

**SUBCONTRACTOR WORK IDENTIFICATION FORM**

|   |                               |  |   |  |
|---|-------------------------------|--|---|--|
| <b>Project Name: Blueprint Outreach - RAMA Consulting Group, Inc.</b> |                               |  | <b>Dept. of Public Utilities</b>              | Date: 03/29/16                                   |
| <b>Project Number: 650004-100003</b>                                  |                               |  | <b>Division: Sewerage &amp; Drainage</b>      |  |
| <b>City Project Manager: Anita Musser</b>                             |                               |  |   |  |
| <b>PM Phone #: (614) 645-5970</b>                                     |                               |  |   |  |
| <b>Prime Contractor: RAMA Consulting</b>                              | <b>Ordinance #: 0847-2016</b> |  | <b>Contract Amt or Mod (\$): \$217,013.79</b> | <b>Contract Duration: 3 yr (1 yr increments)</b> |

**Contractor and Subcontractor CCCN, Scope and Funding Summary**

|                        | <b>Name/<br/>Address</b>  | <b>Prime<br/>Sub</b> | <b>Contact<br/>Information</b>   | <b>CCCN/<br/>Expires</b> | <b>Firm<br/>Type</b> | <b>Contract or Mod Scope</b>        | <b>Contract or Mod \$<br/>Amount and %</b> |
|------------------------|---|----------------------|--|--------------------------|----------------------|-------------------------------------|--|
| 1                      | <b>RAMA Consulting Group, Inc.</b><br>897 E. 11th Ave<br>Columbus, Ohio 43211<br>(614) 245-0451 | Prime                | Mo Wright<br>mowright@rama-consulting.net<br><a href="tel:6142450451">(614) 245-0451</a> | 20-4647970<br>1/16/2017  | MBE                  | community outreach                  | \$ 217,013.79<br>100.0%                    |
| 2                      | NO SUBS   |                      | NO SUBS  |                          |                      |                                     | 0.0%                                       |
| 3                      |   |                      |  |                          |                      |                                     | 0.0%                                       |
| 4                      |   |                      |  |                          |                      |                                     | 0.0%                                       |
| 5                      |   |                      |  |                          |                      |                                     | 0.0%                                       |
| 6                      |   |                      |  |                          |                      |                                     | 0.0%                                       |
| 7                      |   |                      |  |                          |                      |                                     | 0.0%                                       |
| 8                      |   |                      |  |                          |                      |                                     | 0.0%                                       |
|                        |   |                      | Approved: KMS  |                          |                      | <b>TOTAL CONTRACT or Mod AMOUNT</b> | <b>\$ 217,013.79</b>                       |
| Version created 082012 |   |                      | Date: 03/29/2016   |                          |                      | Total Percentage                    | 100.0%                                     |

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|                           |  |
|---------------------------|--|
| Project Name              | Project name as it appears on either the RFP or Bid Documents. The same name should be used in the legislation   |
| Project Number            | Should be a twelve digit number represented as a six-six number. Example 650123-100000   |
| City Project Manager      | The DOSD assigned to the project   |
| P.M. Phone #              | The assigned City Engineer's telephone number  |
| Prime Contractor          | contract / modification awardee  |
| Ordinance                 | Legislation number for the project. To be entered by DPU Fiscal  |
| Date                      | Date the document is completed   |
| Contract/Mod Amt (\$)     | The amount of contract or modification cost for this project   |
| Name and Address          | Company name; address; City & State; Zip Code; and Phone Number  |
| Prime/Sub                 | Indicate whether it the Prime contractor or a subcontractor  |
| Contact Information       | Company Official, or Project Manager, Email address, and Phone number  |
| CCCN / Expires            | City of Columbus Contract Compliance Number (Obtained through Equal Business Opportunity Commission Office - EBOCO) / Expiration Date: Date the CCCN expires |
| Firm Type                 | The Majority or Minority identification of the company. Typically it be identified as: MAJ; MBE; FBE; ASN; or MBR  |
| Contract or Mod Scope     | The scope or type of work being performed for this project   |
| Contract or Mod Amt       | The total amount and percentage each participant will receive for this contract or modification  |
| Total Contract or Mod Amt | Total Amount for all participants in this contract or modification   |
| Total Percentage          | Should equal one hundred percent   |
| Approved                  | DPU's EBOCO Liaison completes this section   |
| Date                      | The date of approval by DPU's EBOCO's Liaison  |