

LABOR COMPLIANCE PROGRAM ANNUAL REPORT

Format for Awarding Body that enforces its own Labor Compliance Program for some but not all projects

Report for the reporting period July 1, 2011- June 30, 2012

| | | |
|---|---------------------------------------|-----------------------|
| 1. Name of Labor Compliance Program (LCP) : Reclamation District 2029 Labor Compliance Program | | |
| 2. LCP I.D. Number (assigned by DIR): 2011.00698 | 3. Date of Initial Approval: 9/1/2011 | |
| 4. Contact person (include name, title, address, telephone, fax, and e-mail, if available) Mr. Alan Richard Coon 421 S. El Dorado Street Ste. E Stockton, CA 95203 | | |
| 5. Did LCP perform any LC § 1771.5 enforcement activities during the 12 months in the reporting period? Please check one: <input checked="" type="checkbox"/> Yes If Yes, proceed to item 6 on the next page <input type="checkbox"/> No If No, complete the information below, sign the form and submit to DIR, Office of the Director, Attn: LCP Special Assistant, 455 Golden Gate Avenue, 10th Floor, San Francisco CA 94102 | | |
| What suggestions do you have for the Department of Industrial Relations to better assist you with your program in the coming year? (attach additional sheets if necessary) | | |
| SUBMITTED BY: | | |
|  Signature | Alan Richard Coon Name and Title | Aug. 28, 2012 Date |

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6. LC § 1771.5 enforcement activities (provide all information requested, attaching as many sheets as necessary).

A. List projects handled by LCP within the past 12 months.

| Project Name | Bid Advertisement Date | Prime Contractor | Contract Amount |
|----------------------------------|------------------------|---------------------|-----------------|
| Project # 2029-04-11-1-11-37 | n/a | D.A. Archer | \$7,500.00 |
| HMP Project # 1129 | 4/18/11 | Asta Construction | \$544,313.00 |
| Testing Project # 531.06 | n/a | Hultgren Tillis | \$24,634.37 |
| Work order # 16003 | n/a | Hamilton Services | \$2,252.25 |
| Mow berry vines on Empire Island | n/a | A.M. Weed Abatement | \$1,910.00 |
| Total | | | \$570,609.62 |

B. Summary of all wages and penalties assessed and/or recovered.

| Project Name | Affected Contractor (who directly employed the worker) | Amount Assessed | Amount Recovered | Approval of Forfeiture Requested from Labor Commissioner? | Description of Violation |
|--------------|--|--------------------|---------------------|---|--------------------------|
| N/a | N/a | N/a | N/a | <input type="checkbox"/> Yes <input type="checkbox"/> No | N/a |
| | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Total | | | | | |

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C. For any amount identified in item B for which approval of forfeiture not requested from the Labor Commissioner, please explain below.

| Project Name | Amount Assessed | Amount Recovered | Explanation |
|--------------|-----------------|------------------|-------------|
| N/a | N/a | N/a | N/a |
| | | | |
| | | | |
| Total | | | |

D. For any amount identified in item B for which approval of forfeiture was requested from the Labor Commissioner, please provide the following:

| Project Name | Amount Assessed | | | | | Amount Recovered | | | | |
|--------------|-----------------|-----------|-----------|-------|-------|------------------|-----------|-----------|-------|-------|
| | LC §1776(g) | LC § 1775 | LC § 1813 | Wages | Total | LC § 1776(g) | LC § 1775 | LC § 1813 | Wages | Total |
| n/a | | | | | | | | | | |
| | | | | | | | | | | |
| Total | | | | | | | | | | |

E. Identify cases that are or were the subject of LC § 1742 proceedings.

| Project Name | Contractor | Nature of Violation | ODL Case # | Current Status |
|--------------|------------|---------------------|------------|----------------|
| n/a | | | | |
| | | | | |

F. Did you refer any contractor to the Labor Commissioner for debarment per LC § 1777.1?

Please check one: Yes No

If yes, identify affected contractor(s) or subcontractor(s) and date(s) of referral: _____

G. Did you refer any apprenticeship violation to the Division of Apprenticeship Standards (DAS)?

Please check one: Yes No

If yes, identify affected contractor(s) or subcontractor(s) and date(s) of referral: _____