

Project Name: Center Large Diamter Condition Assessment			
Project Number: 650725-100009			
City Project Manager: Jeremy Cawley			
PM Phone #: (614) 645-6795			
Prime Contractor/Consultant: American Structurepoint, Inc.		Ordinance #: 3002-2017	
Contractor and Subcontractor CC			
	Name / Address	Prime or Sub	Contact Information
1	American Structurepoint, Inc. 2500 Corporate Exchange Drive, Suite 300 Columbus, Ohio 43231 (614) 901-2235	Prime	Firat Sever (614) 901-2235
2	CDM Smith, Inc. 445 Hutchinson Ave, Suite 820 Columbus, Ohio 43235 (614) 847-8340	Sub	Tom Jedlindky (614) 847-8340 jedlinskyte@cdmsmith.com
3	SewerVue Technology Corp. 7993 Enterprise St. Burnaby, BCV 5A1V5, CAN 604-421-0600	Sub	604-421-0600
4	CTL Engineering, Inc. 2860 Fisher Rd Columbus, Ohio 43204 (614) 276-8123	Sub	Scott Wilson (614) 276-8123 swilson@ctleng.com
5			
6			
7			
8			

DPU Fiscal Revised 8/9/2016		Approved:
		Date:

	Dept. of Public Utilities	Date: 11/04/2017
	Division: Sewers & Drains	
	Contract Amt or Mod (\$):	
	\$526,882.97	
	Contract Duration: 1 yr.	

CN, Scope, and Funding Summary

C.C.# / Expires	DAX Vendor #	Firm Type	Contract or Mod Scope	Contract or Mod Amount & %
35-1127317 8/28/2019	007019	MAJ	Contingency Total	\$ 417,140.13 \$ 417,140.13 79.2%
04-2473650 11/15/2018	000180	FBE	Condition assessment and plan preparation assistance	\$ 55,644.62 10.6%
98-1068604 8/4/2019	022646	MAJ	Advanced inspections of brick sewers utilizing ground penetrating radar (GPR)	\$ 49,038.00 9.3%
31-0680767 8/3/2018	004209	ASN	Soil borings and testing	\$ 5,060.22 1.0%
				\$ - 0.0%
			If Authorized	0.0%
			If Authorized	0.0%
				0.0%

			TOTAL CONTRACT or Mod AMOUNT	\$ 526,882.97
			Total Percentage	100.0%

SUBCONTRACTOR WORK IDENTIFICATION FORM

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 Department / Division assigned project manager
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
Vendor #	The Dynamic Accounting System (DAX) vendor identification number
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