

FORM A

New York State Consultant Services
Contractor's Planned Employment
 From Contract Start Date Through the End of the Contract Term

State Agency Name: NYS Department of Transportation

State Agency Department ID: 3900283

Agency Business Unit: DOT01

Contractor Name: TY Lin International

Contract Number: D041217

Contract Start Date: 11/1/2024

Contract End Date: 11/1/2029

| Employment Category | Number of Employees | Number of Hours to be Worked | Amount Payable Under the Contract |
|--|---------------------|------------------------------|-----------------------------------|
| 11-1011.00 Chief Executives/Principals | 2 | 171 | \$30,000 |
| 11-3051.01 Quality Control Systems Managers | 1.00 | 274 | \$48,000.00 |
| 11-9041.00 Architectural & Engineering Project Manager | 4.00 | 1029 | \$180,000.00 |
| 17-2051.00 Civil Engineers | 25.00 | 4217 | \$738,000.00 |
| 17-3011.02 Civil Drafters | 4.00 | 343 | \$60,000.00 |
| 17-1012.00 Landscape Architects | 4.00 | 343 | \$60,000.00 |
| 19-2041.00 Environmental Scientists | 4.00 | 343 | \$60,000.00 |
| 43-9199.00 Clerical | 1.00 | 137 | \$24,000.00 |
| | 0.00 | 0 | \$0.00 |
| | 0.00 | 0 | \$0.00 |
| | 0.00 | 0 | \$0.00 |
| | 0.00 | 0 | \$0.00 |
| | 0.00 | 0 | \$0.00 |
| | 0.00 | 0 | \$0.00 |
| Total this Page | 45.00 | 6857 | \$1,200,000.00 |
| Grand Total | 45.00 | 6857 | \$1,200,000.00 |

Name of person who prepared this report: Leo Fernandez

Title: Project Manager

Phone #: 212-228-0662

Preparer's Signature: _____

Date Prepared: 9/16/2024

(Use additional pages, if necessary)