

SUBCONTRACTOR WORK IDENTIFICATION FORM

Project Name: CEPT DISINFECTION Step 3 Services			Dept. of Public Utilities
Project Number: 650367-100004	Division: Sewerage & Drainage		
City Project Manager: Stacia Eckenwiler			
PM Phone #: 614-645-0268	Contract Amt or Mod (\$): \$365,454		
Prime Contractor: Burgess & Niple, Inc.	Ordinance #: 2117-2016		Contract Duration: 5 yrs

Contractor and Subcontractor CCCN, Scope and Funding Summary

	<u>Name/ Address</u>	<u>Prime Sub</u>	<u>Contact Information</u>	<u>CCCN/ Expires</u>	<u>Vendor #</u>	<u>Firm Type</u>	<u>Contract or Mod Scope</u>
1	Burgess & Niple, Inc. 5085 Reed Road Columbus OH 43220	Prime	Vui Chung 5085 Reed Road Columbus OH 43220 614.216.4194	31-0885550 9/12/2016	004425	MAJ	Mod
2	PrimeAE Group 8415 Pulsar Place, Suite 300 Columbus OH 43240	Sub	Sutha Vallipuram 8415 Pulsar Place, Suite 300 Columbus OH 43240 614.839.0250	26-0546656 10/30/2017	002102	ASN	Mod
3	Stantec 1500 Lake Shore Drive, Suite 100 Columbus OH 43204	Sub	Bruce Bassett 1500 Lake Shore Drive, Suite 100 Columbus OH 43204	11-2167170 9/10/2017	000462	MAJ	Mod
4							10% Contingency
5							
6							
			Approved: kms				TOTAL CONTRACT or Mod AMOUNT
Version created 082012			Date: 08/16/16				Total Percentage

Date: 8/5/16



Contract or Mod \$

Amount and %

\$ 282,780.00

77.4%

\$ 16,524.00

4.5%

\$ 32,928.00

9.0%

\$ 33,223.00

9.1%

\$ 365,454.00

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