Proposal

AIR Co.

4404 N. Franklin Road
Indianapolis, IN 46226
Phone (317) 546-7473 Fax (317) 546-1272

PROPOSAL SUBMITTED TO City of Franklin	PHONE 317-736-3631 FAX 317-736-5310	DATE February 20, 2013
STREET 70 East Monroe Street	JOB NAME Asbestos Inspection	
CITY, STATE & ZIP CODE Franklin, IN 46131	JOB LOCATION 55 W. Madison St., Franklin	
ARCHITECT/CONSULTANT n/a	DATE OF PLANS n/a	JOB NUMBER 13-163

We hereby submit specifications and estimates for:

Removal and disposal of approximately 230 linear feet of accessible pipe insulation.....$3,450.00

Removal and disposal of approximately 15 linear feet of accessible boiler breeching.....$800.00

* AIR Co. will dispose of all waste at a State approved landfill.
* AIR Co. will not reinstall any items removed in conjunction with work.
* AIR Co. will conduct the work during normal business hours.
* No demolition of walls or ceilings is included in this proposal.

We Propose hereby to furnish material and labor - complete in accordance with above specifications, for the sum of:

see above dollars ($ see above).

Payment to be made as follows:

net 30

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from the above specifications involving extra costs will be executed only upon approval, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workman's compensation Insurance.

Authorized Signature: Daniel Flack

Digitally signed by Daniel Flack
DN: cn=Daniel Flack, o=AIR Co., ou, email=dan_airco@sbcglobal.net, c=US
Date: 2013.02.20 15:22:39 -05'00'

Daniel Flack Project Manager

Note: This proposal may be withdrawn by us if not accepted within thirty (30) days.

Acceptance of Proposal - The above prices, specification and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Date of Acceptance:_____ Signature: _____