SECTION 00622 - Contractor's Application for Payment 61st Drive Water Main Replacement

For Morte Access

	For V	Nork Accompl	ished through the period of	07/16/2018
To: From: PO No. Project No.:	Indian River County Utilities Blue Goose Construction WAD - 2018.003 BG 1344			
1	Original Contract Price:		\$	27,775.00
2	Net change by Change Orders and Written Amendments (+ or -):	-	\$	-
3	Current Contract Price (1 plus 2):	-	\$	27,775.00
4	Total completed and stored to date:		\$	25,475.00
5	Contractor purchased material		\$	400.00
6	Retainage (per Agreement):	-		
	0% of completed Work:			
	<u>0</u> % of retainage:			
	Tota	al Retainage:	\$	-
6	Total completed and stored to date plus contractor purchased material (4 + 5)	-	\$	25,875.00
7	Less previous Application for Payments:	_	\$	-
8	DUE THIS APPLICATION (6 MINUS 7):		\$	25,875.00

CONTRACTOR'S CERTIFICATION:

UNDER PENALTY OF PERJURY, the undersigned CONTRACTOR certifies that (1) the labor and materials listed on this request for payment have been used in the construction of this Work; (2) payment received from the last pay request has been used to make payments to all subcontractors, laborers, materialmen and suppliers except as listed on Attachment A, below; (3) title of all Work. materials and equipment incorporated in said Work or otherwise listed in or covered by this Application for Payment will pass to OWNER at time of payment free and clear of all Liens, security interests and encumbrances (except such as are covered by a Bond acceptable to OWNER indemnifying OWNER against any such Lien, security interest or encumbrance); (4) all Work covered by this Application for Payment is in accordance with the Contract Documents and not defective; and (5) If this Periodic Estimate is for a Final Payment to project or improvement, I further certify that all persons doing work upon or furnishing materials or supplies for this project or improvement under this foregoing contract have been paid in full, and that all taxes imposed by Chapter 212 Florida Statutes, (Sales and Use Tax Act, as Amended) have been paid and discharged, and that I have no claims against the OWNER.

Dated

Application for Payment No. 01 FINAL

(CONTRACTOR - must be signed by an Officer of the Corporation)

Greg Hampton - Controller Print Name and Title

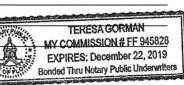
. 1

STATE OF FLORIDA COUNTY OF ST LUCIE

	no being
by me first duly sworn upon oath, says that he/she is the Controller of the CONTRACTOR mentioned above ar	nd that
he/she has been duly authorized to act on behalf of it, and that he/she executed the above Contractor's Application for Paymen	t and
Contractor's Certification statement on behalf of said CONTRACTOR; and that all of the statements contained herein are true, of	correct,
and complete. Subscribed and sworn to before me this 3day of angust, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20	
as in a literation is personally known to me or has producedas in	dentification.
NOTARY PUBLIC: Ulles OI	ormar
Printed name:	

Commission N

Commission Expirat



Indian River County Utilities 61st Drive Water Main Replacement Work Authorization Directive 2018-003

				WOIK	Authorn	zatioi	Directive 2	010-005							
															216.1344
							3				WORK CO	MPLETE	D		and the second
			Scheduled Value		Previous Application			This Period			Total Completed				
Item No.	Description		Unit	Un	nit Price		Amount	Quantity	Total		Quantity	Т	otal	Quantity	Total
01c	Install 6" PVC Water Main	40	LF	\$	6.00		240.00			\$	40.00		240.00		240.
	Install 6" HOPE Horizontal Directional Drill (SDR-11 Including fusion of MI	200	LF	\$	38.85	\$	7,770.00								
07b	adaptors							-	-	_	200.00		7,770.00	200.00	7,770.
9	Install Mechanical Restrained Joint Ductile Iron Fitting	0.25	Ton	\$	4,100.00		1,025.00	-			0.25		1,025.00	0.25	1,025.
10a	Install Mechanical Restrained Joints on Existing Main, 3" through 8"	12	EA	\$	60.00	\$	720.00	-	-		12.00		720.00	12.00	720.
13	Grout Pipe Abandoned and Left In Place, 3" through 8"	220	LF	\$	12.00		2,640.00		-		220.00		2,640.00	220.00	2,640.
23	Test Holes / Potholes	4	EA	\$	250.00	\$	1,000.00	-	-		4.00		1,000.00	4.00	1,000.
28	Install Temporary Jumper and Remove after FDEP Clearance	1	EA	\$	500.00	\$	500.00	-	-		1.00		500.00	1.00	500.
29a	Fill, pressure test, chlorinate, and flush water main, 4" through 8"	240	LF	\$	1.50	\$	360.00	-	-		240.00		360.00	240.00	360.
	Install Sample Point per County Detail, Remove after FDEP Clearance	2	EA	\$	275.00	\$	550.00								
30b								-	-		2.00		550.00	2.00	550.
	Remove, Dispose of and/or Replace Rock Base Course, Compacted to	5	Ton	\$	20.00	\$	100.00								
67b	County Specifications			-				-	-		5.00		100.00	5.00	100.
	Remove, Dispose of and/or Replace Stabilized Sub- Grade Course,	5	Ton	\$	14.00	\$	70.00								
67c	Compacted to County Specifications							•	-		5.00		70.00	5.00	70.
86a	Lawn Restoration (Topsoil & Sod) Includes Watering	100	SY	\$	2.25		225.00	-	-		200.00		450.00	200.00	450.
	Well Point Dewatering Set Up, Tier Depth up to 2S', (Minimum 30' X 30'	2	LS	\$	3,500.00	\$	7,000.00								
88a	Work Area)									\$	2.00	\$	7,000.00	2.00	7,000.
	Well Point DewaterIng, Additional Points Needed for Larger Area or Linear	30	EA	\$	25.00	\$	750.00								
88b	Work									\$	30.00		750.00	30.00	750.
91	Mobilization, Demobilization, MOT (based on 10% Labor Cost):	1	LS	\$	2,300.00		2,300.00			\$	1.00	\$	2,300.00	1.00	2,300.
	Contingency	1	LS	\$	2,525.00	\$	2,525.00							-	
														-	
Total						\$	27,775.00		\$ -			\$	25,475.00		\$ 25,475.

NAIL FARMS, INC. 4430 Nail Farm Rd. MELBOURNE, FL 32934 (321)254-6746 thesodfather@aol.com

Invoice 27800

THANK YOU.

BILL TO Blue Goose Growers 1900 Old Dixie Highway Fort Pierce, FL 34946		DATE PLEASE PAY 07/11/2018 \$428.00		
P.O. NUMBER 1344		JOB DESCRIPTI Pickup	ON	
ACTIVITY	QTY		RATE	AMOUNT
Bahia Pallet	4		100.00	400.00T
Thank you for you	ur business!	SUBTOTAL TAX (7%) TOTAL		400.00 28.00 428.00
ROVED erri Gorman a	at 1:28 pm, Jul 16, 2018	TOTAL DUE		\$4 28.00 \$

216202.6315 A2161344

*****Please make note of our new mailing address.*****