

LCP-AR1

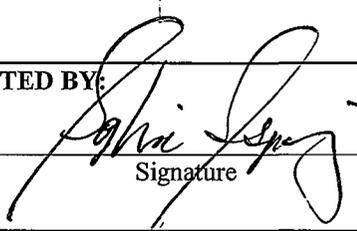
LABOR COMPLIANCE PROGRAM ANNUAL REPORT

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JUL 21 2015

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

Department of Industrial Relations
Office of the Director

Report for the reporting period 7/1/2014 to 6/30/2015
(mm/dd/yyyy) (mm/dd/yyyy)

1. Name of Labor Compliance Program (LCP) : HEAL THE BAY	
2. LCP I.D. Number (assigned by DIR): LCP ID: 2013-01187	3. Date of Initial Approval: 7/10/2013
4. Contact person (include name, title, address, telephone, fax, and e-mail, if available): ALIX HOBBS CHIEF OPERATING OFFICER 1444 9th Street, Santa Monica, CA 90401 PHONE: (310) 451-1500 EMAIL: ahobbs@healthebay.org	
5. Did LCP perform any LC § 1771.5 enforcement activities during the 12 months in the reporting period? Please check one: <input type="checkbox"/> Yes If Yes, proceed to item 6 on the next page <i>Project identified in "6" is in design phase; no enforcement activities during annual period</i> <input checked="" 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: 	
<u>Sophia E. Ramirez, Labor Compliance Administrator</u> Name and Title	<u>7/14/2015</u> 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
WAYS Reading & Fitness Park	3/17/2013	Northeast Trees	\$1,155,028.00
Total			\$1,555,028.00

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
Total		\$0	\$0		

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
Total	\$0	\$0	

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
Total										

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

Project Name	Contractor	Nature of Violation	ODL Case #	Current Status

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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: _____



LCP Inc.

LABOR COMPLIANCE PROVIDERS

1168 E. La Cadena Dr. ▪ Suite 201
Riverside, CA 92507

Phone: (951) 686-3482 ▪ Fax: (951) 346-0545 ▪ Email: inbox@mylcp.org

July 14, 2015

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JUL 21 2015

Department of Industrial Relations
Office of the Director

State of California – Dept. of Industrial Relations
Office of the Director
Attn: Special Assistant to the Director
455 Golden Gate Avenue, 10th Floor
San Francisco, CA 94102

**Re: *Heal the Bay* (LCP ID: 2013-01187)
*LCP Annual Report 2014 - 2015***

To whom it may concern:

On behalf of the *Heal the Bay*, enclosed you will find the LCP Annual Report for the 7/1/2014 thru 6/30/2015 period. This annual report is submitted in accordance with California Code Regulations 16431 for the agency's Prop. 84-funded projects, which are subject to the monitoring of an LCP.

Should you require any additional information not provided in this report, please contact me by e-mail at inbox@mylcp.org or by phone at (951) 686-3482.

Respectfully,

Sophia E. Ramirez
Labor Compliance Administrator

Enclosure

cc: Heal the Bay