

LABOR COMPLIANCE PROGRAM ANNUAL REPORT

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

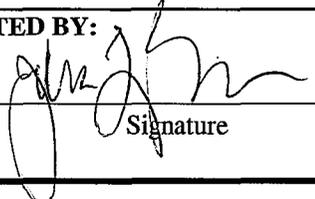
Report for the reporting period 07/01/2014 to 06/30/2015  
(mm/dd/yyyy) (mm/dd/yyyy)

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AUG 07 2015

Department of Industrial Relations  
Office of the Director

1. Name of Labor Compliance Program (LCP) : City of Corning		
2. LCP I.D. Number (assigned by DIR): No. 2011.01116	3. Date of Initial Approval: 04/18/2012	
4. Contact person (include name, title, address, telephone, fax, and e-mail, if available): John L. Brewer, AICP; City Manager City of Corning, 794 Third Street, Corning, CA 96021 Phone: (530) 824-7029 Fax: (530) 824-2489 jbrewer@corning.org		
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)  None.		
SUBMITTED BY:		
 Signature	John L. Brewer, AICP; City Manager Name and Title	7/31/2015 Date

**LCP-AR1**

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
Corning Community Park Project, Phase 2	5/14/2014	Trent Construction, Gerber, CA	\$997,955.52
<b>Total</b>			<b>\$2,841,301.72</b>

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				<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	
<b>Total</b>					

**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			
<b>Total</b>			

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										
<b>Total</b>										

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: \_\_\_\_\_



# City of Corning

794 Third St. Corning, CA 96021 (530) 824-7020 Fax (530) 824-2489

July 31, 2015

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Department of Industrial Relations  
Office of the Director

Department of Industrial Relations  
Office of the Director  
Attn: LCP Special Assistant  
455 Golden Gate Avenue, 10<sup>th</sup> Floor  
San Francisco, CA 94102

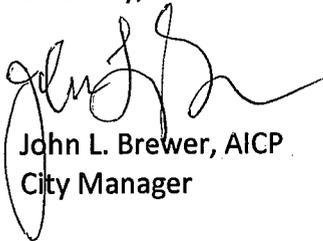
RE: Labor Compliance Program Annual Report

LCP Special Assistant:

Enclosed is the City of Corning' Labor Compliance Program Annual Report (Form LCP-AR1) for the twelve month period, 07/01/2014 through 06/30/2015. The City of Corning Labor Compliance Program (LCP) received initial approval on April 18, 2012.

If you require any additional information, please contact Public Works Director Dawn Grine at 530/824-7025 or by email at [dgrine@corning.org](mailto:dgrine@corning.org).

Sincerely,



John L. Brewer, AICP  
City Manager

Enclosure: Form LCP-AR1