SECTION 00622 - Contractor's Application for Payment GIFFORD AREA STORMWATER PROJECT

Application for Payment No. 4-F

For Work Accomplished through the period of 11/01/2018

through 11/30/ 2018

To:

Indian River County (OWNER)

From:

JOHNSON-DAVIS, INC. (CONTRACTOR)

Project No.:

IRC-1502

Bid No.:

2018045

1) Attach detailed schedule and copies of all paid invoices.

1.	Original Contract Price:	\$211,365.00
2.	Net change by Change Orders and Written Amendments (+ or -):	\$4,570.32
3.	Current Contract Price (1 plus 2):	\$215,935.32
4.	Total completed and stored to date:	\$215,935.32
5.	Retainage (per Agreement):	
l	10% of completed Work:	
	0% of retainage: \$0.00	2
	Total Retainage:	\$0.00
6.	Total completed and stored to date less retainage (4 minus 5):	\$215,935.32
7.	Less previous Application for Payments:	\$194,641.05
		-0
8.	DUE THIS APPLICATION (6 MINUS 7):	\$21,294.27

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.

Attached to or submitted with this form are:

 Signed release of lien forms (partial or final as applicable) from all subcontractors, laborers, materialmen and suppliers except as listed on Attachment A, together with an explanation as to why any release of lien form is not included;

Updated Construction Schedule per Specifica	tion Section 01310, and
Dated By:	(CONTRACTOR – must be signed by an Officer of the Corporation)
STATE OF FLORIDA COUNTY OF INDIAN RIVER	Print Name and Title
Before me, a Notary Public, duly commissioned, bert A. Koske, who being by me first duly of the CONTRACTOR me authorized to act on behalf of it, and that he/she expayment and Contractor's Certification statement on the statements contained herein are true, correct, arme this 4 day of Dec. , 2018.	sworn upon oath, says that he/she is the entioned above and that he/she has been duly ecuted the above Contractor's Application for behalf of said CONTRACTOR; and that all of
ROBURS A. HOPKER is personally	known to me or has produced as identification.
(SEAL) LARISA DITU PELKEY Commission # GG 157707 Expires January 22, 2022	DBLIC: Albert Dith PEWEY DITH PEWEY DITH PEWEY DITH PEWEY DOMMISSION No.: 69 157767 DOMMISSION Expiration: 01. 22-2022
Please remit payment to: Contractor's Name:	inc
Contractor's Name: fournson - Davis Address: 604 Hills Rome	
LANTANA FL. 33	
The remainder of this page wa	

SURETY'S CONSENT OF PAYMENT TO CONTRACTOR:

The Surety, LIBERTY MUTUAL	INSURANCE COMPANY
	Public Construction Bond Number <u>016215860</u> , hereby /NER to the CONTRACTOR, for the amounts specified in TION FOR PAYMENT.
TO BE EXECUTED BY CORPO	RATE SURETY:
Attest:	
J'on mer	LIBERTY MUTUAL INSURANCE COMPANY
Secretary Lian Mier, Witness	Corporate Surety
•	175 Berkeley Street
	Boston, MA 02116
	Business Address
	BY: Bre Q Ald
	Print Name: Benjamin A. Stahl
	Title: Attorney-in-Fact
*	
CONTRACTOR OF STREET	(Affix Corporate SEAL)
STATE OF FLORIDA	5
COUNTY OF INDIAN RIVER	
Benjamin A. Stahl, to me well being by me first duly sworn LIBERTY MUTUAL INSURANCE it to approve payment by the ON Application for Payment. S December, 20 18	y commissioned, qualified, and acting, personally appeared known or who produced well known as identification, who upon oath, says that he/she is the Attorney-in-Fact for CE COMPANY and that he/she has been authorized by WNER to the CONTRACTOR of the foregoing Contractor's subscribed and sworn to before me this 3 rd day of otary Public, State of GEORGIA Decommission Expires: June 12, 2022

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This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

> Liberty Mutual Insurance Company The Ohio Casualty Insurance Company West American Insurance Company

Certificate No: 8195687-016072

call EST on any business day.

Power of A

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POWER OF ATTORNEY

KNOWN ALL PERSONS BY THESE PRESENTS: That The Ohio Casually Insurance Company is a corporation duly organized under the laws of the State of New Hampshire, that Liberty Mutual Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Indiana (herein collectively called the 'Companies'), pursuant to and by authority herein set forth, does hereby name, constitute and appoint, Miama Signorile; Benjamin A. Stahl; Elizabeth K. Sterling; Wesley P. Williams

each individually if there be more than one named, its true and lawful attorney-in-fact to make, state of Atlanta execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Companies in their own proper persons.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Companies and the corporate seals of the Companies have been affixed thereto this 7th day of September , 2018 .

INSU





Liberty Mutual Insurance Company The Ohio Casualty Insurance Company West American Insurance Company

David M. Carey, Assistant Secretary

State of PENNSYLVANIA County of MONTGOMERY

day of September , 2018 before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of Liberty Mutual Insurance Company, The Ohio Casualty Company, and West American Insurance Company, and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer. Attorney 4:30 pm

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at King of Prussia, Pennsylvania, on the day and year first above written.



COMMONWEALTH OF PENNSYLVANIA

Teresa Pastelia, Notary Public Upper Merion Twp, Montgomery Co Mr. Commission Expires March 28, 2021

8 P This Power of Attorney is made and executed pursuant to and by authority of the following By-laws and Authorizations of The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company which resolutions are now in full force and effect reading as follows:

ARTICLE IV - OFFICERS: Section 12. Power of Attorney.

ifirm the validity of t 832-8240 between Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and execution of any such instruments and to attach thereto the seal of the Corporation. When so executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

ARTICLE XIII - Execution of Contracts: Section 5. Surely Bonds and Undertakings.

Any officer of the Company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Company to make, execute, seal, acknowledge and deliver as surely any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as if signed by the president and attested by the secretary.

Certificate of Designation - The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys infact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety

Authorization - By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surely bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, Renee C. Llewellyn, the undersigned, Assistant Secretary, The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy of the Power of Attorney executed by said Companies, is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 3rd day of December







Renee C. Llewellyn, Assistant Secretary

CERTIFICATION OF ENGINEER:

I certify that I have reviewed the above and foregoing Periodic Estimate for Partial Payment; that to the best of my knowledge and belief it appears to be a reasonably accurate statement of the work performed and/or material supplied by the Contractor. I am not certifying as to whether or not the Contractor has paid all subcontractors, laborers, materialmen and suppliers because I am not in a position to accurately determine that issue.

Dated12-20 - 2018	D. ailud
	SIGNATURE

CERTIFICATION OF INSPECTOR:

I have checked the estimate against the Contractor's Schedule of Amounts for Contract Payments and the notes and reports of my inspections of the project. To the best of my knowledge, this statement of work performed and/or materials supplied appears to be reasonably accurate, that the Contractor appears to be observing the requirements of the Contract with respect to construction, and that the Contractor should be paid the amount requested above, unless otherwise noted by me. I am not certifying as to whether or not the Contractor has paid all subcontractors, laborers, materialmen and suppliers because I am not in a position to accurately determine that issue.

Dated	
	SIGNATURE
***************	********************
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ATTACHMENT A

1.	List of all subcontractors, laborers, materialmen and suppliers who have not been paid from the payment received from the last Pay Request and the reason why they were not paid (attach additional pages as necessary):							
2.	List of all subcontractors, laborers, materialmen and suppliers for which a signed release of lien form (partial or final as applicable) is not included with this Pay Request, together with an explanation as to why the release of lien form is not							
	included (attach additional pages as necessary):							

The undersigned lienor, in consideration of the final payment in the amount of \$10.00, hereby waives and releases its lien and right to claim a lien for labor, services or materials furnished to **Johnson-Davis Inc.** on the job of **Indian River County BOCC** (Owner), for improvements to the following described project:

Gifford Area Stormwater Project; Bid No.: 2018045 Project No.: IRC-1502 Indian River County, Florida

Dated On December 64,2018

Lienor's Name:

Allied Trucking od Palm Beach LLC

Address:

WistPalm Beoch F1233411

By:

Printed Name/ Title:

luis Barraheo

Sworn to and subscribe before me this O4 of December 2018

Signature of Notary Public

Commissioned State of Florida

VICTOY MOSCOSO

FINE Name of Motory Public

VICTOR MOSCOSO

MY COMMISSION # FF 899453
EXPIRES: August 15, 2019
londed Tirru Notary Public Underwriters

Personally Known XX or, Produced Identification: Personally Known
Type of Identification Produced:

The undersigned lienor, in consideration of the final payment in the amount of \$10.00, hereby waives and releases its lien and right to claim a lien for labor, services or materials furnished to **Johnson-Davis Inc.** on the job of **Indian River County BOCC** (Owner), for improvements to the following described project:

Gifford Area Stormwater Project; Bid No.: 2018045 Project No.: IRC-1502 Indian River County, Florida

Dated On December 4, 2018	_	
	Lienor's Name Address:	e: Lake Point Restoration LLC 12012 South Shore Blvd., Suite 107 Wellington, FL 33414-6397
By: Printe Sworn to and subscribe before me this	d Namel Title:	Donnie Owen Controlle- 2018
Signature of Notary Public Commissioned State of Florida	Printe	CHRISTINE E HENLEY MY COMMISSION # FF977409 EXPIRES March 31, 2020 same of Notary Public
Personally Known XX or, Produced Type of Identification		

The undersigned lienor, in consideration of the final payment in the amount of \$10.00, hereby waives and releases its lien and right to claim a lien for labor, services or materials furnished to **Johnson-Davis Inc.** on the job of **Indian River County BOCC** (Owner), for improvements to the following described project:

Gifford Area Stormwater Project; Bid No.: 2018045 Project No.: IRC-1502 Indian River County, Florida

Dated On Dec 42, 2018

<i>P</i>	
	Lienor's Name: Mack Concrete Industries, Inc.
	ASTATULA, FL 34705
	().
	By: Salle July
	by.
	Printed Name/ Title: SARAH A JACKSON, Explanation
0	
Sworn to and subscribe before me th	118 100. 4 9 2018
	gamanaranapper
	CONNIE WILSON &
//	MY COMMISSION # GG245054 \$ Composed EXPIRES August 17, 2022 \$
(on reliktor	hannananananananan
Signature of Notary Public	Print Name of Notary Public
Commissioned State of Florida	
Personally Known XX or, Pr	oduced Identification:
	ification Produced:
- JF 2 01 2001	

The undersigned lienor, in consideration of the final payment in the amount of \$10.00, hereby waives and releases its lien and right to claim a lien for labor, services or materials furnished to **Johnson-Davis Inc.** on the job of Indian River County BOCC (Owner), for improvements to the following described project:

Gifford Area Stormwater Project; Bid No.: 2018045
Project No.: IRC-1502
Indian River County, Florida

Dated On 1214118	
	Lienor's Name: Ranger Construction Industries Inc. Address: P.O. BOX 150165 WEST WIM BEACH FC 33416
	By: Printed Name/ Title: Cinkle Roya Create at Cal Perhano
Sworn to and subscribe before me t	his Docember 4,2018
Signature of Notary Public	Gregoris Es frelle- Print Name of Notary Public
Commissioned State of Florida Personally Known XX or, P	Gregoria Estrella NOTARY PUBLIC ESTATE OF FLORIDA Comm#FF958335
	tification Produced: Expires 2/8/2020

The undersigned lienor, in consideration of the final payment in the amount of \$10.00, hereby waives and releases its lien and right to claim a lien for labor, services or materials furnished to **Johnson-Davis Inc.** on the job of **Indian River County BOCC** (Owner), for improvements to the following described project:

Gifford Area Stormwater Project; Bid No.: 2018045
Project No.: IRC-1502
Indian River County, Florida

Dated On	14-18

Lienor's Name:

Unlimited Turf, LLC

Address:

850 NW Federal Highway, Ste 170

Stuart, FL 34994

By:

Printed Name/ Title:

LAZUTA DAMINOS

Sworn to and subscribe before me this 100 . 4, 2018

Signature of Notary Public Commissioned State of Florida Christie Kepass
Print Name of Notary Public

Personally Known XX or, Produced Identification:
Type of Identification Produced:

Notary Public State of Florida Christie P Repass
My Commission GG 158404
Expires 11/17/2018

PROJECT IRC-1502 GIFFORD STORMWATER

				SCHEDULED VALUE		PREVIOUS APPLICATION		THIS PERIOD		TOTAL COMPLETED		%	MATERIALS	BALANC	CE TO FINISH
tem No.	Description	UNIT	QTY	Unit Price	Amount	QUANTITY	Amount	QUANTITY	Amount	QUANTITY	Amount		STORED	QUANTITY	Amount
101-1	MOBILIZATION	LS	1	7,000.00	7,000.00	1.00	7,000.00		0.00	1.00	7,000.00	100.00%	0.00	0.00	0.00
102-1	MAINTENANCE OF TRAFFIC	LS	1	7,500.00	7,500.00	1.00	7,500.00	!	0.00	1.00	7,500.00	100.00%	0.00	0.00	0.00
104-1	ARTIFICIAL COVERINGS / ROLLED EROSION CNTL	LS	1	1,500.00	1,500.00	1.00	1,500.00	:	0.00	1.00	1,500.00	100.00%	0.00	0.00	0.00
110-1-1	CLEARING & GRUBBING	LS	1	12,000.00	12,000.00	1.00	12,000.00	:	0.00	1.00	12,000.00	100.00%	0.00	0.00	0.00
120-1	REGULAR EXCAVATION	CY	490	17.00	8,330.00	473.00	8,041.00		0.00	473.00	8,041.00	96.53%	0.00	17.00	289.00
85-7-11	OPTIONAL BASE, BASE GROUP 11	SY	2 50	20.00	5,000.00	280.00	5,600.00		0.00	280.00	5,600.00	112.00%	0.00	-30.00	-600.00
34-1-11	SUPERPAVE ASPHALTIC CONC, TRAFFIC A, 1-1/2" SP 12.5	TN	25	415.00	10,375.00	37.00	15,355.00		0.00	37.00	15,355.00	148.00%	0.00	-12.00	-4,980.00
25- <u>1</u> 5-21	INLETS, DT BOT, TYPE C, <10'	EA	13	2,500.00	32,500.00	13.00	32,500.00		0.00	13.00	32,500.00	100.00%	0.00	0.00	0.00
30-174-215	PIPE CULV, 14"x23" ERCP	LF	585	100.00	58,500.00	630.00	63,000.00		0.00	630.00	63,000.00	107.69%	0.00	-45.00	-4,500.00
30-982-625	MITERED END SECT, 14"x23"	EA	1	1,700.00	1,700.00	2.00	3,400.00		0.00	2.00	3,400.00	200.00%	0.00	-1.00	-1,700.00
30-3-4	RIPRAP, RUBBLE. F&I, DITCH LINING	TN	15	140.00	2,100.00	34.00	4,760.00		0.00	34.00	4,760.00	226.67%	0.00	-19.00	-2,660.00
70-1-2	PERFORMANCE TURF, SOD	SY	3912	5.00	19,560.00	4,124.00	20,620.00		0.00	4,124.00	20,620.00	105.42%	0.00	-212.00	-1,060.00
00-1-40	SINGLE POST SIGN, INSTALL	EA	11	250.00	2,750.00	0.00	0.00		0.00	0.00	0.00	0.00%	0.00	11.00	2,750.00
0-1-50	SINGLE POST SIGN, RELOCATE	EA	11	150.00	1,650.00	4.00	600.00	7.00	1,050.00	11.00	1,650.00	100.00%	0.00	0.00	0.00
080-15	UTILITY FIXTURE, ADJUST & MODIFY	EA	3	300.00	900.00	0.00	0.00		0.00	0.00	0.00	0.00%	0.00	3.00	900.00
9-1	AS-BUI II' DRAWINGS (BY REGI S'E FED SURVEYOR)	LS	1	10,000.00	10,000.00	0.00	0.00	1.00	10,000.00	1.00	10,000.00	100.00%	0.00	0.00	0.00
		SUB TO	TAL		181,365.00	ļ	181,876.00		11,050.00		192,926.00		0.00		-11,561.00
														1	
	FORCE ACCOUNT	L5	1	30,000.00	6,990.68		0.00		0.00		0.00	0.00%	0.00	1.00	6,990.68
CD1	ADDITIONAL WORK/UTILITIES	LS	1	23,009.32	23,009.32	1.00	23,009.32		0.00	1.00	23,009.32	100.00%	0.00	0.00	0.00
* ***		SUB TO	TA1		30,000.00		23,009.32		0.00		23,009.32	As Plate Sections	0.00		6,990.68
sus instances courses		300.10	105						<u> </u>				<u> </u>	<u> </u>	
	GIFFORD AREA STORMWATER PROJECT	1		TOTAL	211,365.00	· · · · · · · · · · · · · · · · · · ·	204,885.32	TOTAL	11,050.00	TOTAL	215,935.32	TOTAL	0.00	TOTAL	-4,570.
	GILLOUP WEEK OLOUP AND OLOUP			IOTAL	211,363.00	IOTAL	204,003.32	TOTAL			PLETED TO DATE	1017		TOTAL	\$215,935.
					*				·		TORED TO DATE				\$0.0
								SUB-TOTAL	L MATERIALS STO	DRED AND CON	APLETE TO DATE				\$215,935.
											MPLETED AT 0%				\$0.
								тот	AL COMPLETED		LESS RETAINAGE				\$215,935
											IOUS PAYMENT				\$194,641. \$21,294.
										AIVIUUNI DU	IE CONTRACTOR				3/1,/9

 $x_{ij} = x_{ij} + x$