



# Project Labor Agreement

## Pre-Job Conference Form

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: Swinerton Builders                                 |  |  |
| Address: 16798 West Bernardo Drive, San Diego, CA 92127              |  |  |
| Phone: 858-622-4040  |  |  |
| Email: CGaitan@swinerton.com   | Fax: 858-622-4044  |  |
| Prime Contractor's License Number: 92                                |  |  |
| DBE Status: <input type="checkbox"/> Yes <input type="checkbox"/> No |  | DBE Certifying Agency:                 |
| PLA Pre Job Conference Meeting Information                           |  |  |
| Date & Time: 4/6/2026 at 11:00 am                                    |  |  |
| Location: Microsoft Teams  |  |  |
| General Contract Information   |  |  |
| Contract Name:   | City Heights Library Performance Annex Improvements  |  |
| Project Address:   | 3795 Fairmount Ave, San Diego, CA 92105  |  |
| City Contract No:  | K-25-2371-DB2-3-A  | Contract Award Amount: \$ 5,417,724.00 |
| Estimated Start Date:  | October 2025   | Estimated End Date: May 2026           |
| Project Description:   | Design-Build project to add approx 995 sq. ft. expansion to the existing City Heights Library Performance Annex. Addition of two dressing/makeup rooms, a green room, a ticket booth and a vestibule. Interior lighting upgrade, and the HVAC equipment will be relocated and upgraded. Renovation of existing bathrooms within library space serving courtyard. |  |

| Jobsite Information  |                                    |
|--|------------------------------------|
| Site Phone: +1 (415) 686-6103  | Email: CGaitan@swinerton.com       |
| Fax: N/A   | Jobsite Labor Rep: Jennifer Correa |
| Project Manager: Chris Gaitan  | Jobsite Safety Rep: Bryan Gray     |
| Job Superintendent: Jonathan Weaver                                      | Workforce Ordered By:              |
| Jobsite Scheduling Information   |                                    |
| Number of Shifts: 1  | Start / Stop Times: 7AM - 5PM      |
| Pay Day:   | Ending Day of Pay Period:          |
| Jobsite Facilities   |                                    |
| Location(s) of First Aid Facilities: City Heights Performance Bldg.      |                                    |
| Location(s) of Sanitary Facilities: Adjacent to site/park                |                                    |
| Location(s) of Drinking Water Facilities: City Heights Performance Bldg. |                                    |
| Description of Jobsite Parking: Street Parking                           |                                    |
| Name of Selected Hospital: Scripps Mercy Hospital                        |                                    |
| Hospital Address: 4077 Fifth Ave., San Diego, CA 92103                   |                                    |
| Hospital Phone Number: 619-294-8111                                      |                                    |
| Heavy Equipment to Be Utilized on Job                                    | By Contractor                      |
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| Project Craft Workforce Estimate   |                                    |
| Craft  | Workforce needed for Project       |
| Sample: Widget Installer   | 5                                  |
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## Subcontractor Information – Complete or Attach Subcontractor Listing

|   |                                   |
|---|-----------------------------------|
| Subcontractor Name: Murray Company                      |                                   |
| Type/Scope of Work: Plunbing                            |                                   |
| Address: 11011 Via Frontera Suite A San Diego, CA 92127 |                                   |
| Estimated Start Date: 10/28/25                          | Estimated End Date: 4/1/2026      |
| Contact Person: Miles Pavich                            | Phone: 619-405-0307               |
| Email: Jpessa@murraycompany.com                         | Contractor License Number: 162382 |
| Subcontractor Name:                                     |                                   |
| Type/Scope of Work:                                     |                                   |
| Address:  |                                   |
| Estimated Start Date:                                   | Estimated End Date:               |
| Contact Person:   | Phone:                            |
| Email:  | Contractor License Number:        |
| Subcontractor Name: N/A                                 |                                   |
| Type/Scope of Work:                                     |                                   |
| Address:  |                                   |
| Estimated Start Date:                                   | Estimated End Date:               |
| Contact Person:   | Phone:                            |
| Email:  | Contractor License Number:        |
| Subcontractor Name: N/A                                 |                                   |
| Type/Scope of Work:                                     |                                   |
| Address:  |                                   |
| Estimated Start Date:                                   | Estimated End Date:               |
| Contact Person:   | Phone:                            |
| Email:  | Contractor License Number:        |
| Subcontractor Name: N/A                                 |                                   |
| Type/Scope of Work:                                     |                                   |
| Address:  |                                   |
| Estimated Start Date:                                   | Estimated End Date:               |
| Contact Person:   | Phone:                            |
| Email:  | Contractor License Number:        |
| Subcontractor Name: N/A                                 |                                   |
| Type/Scope of Work:                                     |                                   |
| Address:  |                                   |
| Estimated Start Date:                                   | Estimated End Date:               |
| Contact Person:   | Phone:                            |
| Email:  | Contractor License Number:        |