

## Citywide Project Labor Agreement

Professional Services 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.

	Prime Cons	sultant Information			
Prime Consultant Na	me:				
Address:					
Phone:					
Email:		Fax:			
License Number:		<u>.</u>			
PLA Pre Job Conference Meeting Information					
Date & Time: Location:					
General Information					
As-Needed Services	: (Yes or No) l'	If Yes, list Task Order Number:			
Contract No:		Contract (or Task) Award Amount:			
Estimated Start Date	:	Estimated End Date:			
Contract Name:					
Jobsite Scheduling Information					
Number of Shifts:	Start / Stop Times:				
Pay Day:	Ending Day of Pay Period:				
Heavy Equipm	Craft/Contractor				
	Ducie et Oueft	Markformer Estimate			
Project Craft Workforce Estimate					
Somol	Craft o: Widget Installer	Workforce needed for Project			
Sample: Widget Installer		5			
Contractor Jurisdictional Work Assignments					
As required by PLA Article 8, 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.					
accordanc				any successor plan.	
All jurisdictional disputes on this project shall be settled in accordance with PLA Article 8					
	risdictional Work Assignments	<u>Union OR</u>	<u>DBE or</u>	Union Work Assignment	
Contractor name	Scope of Work	Non-Union	<u>Non DBE</u>	<u>(Local #)</u>	
SAMPLE: ABC	Widget Installation	Union	DBE	Widget Union Local 1234	
Contractor		UNIUN	DDE	Widget Union Local 1254	
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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:			