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

State Agency Department ID: 3900283 Contractor Name: AFRIDI ASSOCIATES

Contract Start Date: 03/01/2022

Agency Business Unit: DOT01 Contract Number: D038205 Contract End Date: 02/28/2023

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
47-4011.00 -Construction Inspectors	5.00	0.00	\$1,338,133.00
	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	0.00	\$1,338,133.00
Grand Total	5.00		\$1,338,133.00

Name of person who prepare	d this report: SHEHZAD KHAN	
Title: SR. ASSOCIATE		Phone #: 631-465-0786
Preparer's Signature:	Schan	
Date Prepared: 03/21/2022		