

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 07/01/2013 to 06/30/2014 (mm/dd/yyyy) (mm/dd/yyyy)

RECEIVED AUG 12 2014 DEPT. OF INDUSTRIAL RELATIONS OFFICE OF THE DIRECTOR

1. Name of Labor Compliance Program (LCP) : North Coast County Water District
2. LCP I.D. Number (assigned by DIR): 2011.01049
3. Date of Initial Approval: 09/01/2011
4. Contact person (include name, title, address, telephone, fax, and e-mail, if available): Cari Lemke - General Manager, Administered by: Contractor Compliance and Monitoring, Inc.
5. Did LCP perform any LC § 1771.5 enforcement activities during the 12 months in the reporting period?
What suggestions do you have for the Department of Industrial Relations to better assist you with your program in the coming year?
SUBMITTED BY: [Signature] Signature Name and Title Date 8/7/14