

**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 to June 30, 2012  
(mm/dd/yyyy) (mm/dd/yyyy)

|   |  |                  |
|---|--|------------------|
| 1. Name of Labor Compliance Program (LCP) :<br>Golden State Water Company   |  |                  |
| 2. LCP I.D. Number (assigned by DIR):<br>LCP ID: 2011.01020   | 3. Date of Initial Approval: 09/01/11              |                  |
| 4. Contact person (include name, title, address, telephone, fax, and e-mail, if available):<br>Beth McDonough - Project Manager<br>2143 Convention Center Way, Ste 110<br>Ontario, CA 91764<br>Phone: 562-907-9200  |  |                  |
| 5. Did LCP perform any LC § 1771.5 enforcement activities during the 12 months in the reporting period?<br>Please check one: <input checked="" type="checkbox"/> Yes    If Yes, proceed to item 6 on the next page<br><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,<br>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)  |  |                  |
| <b>SUBMITTED BY:</b>  |  |                  |
| <br>Signature  | Beth McDonough - Project Manager<br>Name and Title | 08/29/12<br>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 |
|----------------------------|------------------------|-----------------------------|-----------------|
| Golden State Water Company | November 2010          | Fleming Environmental, Inc. | \$ 1,004,473.00 |
|                            |                        |                             |                 |
|                            |                        |                             |                 |
|                            |                        |                             |                 |
|                            |                        |                             |                 |
|                            |                        |                             |                 |
|                            |                        |                             |                 |
| Total                      |                        |                             | \$ 1,004,473.00 |

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

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

**LCP-AR1**

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          |                 |                  |             |
|              |                 |                  |             |
|              |                 |                  |             |
| 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: \_\_\_\_\_