

LABOR COMPLIANCE PROGRAM ANNUAL REPORT

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

RECEIVED
JUL 27 2015
Department of Industrial Relations
Office of the Director

Report for the reporting period: 07/01/14 06/30/15

1. Name of Labor Compliance Program (LCP):
SAN DIEGO COUNTY WATER AUTHORITY

2. LCP I.D. Number (assigned by DIR):
2011.00877

3. Date of Initial Approval:
September 1, 2011

4. Contact Person
Name: Jackie Carmona
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5. Did LCP perform any LC § 1771.5 enforcement activities during the 12 months in the reporting period?

Yes If yes, proceed to item 6 on the next page

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:

J Carmona
Signature

Jackie Carmona / Supervising Management Analyst
Name / Title

7/20/15
Date