

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: NYSDOT	Agency Business Unit:
State Agency Department ID:	Contract Number: D038101
Contractor Name: Afridi Associates	Contract End Date: 08/31/2022
Contract Start Date: 05/03/2021	

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Construction Inspection	5.00	7,958.00	\$1,110,264.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	5.00	7,958.00	\$1,110,264.00
Grand Total	5.00	7,958.00	\$1,110,264.00

Name of person who prepared this report: Akber Afridi

Title: Principal

Phone #: (347) 236-7315

Preparer's Signature: 

Date Prepared: 04/16/2021