SUBCONTRACTOR WORK IDENTIFICATION FORM

Project Name: DPU - Oracle WAM DB Administrator and System Administration			**Dept. of Public Utilities**	Date: 9/25/2017
Project Number:			**Director's Office**	
Project Manager: Rick Schomaker			**Contract Amt or Mod ($):** **$200,000.00**	
	Ordinance #: 2578-2017		**Contract Duration: 2nd year of a five-year contract**	

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	**Resource International, Inc.** 6350 Presidential Gateway Columbus, Ohio 43231	Prime	Farah Majidzadeh 614-823-4990	31-0669793 3/24/2018	FBE	To oversee Oracle Work and Asset Management Database and System Administration and provide changes and additional programming as needed.	$200,000.00 100.0%
2	**None**						
3							
4							
5							
6							

	Approved:	**TOTAL CONTRACT or Mod AMOUNT**	**$200,000.00**
Version created 082012	Date:	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