

Project Labor Agreement Pre-Job Conference Form

	actor Information	
Prime Contractor: OHL USA		
Address: 1920 Main Street, Suite 310, Irvine CA 9261	4	
Phone: 949-242-4432		
Email: <u>joanna.banayotidis@ohlna.com</u> Fa	Fax:	
Prime Contractor's License Number: A984140		
DBE Status: ☐ Yes ☒ No DI	DBE Certifying Agency:	
	nce Meeting Information	
Date & Time: February 21, 2023, 8:00 AM		
Location: MS Teams		
General Pro	ject Information	
Project Name: Morena Conveyance North		
Project Address: 5820 Miramar Rd, Suite 204, San Di	ego, CA 92121	
Contract No: K-21-1848-DBB-3	Contract Award Amount: \$ 95,243,645.12	
Estimated Start Date: 06/14/2021	Estimated End Date: June 2024	
Project Description:		
This project includes the installation of approximately 20,870 LF of 48in wastewater forcemain pipeline and 20,870 LF of 30in Welded Steel Pipe brine centrate conveyance pipeline north along Genesee Ave., East along Nobel Dr., North along Town Center Dr., East along Executive Dr., and underneath the I-805. The project includes tunneling underneath San Clemente Canyon, Rose Canyon, and I-805. The work includes excavating, laying, and backfilling of the steel pipe. Additional work includes temporary irrigation installation, utility monitoring, paving, and installation of fiber optic cable.		

Jobsite Information

Site Phone: 714-293-6105	Email: joanna.banayotidis@ohlna.com
Fax: N/A	Jobsite Labor Rep: Steve Ghiselin
Project Manager: Joanna Banayotidis	Jobsite Safety Rep: Haidar Shabu
Job Superintendent: Steve Ghiselin	Workforce Ordered by: Superintendent

Jobsite Scheduling Information		
Number of Shifts: 2	Start / Stop Times: TBD	
Pay Day: Thursday	Ending Day of Pay Period: Sunday	

	Jobsite Facilities
Location(s) of First Aid Facilities: TBD	
Location(s) of Sanitary Facilities: TBD	
Location(s) of Drinking Water Facilities: TBD	
Description of Jobsite Parking: TBD	
Name of Selected Hospital: TBD	
Hospital Address: YBD	
Hospital Phone Number: YBD	

Heavy Equipment to Be Utilized on Job	By Contractor OHLA USA		
Drill Rig	OHLA USA		

Project Craft Workforce Estimate					
Craft	Workforce needed for Project				
Sample: Widget Installer	5				
Operating Engineer	3				
Contractor Jurisdict	tional 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

All jurisdictional disputes on this project shall be settled in accordance with PLA Article 8 Jurisdictional Work Assignments				
Contractor name	Scope of Work	<u>Union OR</u> <u>Non-Union</u>	<u>DBE or</u> Non-DBE	<u>Union Work Assignment</u> (Local #)
Example: ABC Contractor	Sprocket Installation	Union	DBE	Sprocket Union 123
OHLA USA, Inc.	Shoring-Drilling holes and	Union	Non-DBE	Operating Engineers Local 12
OHLA USA, Inc.	Lagging Installation	Union	Non-DBE	Laborers Local 89
OHLA USA, Inc	Waler Installation	Union	Non-DBE	Operating Engineers Local 12
OHLA USA, Inc.	Welding Walers	Union	Non-DBE	Pile Driver/Carpenter Local 562

<u>Subcontractor Listing Attached (not including Subs listed below)</u>

Subcontractor Information –	Complete or Attach Subcontractor Listing
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:
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: