SUBCONTRACTOR WORK IDENTIFICATION FORM

Project Name: 2015-2017 General Engineering Services			**Dept. of Public Utilities**	Date: 03/09/15
Project Number: 650113-100000; 610762-100000			**Division: Sewerage & Drainage**	
City Project Manager: Mark Timbrook				
PM Phone #: (614) 645-0298			**Contract Amt or Mod ($):**	
Prime Contractor: Korda/Nemeth Engineering, Inc.		**Ordinance #**: 0754-2015	**Contract Duration: 3 yrs**	

Contractor and Subcontractor CCCN, Scope and Funding Summary

	Name/ Address	Prime Sub	Contact Information	CCCN/ Expires	Firm Type	Contract or Mod Scope	Contract or Mod $ Amount and %
1	**Korda/Nemeth Engineering, Inc.**	Prime	John Panovsky	31-092291	MAJ	Project Management	$ 300,000.00
	1650 Watermark Drive, Suite 200		(614) 487-1650	7/17/2015			100.0%
	Columbus, Ohio 43215						
	(614) 487-1650						
2	**Barr Engineering**	Sub	Robin Lamb	31-1347309	ASN	Geotechnical, surveying	$ -
	2800 CORPORATE EXCHANGE DR.		(614) 714-0270	7/18/2015			
	Columbus, Ohio 43231						
	(614) 714-0270						
3	**Donahue Ideas**	Sub	COLLEEN M. DONAHUE, P.E.	06-1716807	FBE	H&H CCTV	$ -
	2780 Airport Drive		(614) 532-6771	3/27/2016			
	Columbus, Ohio 43219						
	(614)532-6771						
4	**EMH&T**	Sub	Sandy Doyle-Ahern	31-0685594	MAJ	Flow monitoring, CCTV	$ -
	5500 NEW ALBANY RD		(614) 775-4500	8/2/2015			
	Columbus, Ohio 43054						
	(614) 775-4500						
5	**PolicyWorks**	Sub	DANNETTE PALMORE	30-0193496	MBE	Community Interaction	$ -
	155 W. MAIN ST APT 1704		(614) 469-7886	2/17/2017			
	Columbus, Ohio 43215						
	(614) 469-7886						
6							
			Approved: kms			**TOTAL CONTRACT or Mod AMOUNT**	**$ 300,000.00**
	Version created 082012		Date: 03/09/15			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 peoject. 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