

H2A PROGRAM FEE SCHEDULE & CHECKLIST

	PROGRAM FEES	S (EACH PART BILLED SEPER	ATELY)
\$2500	H2A PROGRAM FEE	PAYABLE TO WORK ABROAD NETWORK CORPORATION UPON CASE ACCEPTANCE & APPROVAL BY SWA & FLAG. (ONLINE PAYMENT OPTION AVAILABLE UPON REQUEST).	ADMIN FEE COVERS COST TO PROCESS DO & USCIS APPLICATION. (FEE DOES NOT INCLUDE USCIS FILING FEE. FEE DOES INCLUDE DOL LABOR CERT FEE UP TO \$200).
\$100 PER APPLICATION, PLUS \$10 PER PERSON.	DOL LABOR CERT FEE (INCLUDED IN \$2500 ADMIN FEE).		THIS FEE INCLUDES: 1. DOL LABOR CERT FEE (ONE-TIME FEE INVOICED BY DOL UPON CERTIFICATION PAID BY WAN ONCE INVOICE RECEIVED FROM DOL).
\$250	FED-EX CHARGES	(INCLUDED IN \$2500 ADMIN FEE)	2. FEDEX EXPENSES (TO EXPEDITE & SECURELY SEND & FILE DOCUMENTS TIMELY) WE SEND TRACKED SHIPPING VIA FEDEX, UPS OR USPS
PART - 2 USCIS FIL	ING FEES (not incl	uded in \$2500) BILLED SEPA	RATELY BEFORE FILING I-129
\$460 + MANDATORY ASYLUM FEE	SMALL EMPLOYER I-129 PET	TITION (LESS THAN 25 WORKERS)	I-129 H-2A FILING FEE + MANDATORY ASYLUM FE
\$530 + MANDATORY ASYLUM FEE	I-129 H-2A UNNAMED (NO LIMIT TO # OF BENEFICIARIES)		I-129 H-2A FILING FEE + MANDATORY ASYLUM FE
\$1090 + MANDATORY ASYLUM FEE	H-2A NAMED WORKER PETITION, LIMIT 25 PER PETITION		I-129 H-2A FILING FEE + MANDATORY ASYLUM FE
\$300 OR \$600	\$300 with I-129 SMALL EMPLOYER, \$600 WITH I-129 NAMED PETITION		MANDATORY ASYLUM PROGRAM FEE
PART 3 - PROVISION OF	SUITABLE WORKER C	OSTS (BILLED SEPARATELY AFT	ER ARRIVAL OF SUITABLE WORKER)
\$1000 PER WORKER/PER TRANSFER (BILLED BY WAN UPON WORKER'S ARRIVAL IN US)	PROVISION OF SUITABLE WORKER PER TRANSFER/ SEASON	PAYABLE TO WORK ABROAD NETWORK AFTER THE ARRIVAL OF SUITABLE WORKERS IN THE US.	ONE-TIME FEE PER SUITABLE WORKER PROVIDED PER TRANSFER/SEASON. EMPLOYER IS RESPONSIBLE FOR THIS FEE
\$205	VISA APPLICATION FEE	WORKER PAYS CONSULATE VISA	
\$25	POSTAGE FEE	APPLICATION FEE (EMPLOYER REIMURSES EMPLOYEE UPON ARRIVAL)	
\$1000-\$1250 (ONEWAY) X2	PER WORKER	WORKER PAYS AIR FARE UPFRONT.	50% AT 50% COMPLETION.
		EMPLOYER REIMBURSES 100% OF BOTH FEES	THE REST AT END OF CONTRACT.
		CHECKLIST	
1. COMPLETED EMPLOYER APPL	ICATION FORM (NO BLANK	SPACES. ANSWER ALL QUESTIONS T	O AVOID DELAYS)
2. SIGNED PROGRAM FEE SCHE	DULE & CHECKLIST (THIS F	FORM)	
3. PROOF OF WORKERS COMPE	NSATION COVERAGE (ATTA	ACH CERTIFICATE OF INSURANCE WHI	EN SUBMITTING))
4. INITIALED AND SIGNED H-2A	COMPLIANCE REVIEW LIST	-	
5. SIGNED AGENCY INDEMNITY	AGREEMENT		
6. SIGNATURE AUTHORIZATION			
Manager Signature			Date