



# Labor Management Compliance Council

501 Shatto Place, Suite 260, Los Angeles, CA 90020

Phone Number: (213) 385-5622

Please complete all fields and email the form to [monika@socallmcc.org](mailto:monika@socallmcc.org)

## PROJECT REFERRAL FORM

Referral Date:		Referred By:		Agency:	
Project Name:				DIR #:	
Project Location:					
Reason for Referral:	Misclassification	Apprenticeship	Skilled & Trained Workforce	230.1	
Other:					

### OWNER / AWARDING AGENCY

Contact Person:	
Agency Name:	
Address:	
Phone #:	

### GENERAL CONTRACTOR / CONSTRUCTION MANAGER

Name:	
Address:	
Phone #:	License # & Class:

### SUB-CONTRACTOR(S) (to be monitored)

Plumber:		License/Craft:	
Fire Sprinkler:		License/Craft:	
HVAC:		License/Craft:	
Landscape:		License/Craft:	
Site Utilities:		License/Craft:	

### NOTES:

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