



# Project Labor Agreement

## Pre-Job Conference Form #3

In accordance with PLA Article 16, each Contractor is required to conduct a Pre-Job Conference with the Unions not later than ten (10) calendar days prior to commencing work.

| General Contractor Information                                                  |                                                                                                                              |                                        |
|---------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Prime Contractor: Dick Miller, Inc.                                             |                                                                                                                              |                                        |
| Address: 930 Boardwalk, Suite H, San Marcos, CA 92078                           |                                                                                                                              |                                        |
| Phone: 760.471.6842                                                             |                                                                                                                              |                                        |
| Email: emontoya@dmiusa.net                                                      | Fax: 760.471.6178                                                                                                            |                                        |
| Prime Contractor's License Number: 380204 A, B, C12                             |                                                                                                                              |                                        |
| DBE Status: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | DBE Certifying Agency: DVBE/SB                                                                                               |                                        |
| PLA Pre Job Conference Meeting Information                                      |                                                                                                                              |                                        |
| Date & Time: 3/4/26 & 11am PST                                                  |                                                                                                                              |                                        |
| Location: ONLINE TEAMS MEETING                                                  |                                                                                                                              |                                        |
| General Contract Information                                                    |                                                                                                                              |                                        |
| Contract Name:                                                                  | Clay Neighborhood Park Improvements                                                                                          |                                        |
| Project Address:                                                                | 3153 Clay Avenue, San Diego, CA 92113                                                                                        |                                        |
| City Contract No:                                                               | K-25-2407-DBB-3                                                                                                              | Contract Award Amount: \$ 5,451,882.00 |
| Estimated Start Date:                                                           | 11/03/2025                                                                                                                   | Estimated End Date: 11.03.2026         |
| Project Description:                                                            | Work To Be Done:<br><br>- Playground and shade installation.<br>- Concrete Pouring<br>- Drill Footings<br>- Utility Locating |                                        |

| Jobsite Information                       |                                          |
|-------------------------------------------|------------------------------------------|
| Site Phone:                               | Email: Sandersm@westernstatebuilders.com |
| Fax:                                      | Jobsite Labor Rep:                       |
| Project Manager: Sanders Martin           | Jobsite Safety Rep:                      |
| Job Superintendent: Jared Moen            | Workforce Ordered By:                    |
| Jobsite Scheduling Information            |                                          |
| Number of Shifts: 1                       | Start / Stop Times: 7am-3pm              |
| Pay Day: Friday                           | Ending Day of Pay Period: Sunday         |
| Jobsite Facilities                        |                                          |
| Location(s) of First Aid Facilities:      |                                          |
| Location(s) of Sanitary Facilities:       |                                          |
| Location(s) of Drinking Water Facilities: |                                          |
| Description of Jobsite Parking:           |                                          |
| Name of Selected Hospital:                |                                          |
| Hospital Address:                         |                                          |
| Hospital Phone Number:                    |                                          |
| Heavy Equipment to Be Utilized on Job     | By Contractor                            |
| Mini Excavator                            | Western State Builders                   |
| Skid Steer                                | Western State Builders                   |
| Reach Fork                                | Western State Builders                   |
|                                           |                                          |
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|                                           |                                          |
| Project Craft Workforce Estimate          |                                          |
| Craft                                     | Workforce needed for Project             |
| Sample: Widget Installer                  | 5                                        |
| Playground Installation                   | 4                                        |
| Shade Installation                        | 4                                        |
|                                           |                                          |
|                                           |                                          |
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|                                           |                                          |
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## Contractor Jurisdictional Work Assignments

As required by PLA Article 8, Section 8.1, the assignment of work will be solely the responsibility of the contractor performing the work involved; and such work assignments will be in accordance with the Plan for the Settlement of Jurisdictional Disputes in the Construction Industry (the "Plan") or any successor plan.

All jurisdictional disputes on this project shall be settled in accordance with PLA Article 8

## Jurisdictional Work Assignments

| <u>Contractor name &amp;<br/>Sub to</u>                          | <u>Scope of Work</u>          | <u>Union OR<br/>Non-<br/>Union</u> | <u>DBE or<br/>Non<br/>DBE</u> | <u>Union Work<br/>Assignment (Local #)</u> |
|------------------------------------------------------------------|-------------------------------|------------------------------------|-------------------------------|--------------------------------------------|
| SAMPLE: ABC Contractor/<br>Prime Contractor                      | Widget Installation           | Union                              | DBE                           | Widget Union Local 1234                    |
| Western State Builders,<br>Inc. Sub to Dick Miller, Inc.         | Shade/Playground<br>Installer | Non                                | Non<br>DBE                    | Carpenters Union<br>Local 619              |
| Western State Builders,<br>Inc. Sub to Dick Miller, Inc.         | Pour Footings                 | Non                                | Non<br>DBE                    | LABOERERS UNION<br>LOCAL 89                |
| Western State Builders,<br>Inc. Sub to Dick Miller, Inc.         | Excavate Footings             | NON                                | NON<br>DBE                    | OPERATORS<br>LOCAL 12                      |
| Cable Pipe and Leak<br>Detection Inc Sub to Dick Miller,<br>Inc. | Utility Locating              | NON                                | DBE                           | Laborers Union<br>Local 89                 |
|                                                                  |                               |                                    |                               |                                            |
|                                                                  |                               |                                    |                               |                                            |
|                                                                  |                               |                                    |                               |                                            |
|                                                                  |                               |                                    |                               |                                            |
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|                                                                  |                               |                                    |                               |                                            |

## Subcontractor Information – Complete or Attach Subcontractor Listing

|                                                       |                                    |
|-------------------------------------------------------|------------------------------------|
| Subcontractor Name: Western State Builders, Inc.      |                                    |
| Type/Scope of Work: Playground and shade installation |                                    |
| Address: 2141 Orange Ave Escondido, CA 92029          |                                    |
| Estimated Start Date:                                 | Estimated End Date:                |
| Contact Person: Julian                                | Phone: 760.270.8639                |
| Email: Julian@westernstatebuilders.com                | Contractor License Number: 1069677 |
|                                                       |                                    |
| Subcontractor Name: Cable Pipe and Leak Detection Inc |                                    |
| Type/Scope of Work: Utility Locating                  |                                    |
| Address: 1483 > 2nd St. Ste #201, El Cajon, Ca. 92021 |                                    |
| Estimated Start Date: 3/6/26                          | Estimated End Date: 3/6/26         |
| Contact Person: Rylee Dillard                         | Phone: 619-873-1530                |
| Email: rdillard@cpldetection.com                      | Contractor License Number: 860181  |
|                                                       |                                    |
| Subcontractor Name:                                   |                                    |
| Type/Scope of Work:                                   |                                    |
| Address:                                              |                                    |
| Estimated Start Date:                                 | Estimated End Date:                |
| Contact Person:                                       | Phone:                             |
| Email:                                                | Contractor License Number:         |
|                                                       |                                    |
| Subcontractor Name:                                   |                                    |
| Type/Scope of Work:                                   |                                    |
| Address:                                              |                                    |
| Estimated Start Date:                                 | Estimated End Date:                |
| Contact Person:                                       | Phone:                             |
| Email:                                                | Contractor License Number:         |
|                                                       |                                    |
| Subcontractor Name:                                   |                                    |
| Type/Scope of Work:                                   |                                    |
| Address:                                              |                                    |
| Estimated Start Date:                                 | Estimated End Date:                |
| Contact Person:                                       | Phone:                             |
| Email:                                                | Contractor License Number:         |
|                                                       |                                    |
| Subcontractor Name:                                   |                                    |
| Type/Scope of Work:                                   |                                    |
| Address:                                              |                                    |
| Estimated Start Date:                                 | Estimated End Date:                |
| Contact Person:                                       | Phone:                             |
| Email:                                                | Contractor License Number:         |