

LCP-AR1

LABOR COMPLIANCE PROGRAM ANNUAL REPORT

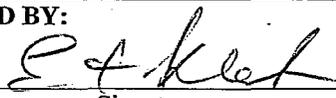
Format for Awarding Body that enforces its own Labor Compliance Program for some but not all projects

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

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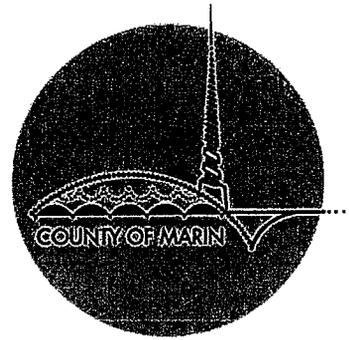
Department of Industrial Relations
Office of the Director

1. Name of Labor Compliance Program (LCP) : Marin County Flood Control and Water Conservation District		
2. LCP I.D. Number (assigned by DIR): 2015.00285	3. Date of Initial Approval: 06/10/2015	
4. Contact person (include name, title, address, telephone, fax, and e-mail, if available): Ernest Klock- Principal Civil Engineer 3501 Civic Center Drive, Suite 404 San Rafael, CA 94903 Phone: 415-473-6552 Administered by: Contractor Compliance and Monitoring, Inc. 635 Mariners Island Blvd. #200 San Mateo, CA 94404 Phone: (650) 522-4403 Fax: (650) 522-4402		
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 <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:		
 Signature	Ernest Klock, Principal Civil Engineer Name and Title	8/17/15 Date

**DEPARTMENT OF PUBLIC WORKS
MARIN COUNTY, CALIFORNIA**

Raul Rojas, Director

P.O. Box 4186
San Rafael, CA 94913-4186
Telephone: 415-499-6528 Fax: 415-499-3799



TRANSMITTAL LETTER

DATE: August 17, 2015

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

SUBJECT: Annual Report

TRANSMITTED: LCP Annual Report for Months 07/01/14 to 06/30/15

FOR: This is for the DIR's Files
 Your Signature
 Your Approval
 Please show any conflicts with your facilities
 Your Review: please return with your comments
 Your Review: please contact the undersigned

COMMENT: Annual Report 2015 – Marin County Flood Control and Water Conservation District. Original signed copy is enclosed.