

## Project Labor Agreement (PLA) Pre-Job Conference Form No.\_\_\_\_

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:			
Address:			
Phone:			
Email:	Fax:		
Prime Contractor's License Number:			
DBE Status: □ Yes □ No	DBE Certifying Agency:		
	erence Meeting Information		
Date & Time:			
Location:			
	Project Information		
Project Name:			
Project Address:			
City Contract No:	Contract Award Amount: \$		
Estimated Start Date:	Estimated End Date:		
Project Description:			

Jobsite Information	
Site Phone: Email:	
Fax:	Jobsite Labor Rep:
Project Manager:	Jobsite Safety Rep:
Job Superintendent:	Workforce Ordered By:

Jobsite Scheduling Information	
Number of Shifts:	Start / Stop Times:
Pay Day:	Ending Day of Pay Period:

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

Project Craft Workforce Estimate		
Workforce needed for Project		

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>Union OR</u>	DBE or	Union Work
<u>Contractor name</u>	Scope of Work	Non- Union	Non DBE	<u>Union Work</u> <u>Assignment (Local</u> #)
	<u> </u>	<u> </u>	<u> </u>	

Subcontractor Name:   Type/Scope of Work:   Estimated End Date:   Estimated Start Date:   Estimated End Date:   Contact Person:   Phone:   Email:   Contractor License Number:   Estimated Start Date:   Estimated End Date:   Estimated Start Da	Subcontractor Information – Cor	nplete or Attach Subcontractor Listing		
Address:  Estimated Start Date:  Estimated End Date:  Contact Person:  Email:  Subcontractor Name: Type/Scope of Work: Address:  Estimated Start Date:  Estimated End Date:  Contact Person:  Estimated Start Date:  Subcontractor Name: Type/Scope of Work: Address:  Estimated Start Date:  Contact Person:  Email:  Contractor License Number:  Subcontractor Name: Type/Scope of Work:  Address:  Estimated Start Date:  Contact Person:  Estimated Start Date:  Estimated Start Date:  Contact Person:  Phone:  Email:  Contact Person:  Email:  Contractor License Number:  Subcontractor Name: Type/Scope of Work:  Address:  Estimated Start Date:  Estimated End Date:  Contact Person:  Email:  Contractor License Number:  Subcontractor Name: Type/Scope of Work:  Address:  Estimated End Date:  Contact Person:  Email:  Contractor License Number:  Subcontractor Name: Type/Scope of Work:  Address:  Estimated End Date:  Contact Person:  Estimated End Date:  Contact Person:  Estimated End Date:  Contractor License Number:  Subcontractor Name: Type/Scope of Work:  Address:  Estimated End Date:  Contractor License Number:  Subcontractor Name: Type/Scope of Work:  Address:  Estimated End Date:  Contractor License Number:  Estimated End Date:  Contractor License Number:  Subcontractor Name: Type/Scope of Work:  Address:  Estimated End Date:  Contractor License Number:  Subcontractor Name: Type/Scope of Work:  Address:  Estimated End Date:  Contractor License Number:  Subcontractor Name: Type/Scope of Work:  Address:  Estimated End Date:  Contractor License Number:  Subcontractor Name: Type/Scope of Work:  Address:  Estimated End Date:  Contractor License Number:  Subcontractor Name: Type/Scope of Work:  Address:  Estimated End Date:  Contractor License Number:  Phone:  Endit	Subcontractor Name:			
Estimated Start Date: Estimated End Date: Contact Person: Phone: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated End Date: Contact Person: Phone:  Subcontractor Name: Type/Scope of Work: Address: Estimated End Date: Contact Person: Phone:  Subcontractor Name: Type/Scope of Work: Address: Estimated End Date: Contact Person: Phone: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated End Date: Contact Person: Phone:  Subcontractor Name: Type/Scope of Work: Address: Estimated End Date: Contact Person: Phone: Estimated Start Date: Estimated End Date: Contact Person: Phone: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated End Date: Contact Person: Phone: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated End Date: Contact Person: Phone: Estimated Start Date: Estimated End Date: Contact Person: Phone: Estimated Start Date: Estimated End Date: Contact Person: Phone: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated End Date: Contact Person: Phone: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated End Date: Contact Person: Phone: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated End Date: Contact Person: Phone:		Type/Scope of Work:		
Contact Person:         Phone:           Email:         Contractor License Number:           Subcontractor Name:	ļ			
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: 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: Estimated Start Date: Estimated End Date: Contact Person: Phone: 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: 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: Estimated Start Date: Estimated End Date: Contact Person: Phone:	Estimated Start Date:	Estimated End Date:		
Subcontractor Name:  Type/Scope of Work:  Address:  Estimated Start Date:  Contact Person:  Email:  Subcontractor Name:  Type/Scope of Work:  Address:  Estimated Start Date:  Contractor License Number:  Subcontractor Name:  Type/Scope of Work:  Address:  Estimated Start Date:  Contact Person:  Phone:  Email:  Contractor License Number:  Subcontractor Name:  Type/Scope of Work:  Address:  Estimated Start Date:  Contractor License Number:  Subcontractor Name:  Type/Scope of Work:  Address:  Estimated Start Date:  Contact Person:  Phone:  Email:  Contractor License Number:  Subcontractor Name:  Type/Scope of Work:  Address:  Estimated End Date:  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:  Contractor License Number:  Estimated Start Date:  Estimated End Date:  Contractor License Number:  Estimated Start Date:  Estimated End Date:  Contractor License Number:  Estimated Start Date:  Estimated End Date:  Type/Scope of Work:  Address:  Estimated End Date:  Contact Person:  Phone:	Contact Person:	Phone:		
Type/Scope of Work:   Address:   Estimated Start Date:   Estimated End Date:   Contact Person:   Phone:   Phone:   Email:   Contractor License Number:   Subcontractor Name:   Type/Scope of Work:   Address:   Estimated End Date:   Contractor License Number:   Estimated Start Date:   Estimated End Date:   Contractor License Number:   Estimated Person:   Phone:   Estimated End Date:   Contractor License Number:   Estimated Start Date:   Estimated End Date:   Contractor License Number:   Estimated Start Date:   Estimated End Date:   Contact Person:   Phone:   Email:   Contractor License Number:   Estimated Start Date:   Estimated End Date:   Contractor License Number:   Estimated Start Date:   Estimated End Date:   Est	Email:	Contractor License Number:		
Address: Estimated Start Date:  Contact Person:  Email:  Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date:  Estimated Start Date:  Estimated Start Date:  Contractor License Number:  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:  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 End Date:  Contractor License Number:  Subcontractor Name:  Type/Scope of Work:  Address:  Estimated End Date:  Contractor License Number:  Subcontractor Name:  Type/Scope of Work:  Address:  Estimated Start Date:  Estimated End Date:  Contact Person:  Estimated End Date:  Contact Person:  Estimated End Date:  Phone:	Subcontractor Name:			
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:  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:  Subcontractor Name:  Type/Scope of Work:  Address: Estimated Start Date: Estimated End Date:  Contact Person: Phone:  Subcontractor Name:  Type/Scope of Work:  Address: Estimated End Date: Estimated End Date:  Contractor License Number:  Subcontractor Name:  Type/Scope of Work:  Address: Estimated Start Date: Estimated End Date:  Contractor License Number:  Subcontractor Name:  Type/Scope of Work:  Address: Estimated Start Date: Estimated End Date:  Contact Person: Phone:	Type/Scope of Work:			
Contact Person: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Contact Person: Email: Contractor License Number:  Estimated End Date: Contact Person: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: Contact Person: 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: 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: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: Contact Person: Phone:	ļ			
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: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: Contact Person: Phone: Email: Contact Person: Phone: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: Contact Person: Phone:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: Contact Person: Phone:	Estimated Start Date:	Estimated End Date:		
Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Email: Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date:  Email: Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: Contact Person: Phone: Email: Contact Person: Phone: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: 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: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: Contact Person: Estimated End Date: Phone:	Contact Person:	Phone:		
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 End Date:           Estimated Start Date:         Estimated End Date:           Contact Person:         Phone:           Subcontractor Name:         Type/Scope of Work:           Address:         Estimated End Date:           Contact Person:         Phone:           Email:         Contractor License Number:           Subcontractor Name:         Phone:           Subcontractor Name:         Contractor License Number:           Subcontractor Name:         Type/Scope of Work:           Address:         Estimated Start Date:         Estimated End Date:           Contact Person:         Phone:	Email:	Contractor License Number:		
Address: Estimated Start Date: Contact Person: Phone: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: Contact Person: Estimated Start Date: Estimated Person: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated Start Date: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Contact Person: Phone: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated End Date: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated Start Date: Estimated Start Date: Estimated End Date: Phone:	Subcontractor Name:			
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 End Date:  Contractor License Number:  Subcontractor Name:  Type/Scope of Work:  Address: Estimated End Date:  Contact Person: Phone:  Estimated End Date:  Contact Person: Contractor License Number:  Subcontractor Name:  Type/Scope of Work:  Address: Estimated End Date:  Contractor License Number:  Subcontractor Name:  Type/Scope of Work:  Address: Estimated End Date:  Contractor License Number:  Subcontractor Name:  Type/Scope of Work:  Address: Estimated End Date:  Contact Person: Phone:	Type/Scope of Work:			
Contact Person: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Contact Person: Phone:  Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Contact Person: Phone: Email: Contact Person: Phone: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated End Date: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: Phone:	ļ			
Email:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date:  Contact Person: Email:  Subcontractor Name: Type/Scope of Work:  Address: Estimated End Date: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: Contact Person: Estimated Start Date: Contact Person: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated End Date: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: Contractor License Number:	Estimated Start Date:	Estimated End Date:		
Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date:  Contact Person: Phone:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date:  Estimated End Date: 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: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: Phone:	Contact Person:	Phone:		
Type/Scope of Work:  Address: Estimated Start 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:  Contact Person: Estimated End Date: Contact Person: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: Contractor License Number:	Email:	Contractor License Number:		
Address: Estimated Start Date: Contact Person: Email: Contractor Name: Type/Scope of Work: Address: Estimated Start Date:  Contact Person: Email: Estimated End Date:  Contractor License Number:  Estimated End Date: Contact Person: Phone: Email: Contractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Contact Person: Estimated Start Date: Estimated End Date:  Contact Person: Phone:	Subcontractor Name:			
Estimated Start Date:  Contact Person:  Email:  Contractor License Number:  Subcontractor Name:  Type/Scope of Work:  Address:  Estimated Start Date:  Contact Person:  Email:  Contact Person:  Email:  Contractor License Number:  Contractor License Number:  Subcontractor Name:  Type/Scope of Work:  Address:  Estimated End Date:  Contractor License Number:  Subcontractor Name:  Type/Scope of Work:  Address:  Estimated Start Date:  Contact Person:  Estimated End Date:  Contact Person:  Estimated End Date:  Phone:	Type/Scope of Work:			
Contact Person: Email: Contractor License Number:  Subcontractor Name:  Type/Scope of Work: Address: Estimated Start Date: Contact Person: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Contact Person:  Estimated End Date: Contact Person: Phone:	Address:			
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:  Contractor License Number:	Estimated Start Date:	Estimated End Date:		
Subcontractor Name:  Type/Scope of Work:  Address:  Estimated Start Date:  Contact Person:  Email:  Subcontractor Name:  Type/Scope of Work:  Address:  Estimated End Date:  Contractor License Number:  Type/Scope of Work:  Address:  Estimated Start Date:  Contact Person:  Estimated End Date:  Contact Person:  Phone:	Contact Person:	Phone:		
Type/Scope of Work: Address: Estimated Start Date: Contact Person: Phone: Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: Contractor License Number:	Email:	Contractor License Number:		
Address:  Estimated Start Date:  Contact Person:  Email:  Subcontractor Name:  Type/Scope of Work:  Address:  Estimated Start Date:  Estimated End Date:  Contractor License Number:   Subcontractor Name:  Type/Scope of Work:  Address:  Estimated Start Date:  Contact Person:  Phone:	Subcontractor Name:			
Address:  Estimated Start Date:  Contact Person:  Email:  Subcontractor Name:  Type/Scope of Work:  Address:  Estimated Start Date:  Estimated End Date:  Contractor License Number:   Subcontractor Name:  Type/Scope of Work:  Address:  Estimated Start Date:  Contact Person:  Phone:	Type/Scope of Work:			
Contact Person:  Email:  Contractor License Number:  Subcontractor Name:  Type/Scope of Work:  Address:  Estimated Start Date:  Contact Person:  Phone:	ļ			
Email: Contractor License Number:  Subcontractor Name: Type/Scope of Work: Address: Estimated Start Date: Estimated End Date: Contact Person: Phone:	Estimated Start Date:	Estimated End Date:		
Subcontractor Name:  Type/Scope of Work:  Address:  Estimated Start Date:  Contact Person:  Estimated End Date:  Phone:	Contact Person:	Phone:		
Type/Scope of Work:  Address:  Estimated Start Date:  Contact Person:  Estimated End Date:  Phone:	Email:	Contractor License Number:		
Address:  Estimated Start Date: Estimated End Date:  Contact Person: Phone:	Subcontractor Name:			
Estimated Start Date: Estimated End Date: Contact Person: Phone:	Type/Scope of Work:			
Contact Person: Phone:	Address:			
	Estimated Start Date:	Estimated End Date:		
Email: Contractor License Number:	Contact Person:	Phone:		
	Email:	Contractor License Number:		