

SUBCONTRACTOR WORK IDENTIFICATION FORM

Project Name: Real Time Control - Sewer System Optimization			Dept. of Public Utilities	Date: 11/09/2015
Project Number: 650009-100002			Division: Sewerage & Drainage	
City Project Manager: Fang Cheng				
PM Phone #: (614) 645-1267			Contract Amt or Mod (\$): \$741,036.22	
Prime Contractor: EmNet, LLC	Ordinance #: 2882-2015	Contract Duration: approx. 1 yr.		

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	EmNet LLC 121 S. Niles Ave., Suite 22 South Bend, IN 46617 (574) 855-1012	Prime	Luis Montestruque kculp@emnet.net (574) 855-1012	20-1118177 10/31/2016	MAJ	Project Management	\$ 632,318.69 85.3%
2	CDM Smith, Inc. 8800 Lyra Drive, Suite 500 Columbus, Ohio 43240 (614)847-8340	Sub	Tom Jedlinsky JedlinskyTE@cdmsmith.com (614) 847-8340	04-2473650 12/4/2016	MAJ	Real time optimization system implementation	\$ 96,318.75 13.0%
3	XYZ Professional Services LTD 3354 E. Broad Street, Ste C Columbus, Ohio 43213 (614) 238-9080	Sub	Melva Williams-Argaw melva@xyzprofessionalservices.com (614) 238-9080	04-3846618 12/31/2016	MBE	Field survey	\$ 12,398.78 1.7%
4							0.0%
5							0.0%
6							0.0%
7							0.0%
8							0.0%

Version created 082012			Approved: KMS		TOTAL CONTRACT or Mod AMOUNT \$ 741,036.22
			Date: 11/10/2015		Total Percentage

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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