

**BOARD OF PUBLIC WORKS AND SAFETY  
Agenda Request Form**

(Form B-01-2012)

*Organizations and individuals are asked to submit a request form and supporting documents to be placed on the agenda. You will be contacted by the City confirming the date of the meeting in which your request will be heard. Please make sure that your contact information is accurate in case we need to get in touch with you. The Board of Works meets on the 1st and 3rd Monday of each month at 5:00 p.m. in City Hall located at 70 E. Monroe Street.*

|                                                                           |                                         |                                      |               |
|---------------------------------------------------------------------------|-----------------------------------------|--------------------------------------|---------------|
| <b>Date Submitted:</b>                                                    | February 12, 2019                       | <b>Meeting Date:</b>                 | March 4, 2019 |
| <b>Contact Information:</b>                                               |                                         |                                      |               |
| <b>Requested by:</b>                                                      | Mark Richards                           |                                      |               |
| <b>On Behalf of Organization or Individual:</b>                           |                                         | Department of Planning & Engineering |               |
| <b>Telephone:</b>                                                         | 317-736-3631                            |                                      |               |
| <b>Email address:</b>                                                     | mrichards@franklin.in.gov               |                                      |               |
| <b>Mailing Address:</b>                                                   | 70 E. Monroe Street, Franklin, IN 46131 |                                      |               |
| <b>Describe Request:</b>                                                  |                                         |                                      |               |
| Request approval of Change Order 005 for the King Street Phase 4 project. |                                         |                                      |               |
| <b>List Supporting Documentation Provided:</b>                            |                                         |                                      |               |
| Change Order 005                                                          |                                         |                                      |               |
| <b>Who will present the request?</b>                                      |                                         |                                      |               |
| <b>Name:</b>                                                              | Mark Richards                           | <b>Telephone:</b>                    | 317-736-3631  |

*In order for an individual and/or agency to be considered for new business on the Board of Works agenda, this reservation form and supporting documents must be received in the Mayor's office no later than 4:00 p.m. on the Wednesday before the meeting.*

**INDIANA Department of Transportation**  
**Construction Change Order and Time Extension Summary**

**Contract Information**

District:SEYMOUR DISTRICT

Contract No.: R -37572

AE:Wren, Rachel

Letting Date:12/13/2017

PE/S:Dowty, Chris

Status:Draft

**Change Order Information**

Date Generated: 10/22/2018

Change Order No.: 005

Date Approved: 00/00/0000

EWA: Y or Force Acct: N

Reason Code: CHANGED COND, Utility Related

Description: Booster Pumps

|                                 |                 |                   |
|---------------------------------|-----------------|-------------------|
| Original Contract Amount        | \$ 4,528,000.00 |                   |
| Current Change Order Amount     | \$ 16,410.00    | Percent: 0.362 %  |
| Total Previous Approved Changes | \$ -780.00      | Percent: -0.017 % |
| Total Change To-Date            | \$ 15,630.00    | Percent: 0.345 %  |
| Modified Contract Amount        | \$ 4,543,630.00 |                   |

**Time Extension Information**

Date Initiated 00/00/0000

Date Completed 00/00/0000

Original Contract Time

SS Completion Date 00/00/0000 or SS Calendar/Work Days 0

SP Date 00/00/0000 or SP Days

(SS = Standard Specification, SP = Special Provision)

Time Element Description:

Current Time Extension

SS Days 0 SP Days 0 SP Days Value \$ 0.00

Previous Time Approved

SS Days by AE:\_\_\_\_\_ DCE:\_\_\_\_\_ SCE:\_\_\_\_\_ DDCM:\_\_\_\_\_

SS Days\_\_\_\_\_ SP Days Value \$ \_\_\_\_\_

Revised Contract Time

SS Completion Date 00/00/0000 or SS Calendar/Work Days 0

SS Date 00/00/0000 or SP Days 0

**INDIANA Department of Transportation**  
**Construction Change Order and Time Extension Summary**

**Review and Approval Information**

Required Approval Authority AE:\_\_\_\_\_ DCE:\_\_\_\_\_ SCE:\_\_\_\_\_ \* DDCM:\_\_\_\_\_ \*  
(\$ per Change Order) (- LE \$ 250K-) (- LE \$ 750K - ) ( -- LE \$ 2 M -- ) ( -- GT \$ 2 M -- )  
(Days per Contract) ( 50 SS days ) ( 100 SS days ) ( 200 SS Days ) ( GT 200 SS days)

Verbal Approval Required? Y / N If Y, by \_\_\_\_\_ Date Issued \_\_\_\_\_

Total Change To-Date>5%? Y / N If Y , Copy to Program Budget Manager \_\_\_\_\_

Scope/Design Recommendation Y / N If Y, Referred to Project Manager(PM) \_\_\_\_\_  
Required?

Date to PM \_\_\_\_\_ Date Returned \_\_\_\_\_

Approval Authority Concurs with PM? Y / N If Y, Concurrence by \_\_\_\_\_ Date \_\_\_\_\_

If N, Resolution: Approved \_\_\_\_\_ Disapproved \_\_\_\_\_

Resolved by \_\_\_\_\_ Date \_\_\_\_\_

LPA Signatures Required? Y / N If Y, Date to LPA \_\_\_\_\_ Date Returned \_\_\_\_\_

FHWA Signatures Required? Y / N If Y, Date to FHWA \_\_\_\_\_ Date Returned \_\_\_\_\_

\* Field Engineer Recommendation (Required for SCE or DDCM Approval)

Field Engineer \_\_\_\_\_ Date \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contract No: R -37572

INDIANA

Date: 12/17/2018

Change Order No: 005

Department of Transportation

Page: 3

Contract: R -37572  
Project: 1400298 - State: 140029800LC5  
Change Order Nbr: 005  
Change Order Description: Booster Pumps  
Reason Code: CHANGED COND, Utility Related

| CLN  | PCN     | PLN  | Item Code | Unit | Unit Price | CO Qty | Comment | Amount Change        |
|------|---------|------|-----------|------|------------|--------|---------|----------------------|
| 0172 | 1400298 | 0172 | 715-09977 | EACH | 8,205.000  | 2.000  | C       | Amount: \$ 16,410.00 |

Item Description: PUMP

Supplemental Description1: BOOSTER PUMPS FOR IRRIGATION

Supplemental Description2:

Total Value for Change Order 005 = \$ 16,410.00

Whereas, the Standard Specifications for this contract provides for such work to be performed, the following change is recommended.  
General or Standard Change Order Explanation

There was not sufficient item bid history for booster pumps on the Site Manager reports page. Therefore, a cost analysis worksheet was generated to justify the pricing submitted. The contractor's pricing was in line with the cost analysis. Cost analysis worksheet is attached to this change order. The pumps were deemed necessary because the water main did to provide sufficient pressure needed for irrigation operation. This was determined by Indiana American Water summarized in the attached report. Change order was created as described on Page 134 of the contract special provisions. A contract time adjustment is not required for this change.

## Change Order Explanation for Specific Line Item

\*\*\*\*\*  
It is the intent of the parties that this change order is full and complete compensation for the work describe above.  
Notification and consent to this change order is hereby acknowledged.

Contractor: Nathan Gaskill

Signed By: Nathan Gaskill

Date: 12/29/18

NOTE: Other required State and FHWA signatures will be obtained electronically through the SiteManager system.

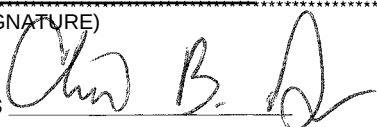
Contract No:R -37572  
Change Order No:005

INDIANA  
Department of Transportation

Date:12/17/2018  
Page: 4

\*\*\*\*\*  
APPROVED FOR LOCAL PUBLIC AGENCY

|                      |                                   |                                  |
|----------------------|-----------------------------------|----------------------------------|
| _____<br>(SIGNATURE) | _____<br>MAYOR<br>(TITLE)         | _____<br>MARCH 4, 2019<br>(DATE) |
| _____<br>(SIGNATURE) | _____<br>MEMBER, BPW&S<br>(TITLE) | _____<br>MARCH 4, 2019<br>(DATE) |
| _____<br>(SIGNATURE) | _____<br>MEMBER, BPW&S<br>(TITLE) | _____<br>MARCH 4, 2019<br>(DATE) |

PE/S  SUBMITTED FOR CONSIDERATION

\*\*\*\*\*  
APPROVED FOR INDIANA DEPARTMENT OF TRANSPORTATION

| Approval Level | Name of Approver | Date | Status |
|----------------|------------------|------|--------|
|----------------|------------------|------|--------|

## Change Order Worksheet

(To be included as part of Change Order Document)

Change Order # 5

Contract # R -37572 PE/PS Chris Dowty Project Manager Whitney Carlin

Program Budget Manager Robin Bolte Approval Authority Area Engineer

Date Contractor issued Written Notice of Changed Condition 3/24/2018

Date Area Engineer was notified of Changed Condition 4/19/2018

Date Project Manager was notified of Changed Condition \_\_\_\_\_

Date LPA was notified of Changed Condition 4/19/2018

Date FHWA was notified of Changed Condition (if Federal Oversight job) \_\_\_\_\_

Date Contractor was asked to provide pricing 4/19/2018

Date Contractor returned pricing for review 10/18/2018

Will work be done before approved Change Order Yes No No

If Yes

Date AE gave Documented Verbal Approval \_\_\_\_\_

Date LPA gave Documented Verbal Approval \_\_\_\_\_

Date FHWA gave Documented Verbal Approval (if Federal Oversight job) \_\_\_\_\_

Date Work Order Document was issued to Contractor \_\_\_\_\_

Is there a scope change? Yes No

If Yes

Date that Project Manager gave Documented Verbal Approval \_\_\_\_\_

Date that **Draft** Change Order was emailed to Project Manager for review <sup>1</sup> \_\_\_\_\_

Date Project Manager returned his/her review <sup>2</sup> \_\_\_\_\_

Date that **Draft** Change Order was sent to LPA for signatures (if applicable) \_\_\_\_\_

Date that **Draft** Change Order was sent to FHWA for approval (if Federal Oversight) \_\_\_\_\_

Date FHWA approved Change Order in SiteManager (If Federal Oversight) \_\_\_\_\_

1 The PE/PS should email a copy of the Draft Change Order to the Project Manager and give them a 5 work day period to review the Change Order before it is approved.

2 If there is no response, use the date at the end of the 5 work day period.

\*\* Contract Time should be addressed by one of the three statements detailed in Construction Memo 09-15.

INDIANA DEPARTMENT OF TRANSPORTATION  
Change Order Cost Analysis Worksheet

Contract Number: **R -37572** Change Order Number: **5**  
Change Order Description: Irrigation Tie-ins Busch Landscaping (Subcontractor) Pricing

**LABOR** Classification Codes: L=Laborer, O=Operator, F=Foreman, C=Carpenter/Pile Driver, T=Teamster, I=Iron Worker (Add Sub-Categorization as necessary)  
Hourly Rate Codes: ST=Straight Time, OT= Overtime (1.5\*ST), DT=Double Time (2\*ST)

| Class | Quantity for<br>Class (EA) | ST<br>Hours | OT<br>Hours | DT<br>Hours | ST Hourly Rate<br>(\$) | Fringes<br>per Hour (\$)                                               | Total Wages for<br>Insurance Calc.  | Fringe<br>Cost  | Hourly Payroll<br>Cost |
|-------|----------------------------|-------------|-------------|-------------|------------------------|------------------------------------------------------------------------|-------------------------------------|-----------------|------------------------|
| LABOR | 2                          | 2           |             |             | \$24.22                | \$15.16                                                                | \$96.88                             | \$60.64         | \$96.88                |
| OPER  | 1                          | 18          |             |             | \$36.75                | \$18.95                                                                | \$661.50                            | \$341.10        | \$661.50               |
| SUP   | 1                          | 18          |             |             | \$36.75                | \$18.95                                                                | \$661.50                            | \$341.10        | \$661.50               |
|       |                            |             |             |             |                        |                                                                        | \$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                 |
|       |                            |             |             |             |                        | Totals:                                                                | <b>\$1,419.88</b>                   | <b>\$742.84</b> | <b>\$1,419.88</b>      |
|       |                            |             |             |             |                        | Estimated Insurance (Worker's Compensation and Liability Cost) =       |                                     | <b>20.00%</b>   | <b>\$283.98</b>        |
|       |                            |             |             |             |                        | Estimated Tax (Federal Unemployment, State Unemployment, Federal SS) = |                                     | <b>11.75%</b>   | <b>\$166.84</b>        |
|       |                            |             |             |             |                        |                                                                        | Total Fringe Cost =                 |                 | <b>\$742.84</b>        |
|       |                            |             |             |             |                        |                                                                        | Labor Subtotal =                    |                 | <b>\$2,613.54</b>      |
|       |                            |             |             |             |                        |                                                                        | Labor Markup =                      | <b>20.00%</b>   | <b>\$522.71</b>        |
|       |                            |             |             |             |                        |                                                                        | <b>Total Estimated Labor Cost =</b> |                 | <b>\$3,136.25</b>      |

**MATERIAL** (Consider Some Overrun in Material Quantities)

[illegible]

**EQUIPMENT** (Utilize the current Rental Rate Blue Book as published by Equipment Watch<sup>(6)</sup>) (FHWA Hourly Rate = FHWA Monthly Rate / 176)

<https://app.equipmentwatch.com/search> (must be connected to the network)

| Equipment Description<br>(include Make, Model, Year, Attachments) | Equipment<br>Hours | Equipment Hourly<br>Rate (\$)           | Equipment<br>Cost |
|-------------------------------------------------------------------|--------------------|-----------------------------------------|-------------------|
| Excavator                                                         | 18                 | \$36.23                                 | \$652.14          |
| Dodge Truck                                                       | 2                  | \$35.76                                 | \$71.52           |
| Ford Truck                                                        | 2                  | \$35.76                                 | \$71.52           |
| Trailer                                                           | 8                  | \$11.13                                 | \$89.04           |
|                                                                   |                    |                                         | \$0.00            |
|                                                                   |                    |                                         | \$0.00            |
|                                                                   |                    | Equipment Subtotal =                    | \$884.22          |
|                                                                   |                    | Equipment Markups = 12.00%              | \$106.11          |
|                                                                   |                    | <b>Total Estimated Equipment Cost =</b> | <b>\$990.33</b>   |

Total Estimated Labor, Material and Equipment Cost = \$15,644.48

Contract Number: **R-37572**

Change Order Number: **5**

Change Order Description: **Booster Pumps**

**SUBCONTRACTING**

| Total Dollars Subcontracted Work                                   | 10% of the first<br>\$3000.00 | 7% of the<br>Remaining Amount | Total Subcontracting<br>Cost |
|--------------------------------------------------------------------|-------------------------------|-------------------------------|------------------------------|
| \$15,101.77                                                        | \$300.00                      | \$847.12                      | \$16,248.89                  |
| Total Estimated Labor, Material and Equipment Cost (from page 1) = |                               |                               | \$0.00                       |
| Bond Cost =                                                        |                               |                               | 2.00% \$324.98               |
| Total Estimated Change Order Cost =                                |                               |                               | <b>\$16,573.87</b>           |

Prepared by: **Chris Dowty**

Date: **10/19/2018**

# CHANGE ORDER REQUEST FORM

CONTRACT NO. **R-37572**

DATE OF SUBMISSION

**October 18,  
2018**

|                                                                             |                            |
|-----------------------------------------------------------------------------|----------------------------|
| <b>PROJECT DESCRIPTION</b><br><i>(route / intersection / bridge no(s).)</i> | King St, Franklin, In      |
| <b>CHANGE ORDER REQUEST SUMMARY DESCRIPTION</b>                             | Partial Irrigation Package |
| <b>PROPOSED SOLUTION SUMMARY</b>                                            | Attached pricing           |

NOTE: Upon request from Engineer, enter detailed description on page 2.

|                             |                     |                          |                    |
|-----------------------------|---------------------|--------------------------|--------------------|
| <b>ONSET DATE OF CHANGE</b> | <b>May 14, 2018</b> | <b>CHANGE ORDER TYPE</b> | Errors & Omissions |
|-----------------------------|---------------------|--------------------------|--------------------|

## PROPOSED COST AND TIME ADJUSTMENT

**COST**

**COST INCREASE / (DECREASE):**

**\$ 16,410.00**

The cost adjustment shall include lump sum and estimated totaled unit-priced item costs. Attach a separate sheet of unit price items including item description, unit of measurement, estimated quantity and unit price.

**CHECK APPROPRIATE BOXES PER APPROPRIATE BASIS OF COST CHANGE:**

☐ 109.03 Altered Quantities    ☒ 109.05(a) Agreed Price    ☐ 109.05(b) Force Account    ☐ 109.05.02 Delay Costs

**PROPOSED COST CHANGE INCLUDES:**    ☐ Labor    ☐ Material    ☐ Equipment    ☐ Lease Agreement    ☒ Subcontractor

**TIME ADJUSTMENT**

**INCREASE / (DECREASE):**

**(work days)**

[Click here to  
enter text.](#)

**CHECK APPROPRIATE BOXES PER APPROPRIATE BASIS OF TIME CHANGE:**

☒ 108.08(a) Excusable, Non-Compensable    ☐ 108.08(b) Excusable, Compensable

NOTE: If **Compensable**, attach details based on 109.05.2(a) Allowable Delay Costs.

## SUPPLEMENTAL INFORMATION

Additional information may be entered by the contractor.

|                                                                        |                                                                                                 |
|------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| <b>CHANGE ORDER ORIGATION:</b>                                         | <input checked="" type="checkbox"/> INDOT / LPA <input type="checkbox"/> Contractor             |
| <b>DOCUMENTS AFFECTED:</b>                                             |                                                                                                 |
| <input type="checkbox"/> Contract Specifications (ref. doc name/no.)   | <a href="#">Click here to enter text.</a>                                                       |
| <input checked="" type="checkbox"/> Contract Plans (ref. doc name/no.) | Plans show incorrect service points and low water pressure                                      |
| <b>CHANGE ORDER AFFECTS DBE PARTICIPATION:</b>                         | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no    (if yes, attach details) |

CHANGE ORDER REQUEST FORM

CONTRACT NO.

R-37572

UPON WRITTEN REQUEST FROM THE ENGINEER, PROVIDE ADDITIONAL DETAIL

|                                                |               |                                        |               |
|------------------------------------------------|---------------|----------------------------------------|---------------|
| DATE RECEIVED REQUEST FOR<br>ADDITIONAL DETAIL | [Select Date] | SUBMITTAL DATE OF<br>ADDITIONAL DETAIL | [Select Date] |
|------------------------------------------------|---------------|----------------------------------------|---------------|

DETAILED DESCRIPTION / JUSTIFICATION:

*(Include location(s), actions of contractor, owner, and other stakeholders, key events and related cause(s), discoveries, discussions, meetings, and effect on the contract if no action is taken. Also include references to key documents attached or available to support this change order request.)*

Click here to enter text.

PROPOSED SOLUTION – ADDITIONAL DETAILS:

*(Include proposed scope of work, means & methods, materials, equipment, utility relocation required, subcontracted scope and the effect on the contract schedule. Also include references to attached documents including, but not limited to, sketches, calculations, photos, material information, and submittals and meeting minutes.)*

Click here to enter text.

SIGNATURES

Contractor:

Name: (print)

(signature)

Date:

10/18/18

Project Engineer/Supervisor: *(signature is to acknowledge receipt of the document and does not signify agreement of the change order)*

Name: (print)

(signature)

Date:

10/18/18

NOTE: The Contractor and PE/S should retain a signed copy of this document for record.

CHANGE ORDER REQUEST FORM

**CONTRACT NO.**

[Click here to enter text.](#)

**ATTACHMENT: UNIT PRICE ITEMS DETAIL**

Attach or paste a unit price item detail.

# Milestone



Chris Dowty  
HWC Engineering  
135N Pennsylvania St, Suite 2800  
Indianapolis, In 46204

Thursday, October 18, 2018

## **RE: R-37572 REQUEST FOR PARTIAL PUMP PACKAGE PRICING**

Chris-

Attached is your request for the partial irrigation pump pricing only. The attached pricing will not make the irrigation system functional as stated in our progress meeting today. All other items to make the irrigation system functional, will be continue to be a part of the INDOT claim process that has already been started.

Irrigation Pump System, 2 each. \$8,205.00.

Nathan Gaskill

Project Manager  
Milestone Contractors, L.P.

**Milestone Contractors, LP**

3410 South 650 East Columbus, IN 812/579-5248 Fax 812/579-6703



## Milestone Contractors, L.P. Extra Work Pricing Summary

Project No:

R-37572 King St Franklin, In

Date Requested:

10/15/2018

Date Submitted:

10/18/2018

Description of Work:

Irrigation Changes Busch Landscaping Only, Partial Pump Package

Reason for Extra Work:

Bid Documents Error

Has Work Already Been Completed?

NO

When:

THROUGH

job duration

MCLP Project No.

183001

Cost Activity Code:

95000

All calculations and markups represent the application of INDOT Standard Specification 109.05 Extra Work and Force Account Work

| Item:                | Irrigation Changes Busch Landscaping Only, Partial Pump Package |              | Quantity: | 2           | Units     | EA                             |
|----------------------|-----------------------------------------------------------------|--------------|-----------|-------------|-----------|--------------------------------|
| Labor:               | Cost =                                                          | \$ -         | Markup %  | 20%         | \$ -      | Total \$ -                     |
| Equipment:           | Cost =                                                          | \$ -         | Markup %  | 12%         | \$ -      | Total \$ -                     |
| Materials:           | Cost =                                                          | \$ -         | Markup %  | 12%         | \$ -      | Total \$ -                     |
| Subcontract:         | Cost =                                                          | \$ 15,101.77 | Markup %  | 10%         | \$ 300.00 | Total \$ 16,248.89             |
|                      |                                                                 |              | Markup %  | 7%          | \$ 847.12 |                                |
| Supplies             | Cost =                                                          | \$ -         | Markup %  | 12%         | \$ -      |                                |
| Trucking:            | Cost =                                                          | \$ -         | Markup %  | 12%         | \$ -      |                                |
|                      |                                                                 | \$ 15,101.77 |           | \$ 1,147.12 |           | \$ 16,248.89                   |
| Insurance & Bond     | Cost =                                                          | \$ 146.24    | Markup %  | 10%         | \$ 14.62  | Total \$ 160.86                |
| Total                |                                                                 |              |           |             |           | \$ 16,409.75                   |
| Unit Price           |                                                                 |              |           |             |           | <b>\$ 8,204.88</b>             |
| Extra Days Requested |                                                                 |              |           |             |           | Bid Price = <b>\$ 8,205.00</b> |

| Item:                |        |      | Quantity: | Units                   |
|----------------------|--------|------|-----------|-------------------------|
| Labor:               | Cost = | \$ - | Markup %  | 20%                     |
| Equipment:           | Cost = | \$ - | Markup %  | 12%                     |
| Materials:           | Cost = | \$ - | Markup %  | 12%                     |
| Subcontractor:       | Cost = | \$ - | Markup %  | 10%                     |
|                      |        |      | Markup %  | 7%                      |
| Trucking:            | Cost = | \$ - | Markup %  | 10%                     |
|                      |        |      | Markup %  | 7%                      |
|                      |        | \$ - |           | \$ -                    |
| Insurance & Bond     | Cost = | \$ - | Markup %  | 10%                     |
| Total                |        |      |           | \$ -                    |
| Unit Price           |        |      |           | <b>#DIV/0!</b>          |
| Extra Days Requested |        |      |           | Bid Price = <b>\$ -</b> |

| Item:                |        |      | Quantity: | Units                   |
|----------------------|--------|------|-----------|-------------------------|
| Labor:               | Cost = | \$ - | Markup %  | 20%                     |
| Equipment:           | Cost = | \$ - | Markup %  | 12%                     |
| Materials:           | Cost = | \$ - | Markup %  | 12%                     |
| Subcontractor:       | Cost = | \$ - | Markup %  | 10%                     |
|                      |        |      | Markup %  | 7%                      |
| Trucking:            | Cost = | \$ - | Markup %  | 10%                     |
|                      |        |      | Markup %  | 7%                      |
|                      |        | \$ - |           | \$ -                    |
| Insurance & Bond     | Cost = | \$ - | Markup %  | 10%                     |
| Total                |        |      |           | \$ -                    |
| Unit Price           |        |      |           | <b>#VALUE!</b>          |
| Extra Days Requested |        |      |           | Bid Price = <b>\$ -</b> |

Busch Landscaping, LLC (DBE & WBE Certified)

5703 N. US 421  
Osgood, IN 47037

# Estimate

| Date       | Estimate #  |
|------------|-------------|
| 10/16/2018 | 18140 37572 |

| Name / Address                                                      |
|---------------------------------------------------------------------|
| Milestone Contractors, L.P.<br>3410 S. 650 E.<br>Columbus, IN 47203 |

|                                                                                                                                                                                                                                                                                                   |          | Job Name/Location       |          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-------------------------|----------|
|                                                                                                                                                                                                                                                                                                   |          | R-37572-A Franklin      |          |
| Description                                                                                                                                                                                                                                                                                       | Qty      | Cost                    | Total    |
| R-37572-A Franklin/Johnson Co.<br>Revised 10.16.18<br>Materials increased 12% over cost per INDOT Specs 109.05 (b):<br>Munro Commander Pro pump                                                                                                                                                   | 2        | 3,304.00                | 6,608.00 |
| Cabinet                                                                                                                                                                                                                                                                                           | 2        | 646.24                  | 1,292.48 |
| Pedestal                                                                                                                                                                                                                                                                                          | 2        | 768.32                  | 1,536.64 |
| Misc. supplies for irrigation                                                                                                                                                                                                                                                                     | 1        | 846.72                  | 846.72   |
| Labor increased 20% over cost per INDOT Specs 109.05 (b):<br>Labor: 2 Laborers--load equip., materials & supplies; perform safety<br>check; fuel trucks and attach trailers; unload and put away<br>equip./dispose of debris at end of day--\$24.22 + \$15.16 = \$39.38 *<br>120% = \$47.26       | 4        | 47.26                   | 189.04   |
| Operator/irrigation installer--\$36.75 + \$18.95 = \$55.70 *120% =<br>\$66.84                                                                                                                                                                                                                     | 18       | 66.84                   | 1,203.12 |
| Project manager--\$36.75 + \$18.95 = \$55.70 *120% = \$66.84                                                                                                                                                                                                                                      | 18       | 66.84                   | 1,203.12 |
| Overhead: Estimator/Admin. Ass't.--preparing estimates and<br>paperwork; ordering materials; preparing payroll and state and<br>federal payroll forms; interest for borrowed money while waiting for<br>INDOT payment; office equipment, includes 20% increase to<br>payroll & 12% on other items | 0.5      | 1,262.12                | 631.06   |
| Payroll taxes include 20% increase over costs per INDOT Specs<br>109.05 (b):<br>Payroll taxes: Unempl. state rate (7.474%)                                                                                                                                                                        | 2,123.38 | 0.08969                 | 190.45   |
| Estimate is valid for 30 days.                                                                                                                                                                                                                                                                    |          | <b>Subtotal</b>         |          |
|                                                                                                                                                                                                                                                                                                   |          | <b>Sales Tax (7.0%)</b> |          |
|                                                                                                                                                                                                                                                                                                   |          | <b>Total</b>            |          |

| Phone #             | Fax #        | E-mail              |
|---------------------|--------------|---------------------|
| 812.498.5800 (Cell) | 812.852.5920 | mabusch@etczone.com |

Busch Landscaping, LLC (DBE & WBE Certified)

5703 N. US 421  
Osgood, IN 47037

# Estimate

| Date       | Estimate #  |
|------------|-------------|
| 10/16/2018 | 18140 37572 |

| Name / Address                                                      |
|---------------------------------------------------------------------|
| Milestone Contractors, L.P.<br>3410 S. 650 E.<br>Columbus, IN 47203 |

| Job Name/Location                                                                                         |          |                         |             |
|-----------------------------------------------------------------------------------------------------------|----------|-------------------------|-------------|
| R-37572-A Franklin                                                                                        |          |                         |             |
| Description                                                                                               | Qty      | Cost                    | Total       |
| Payroll taxes: Workman's comp. insurance (\$6.79 per \$100 of payroll)                                    | 21.2334  | 8.15                    | 173.05      |
| Payroll taxes: Federal unemployment. FUTA 1.5%                                                            | 2,123.38 | 0.018                   | 38.22       |
| Payroll taxes: Social security 7.65%                                                                      | 2,123.38 | 0.0918                  | 194.93      |
| Equipment includes 12% increase per INDOT Specs 109.05 (b):                                               |          |                         |             |
| Excavator + insurance (hr.)                                                                               | 18       | 36.23                   | 652.14      |
| Hand-operated digger + insurance (hr.)                                                                    | 8        | 4.92                    | 39.36       |
| Dodge truck + insurance (hr.)                                                                             | 2        | 35.76                   | 71.52       |
| Ford truck + insurance (hr.)                                                                              | 2        | 35.76                   | 71.52       |
| 2 Trailers + insurance (hr.)                                                                              | 4        | 11.13                   | 44.52       |
| Mileage to/from work site (2 trucks with 2 trailers) 120 miles round trip--Osgood/Franklin at \$.545/mile | 120      | 0.545                   | 65.40       |
| General liability & personal property insurance--includes 10% increase per INDOT Specs 109.05 (b):        | 12.62    | 4.00                    | 50.48       |
| Estimate is valid for 30 days.                                                                            |          | <b>Subtotal</b>         | \$15,101.77 |
|                                                                                                           |          | <b>Sales Tax (7.0%)</b> | \$0.00      |
|                                                                                                           |          | <b>Total</b>            | \$15,101.77 |

| Phone #             | Fax #        | E-mail              |
|---------------------|--------------|---------------------|
| 812.498.5800 (Cell) | 812.852.5920 | mabusch@etczone.com |

- D. **Booster Pump (pressure unknown):** The existing water pressure was not available at the time of design development. The Contractor is required to determine the existing pressure at the irrigation point of connection prior to installation of the system. Report any deviation between the existing pressure and the required pressure in writing to the engineer. If the required **75 psi** minimum is not available at the point of connection than a booster pump, protective cover and pump start relay shall be required and submitted as a change order to the Engineer's authorized representative. The irrigation consultant shall determine the appropriate manufacturers and models such as: Munro: "Complete PRO-II" (model # CP200B for single-phase power, or #CP200B3 for three-phase power) or equivalent models by Rain Bird or Watertronics. The booster pump shall be installed per manufacturer's specifications on a concrete pad. The Contractor shall have the exact power and voltage verified for coordination with the pump prior to purchase and installation. A Munro StartBox pump start relay shall activate and control the pump. The booster pump shall be winterized and stored in an indoor facility during the off-season. Submit a change order to the engineer for approval if it is determined that a booster pump is required. If needed, providing electrical service and connections will be required by the irrigation contractor, and their electrical subcontractor, as a part of the irrigation scope of work.
- E. **Main Line Piping:** All main line piping shall be C1 200 PVC SDR 21 standard weight as manufactured by Cresline or approved equal. All mainline 1" - 2 1/2" shall be solvent welded. All mainline 3" and larger shall be PVC gasketed type. Pipe shall carry the N.S.F. seal of approval and meet the following specifications: ASTM 1120/1220, C.S. 256-63, or latest revisions. Size as indicated on drawings.
- F. **Lateral Line Piping:** All lateral lines downstream of the valves shall be CL 200 PVC SDR 21 for 1" pipe, C1 200 PVC SDR 21 for 1 1/4" and larger pipe, standard weight as manufactured by Cresline or approved equal. Pipe shall carry the N.S.F. seal of approval and meet the following specifications: ASTM 1120/1220, C.S. 256-63, SDR 21 or latest revision. Size as indicated on drawings.
- G. **Pipe Fittings:** All PVC fittings 1" - 3" shall be solvent weld schedule 40 standard weight. Attachment shall be made with both a primer and a solvent cement as approved by the manufacturer. Glue type saddles may be used so long as they are 3/4 round type units which grip the pipe. Saddles are to be bored or cut with appropriate equipment and holes are not to be burned into the pipe. All fittings 4" and larger shall be ductile iron with PVC gasket and hub configuration and retaining rings as manufactured by Harco or Leemco. Provide Harco or Leemco joint restraints or concrete thrust blocks on all 3" and larger fittings. Install per manufactures recommendations.

## INDIANA AMERICAN WATER

## FLOW TEST DATA SHEET

DATE 6/7/2018

TIME 2:30 pm

TEST REQUESTED BY: Adam Boone

TEST CONDUCTED BY: Miguel and Chris

## RESIDUAL HYDRANT - POINT A:

HYDRANT NO: HFR-287 SHEET

LOCATION corner of milford and longest drive

STATIC PRESSURE BEFORE FLOW 58 RESIDUAL PRESSURE 47

STATIC PRESSURE TWO MINUTES AFTER FLOW 62

## FLOW HYDRANT - POINT B:

HYDRANT NO. HFR-323 SHEET

LOCATION corner of hole in one and longest drive

STATIC PRESSURE BEFORE FLOW 58 SIZE OF OPENING 2.5

DISCHARGE COEFFICIENT\* .09 PITOT READING 42

FLOW 1209 MINUTES FLOWED 2

STATIC PRESSURE TWO MINUTES AFTER FLOW 62

## FLOW HYDRANT - POINT C:

HYDRANT NO. SHEET

LOCATION

STATIC PRESSURE BEFORE FLOW RESIDUAL PRESSURE

DISCHARGE COEFFICIENT\* PITOT READING

FLOW MINUTES FLOWED

STATIC PRESSURE TWO MINUTES AFTER FLOW

## FLOW HYDRANT - POINT D:

HYDRANT NO. SHEET

LOCATION

STATIC PRESSURE BEFORE FLOW RESIDUAL PRESSURE

DISCHARGE COEFFICIENT\* PITOT READING

FLOW MINUTES FLOWED

STATIC PRESSURE TWO MINUTES AFTER FLOW

RESULTS:  
FLOW AT 20 PSI: