



## Citywide Project Labor Agreement (PLA) 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:	
Address:	
Phone:	
Email:	Fax:
Prime Contractor's License Number:	
DBE Status: <input type="checkbox"/> Yes <input type="checkbox"/> No	DBE Certifying Agency:
PLA Pre Job Conference Meeting Information	
Date & Time:	
Location:	
General Contract Information	
Contract 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	
Craft	Workforce needed for Project
Sample: Widget Installer	5



**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: