



Laborers Funds Administrative Office of Northern California, Inc.

5672 Stoneridge Drive, Suite 100, Pleasanton, CA 94588
Employer Services Direct Line: 707-863-3480 or 800-244-4530

Part C – To be completed if you have signed either a Project Labor Agreement, One-Job Agreement or Sub-Contractor Agreement

Name of General Contractor: _____

Name of owner (awarding agency if publicworks) of project:

Name and address/location of the project:

Is this a certified Payroll Project? Yes No

Type of project i.e., public works (state or federal); commercial (over 12 million); light commercial; private grading/residential, etc.:

Response:

Estimated start date of the Employer's
portion of the work: _____

Estimated completion date of the

Employers portion of the work: _____

Are there any special provisions that have been agreed to by the parties that will amend the terms of the Laborers Master Agreement?

Response:

Please sign below and return this form to the above listed address, fax (707) 864-5856 or via email to AR@lfao.org. Thank you for completing and returning promptly.

Sincerely,

Employer Services
Laborers Funds Administrative Office

Form completed by: _____

Print Name and Title

Signature

Date(mm/dd/yyyy)