

# **CITY OF MADISON**

## **REQUEST FOR BIDS**



RFB #: 13016-0-2024-AH

Title: Olbrich Botanical Gardens  
Conservatory Assessment – Phase 2

City Agency: Engineering

Due Date: February 19, 2024  
2:00 PM CST

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## 1 NOTICE TO BIDDERS

### 1.1 Summary

The City of Madison Police (“City”) is soliciting Bids from qualified vendors for Ammunition. Vendors submitting Bids (“Bidders”) are required to read this Request for Bids (“RFB”) in its entirety and follow the instructions contained herein.

### 1.2 Important Dates

Deliver Bids no later than the due time and date indicated below. The City will reject late Bids:

Issue Date: February 5, 2024  
Questions Due Date: February 9, 2024  
Answers Posted Date: February 12, 2024  
Due Date: February 19, 2024, 2:00 PM CST

### 1.3 Format

The City will not consider illegible Bids.

Elaborate Bids (i.e., expensive artwork) beyond that sufficient to present a complete and effective Bid, are not necessary or desired.

The City is requesting bids in the following format: **Electronic**. Electronic versions less than 20MB should be emailed to the address in section 1.5.

Complete and return Forms A through E to City of Madison Purchasing Services by February 19, 2024, 2:00 PM CST.

### 1.4 Labeling

All email correspondence must include RFB #13016-0-2024-AH in the subject line.

### 1.5 Delivery of Bids

Delivery of electronic copy to: via email to [bids@cityofmadison.com](mailto:bids@cityofmadison.com)

Bids must be delivered as instructed. Deliveries to other City departments and/or locations may result in disqualification.

### 1.6 Appendix A: Standard Terms & Conditions

Bidders are responsible for reviewing Appendix A, the Standard Terms and Conditions, prior to submission of their bids. Appendix A applies to the submission of bids and in the absence of a signed contract becomes part of the contract terms. Part I of Appendix A provides legal terms relevant only to the submission of bids. Part II of Appendix A provides legal terms that would apply *only in the absence of a signed contract*.

### 1.7 Appendix B: Sample Contract for Purchase of Services

Bidders are responsible for reviewing Appendix B, Sample Contract, prior to submission of their bid. A contract in the form of Appendix B will serve as the basis of the contract resulting from this RFP. The resulting contract will control over any different legal terms in this RFP, Appendix A, the proposal, etc. **By submitting a proposal, Bidders affirm their willingness to enter into a contract containing the terms found in Appendix B.** While the City strives to provide the most appropriate sample contract for

this RFP, the City reserves the right to modify the sample form for any resulting contract. The City does not negotiate legal terms prior to award.

### 1.8 Affirmative Action Notice

If Contractor employs 15 or more employees and does aggregate annual business with the City of \$50,000 or more for the calendar year in which the PO and/or Contract is in effect, Contractor shall file, within thirty (30) days from the PO/Contract effective date and BEFORE RELEASE OF PAYMENT, an Affirmative Action Plan designed to ensure that the Contractor provides equal employment opportunity to all and takes affirmative action in its utilization of applicants and employees who are women, minorities and/or persons with disabilities. A sample affirmative action plan, Request for Exemption forms, and instructions are available at: [www.cityofmadison.com/civil-rights/contract-compliance/vendors-suppliers/forms](http://www.cityofmadison.com/civil-rights/contract-compliance/vendors-suppliers/forms) or by contacting a Contract Compliance Specialist at the City of Madison Affirmative Action Division at (608) 266-4910. Vendors must register for an account to complete the required forms online, here: <https://elam.cityofmadison.com/citizenaccess>

Contractor shall also allow maximum feasible opportunity to small business enterprises to compete for any subcontracts entered into pursuant to this PO/Contract.

Job postings: All contractors who employ 15 or more employees (regardless of the dollar amount of this contract or their annual aggregate business with the City) must notify the City of all external job openings at locations in Dane County, Wisconsin, and agree to interview candidates referred by the City or its designated organization. Job posting information is available at: <http://www.cityofmadison.com/civil-rights/programs/referrals-and-interviews-for-sustainable-employment-raise-program>. Instructions for contractors: [http://www.cityofmadison.com/civil-rights/documents/RaISE\\_Job\\_Posting\\_Instructions.pdf](http://www.cityofmadison.com/civil-rights/documents/RaISE_Job_Posting_Instructions.pdf)

The complete set of Affirmative Action requirements for this purchase can be found in **paragraph 20 of Appendix A – Standard Terms and Conditions** and, in **Section 13 of Appendix B – Sample Contract for Purchase of Services**.

### 1.9 Multiple Bids

Multiple Bids from Bidders are permitted; however, each must fully conform to the requirements for submission. Bidders must sequentially label (e.g., Bid #1, Bid #2) and separately package each Bid. Bidders may submit alternate pricing schemes without having to submit multiple Bids.

### 1.10 City of Madison Contact Information

The City of Madison Police is the procuring agency:	Randy Wiesner City of Madison Engineering RWiesner@cityofmadison.com
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The City of Madison Purchasing Services administers the procurement function:	Andre Hargianto Purchasing Services City-County Bldg, Room 407 210 Martin Luther King, Jr. Blvd. Madison, WI 53703-3346 <a href="mailto:bids@cityofmadison.com">bids@cityofmadison.com</a>
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For questions regarding Affirmative Action Plans please contact:	Contract Compliance Department of Civil Rights City-County Bldg., Room 523 210 Martin Luther King, Jr. Blvd. Madison, WI 53703 PH: (608) 266-4910 <a href="mailto:dcr@cityofmadison.com">dcr@cityofmadison.com</a>
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The City employs spam filtering that occasionally blocks legitimate emails, holding them in ‘quarantine’ for four calendar days. The contacts listed in this RFB will acknowledge all emails received. Bidders not receiving acknowledgement within twenty-four hours shall follow-up via phone with specific information identifying the originating email address for message recovery.

### 1.11 Inquiries and Clarifications

Bidders are to raise any questions they have about the RFB document without delay. Direct all questions, **in writing**, to the Purchasing Services administrator listed in Section 1.10.

Bidders finding any significant ambiguity, error, conflict, discrepancy, omission, or other deficiency in this RFB document shall immediately notify the Buyer and request clarification. In the event that it is necessary to provide additional clarification or revision to the RFB, the City will post addenda – see 1.12 below. Bidders are strongly encouraged to check for addenda regularly.

Bids should be as responsive as possible to the provisions stated herein. Exceptions are not permitted. The City of Madison reserves the right to disqualify any and all bids that are non-responsive or that include exceptions.

### 1.12 Addenda

In the event that it is necessary to provide additional clarification or revision to the RFB, the City will post addenda to its Bids distribution websites – see 1.13 below. It is the Bidders responsibility to regularly monitor the websites for any such postings. Bidders must acknowledge the receipt of any addenda on Form B. Failure to retrieve addenda and include their provisions may result in disqualification.

### 1.13 Bid Distribution Networks

The City of Madison posts all Request for Bids, addenda, tabulations, awards and related announcements on two distribution networks – VendorNet and DemandStar. The aforementioned documents are available **exclusively** from these websites. It is the Bidders responsibility to regularly monitor the bid distribution network for any such postings. Bidders failure to retrieve such addenda and incorporate their appropriate provisions in their response may result in disqualification. Both sites offer free registration to City Bidders.

State of Wisconsin VendorNet System: State of Wisconsin and local agencies bid network. Registration is free. <http://vendornet.state.wi.us/vendornet>

DemandStar by Onvia: National bid network – Free subscription is available to access Bids from the City of Madison and other Wisconsin agencies, participating in the Wisconsin Association of Public Purchasers (WAPP). A fee is required if subscribing to multiple agencies that are not included in WAPP.

Bid Opportunities: [www.cityofmadison.com/finance/purchasing/bidDemandStar.cfm](http://www.cityofmadison.com/finance/purchasing/bidDemandStar.cfm)

Home Page: [www.demandstar.com](http://www.demandstar.com)

To Register: <https://www.demandstar.com/app/registration>

Please note when registering: Pick the **Wisconsin Association of Public Procurement (WAPP)** to select all current Wisconsin government agencies.

### 1.14 Local Vendor Preference

The City of Madison has adopted a local preference purchasing policy granting a scoring preference to local suppliers. Only suppliers registered as of the bid's due date will receive preference. Learn more and register at the City of Madison website: [www.cityofmadison.com/business/localPurchasing](http://www.cityofmadison.com/business/localPurchasing).

### 1.15 Oral Presentations/Site Visits/Meetings

Bidders may be asked to attend meetings, make oral presentations, inspect City locations or make their facilities available for a site inspection as part of this RFB process. Such presentations, meetings or site visits will be at the Bidders expense.

### 1.16 Acceptance/Rejection of Bids

The City reserves the right to accept or reject any or all Bids submitted, in whole or in part, and to waive any informalities or technicalities, which at the City's discretion is determined to be in the best interests of the City. Further, the City makes no representations that a contract will be awarded to any Bidder responding to this request. The City expressly reserves the right to reject any and all Bids responding to this invitation without indicating any reasons for such rejection(s).

The City reserves the right to postpone due dates and openings for its own convenience and to withdraw this solicitation at any time without prior notice.

### 1.17 Withdrawal or Revision of Bids

Bidders may, without prejudice, withdraw Bids submitted prior to the date and time specified for receipt of Bids by requesting such withdrawal before the due time and date of the submission of Bids. After the due date of submission of Bids, no Bids may be withdrawn for a period of 90 days or as otherwise specified or provided by law. Bidders may modify their Bids at any time prior to opening of Bids.

### 1.18 Non-Material and Material Variances

The City reserves the right to waive or permit cure of nonmaterial variances in the offer if, in the judgment of the City, it is in the City's best interest to do so. The determination of materiality is in the sole discretion of the City.

### 1.19 Public Records

Bidders are hereby notified that all information submitted in response to this RFB may be made available for public inspection according to the Public Records Law of the State of Wisconsin or other applicable public record laws. Information qualifying as a "trade secret"—defined in State of Wisconsin Statutes—may be held confidential.

Bidders shall seal separately and clearly identify all information they deem to be "trade secrets," as defined in the State of Wisconsin Statutes. Do not duplicate or co-mingle information, deemed confidential and sealed, elsewhere in your response.

S. 19.36(5)

(5) TRADE SECRETS. An authority may withhold access to any record or portion of a record containing information qualifying as a trade secret as defined in s. 134.90(1)(c).

s. 134.90(1)(c)

(c) "Trade secret" means information, including a formula, pattern, compilation, program, device, method, technique or process to which all of the following apply:

1. The information derives independent economic value, actual or potential, from not being generally known to, and not being readily ascertainable by proper means by, other persons who can obtain economic value from its disclosure or use.
2. The information is the subject of efforts to maintain its secrecy that are reasonable under the circumstances.

The City cannot ensure that information will not be subject to release if a request is made under applicable public records laws. The City cannot consider the following confidential: a bid in its entirety, price information, or the entire contents of any resulting contract. The City will not provide advance notice to Bidders prior to release of any requested record.

To the extent permitted by such laws, it is the intention of the City to withhold the contents of Bids from public view—until such times as competitive or bargaining reasons no longer require non-disclosure, in the City's opinion. At that time, all Bids will be available for review in accordance with such laws.

### 1.20 Usage Reports

Annually, the successful Bidders shall furnish to City Purchasing usage reports summarizing the ordering history for each department served during the previous contract year. The report, at a minimum, must include each and every item or service ordered during the period, its total quantities and dollars by item/service and in total. The City reserves the right to request usage reports at any time and request additional information, if required, when reviewing contract activity.

### 1.21 Partial Award

Unless otherwise noted, it will be assumed that Bidders will accept an order for all or part of the items/services priced.

### 1.22 Tax Exempt

The City of Madison as a municipality is exempt from payment of federal excise taxes (Registration Number 008-1020421147-08) and State of Wisconsin taxes per Wisconsin statute 77.54(9a). Federal Tax ID #39-6005507. A completed Wisconsin Department of Revenue Form S-211 (R.2-00) can be found on the City website. Our tax-exempt number is ES 42916.

### 1.23 Cooperative Purchasing

Bidders may choose to extend prices offered on bids to other municipalities. Under Wisconsin Statutes, a municipality is defined as a county; city; village; town; school district; board of school directors; sewer district; drainage district; vocational, technical and adult education district; or any other public or quasi-public corporation, officer, board or other body having the authority to award public contracts. This is known as "cooperative" or "piggyback" purchasing, a practice common amongst units of government. The City is not responsible for any contract resulting from a cooperative purchase using this RFB as a basis; they are made solely between the bidders and third party unit of government.

### 1.24 Bidders Responsibility

Bidders shall examine this RFB and shall exercise their judgment as to the nature and scope of the work required. No plea of ignorance concerning conditions or difficulties that exist or may hereafter arise in the execution of the work under the resulting contract, as a consequence of failure to make necessary examinations and investigations, shall be accepted as an excuse for any failure or omission on the part of the Bidders to fulfill the requirements of the resulting contract.

## 2 DESCRIPTION OF SERVICES/COMMODITIES

### 2.1 General Project Overview

Construction of the Olbrich Botanical Gardens-Bolz Conservatory was completed in 1991. In 2022 City Engineering-Facility Management and Olbrich Botanical Gardens released an RFP for a structural assessment overview of the Olbrich Gardens primary campus structures. This RFB is the next step for further assessment and/or generalized repairs based on the original 2022 Structural Assessment of the Bolz Conservatory.

The following technical exhibits are provided for the Assessment Contracting Teams review. The original drawing set has been reduced to only the pages that may apply to this RFB. If you feel other pages are relevant contact the City Project Manager for additional information.

1. Exhibit B – OBG Reduced Plan Set. This is a reduced plan set that includes general architectural, conservatory structural, conservatory mechanical, and glazing panel information.
2. Exhibit C – OBG Original Glass (Wasco) Panels Submittal. This document is believed to be the original submittal for the glazing system that was installed.
3. Exhibit D – OBG Infrared information from the 2023 assessment.
4. Exhibit E – Labor Rate Work Sheet.

### 2.2 Location

All work is to be conducted at the Olbrich Botanical Gardens-Bolz Conservatory, located at 3330 Atwood Ave, Madison, WI.

### 2.3 Assessment Contracting Team Requirements

The Assessment Contracting Team (ACT) shall have the following skills, knowledge base, and be comprised of the following:

1. Structural Engineer:
  - a. Shall have a valid PE license in the State of Wisconsin, with 10 years minimum experience performing structural building design.
    - i. Shall be required to be on site to ensure work by other ACT personnel are being carried out as directed by the PE. Verification of work via photos, teleconference, etc., will not be permitted.
  - b. Shall be the ACT Leader and shall select other ACT personnel as described within this bid document.
  - c. Shall respond to all bidding requirements including proposals, addendums, and contracting if awarded the bid.
  - d. Shall be responsible for completing all scopes of work described within the RFB including change orders and deliverable reports.
  - e. Shall be capable of working from heights on a lift.
2. General Contractor:
  - a. Shall be able to provide laborers as needed to fulfill the scopes of work described within this RFB. This shall include but not be limited to the following:
    - i. Laborers certified as required for working on high steel structures.
    - ii. Laborers familiar with working with structural steel and cold rolled steel.
    - iii. Painters
    - iv. Welders
    - v. Insulation installers
    - vi. Mechanical equipment maintenance technician
    - vii. Supervisory staff for coordinating all work and scheduling as directed by the Structural Engineer.
  - b. Shall provide all materials, equipment, tools as needed to perform the scopes of work described in this RFB or by the Structural Engineer. Materials shall be as directed by the



PE and shall be the modern day equivalent or better of materials specified in the original plans and details.

3. Material Testing Agent:
  - a. Shall be experienced in Non-Destructive Testing (NDT) of structural steel components located on a work site.
  - b. Methods shall include but not be limited to visual inspection, ultra-sonic testing, etc. All testing shall be done on site and in place.
  - c. Shall be capable of working from heights on a lift.
4. Glazing Specialist/Consultant:
  - a. Shall be experienced in glass curtain wall framing systems, including but not limited to framing systems, glazing units, and sealants.
  - b. Shall be able to visually inspect and accurately record the conditions of multi-panel glazing units, installation structure components and sealants.
  - c. Shall be able to provide (or coordinate) appropriate labor and materials for on site repair of glazing units.
  - d. Shall provide all materials, equipment, tools as needed to perform the scopes of work described in this RFB or by the Structural Engineer. Materials shall be as directed by the PE and shall be the modern day equivalent or better of materials specified in the original plans and details.
  - e. Shall be capable of working from heights on a lift or other methods as necessary for the nature of this work.

#### 2.4 Contract Duration and Work Hours

Traditionally the Conservatory is closed to the public for 2 weeks each spring for annual pruning of the tropical trees inside and annual maintenance. This year that maintenance period has been extended as follows to accommodate the scope of services described within this RFB.

1. March 11 - 22, 2024: Olbrich Staff maintenance and pruning. The contractor may mobilize to the site but cannot be actively working inside the conservatory during this time. Mobilization to the site will be limited to an outside area designated for receiving lifts and materials. The ACT will not be permitted to store any lift, materials, tool boxes, etc. inside the Conservatory or Headhouse until staff has completed their maintenance work.
2. March 25 - May 31, 2024: Awarded contractor shall complete all tasks including set-up, tear-down, and any site restoration within this time frame.
3. Work hours shall be Monday-Friday from approximately 7:00 AM to 5:00PM.
  - a. Actual start time shall be coordinated with Olbrich staff to accommodate daily watering and maintenance activities to be completed prior to starting any elevated work.
    - i. Conservatory Staff maintain/water plants in the conservatory from 8am to 10am, 7 days a week. Staff can be flexible with their schedule but need to be consistent.
  - b. Working on Saturday is permitted with a minimum of 3 working days advance notice and permission by the Olbrich Director.

#### 2.5 Special Requirements

The following special requirements shall be provided and/or observed by all contractors, sub-contractors, their employees, and others as may be necessary while performing their duties as it relates to this contract.

1. ACT is responsible for providing all labor, materials, tools, and equipment necessary to complete the work described here in or as a result of field directives from the PE and Testing Agent that have been approved by the Owner Team.
2. Lift Requirements, Exterior:
  - a. Only electrical lifts will be permitted by the Owner Team for exterior work due to vehicle emissions affecting plants and visitors to Olbrich Gardens.
  - b. Lifts must be able to operate from paved surfaces and will not be permitted in any landscaped areas.

- c. No cutting or pruning of vegetation will be permitted. If this is needed it will be requested to be done through the Owner Team. Owner Team has sole authority in determining if the request will be granted.
  - d. ACT will be responsible for all lift rentals, safety equipment, sheathing, and other related expenses.
  - e. Staff can assist with providing electrical access for charging lifts.
    - i. Olbrich/Owner will not be responsible for upgrading electrical power/access in the event the existing electrical service/access is not sufficient. Any needed upgrades will be reviewed on an individual basis between the ACT and the Owner.
3. Lift Requirements, Interior:
- a. Only electrically operated lifts will be permitted inside the Conservatory.
    - i. Lift access must come into the Headhouse via the overhead door on the Sugar Ave. end of the complex.
      - 1. Once inside the Headhouse there will be an immediate right hand turn through a coil up door then through the back of house partition wall into the Conservatory.
      - 2. The back of house area has a height restriction of 6'-6" due to suspended water supply line and electrical conduits. Any lift will need to either fit under that restriction or have the ability to be disassembled to have sufficient clearance. Assembly/disassembly is the responsibility of the ACT.
  - b. Staff usually leases a 40' electric articulating narrow jib lift, from Sunbelt Rentals, for their annual maintenance of tall trees inside the Conservatory. This is not long enough to reach the cupola and staff estimates a 55' or 60' lift would be required.
    - i. Consultants from the 2023 assessment team used a 75' stationary lift to access the cupola.
    - ii. Accessing the cupola from the outside would require a 80' lift, minimum.
    - iii. Final decision of the type and location of a lift to access the cupola shall be approved by the owner based on recommendations from the ACT.
  - c. Plywood sheathing one-half inch or thicker will be required to be used under the wheels while the lift is rolling or stationary on any of the paver walkways.
    - i. Lifts and plywood sheathing will not be permitted within the planting beds or on the wooden bridges.
  - d. ACT will be responsible for all lift rentals, safety equipment, sheathing, and other related expenses.
    - i. Staff can assist with providing electrical access for charging lifts.
    - ii. Olbrich/Owner will not be responsible for upgrading electrical power/access in the event the existing electrical service/access is not sufficient. Any needed upgrades will be reviewed on an individual basis between the ACT and the Owner.
3. Catchment:
- a. The ACT shall provide a catchment when working from the lift regardless of working height.
  - b. Purpose of the catchment is to contain materials, tools, parts, and other droppable items to prevent injury to personnel below, damage to vegetation and hardscape below.
  - c. Catchment shall be capable of catching particulate matter greater than 1/2", such as insulation, paint, etc.
    - i. ACT is responsible for site cleanup on a minimum of a daily basis. Insulation and paint chips must be kept out of the water features and off the ground so wildlife within the conservatory does not eat the materials.
4. Wildlife Protection:

- a. The Bolz Conservatory has various types of wildlife inside the conservatory. This includes birds of flight, ground birds, and Koi fish in the stream.
  - b. The ACT shall be aware they exist and cannot reasonably be removed during your work.
    - i. Free flight birds cannot be captured or temporarily caged.
    - ii. Koi in ponds cannot be moved to alternate ponds.
    - iii. Other ground birds and animals cannot be captured or temporarily caged.
  - c. The ACT shall follow all staff requirements when going in/out of the conservatory with equipment and working in the cupola. This may include providing netting or traps when working in the cupola to prevent birds from getting out. All exposed openings to the exterior shall be screened to keep wildlife enclosed within the Conservatory.
  - d. ACT must review all new/replacement products with the Conservatory Curator and Director of Horticulture to confirm that they will cause minimal harm to plants and animals in the conservatory.
5. Vegetation Protection:
- a. Many of the trees, flowers, and plants in the Bolz Conservatory are tropical plants from other countries and cannot be easily replaced if damaged.
  - b. ACT shall review locations of equipment with Conservatory Curator and Director of Horticulture before setting-up and/or relocating equipment.
  - c. ACT shall use caution when working above/around the plants so as to not damage them during your work. Should damage occur contact the Conservatory Curator or Director of Horticulture immediately so staff can assess and repair as soon as possible.
  - d. Because of their Tropical nature all plants (and wildlife) in the Conservatory, environmental conditions must be maintained at all times. Even brief temperature drops below 50 degrees Fahrenheit will have detrimental affects on plant and animal life and may result in death.
    - i. Manual overrides and/or equipment shutdowns must be authorized by the Conservatory Curator and/or the Director of Horticulture.
    - ii. Daytime temperatures are maintained at a minimum of 70F and may exceed 90F in the upper portions of the glass pyramid.
    - iii. Night time temperatures are usually at a low of 60F
    - iv. Only in emergency conditions has the Conservatory temperature ever fallen to below 60F.
6. Coordination With Others:
- a. The ACT will be required to coordinate with Olbrich staff for all start/end times, staff access to the conservatory gardens, charging points for lifts and any other needs requiring the use of the existing facility.
  - b. PE shall coordinate any overlapping work necessary between structural and glazing work.

## 2.6 Rates, Overhead and Profit

The ACT shall provide all of the following information along with their proposal. This information shall only be used to establish and approve additional work as described in section 2.8 below.

1. Labor Rates. Exhibit E contains sample Labor Rate work sheets for the ACT to fill out and provide with their proposal. Provide a separate rate sheet for all personnel necessary to perform work as described in the scope of work. This shall include but not be limited to the following: Professional Engineer, Construction Foreperson, General Laborer, Iron Worker, Carpenter, Sheet Metal Worker, Equipment Operator, Painter, Mechanical Maintenance Mechanic, Material Testing Personnel, Glazing Consultant/laborer, and any other personnel that may be used to perform the scope of work outlined in this RFB.
2. Equipment Rates. Provide Equipment Rates for all specialty equipment with a value in excess of \$1500.

- a. It is assumed that job trailers (if used), equipment lifts and general tools will be part of the bid for the duration of the project. These items will be bid under the Item #1 Mobilization description in Section 2.8 below only. No double dipping will be permitted.
3. Material Rates. Material Rates shall be itemized as needed. All material quotes shall be current market value with no mark up or tax. The City of Madison is Tax Exempt, request Tax Exemption Form prior to contract start date through the project manager.
4. Overhead and Profit. Where additional work can be performed as a “change order” overhead and profit shall be capped at 15% of the total cost of the change order.

## 2.7 Deliverables

1. Refer to section 2.8 Scope of Work below for anticipated work and deliverables. In general the deliverables are as follows:
  - a. Where a specific amount of work is identified in the scope, perform that work as described.
  - b. Change Order Requests (COR).
    - i. Where minor maintenance type repairs can be completed while performing the scope of work provide a written COR to the Owner Team. The COR shall include a description of the work to be performed, existing condition photos, and a cost proposal of all materials and labor required to complete the COR.
    - ii. Where additional work is required that may be extensive, or have long lead times for materials provide a written COR to the Owner Team. The COR shall include a description of the work to be performed, existing condition photos, and a cost proposal of all materials and labor required to complete the COR.
  - c. Final Summary Report. Provide a single final summary report of all of the following:
    - i. A description of existing conditions, including photographs, for each item of work defined in section 2.8 below.
    - ii. A description of any COR work completed include follow up photographs of completed work and conditions.
    - iii. A description of any COR work not performed or significant future repair work. Provide a written description of the existing condition, include photographs, and a written description of the next steps with an estimated cost. For followup work prioritize with 1 being most critical to complete.

## 2.8 Scope of Work

The following Scope of Work descriptions correspond by title to the proposal sheet. Each item on the proposal sheet shall be lump sum for that item including all labor, materials, equipment rentals, and other incidentals as described throughout this RFB document.

See Exhibit B for plans and details of the existing Conservatory primary structural framing and cupola framing and roofing.

1. Item #1: Mobilization shall include relocating all job trailers, rental and large item equipment, plywood sheathing for lifts, and similar items to the job site. Items associated with mobilization do not need to be included in the Final Report.
2. Item #2: Cupola Framing and Roof Assessment
  - a. The 2022 Structural Assessment was not able to complete this assessment due to the moldy insulation described below and the time constraints with removing/replacing it. This item is to remove the insulation and complete the assessment of the cupola framing, ventilation grilles, screens and related materials, and then install new insulation.
  - b. Refer to original construction detail 10 on sheet C7 for this bid item (other details may also apply).
    - i. Remove all existing interior insulation for assessment of cupola framing, exterior wall panels and roofing panels.

1. Some/all of the insulation may be moldy. ACT is responsible for providing all appropriate PPE, containment and legal disposal of removed materials, including any required fees.
  2. Remove and bag insulation within the cupola, all insulation materials must stay within the defined work area. DO NOT let insulation fall to the ground or land within the vegetation. Catchment system must be able to contain insulation, fasteners and any other associated debris.
  3. Conditions will be hot and humid inside the Conservatory and in the cupola. The exhaust fans in the cupola may be required to run to pull the hot air from the Conservatory interior. Coordinating this work early or on overcast days may be useful but is not required. All Conservatory equipment is operated by an environmental control system, the ACT must coordinate with the Conservatory Curator or Horticulture Director if you need to turn equipment off.
  - ii. Assess the cupola structural framing and roofing/siding materials for condition and weather proofing needs.
    1. Assessment shall be performed by PE and Testing Agency personnel for existing conditions and evaluation of next steps.
    2. If simple fixes are warranted provide a written COR (as described in section 2.7 above) to the Owner Team. DO NOT proceed with any work until Owner Team has approved the COR.
    3. Where extensive work must be done at a later date provide a detailed description of next steps in the Final Report. Include recommended scope of work, photos, and cost estimates.
    4. If multiple areas need extensive work, document each with separate estimates and prioritize most critical as #1 to least critical.
    5. If needed repairs will cause the interior temperature of the Conservatory to potentially fall below 55F the Owner Team must be notified. This work may need to be delayed until outdoor temperatures will be above 50F.
  - c. Install new insulation of types and specifications that match the original materials installed. Paint as indicated on details.
    - i. NOTE: this step shall be completed only after the completion of the assessment in item 3 below for the primary structural framing that is hidden by the insulation.
3. Item #3: Cupola Primary Structural Framing Assessment
- a. The 2022 Structural Assessment indicated water damage to main tube steel framing that supports the cupola. Rust staining and patches of steel delamination were visible on the main HSS 18x6 framing members.
  - b. Refer to original construction details on sheet C7 for this bid item (other details may also apply).
  - c. This item may require coordination with the Glazing Panel Assessment for potential glazing repairs in this area.
  - d. Clean primary structural members free of rust down to bare metal. After cleaning the Testing Agency and PE shall determine if the existing structural members are structurally adequate to support the required loading.
    - i. Interior air quality requirements and the prevention of chemicals dripping on plants/animals/water features/other hardscape features below is a concern of the Owner Team. The ACT shall provide the Owner Team with information on means and methods for performing this work, precautions to be taken to prevent contamination and/or damage plants/animal/water hardscape features.
      1. See section 2.5 regarding required catchment and protection of wildlife.
    - ii. If the new assessment indicates the framing is structurally adequate to support the required loading or requires small localized repairs provide a COR (as described in section 2.7 above) to the Owner Team.
      1. COR should describe all of the following:
        - a. Any localized repairs needed and method to be used to accomplish them.

- b. All primer and paint required to protect bare metal. Final color shall match existing color.
        - 2. DO not proceed with any work until Owner Team has approved the COR.
      - iii. If the new assessment indicates the framing is not structurally adequate to support the required loading notify the Owner Team immediately.
        - 1. Provide a detailed report and estimate of the findings for each major repair.
          - a. Indicate current conditions and anticipated requirements necessary for each major repair.
          - b. Include detailed list of repair materials, equipment needed and estimated labor by type to complete each major repair.
          - c. Include labor for PE design time, estimated length of time for any required structural review, and permitting.
          - d. Include anticipated lead time for manufacturing or fabricating of parts needed for each major repair.
          - e. Wait for further instructions from the Owner Team.
4. Item #4: Mechanical Equipment Maintenance
  - a. There are 4 exhaust fans located in the cupola. The exhaust fans and associated louvers are used to exhaust the excess heat from the conservatory below. This scope of work is for general maintenance to this system.
  - b. Refer to Exhibit B for cupola details, exhaust fan locations, and the related fan equipment schedule.
  - c. The ACT shall perform all of the following:
    - i. Replace all belts on fan motors
    - ii. Grease all motor bearings
    - iii. Check all fan shaft bearings to make sure they are not worn out
      - 1. If excessive wear is noted advise the Owner Team immediately. Owner Team will determine how to proceed.
    - iv. Grease all shaft bearings
      - 1. If excessive wear is noted advise the Owner Team immediately. Owner Team will determine how to proceed.
    - v. Check louver actuators and linkages to make sure they are functioning properly. Perform general maintenance as needed.
    - vi. Update equipment hang tags to reflect date and type of maintenance completed.
  - d. ACT shall include a summary of work completed or recommended for future work in the final report.
5. Item #5: Glazing Panel Assessment
  - a. This specific assessment may require a different type of equipment rental or use type.
  - b. The lift that was used for the 2023 assessment was stationary and could not be easily moved around the Conservatory because of path locations, vegetation and retaining walls. Lifts will not be allowed to rest on glass panels or structural members while performing work under this bid item.
    - i. The ACT shall outline in their proposal how the glazing panels will be accessed to complete the work for this bid item and what types of equipment will be used.
  - c. Refer to Exhibit D for thermal images taken during the 2022 Structural Assessment.
  - d. Complete a close up assessment of all glazing panels. The goal of this assessment is to identify cracked glazing panels and glazing panels that have lost their thermal capability.
    - i. Provide a final report in tabular form where each glazing panel has a unique identifier for future reference.
    - ii. The tabular format shall correspond with photographs or plan views of each glazing face for accurate identification of the panel at a future date.
    - iii. Each panel shall be rated, 1 (poor), 2 (average), or 3 (good) to describe general condition characteristics. Provide other remarks for each panel as needed.
  - e. Review all mechanical fastening systems associated with fastening the glazing panels to the structure. Note any issues in the tabular report noted in item 2b above.

- f. Review all gaskets and sealants associated with weatherproofing the glazing system to the structure. Note any issues in the tabular report noted in item 2b above.
6. Item #5: Simple Glazing Panel Repairs
- a. This specific work may require a different type of equipment rental or use type.
  - b. The lift that was used for the 2023 assessment was stationary and could not be easily moved around the Conservatory because of path locations, vegetation and retaining walls. Lifts will not be allowed to rest on glass panels or structural members while performing work under this bid item.
    - i. The ACT shall outline in their proposal how the glazing panels will be accessed to complete the work for this bid item and what types of equipment will be used.
  - c. If needed repairs will cause the interior temperature of the Conservatory to potentially fall below 55F the Owner Team must be notified. This work may need to be delayed until outdoor temperatures will be above 50F.
  - d. It is anticipated that some repairs may be simple in nature such as tightening of fasteners, removing existing sealant materials, and applying new sealants, etc.
  - e. Simple repairs will be triaged so the worst cases are repaired first. There is at least one known major leak inside the structure, exact location of the source is not known..
  - f. This bid item shall be based on the original design, details and specifications and shall be limited to a maximum of 24 hours of labor and 500 linear feet of sealant materials for simple repairs.
    - i. If additional simple repairs exceeding the 24 Hr/500 LF limit noted above the ACT shall provide the Owner Team with a Change Order Request.
      - 1. COR shall only be turned in after the assessment has been completed.
      - 2. Do not proceed with any additional repairs until approved by the Owner Team.
      - 3. All simple repairs approved with the COR shall be completed within the time constraints of this contract no additional time will be permitted.

### **3 REQUIRED INFORMATION AND CONTENT OF BIDS**

#### **3.1 Forms**

Form A – Signature Affidavit

Form B – Receipt Forms and Submittal Checklist

Form C – Contractor Profile Information

Form D – Cost Proposal

Form E – References





## Form A: Signature Affidavit

### RFB #: 13016-0-2024-AH Olbrich Botanical Gardens Conservatory Assessment – Phase 2

*This form must be returned with your response.*

In signing Proposals, we certify that we have not, either directly or indirectly, entered into any agreement or participated in any collusion or otherwise take any action in restraint of free competition; that no attempt has been made to induce any other person or firm to submit or not to submit Proposals, that Proposals have been independently arrived at, without collusion with any other Proposers, competitor or potential competitor; that Proposals have not been knowingly disclosed prior to the opening of Proposals to any other Proposers or competitor; that the above statement is accurate under penalty of perjury.

The undersigned, submitting this Proposals, hereby agrees with all the terms, conditions, and specifications required by the City in this Request for Proposals, declares that the attached Proposals and pricing are in conformity therewith, and attests to the truthfulness of all submissions in response to this solicitation.

Proposers shall provide the information requested below. Include the legal name of the Proposers and signature of the person(s) legally authorized to bind the Proposers to a contract.

---

COMPANY NAME

---

SIGNATURE

---

DATE

---

PRINT NAME OF PERSON SIGNING



**Form B: Receipt of Forms and Submittal Checklist**

**RFB #: 13016-0-2024-AH Olbrich Botanical Gardens  
Conservatory Assessment – Phase 2**

*This form must be returned with your response.*

Proposers hereby acknowledge the receipt and/or submittal of the following forms:

Forms	Initial to Acknowledge SUBMITTAL	Initial to Acknowledge RECEIPT
Description of Services/Commodities	N/A	
Form A: Signature Affidavit		
Form B: Receipt of Forms and Submittal Checklist		
Form C: Vendor Profile		
Form D: Cost Proposal		
Form E: References		
Appendix A: Standard Terms & Conditions	N/A	
Appendix B: Contract for Purchase of Services	N/A	
Appendix C: Specifications for 2024 Ammunition		
Addendum #	N/A	
Addendum #	N/A	
Addendum #	N/A	

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COMPANY NAME



# Form C: Vendor Profile

## RFB #: 13016-0-2024-AH Olbrich Botanical Gardens Conservatory Assessment – Phase 2

*This form must be returned with your response.*

### COMPANY INFORMATION

COMPANY NAME (Make sure to use your complete, legal company name.)			
FEIN	(If FEIN is not applicable, SSN collected upon award)		
CONTACT NAME (Able to answer questions about proposal.)	TITLE		
TELEPHONE NUMBER	FAX NUMBER		
EMAIL			
ADDRESS	CITY	STATE	ZIP

### AFFIRMATIVE ACTION CONTACT

If the selected contractor employs 15 or more employees and does aggregate annual business with the City of \$50,000 or more, the contractor will be required to file an Affirmative Action Plan and comply with the City of Madison Affirmative Action Ordinance, Section 39.02(9)(e), within thirty (30) days contract signature. Vendors who believe they are exempt based on number of employees or annual aggregate business must file a request for exemption. Link to information and applicable forms: <https://www.cityofmadison.com/civil-rights/contract-compliance/vendors-suppliers>

CONTACT NAME	TITLE		
TELEPHONE NUMBER	FAX NUMBER		
EMAIL			
ADDRESS	CITY	STATE	ZIP

### ORDERS/BILLING CONTACT

Address where City purchase orders/contracts are to be mailed and person the department contacts concerning orders and billing.

CONTACT NAME	TITLE		
TELEPHONE NUMBER	FAX NUMBER		
EMAIL			
ADDRESS	CITY	STATE	ZIP

### LOCAL VENDOR STATUS

The City of Madison has adopted a local preference purchasing policy granting a scoring preference to local suppliers. Only suppliers registered as of the bid's due date will receive preference. Learn more and register at the City of Madison website.

CHECK ONLY ONE:

- Yes**, we are a local vendor *and* have registered on the City of Madison website under the following category: \_\_\_\_\_ [www.cityofmadison.com/business/localPurchasing](http://www.cityofmadison.com/business/localPurchasing)
- No**, we are not a local vendor or have not registered.



## Form D: Cost Proposal

### RFB #: 13016-0-2024-AH Olbrich Botanical Gardens Conservatory Assessment – Phase 2

*This form must be returned with your response.*

Prepare the fee proposal as all inclusive, not-to-exceed, fixed fees:

- All Inclusive – Covers all direct and indirect necessary expenses including but not limited to; travel, telephone, copying and other out-of-pocket expenses.
- Not To Exceed – The actual fees shall not exceed the amount specified in fee proposal.
- Fixed Fee – All prices, rates, fees and conditions outlined in the proposal shall remain fixed and valid for the entire length of the contract and any/all renewals.

Any pricing increases or additions must be agreed upon in writing by both parties.

Notice: Please enter your price proposals in **Exhibit A**.

---

COMPANY NAME



# Form E: References

## RFB #: 13016-0-2024-AH Olbrich Botanical Gardens Conservatory Assessment – Phase 2

*This form must be returned with your response.*

Please list three references that are **NOT** from the City of Madison. If you wish to highlight any additional work experience for the City of Madison, please list it on a separate page.

REFERENCE #1 – CLIENT INFORMATION			
COMPANY NAME	CONTACT NAME		
ADDRESS	CITY	STATE	ZIP
TELEPHONE NUMBER	FAX NUMBER		
EMAIL			
CONTRACT PERIOD	YEAR COMPLETED	TOTAL COST	
DESCRIPTION OF THE PERFORMED WORK			

REFERENCE #2 – CLIENT INFORMATION			
COMPANY NAME	CONTACT NAME		
ADDRESS	CITY	STATE	ZIP
TELEPHONE NUMBER	FAX NUMBER		
EMAIL			
CONTRACT PERIOD	YEAR COMPLETED	TOTAL COST	
DESCRIPTION OF THE PERFORMED WORK			

COMPANY NAME

<b>REFERENCE #3 – CLIENT INFORMATION</b>			
COMPANY NAME	CONTACT NAME		
ADDRESS	CITY	STATE	ZIP
TELEPHONE NUMBER	FAX NUMBER		
EMAIL			
CONTRACT PERIOD	YEAR COMPLETED	TOTAL COST	
DESCRIPTION OF THE PERFORMED WORK			

---

COMPANY NAME

## Exhibit A

### Olbrich Botanical Gardens Conservatory As:

<u>ITEM</u>	<u>DESCRIPTION</u>	<u>QTY</u>	<u>UNITS</u>
1	Mobilization	1	Lump Sum
2	Cupola Framing and Roof Assessment	1	Lump Sum
3	Cupola Primary Structural Framing Assessment	1	Lump Sum
4	Mechanical Equipment Maintenance	1	Lump Sum
5	Glazing Panel Assessment	1	Lump Sum
6	Simple Glazing Panel Repairs	1	Lump Sum

Partial payments on each bid item will be allowed based on the percentage of the scope of work description completed. Mobilization will not be completely paid out until final payment when demobilization is complete.

**Assessment - Phase 2**

**TOTAL BASE BID**



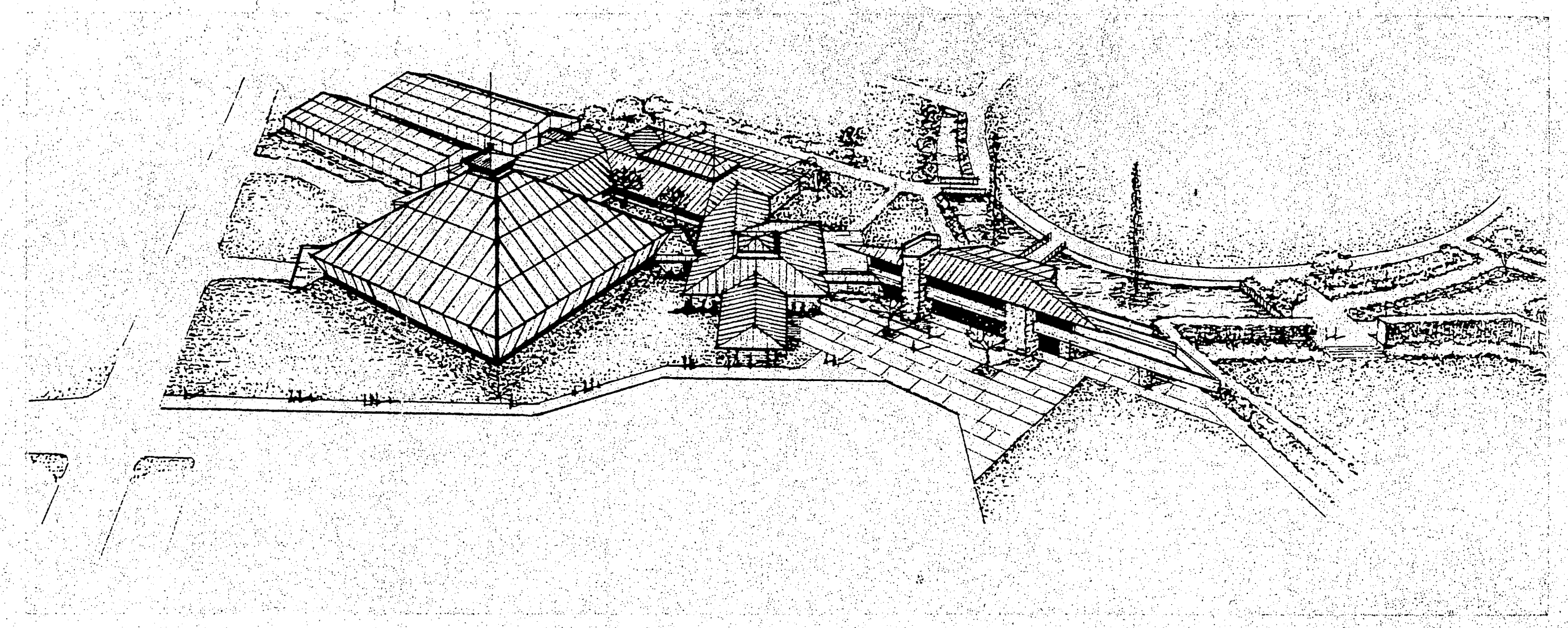
**SHEET INDEX**

- 1. SITE PLAN, SITE PLAN LEGEND.
- 2. SOUTH ELEVATION, SOUTHWEST ELEVATION.
- 3. EAST ELEVATION, NORTHEAST ELEVATION, NORTHWEST ELEVATION.
- 4. COMPLEX FLOOR PLAN.
- 5. REFLECTED CEILING PLAN.
- 6. ROOF PLAN.
- 7. ROOM FINISH SCHEDULE, TYPICAL WALL TYPES.
- 8. DOOR HARDWARE SCHEDULE, DOOR SCHEDULE, DOOR TYPES.
- 9. SPECIFICATIONS, WINDOW SCHEDULE.
- 10. COURTYARD ELEVATIONS & 1/8" BUILDING SECTIONS.
- 11. 1/8" BUILDING SECTIONS.
- 12. COVERED ENTRANCE WALK, ROOF FRAMING PLAN, EAVE DTL., 1/4" SECTION, 1/2" RAMPED CORRIDOR & FOYER SECTIONS.
- 13. 1/2" WALL SECTIONS & CORRIDOR (14), CLERESTORY, MULTI-PURPOSE RM. & WORKROOM, CATWALK DTL. & MULTI-PURPOSE RM.
- 14. MISC. ROOF & EAVE DTLS. & HEADHOUSE, CONSERVATORY, BOILER RM., & DIRECTOR'S OFF.
- F-1. TOILET ROOM INTERIOR ELEVATIONS, CHANGING COUNTER DETAIL, PARTIAL FLOOR PLAN & ENTRANCE.
- F-2. PARTIAL FLOOR PLAN & VESTIBULE (9), 1/4" SECTIONS THRU VEST (9), MISC. WINDOW & DOOR SILL, JAMB, & HEAD DETAILS & VESTIBULE (9).
- F-3. MISCELLANEOUS DETAILS.
- F-4. WINDOW SILL, HEAD, & EAVE DTL. & RAMPED CORRIDOR (3), MISCELLANEOUS SILL, JAMB, HEAD, & EAVE DETAILS.
- F-5. 1/2" SECTIONS & COVERED WALK & VESTIBULE (11), ROLL-UP GRILLE HEAD & JAMB DETAILS, DISPLAY CASE DETAILS.
- F-6. 1/4" INTERIOR ELEVATIONS/SECTIONS & FOYER & VESTIBULE (11), RECEPTION AREA, & VESTIBULE (9).
- F-7. PARTIAL FOYER REFLECTED CEILING PLAN, UPPER FOYER WALL DETAILS, MISCELLANEOUS SKYLIGHT & OTHER DETAILS.
- F-8. MISCELLANEOUS DETAILS & LOW CONSERVATORY WALL, MISC. SKYLIGHT GLAZING DETAILS, SKYLIGHT GLAZING NOTES & SPECIFICATIONS.
- F-9. 1/4" INTERIOR ELEVATIONS/SECTIONS, & UNTEL DTL. & RAMPED CORR. (3), INTERIOR ELEVATIONS & LIBRARY & GIFT SHOP, MISCELLANEOUS DTL.
- F-10. GIFT SHOP SALES COUNTER & RECEPTION DESK DETAILS.
- MP-1. PARTIAL FLOOR PLAN & CORRIDOR (14), TOILET RM. & CORRIDOR (14), INTERIOR ELEVATIONS, WALK-IN COOLER, AIRSPACE CLOSURE DTL.
- MP-2. MISC. DETAILS & MULTI-PURPOSE RM., CLERESTORY HEAD, SILL & MULLION DTL., MISC. HEAD, JAMB, MULLION, & OTHER DETAILS.
- MP-3. 1/4" INTERIOR ELEVATIONS/SECTIONS THRU MULTI-PURPOSE ROOM.
- MP-4. PARTIAL MULTI-PURPOSE RM., REFLECTED CLG. PLAN, REFLECTED CLG. PLAN & PARTITION STORAGE, SECTION DTLS. THRU TRANSLUCENT PANELS.
- MP-5. MISCELLANEOUS LAMINATED WOOD BEAM (L.W.B.), & PARTITION DETAILS & MULTI-PURPOSE ROOM.
- C-1. CONSERVATORY - FIRST FLOOR PLAN.
- C-2. CONSERVATORY - UPPER LEVEL FLOOR PLAN.
- C-3. CONSERVATORY SPECIFICATIONS & GENERAL NOTES.
- C-4. CONSERVATORY - REFLECTED CEILING PLAN.
- C-5. 1/8" BUILDING SECTIONS THRU CONSERVATORY.
- C-6. 1/8" BUILDING SECTIONS THRU CONSERVATORY.
- C-7. CONSERVATORY GLAZING DETAILS & SPECIFICATIONS.
- C-8. CONSERVATORY STAIR & CUPOLA DETAILS.
- HH-1. HEADHOUSE BUILDING SECTIONS, MISCELLANEOUS HEADHOUSE DETAILS.
- HH-2. HEADHOUSE EXTERIOR WALL DETAILS, VALLEY & HIP DETAILS, STONE & CONCRETE SILL DETAILS.
- HH-3. SOUTHWEST HEADHOUSE ENDWALL DETAIL KEY, SOUTHWEST HEADHOUSE ENDWALL DETAILS.
- HH-4. MEZZANINE FLOOR PLAN, MEZZANINE SECTION, DETAILS, ROOF SCUTTLE DETAIL, RIDGE TRANSITION DTLS. & PAD ROOM CONN. (12) & HEADHOUSE.
- G-1. GREENHOUSE FLOOR PLAN.
- G-2. NORTHWEST HEADHOUSE ELEVATION & 1/8" SECTION THRU 1" PAD ROOM CONNECTOR, GREENHOUSE FRAMING & OUTER FIN. WALL DTL.
- G-3. 1/2" SECTION THRU GREENHOUSE VESTIBULE, MISCELLANEOUS WALL SECTION DETAILS & GREENHOUSE VESTIBULES.
- G-4. MISCELLANEOUS GREENHOUSE DETAILS.
- G-5. GREENHOUSE WALL SECTIONS, MISC. DETAILS, SECTION THRU GREENHOUSE CONNECTOR, EAVE/GUTTER DETAILS.
- G-6. RIDGE VENT DTLS., GREENHOUSE I. & II., VENTED ROOF GLAZING DTLS., GREENHOUSE I. & II., FIXED ROOF GLAZING DTLS., GREENHOUSE I. & II.

**VOID**  
ORIGINAL DESIGN  
**NOT AS BUILT**  
AUGUST 1, 1992

- S-1. FOUNDATION PLAN/MAIN BUILDING.
- S-2. FOUNDATION PLAN/GREENHOUSE & DETAILS.
- S-3. FOUNDATION PLAN/CONSERVATORY & DETAILS.
- S-4. MEZZANINE FRAMING PLAN/CONSERVATORY & DETAILS.
- S-5. ROOF FRAMING PLAN/MAIN BUILDING.
- S-6. ROOF FRAMING PLAN/CONSERVATORY.
- S-7. DETAILS/MAIN BUILDING.
- S-8. MECH. ROOM FLOOR FRAMING & DETAILS.
- S-9. DETAILS.
- S-10. DETAILS/CONSERVATORY.
- E-1. COMPLEX FLOOR PLAN - LIGHTING.
- E-2. COMPLEX FLOOR PLAN - POWER.
- E-3. FIRST FLOOR CONSERVATORY - LIGHTING.
- E-4. FIRST FLOOR CONSERVATORY - POWER.
- E-5. UPPER LEVEL CONSERVATORY - LIGHTING.
- E-6. UPPER LEVEL CONSERVATORY - POWER.
- E-7. GREENHOUSE FLOOR PLAN - LIGHTING.
- E-8. GREENHOUSE FLOOR PLAN - POWER.
- E-9. EXISTING BUILDING, UPPER MECHANICAL ROOM, SITE LIGHTING.
- E-10. ELECTRICAL RISER DIAGRAM, PANEL SCHEDULES.
- E-11. SCHEDULES.
- E-12. DETAILS.
- H-1. COMPLEX FLOOR PLAN/AIR DISTRIBUTION.
- H-2. COMPLEX FLOOR PLAN/HEATING PIPING.
- H-3. CONSERVATORY UPPER LEVEL/HEATING & VENTILATION.
- H-4. CONSERVATORY FIRST FLOOR/HEATING & VENTILATION.
- H-5. GREENHOUSE FLOOR PLAN/HEATING.
- H-6. MECHANICAL ROOM FLOOR PLAN - SECTIONS & DETAILS.
- H-7. BOILER ROOM FLOOR PLAN, MECHANICAL ROOM ROOF PLAN, GREENHOUSE RISER DIAGRAMS - HEATING.
- H-8. SCHEDULES & DETAILS.
- H-9. SECTIONS & DETAILS, CONSERVATORY WALL FIN PIPING RISER DIAGRAM.
- P-1. SITE DRAINAGE PLAN, CATCH BASIN DATA TABLE, SITE DRAINAGE DETAILS.
- P-2. MAIN COMPLEX PLUMBING FLOOR PLAN, PLUMBING SYMBOLS.
- P-3. MAIN SUPPLY RISER DIAGRAM, MAIN WASTE & VENT RISER DIAGRAM, UPPER MECH. RM. PLOG. FLOOR PLAN, PLUMBING DETAILS.
- P-4. ENLARGED PLUMBING FLOOR PLANS, RISER DIAGRAMS FOR ENLARGED FLOOR PLANS.
- P-5. CONSERVATORY DRAINAGE PLANS, DRAINAGE DETAILS.
- P-6. CONSERVATORY PLUMBING FLOOR PLANS, ENLARGED MECHANICAL RM. PLUMBING SUPPLY PLAN, CONSERVATORY PLUMBING DETAILS.
- P-7. CONSERVATORY RISER DIAGRAMS, MISTEB. SYSTEM PLANS, MISTEB. SYSTEM RISER DIAGRAM, DETAILS.
- P-8. GREENHOUSE PLUMBING FLOOR PLAN, WASTE, VENT & SUPPLY RISER DIAGRAMS, PLUMBING DETAILS.
- P-9. PLUMBING FIXTURE & CONNECTION SCHEDULES, PLUMBING PIPE MARKING SCHEDULE, WATER-FALL RISER DIAGRAM, DETAILS.
- P-10. PLUMBING SPECIFICATIONS AND REQUIREMENTS.
- 15. ADDITIONAL DETAILS RELEASED DURING CONSTRUCTION.
- 16. ADDITIONAL DETAILS RELEASED DURING CONSTRUCTION.
- F-11. GIFT SHOP COUNTER, CABINET, & SHELVING PLANS, WALL ELEVATIONS, DETAILS, SPECIFICATIONS.
- C-8. CONSERVATORY BRIDGE PLAN, DETAILS, BRIDGE SPECIFICATIONS.
- C-7. FOOTING & FOUNDATION PLAN & DETAILS FOR AS DESIGNED GREENHOUSE.
- H-10. AS-BUILT HEATING PLANS FOR GREENHOUSE.
- P-11. FERTILIZER & M (70%) REPIPING PLANS, RISER DIAGRAM, DETAILS, SPECIFICATIONS.
- P-12. REVERSE COMPOSITE PLUMBING PLAN, DETAILS.

**NOTES** THE FOLLOWING SHEETS WERE ADDED DURING CONSTRUCTION OR AS "AS-BUILT"



**OLBRICH BOTANICAL COMPLEX & CONSERVATORY**  
3330 Atwood Avenue, Madison, Wisconsin

STUART WILLIAM GALLAHER, ARCHITECT, INC.  
702 North Blackhawk Avenue  
Madison, Wisconsin 53705 (608)238 0991

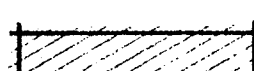
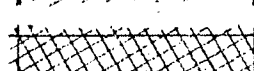
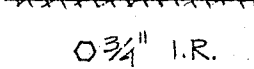
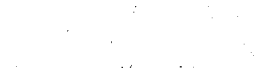
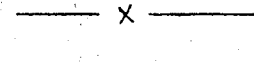

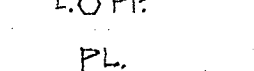
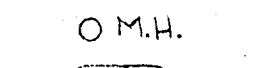
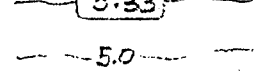
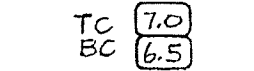
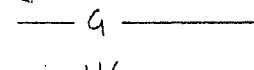
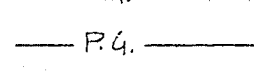
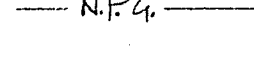
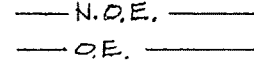
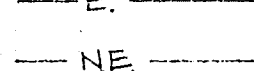
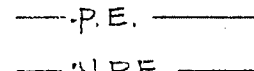
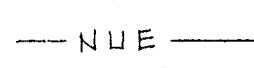
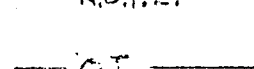
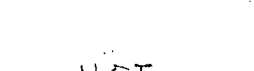
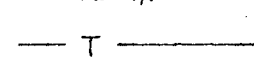
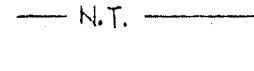

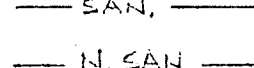

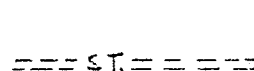
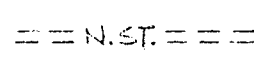
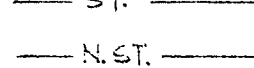

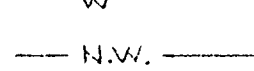
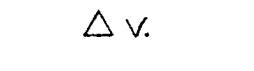










**Key to Drawing Symbols**

- 1,2,3,etc.= General Plan, Elevation, & Section Drawings**
- F = Foyer Area Drawings**
- MP = Multi-Purpose Area Drawings**
- C = Conservatory Area Drawings**
- HH = Headhouse Area Drawings**
- G = Greenhouse Area Drawings**
- S = Structural Drawings**
- E = Electrical Drawings**
- H = Heating, Ventilating, & Air Conditioning Drawings**
- P = Plumbing Drawings**
- ⊙ --- ⊙ CENTERLINE OF COLUMN GRID  
COLUMN IDENTIFICATION NUMBER/LETTER
- ⊙ --- ⊙ BUILDING SECTION OR WALL SECTION LETTER/NUMBER  
SHEET WHERE SECTION IS SHOWN
- ⊙ --- ⊙ DETAIL NUMBER  
SHEET WHERE DETAIL IS SHOWN
- ⊙ --- ⊙ INTERIOR ELEVATION NUMBER  
SHEET WHERE INTERIOR ELEVATION IS SHOWN
- ⊙ --- ⊙ WALL TYPE DETAIL NUMBER  
SHEET WHERE WALL TYPE DETAIL IS SHOWN
- FOYER --- ROOM NAME  
ROOM NUMBER
- ⊙ --- ⊙ WINDOW IDENTIFICATION NUMBER  
ROOM/AREA WHERE WINDOW IS LOCATED
- ⊙ --- ⊙ DOOR IDENTIFICATION NUMBER  
ROOM/AREA WHERE DOOR IS LOCATED
- ⊙ --- ⊙ DOOR HARDWARE SET NUMBER (SEE SHEET #8)
- ⊙ --- ⊙ DOOR/ROOM FINISH/WINDOW SCHED. REMARKS (SEE SHEET #7, 8, & 9)
- T.O.P.F. --- TOP OF FINISH FLOOR
- NOTE: SEE SITE PLAN LEGEND SHEET #1 FOR SITE PLAN SYMBOLS

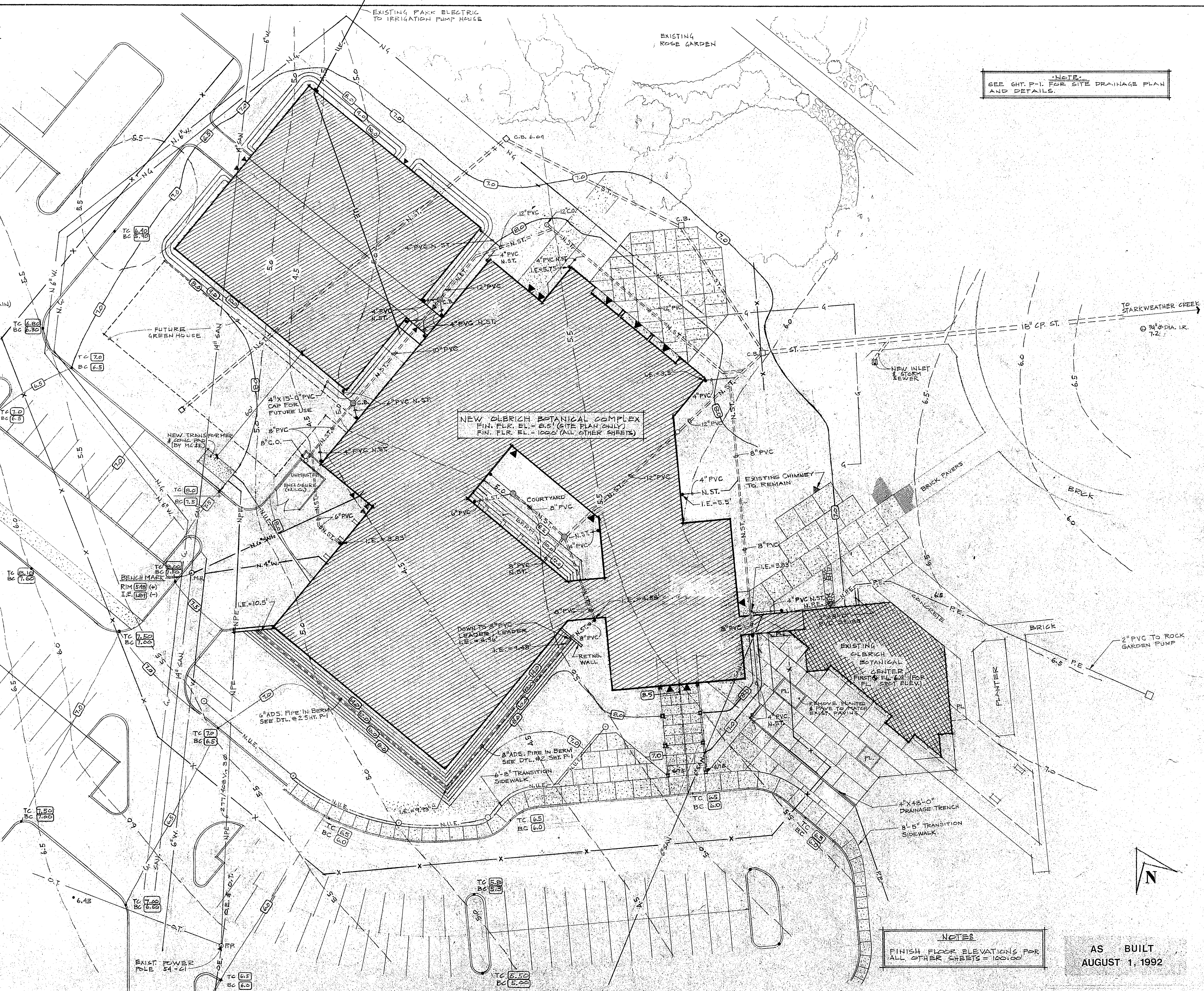
THIS SET DOES NOT CONTAIN AS-BUILT PLANS OR DETAILS OF THE GREENHOUSES.

AS BUILT  
AUGUST 1, 1992

**SITE PLAN LEGEND:**

-  NEW BOTANICAL COMPLEX
-  EXISTING BUILDINGS (TO REMAIN)
-  0.375" I.R. 3/4" DIA. IRON ROD
-  CONSTRUCTION LIMITS
-  6" CURB
-  L.O.P.P. PARKING LOT LIGHT/POWER POLE
-  PL. PLANTER
-  O.M.H. MANHOLE
-  5.33 FINISH CONTOUR GRADE ELEVATION
-  5.0 EXIST. CONTOURS TO BE ALTERED
-  7.0 TOP OF NEW CURB
-  6.5 BOTTOM OF NEW CURB
-  G EXIST. GAS (M.G.E.) (TO REMAIN)
-  N.G. NEW GAS (M.G.E.)
-  P.G. EXIST. PARK GAS (TO REMAIN)
-  N.P.G. NEW PARK GAS
-  N.O.E. NEW OVERHEAD ELECTRIC (M.G.E.)
-  O.E. EXIST. OVERHEAD ELECTRIC (M.G.E.) (TO REMAIN)
-  E. EXIST. ELECTRIC (M.G.E.) (TO REMAIN)
-  N.E. NEW ELECTRIC (M.G.E.)
-  P.E. EXIST. PARK ELECTRIC (TO REMAIN)
-  N.P.E. NEW PARK ELECTRIC
-  N.U.E. NEW UNDERGROUND ELECTRIC (M.G.E.)
-  N.O.P.E. NEW OVERHEAD PARK ELECTRIC
-  O.T. EXIST. OVERHEAD TELEPHONE (WIS. BELL) (TO REMAIN)
-  N.O.T. NEW OVERHEAD TELEPHONE (WIS. BELL)
-  T. EXIST. TELEPHONE (WIS. BELL) (TO REMAIN)
-  N.T. NEW TELEPHONE (WIS. BELL)
-  S.A.N. EXIST. SANITARY (TO REMAIN)
-  N.S.A.N. NEW SANITARY
-  S.T. EXIST. LARGE DIA. STORM (TO REMAIN)
-  N.S.T. NEW LARGE DIA. STORM
-  S.T. EXIST. SMALL DIA. STORM (TO REMAIN)
-  N.S.T. NEW SMALL DIA. STORM
-  W. EXIST. WATER (TO REMAIN)
-  N.W. NEW WATER
-  Δ V. WATER VALVE BOX
-  C.O. CLEANOUT
-  C.B. EXISTING CATCH BASIN
-  C.B. NEW CATCH BASIN

**NOTE:**  
SEE SHT. P-1 FOR SITE DRAINAGE PLAN AND DETAILS.



**NOTE:**  
FINISH FLOOR ELEVATIONS FOR ALL OTHER SHEETS = 10.0/0.0

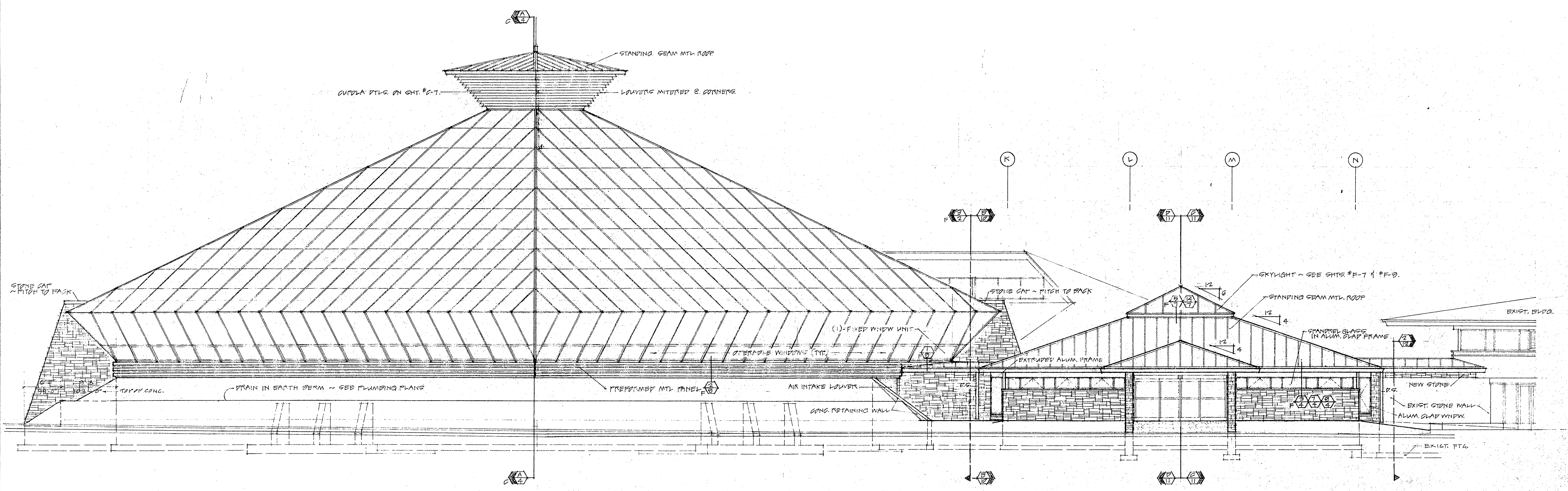
**AS BUILT**  
AUGUST 1, 1992

**SITE PLAN**

**SCALE: 1"=20'**

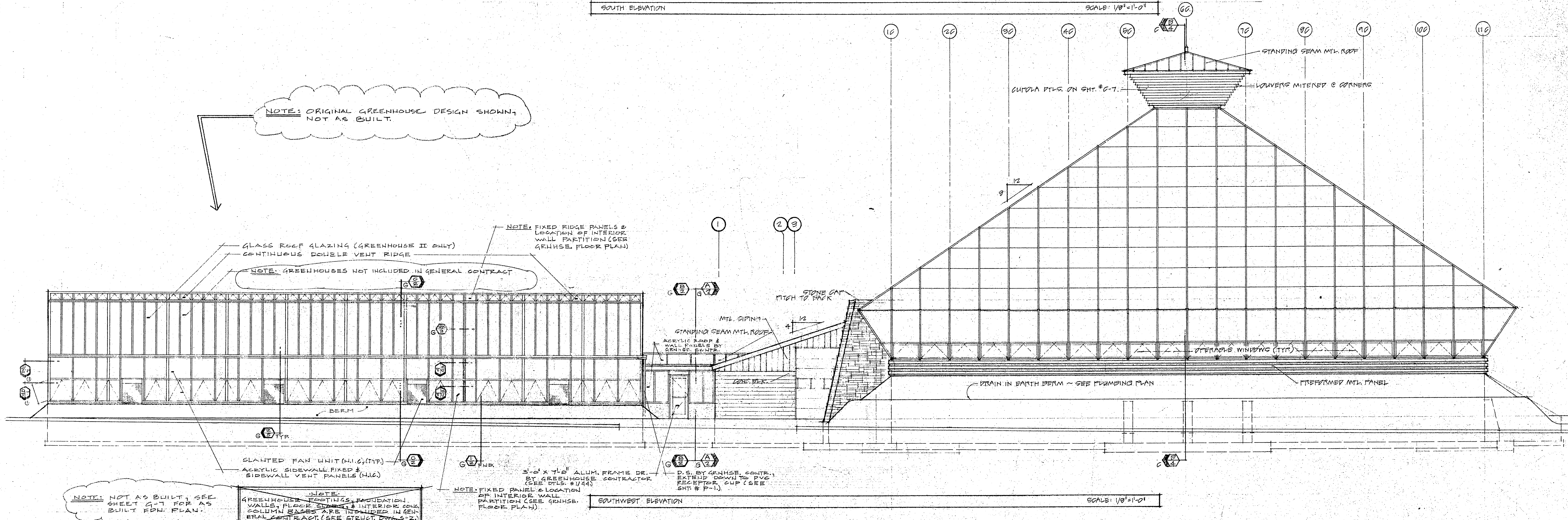
12-12-88: CHANGED LOCATION & SIZE OF SANITARY AND LOCATION OF SANITARY SERVICES AS SHOWN NORTH SIDE OF CONSERVATORY  
11-18-88

**STUART WILLIAM GALLAHER, ARCHITECT, INC.**  
 707 NORTH BLACKHAWK AVENUE  
 MADISON, WISCONSIN 53706  
**OLBRICH BOTANICAL COMPLEX**  
 SITE PLAN - SITE PLAN LEGEND



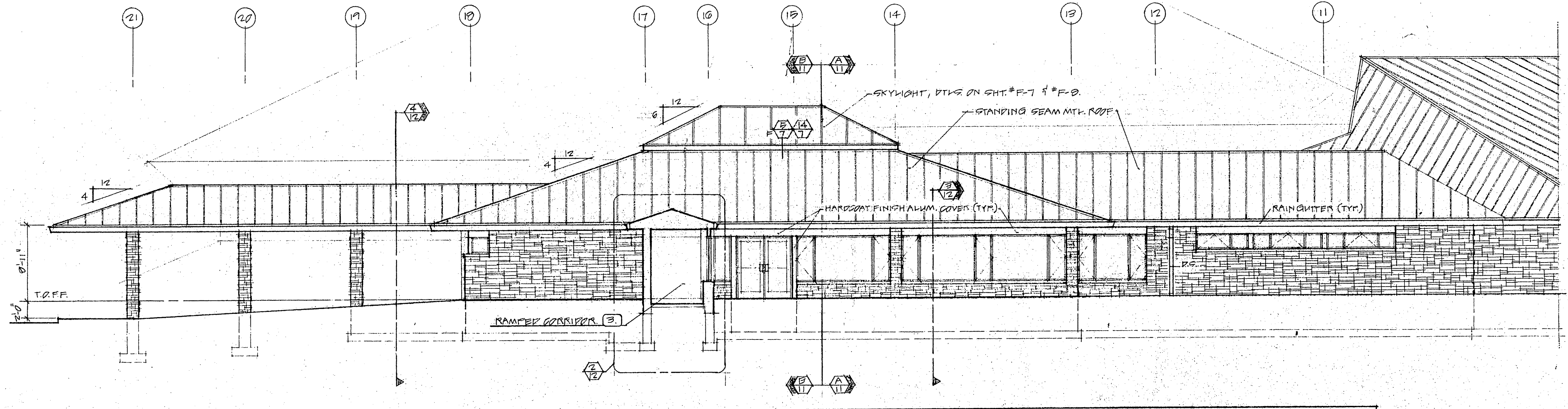
SOUTH ELEVATION SCALE: 1/8"=1'-0"

NOTE: ORIGINAL GREENHOUSE DESIGN SHOWN, NOT AS BUILT.

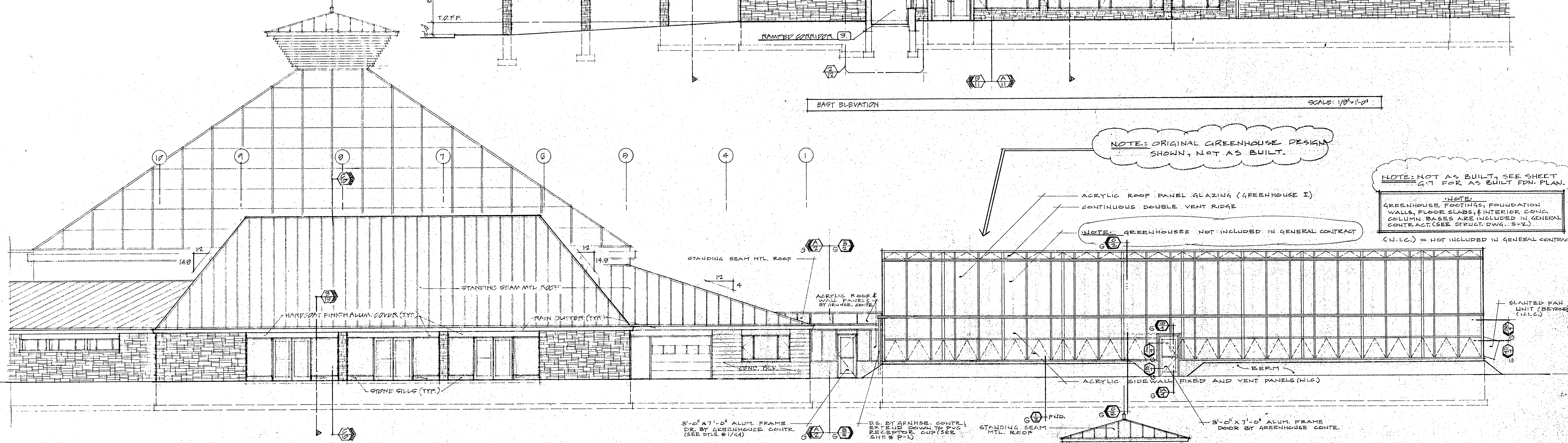


SOUTHWEST ELEVATION SCALE: 1/8"=1'-0"

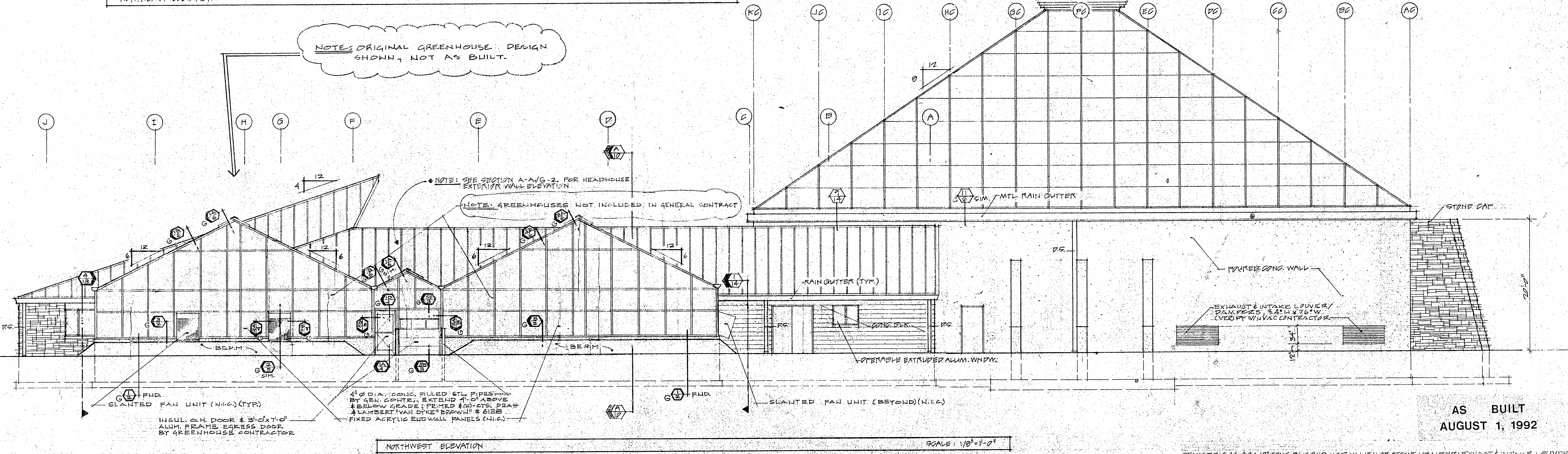
AS BUILT  
AUGUST 1, 1992



EAST ELEVATION SCALE: 1/8"=1'-0"



NORTHEAST ELEVATION SCALE: 1/8"=1'-0"



NORTHWEST ELEVATION SCALE: 1/8"=1'-0"

NOTE: ORIGINAL GREENHOUSE DESIGN SHOWN, NOT AS BUILT.

NOTE: NOT AS BUILT, SEE SHEET 47 FOR AS BUILT FDN. PLAN.

NOTE: GREENHOUSES NOT INCLUDED IN GENERAL CONTRACT (N.I.C.) = NOT INCLUDED IN GENERAL CONTRACT

NOTE: ORIGINAL GREENHOUSE DESIGN SHOWN, NOT AS BUILT.

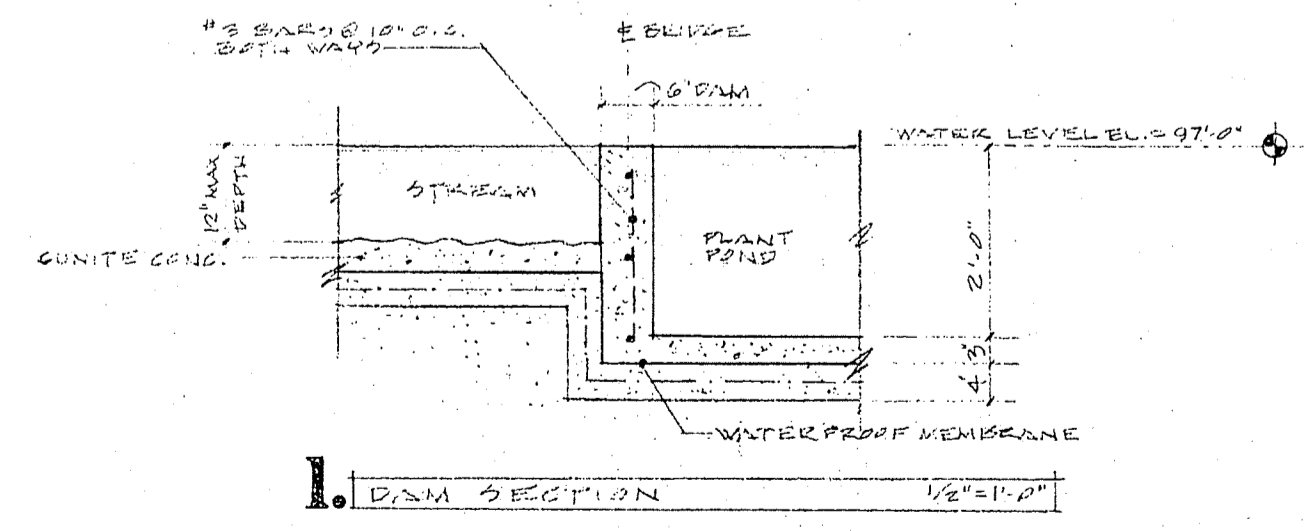
NOTE: SEE SECTION A-A/G-2, FOR HEADHOUSE EXTERIOR WALL ELEVATION

NOTE: GREENHOUSES NOT INCLUDED IN GENERAL CONTRACT

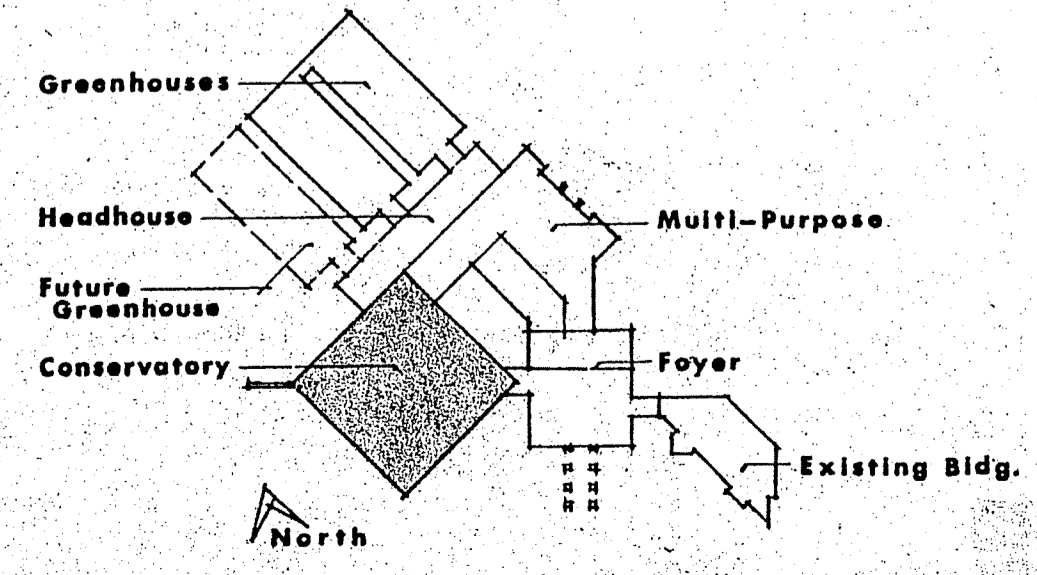
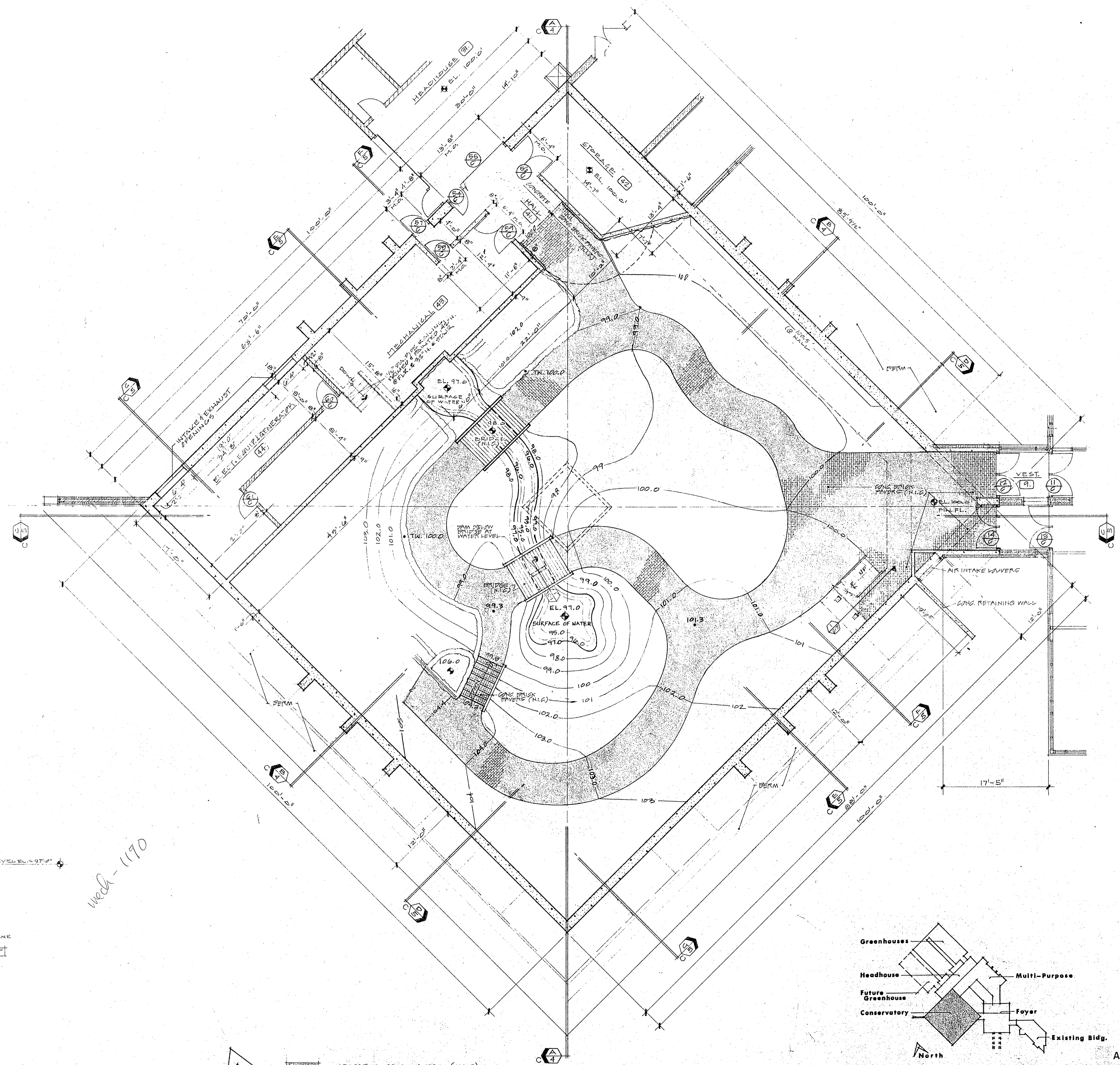
AS BUILT  
AUGUST 1, 1992

REVISED 4.14.83: 12\"/>

11-18-89



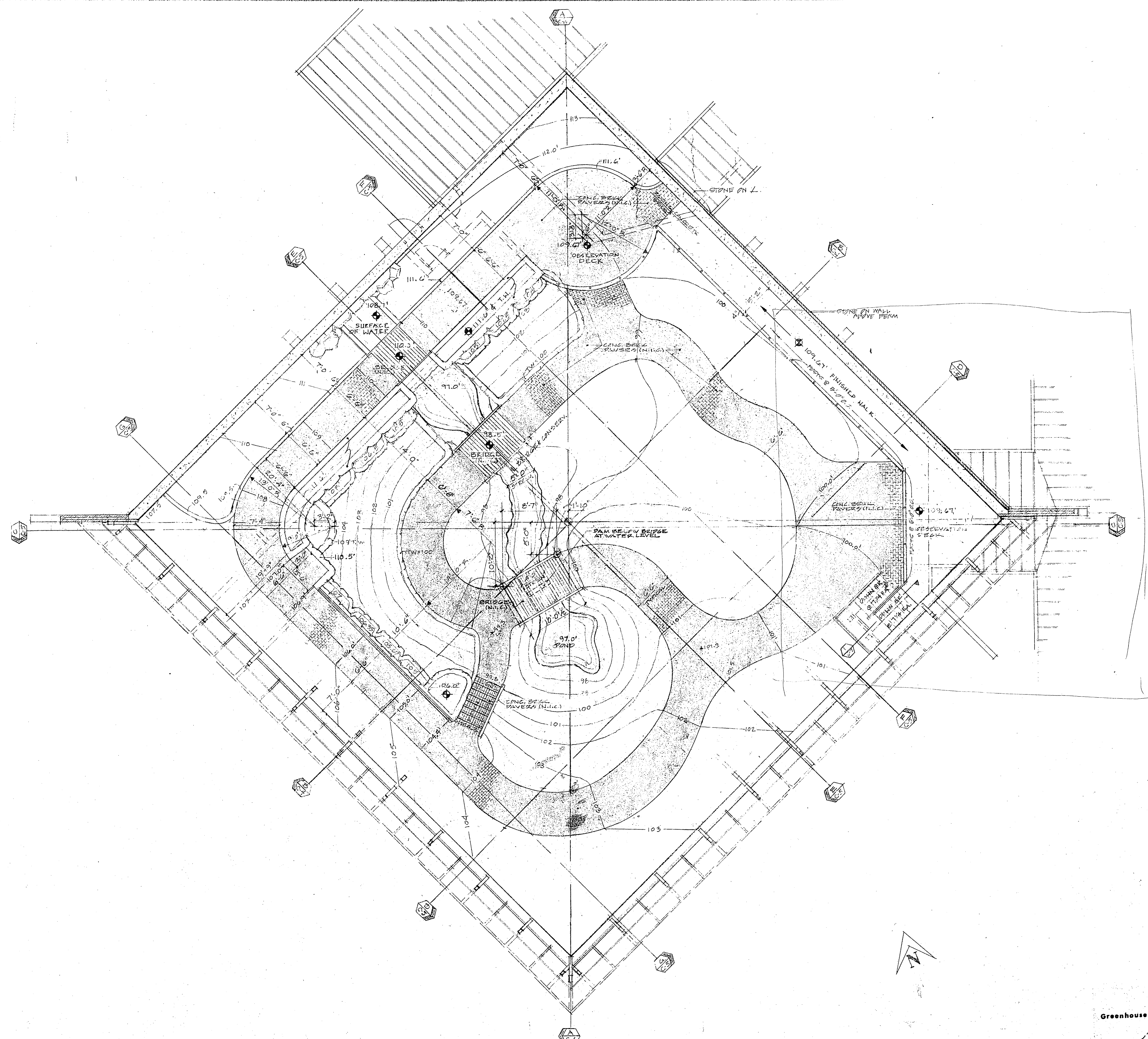
Wed - 1170



CONCRETE BRICK PAVERS (N.I.G.)  
**CONSERVATORY - FIRST FLOOR PLAN**

SCALE: 1/8" = 1'-0"

AS BUILT  
 AUGUST 1, 1992  
 REVISIONS: 1. 11.89: REMOVE CONC. VALANCE, ROOM # 45 & PARKING  
 11.16.88

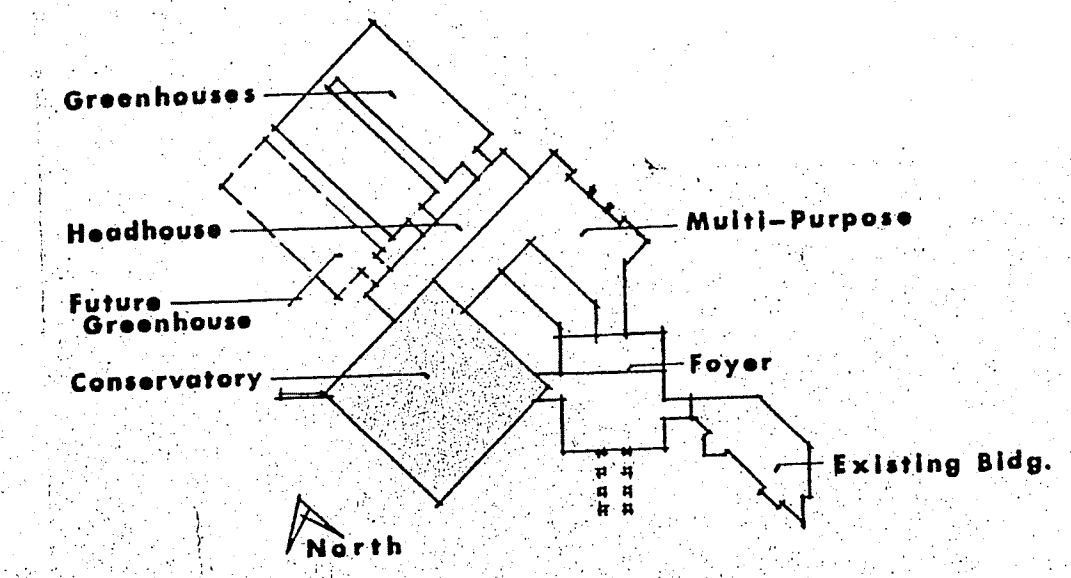


CONSERVATORY - UPPER LEVEL FLOOR PLAN SCALE: 1/8" = 1'-0"

CONCRETE BRICK PAVES (N.I.C.)

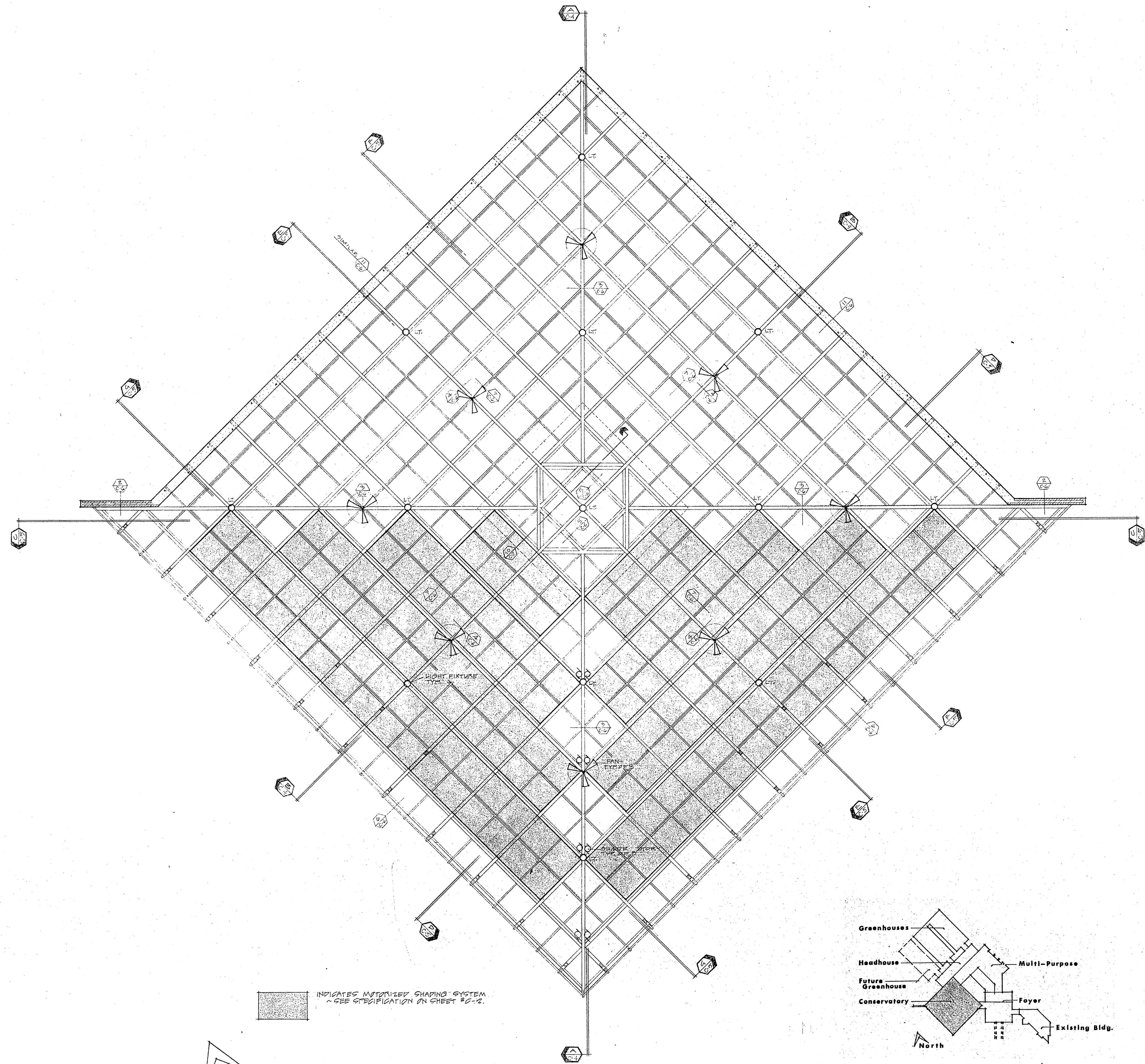
CONSERVATORY SPECIFICATIONS & GENERAL NOTES

- CONSERVATORY FILL & GRADING**  
**Drainage Bed:** shall be 12" deep consisting of the fill sand existing within the building perimeter.  
**Planting Beds:** shall be brought up to the grades indicated on the Conservatory Floor Plans and shall be 24" deep above the Drainage Bed. Soils required for the Planting Bed will be furnished to the Contractor on the Building Site.
- WATERPROOFING MEMBRANE:** on the Conservatory side of Rooms #43, #44 & #45 shall be "BITUTHENE 3000" system as manufactured by Grace Construction. Application shall be by a Sub-contractor approved by the Manufacturer and shall be in accordance with Grace Construction Specifications.
- SHADING SYSTEM:** shall be supplied and installed by Cravo Equipment Ltd. (519-759-8226). Fabric shall be Cravo "Fireproof 50" (FSI-10) custom tailored with polyester loop tape and suspension hooks. Covers shall be suspended from stainless steel wires with corrosion proof hardware. Each horizontal row of Covers shall have a separate 1/3 HP, 120/60/1, reversible Gear motor. All Gear motors per quarter roof shall have adjustable light and temperature controls.
- OPERATING SASH MOTORS, SHAFTS AND ARMS:** shall be as manufactured by Wadsworth Control Systems. Motors shall be #M-1135 VC-2000/2R (4 total) with power and control wiring. One rack and pinion drive arm shall be installed on each sash. All equipment shall be finished with white, exterior epoxy paint as manufactured by the Glidden Co.
- ARTIFICIAL ROCKWORK, WATERFALL, STREAM & POND SUBCONTRACTOR:** shall have a minimum of seven (7) years experience in this type of construction and shall have the facilities for shop casting the required GFRP Panels. Submittal Drawings to the Architect shall be required for all phases of this work.  
**Artificial Rockwork** shall be Glass Fiber Reinforced Concrete, (GFRP PANELS), Limestone Types #1 through #10 as shop cast by Cost of Wisconsin Construction, Inc. Connections and ties to concrete walls shall be furnished and installed by this Subcontractor. Additional footings required for the GFRP Panels shall be installed by this Subcontractor.  
**Waterfall, Stream and Pond** shall be 3500 p.s.i. reinforced Shotcrete. Horizontal or inclined reinforcing shall be galvanized wire fabric 2" x 2" x 14 gauge Steel Tex. Vertical Shotcrete shall be backed up with "truss loop" manufactured by Bostwick Steel Lath Co. and #3 Bars at 10" o.c. both ways. Water proofing shall be "TREMPRO 60" as manufactured by Tremco. Shotcrete shall be applied with a dry-mix nozzle with speed and mixing controls (mixing range of 1:3 to 1:7)  
**Waterfall Equipment, Piping and Accessories** shall be supplied and installed by this Subcontractor. The Plumbing Subcontractor shall install the required piping to the Pump System.

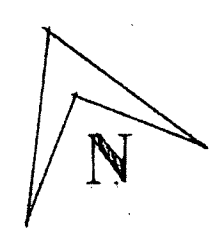
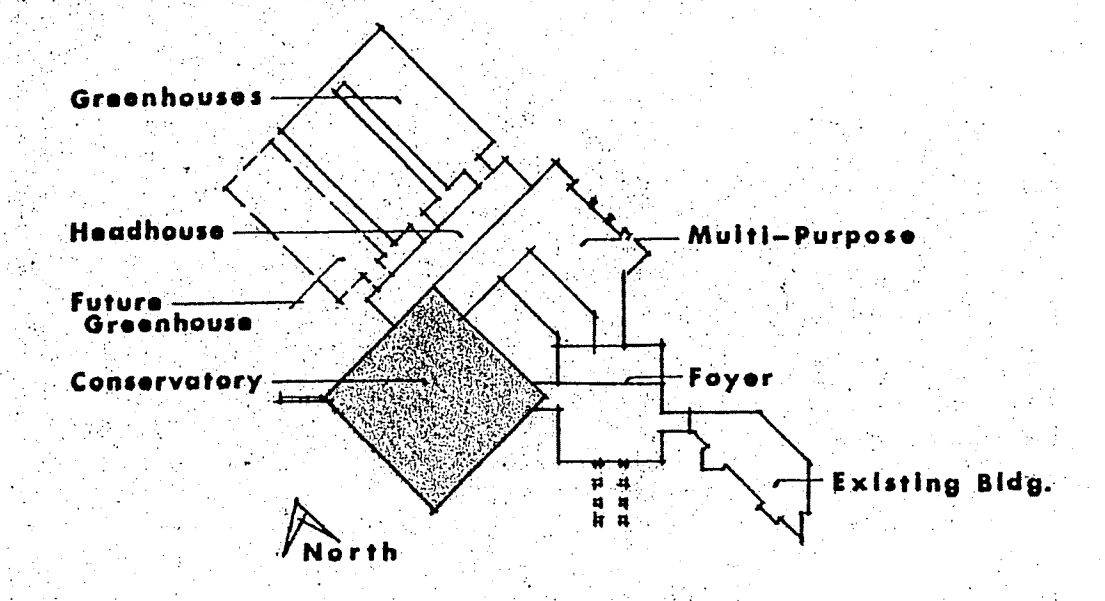


AS BUILT  
 AUGUST 1, 1992  
 REVISION: 2-1-90 5'0" STREAM, BRIDGES & CONTROLS  
 REVISION: 2-1-89 (CO-2) DELETE 1" CONSERVATORY CURB TOP DETAIL 2/C-5  
 11-12-88

STUART WILLIAM GALLAHER, ARCHITECT, INC.  
 702 NORTH BACHTAWK AVENUE  
 MADISON, WISCONSIN 53706  
 COMPLEX  
 BOTANICAL  
 OLBRICH  
 3330 ATWOOD AVENUE  
 CONSERVATORY - UPPER LEVEL FLOOR PLAN  
 CONSERVATORY SPECIFICATIONS & GENERAL NOTES  
 C-2



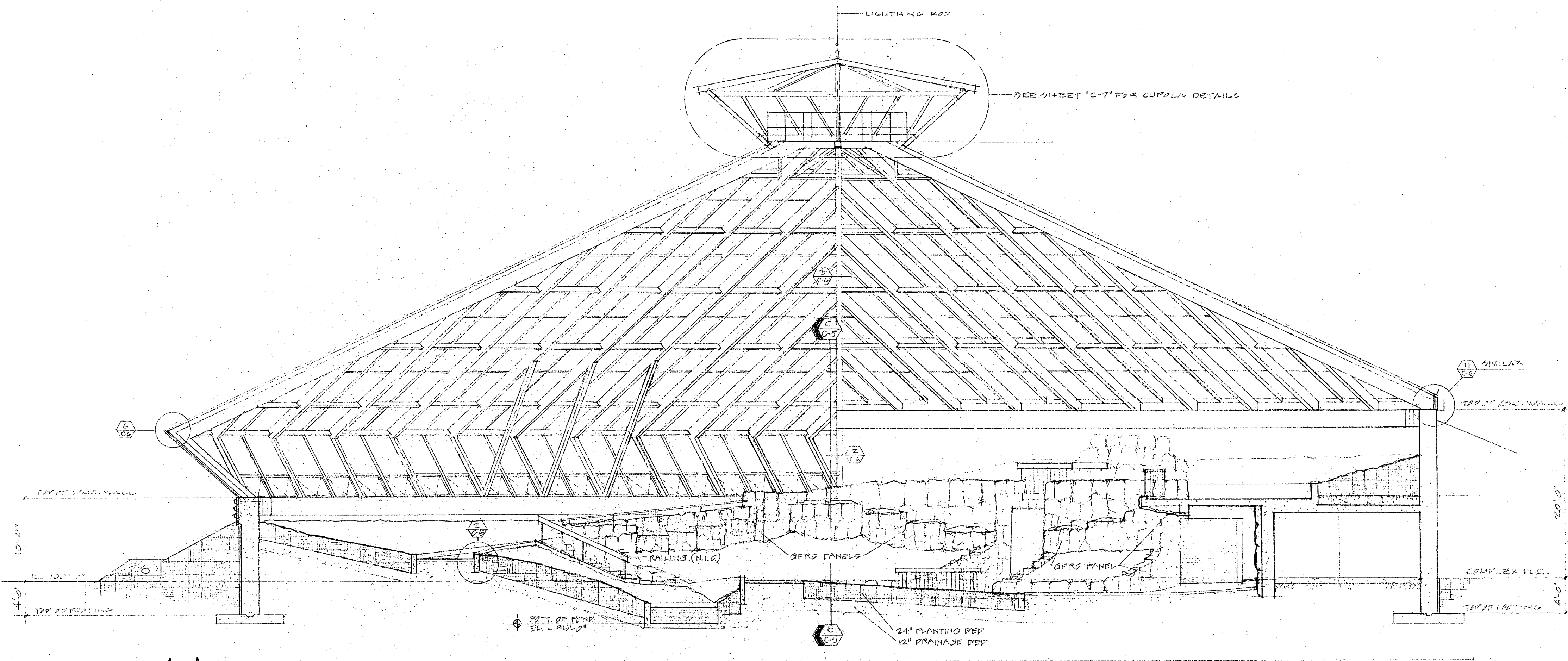
INDICATES MATERIALIZED SHADING SYSTEM  
 - SEE SPECIFICATION ON SHEET #C-2.



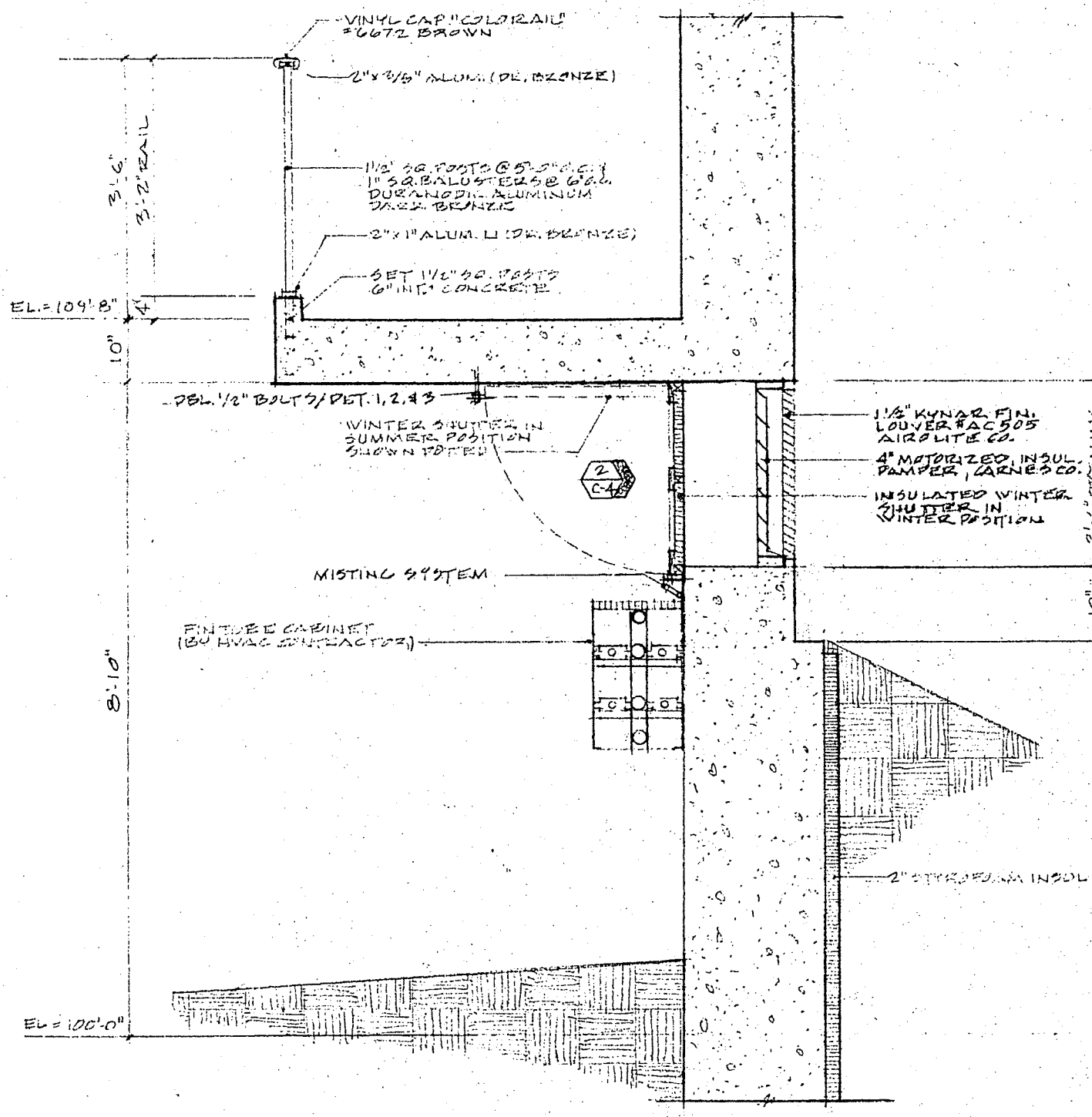
CONSERVATORY - REFLECTED CEILING PLAN

SCALE: 1/8" = 1'-0"

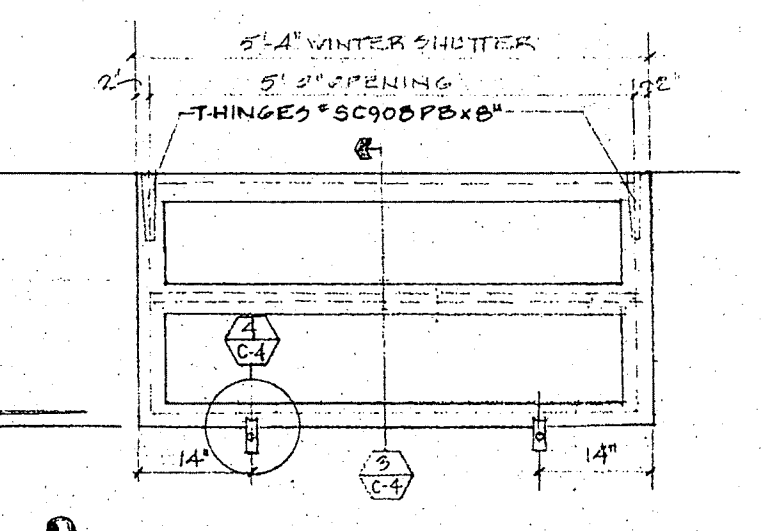
AS BUILT  
 AUGUST 1, 1992



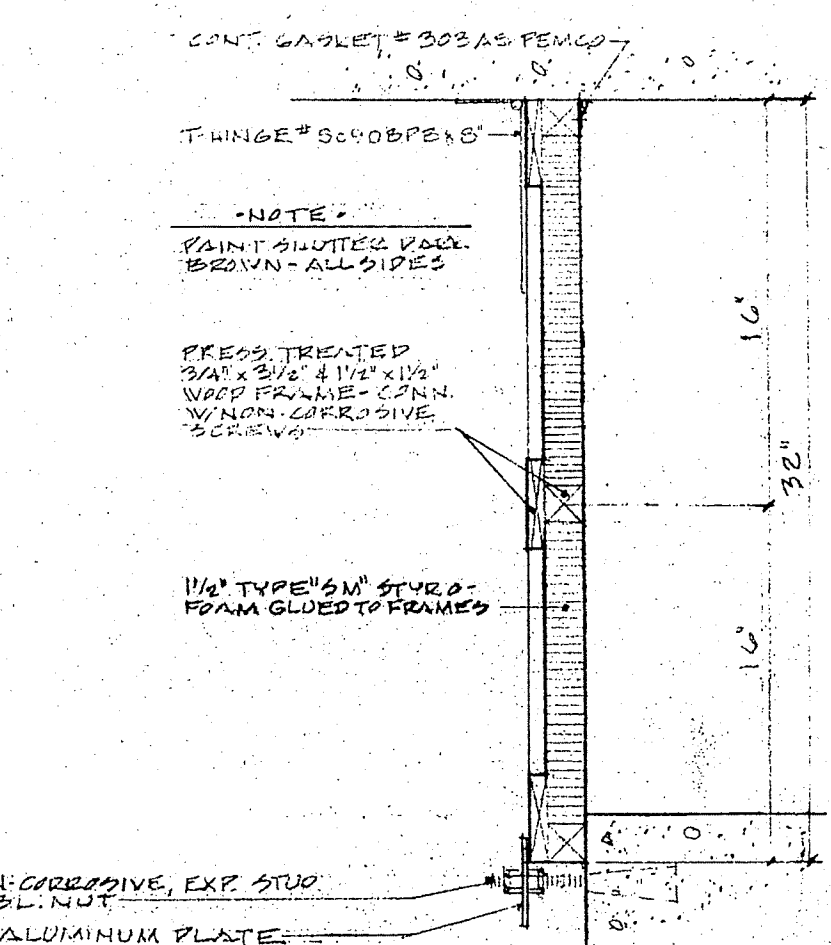
**A-A. SECTION TITIRO CONSERVATORY - SOUTH/NORTH** SCALE: 1/8" = 1'-0"



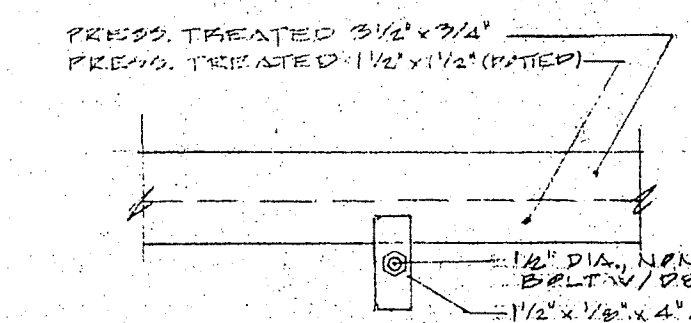
**1. ELEVATED WALK & LOWER AIR INTAKE SECTION** SCALE: 1/4" = 1'-0"



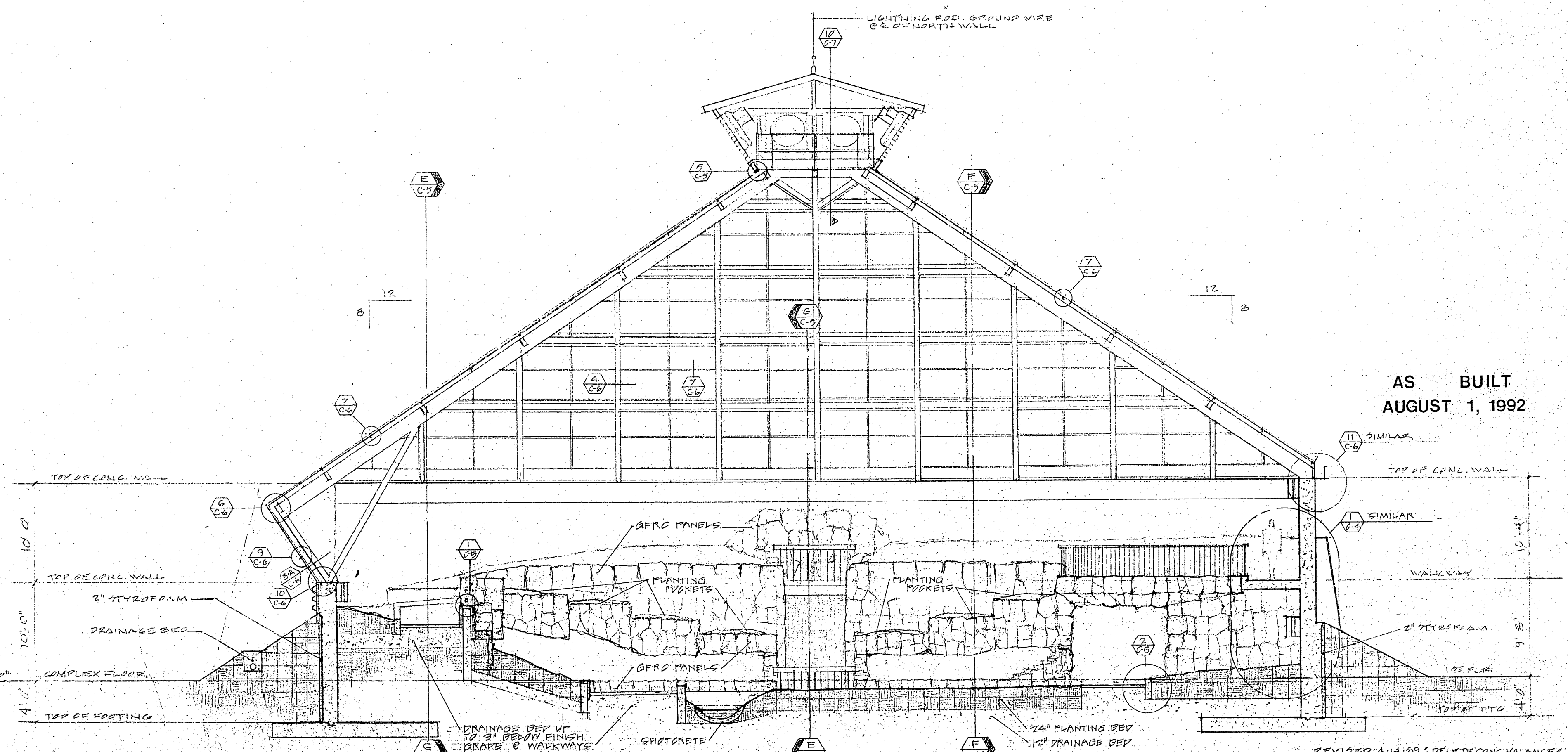
**2. WINTER SHUTTER ELEVATION** 1/4" = 1'-0"



**3. WINTER SHUTTER SECTION** 1/4" = 1'-0"



**4. SHUTTER BOLT DETAIL** 1/4" = 1'-0"

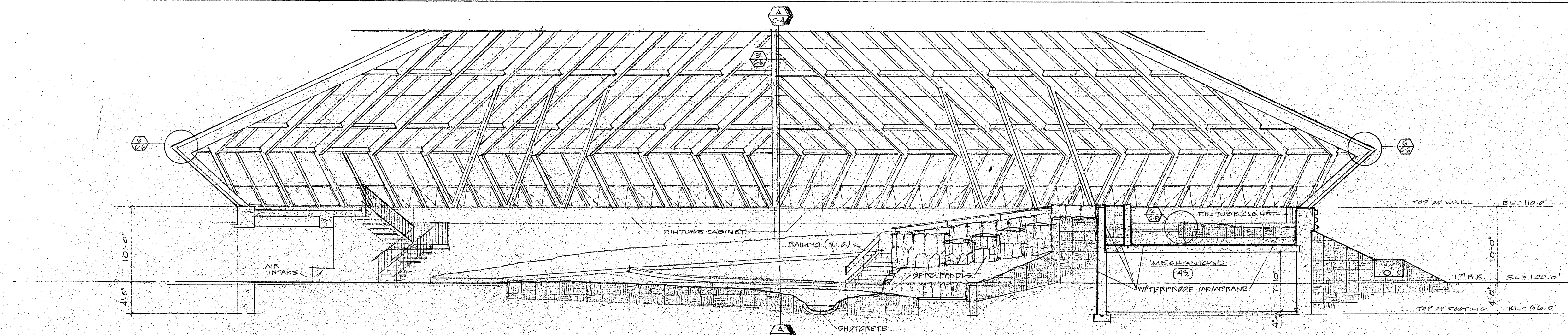


**B-B. SECTION TITIRO CONSERVATORY - WEST/EAST** SCALE: 1/8" = 1'-0"

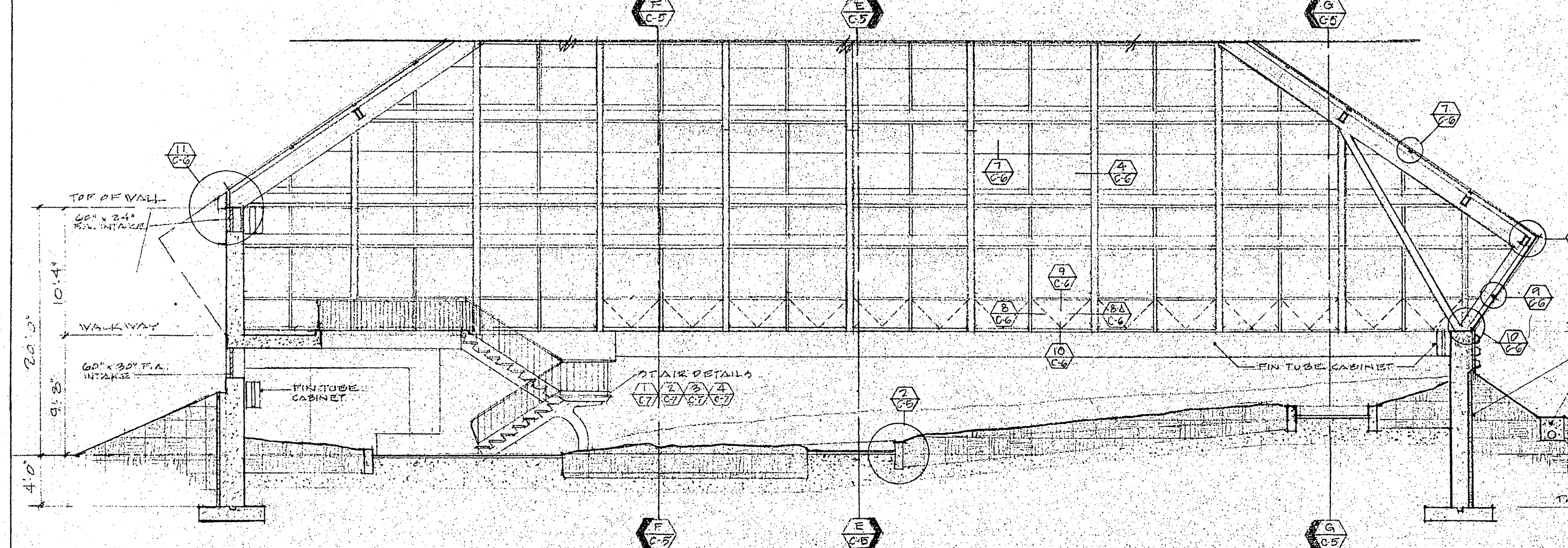
AS BUILT  
AUGUST 1, 1992

REVISED 11-18-88 BY DELWIDE CONE VALANCE  
REVISED 08-11-88 BY DELWIDE CONE VALANCE  
SCALE: 1/8" = 1'-0"  
11-18-88

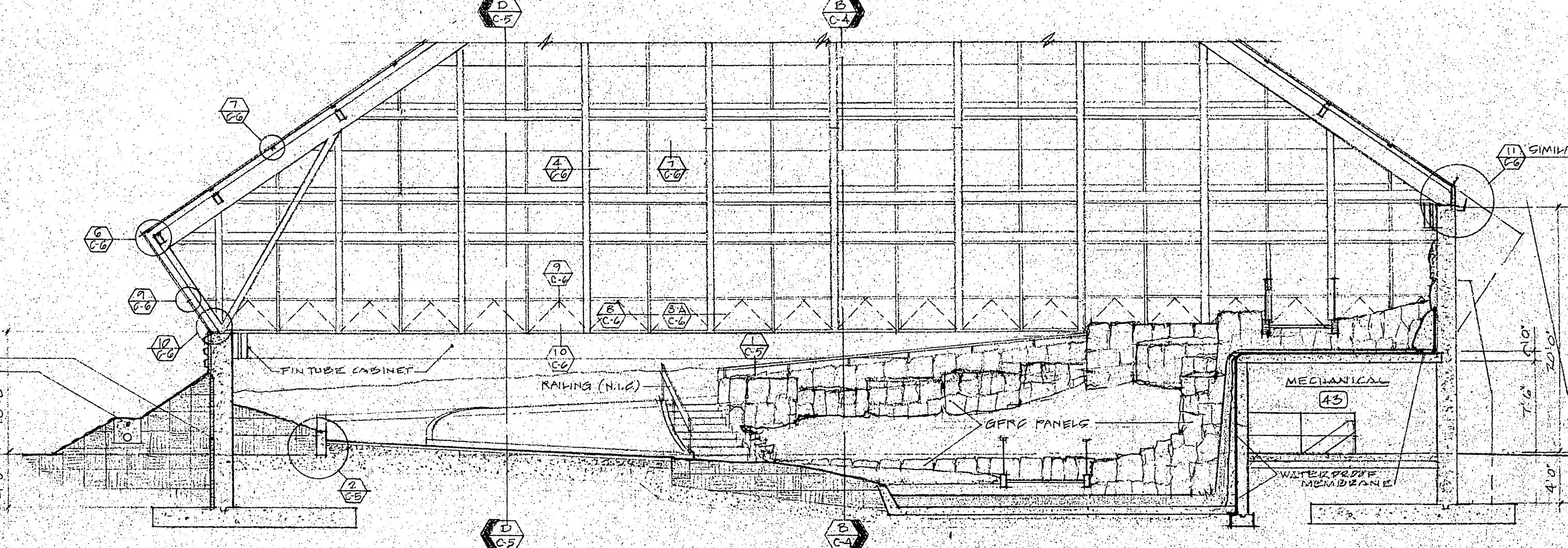




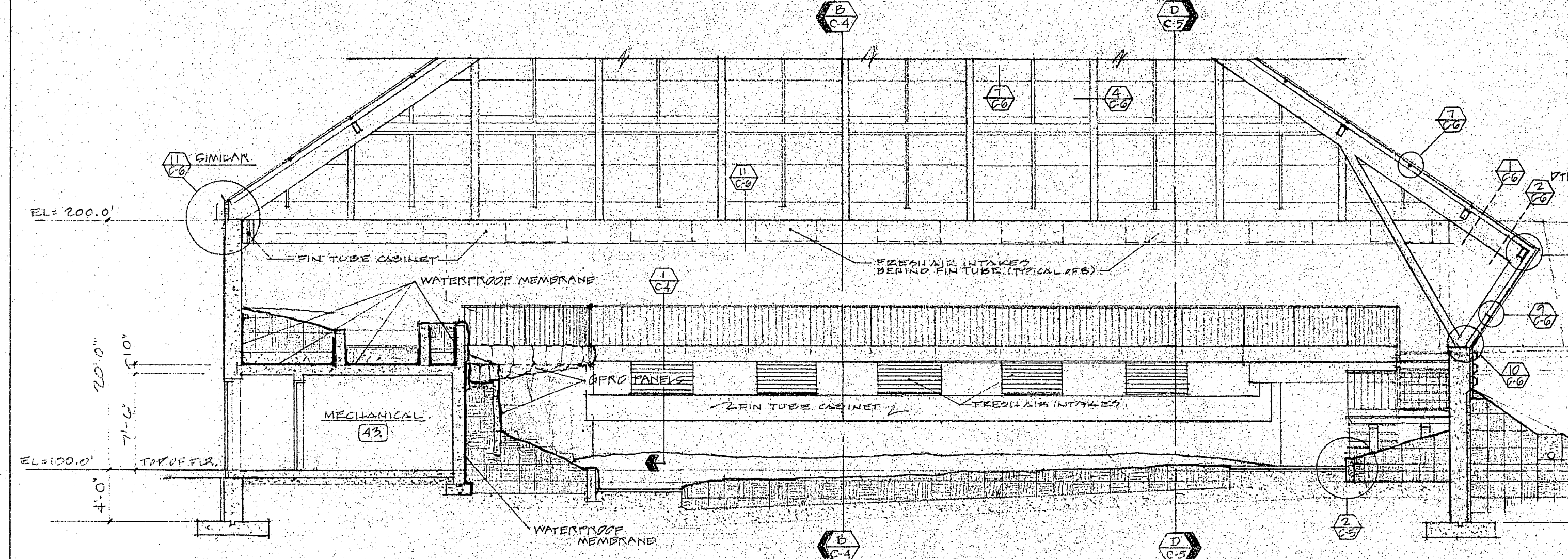
C-C. SECTION THRU CONSERVATORY & MECHANICAL ROOM SCALE: 1/8" = 1'-0"



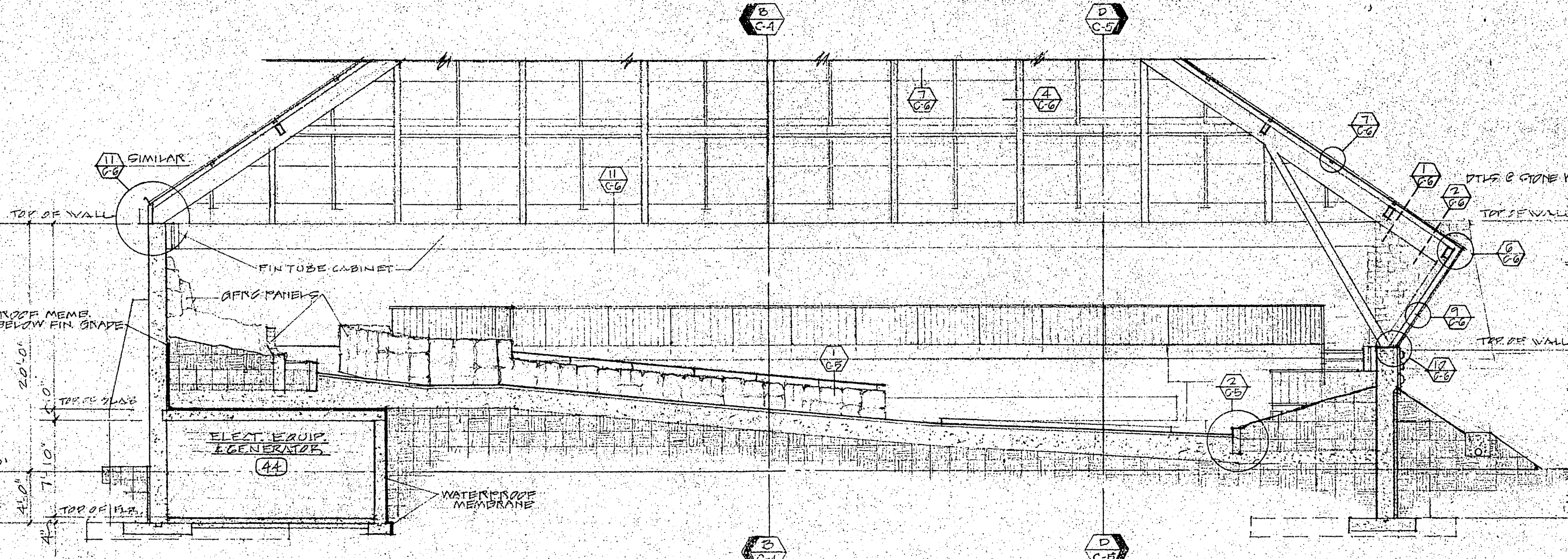
D-D. SECTION THRU CONSERVATORY & UPPER WALL SCALE: 1/8" = 1'-0"



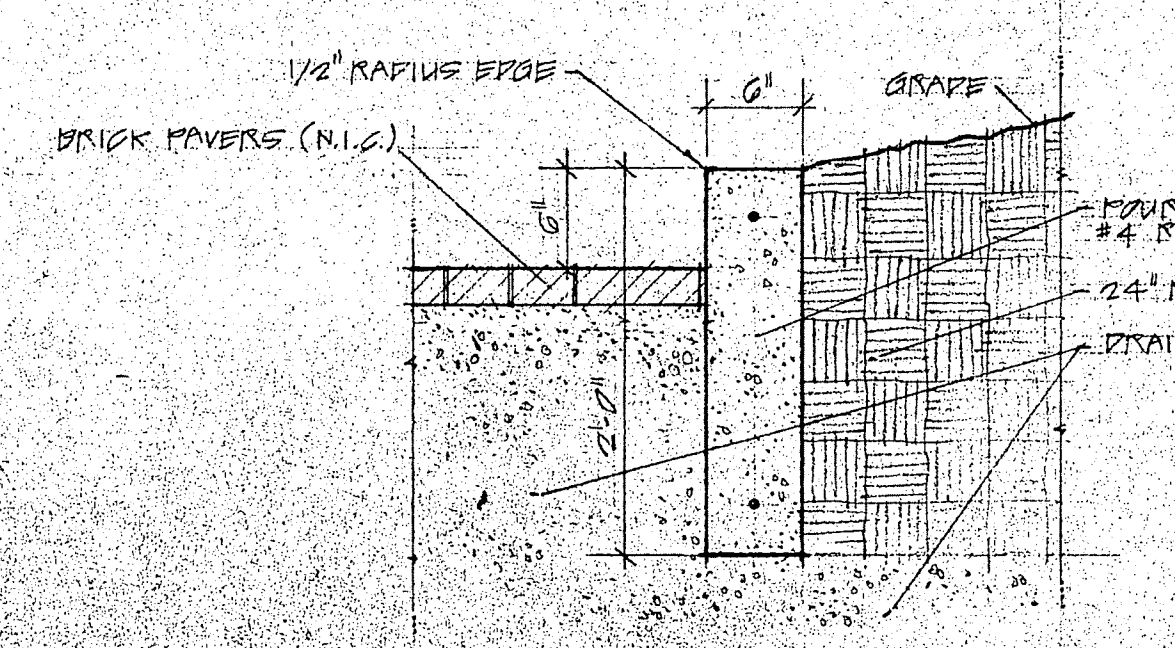
E-E. SECTION THRU CONSERVATORY & WATER FALL SCALE: 1/8" = 1'-0"



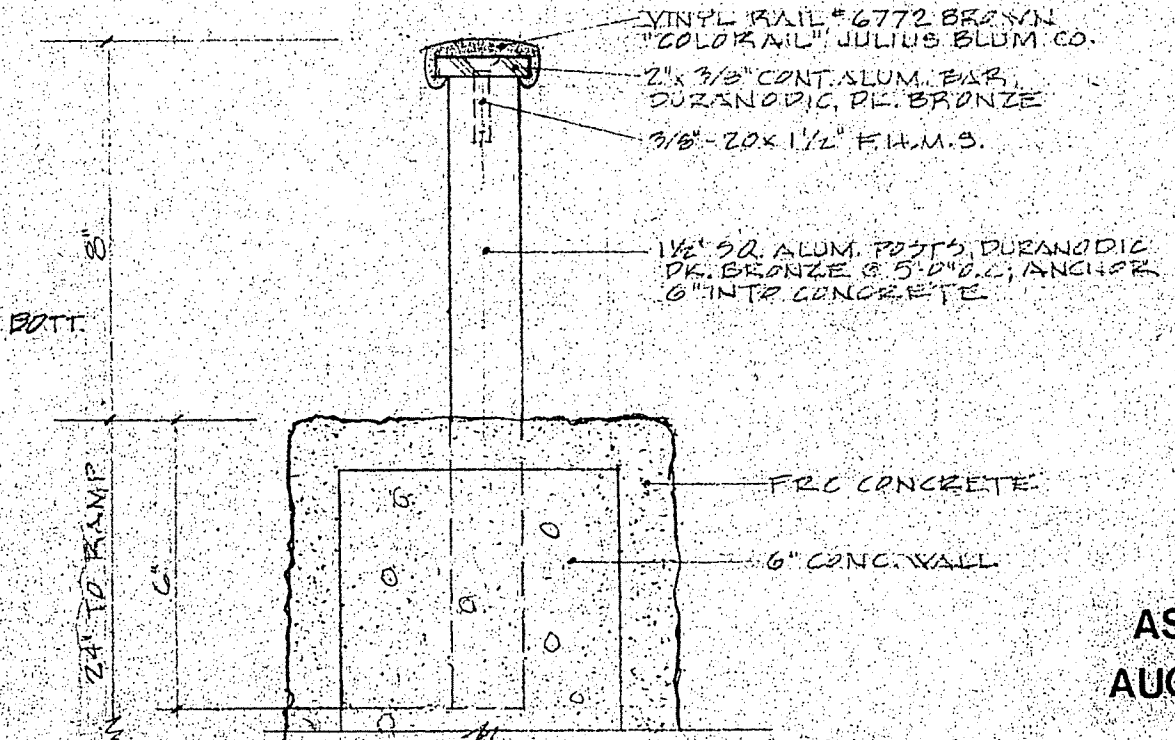
F-F. SECTION THRU CONSERVATORY & UPPER WALK & MECH. RM. SCALE: 1/8" = 1'-0"



G-G. SECTION THRU CONSERVATORY & RAMPED WALKWAY SCALE: 1/8" = 1'-0"



2. CURB DETAIL SCALE: 1" = 1'-0"



1. RAMP RAIL DETAIL SCALE: 1" = 1'-0"

AS BUILT  
AUGUST 1, 1992

REVISION 1: 12.83. REMOVE CONC. VALANCE & SECTION DEEP

11-18-88

**NOTES & SPECIFICATIONS**

(A) GLAZING FRAMEWORK: ALL ALUMINUM MEMB. SHALL BE FINISHED W/ KYNAR FINISH. MEMBERS SHALL BE EXTRUDED ALUM. PER DETAILS OR AS MANUF. BY QUALIFIED SUPPLIER OR APPROVED EQUAL. PURLIN MEMB. SHALL BE CAPLED Rafter MEMB. SHALL HAVE SNAP-ON CAPS W/ NO EXPOSED FASTENERS.

(B) INSULATING GLASS: LOW IRON CLEAR GLAZING, W/ HEAT STRENGTHENED EXTERIOR LITE, W/ SEALED AIR SPACE, 2 LAYERS 1/4" GLASS LAMINATED W/ POLYVINYL BUTYRAL. BR BRILLAGE.

(C) GLAZING STRIPS: TYPE I, HEAT CURED, BLACK SILICONE RUBBER TYPE A 50 4 5 DURAMETER.

(D) SETTING BLOCKS: TYPE II, EXTRUDED, BLACK, SILICONE RUBBER TYPE A 50 5 DURAMETER.

(E) SEALANT: A STM 201 202-TAL ALUMINUM, ASTM A193 B5 300 SERIES STAINLESS STEEL OR ASTM B31 ALUM. RIVETS 1/2" REQUIRED FOR PROPER CONNECTION.

(F) SEALANTS: SHALL BE COMPATIBLE W/ SUBSTRATES & DEVELOP FULL ADHESIVE STRENGTH WHEN SUBJECT TO DESIGN LOAD MOVEMENTS & SHALL BE APPLIED IN ACCORDANCE W/ MANUFACTURER'S SPECIFICATIONS.

(G) STRUCTURAL SEALANT: 100% POLYSILOXANE SILICONE SEALANT, NEUTRAL CURE, MEDIUM TO HIGH MODULUS.

(H) NON-STRUCTURAL & WEATHER SEALANTS: SILICONE SEALANTS APPLIED IN ALL JOINTS & WEATHER SPECIFICATIONS.

(I) DISSIMILAR METAL CONNECTIONS: SEPARATE W/ ASPHALTIC PAINT, NEOPRENE OR APPROVED NON-CONDUCTIVE MATERIAL.

(J) ALUMINUM CLAD PANEL: 0.04" KYNAR FINISHED ALUMINUM LAMINATED TO 2011 PLYSIL FROM INSULATION, THICKNESS AS INDICATED ON DETAILS.

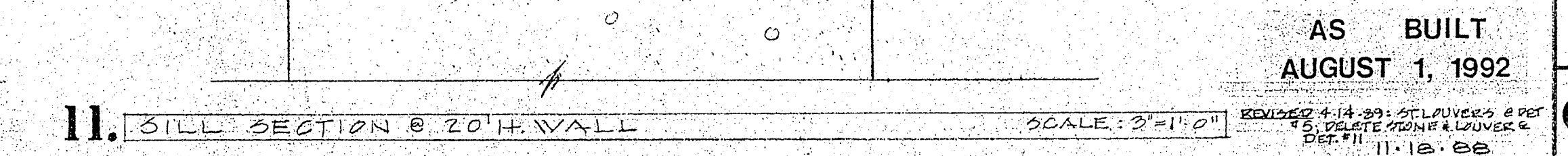
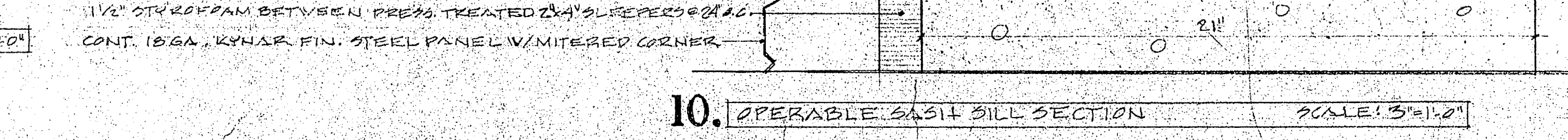
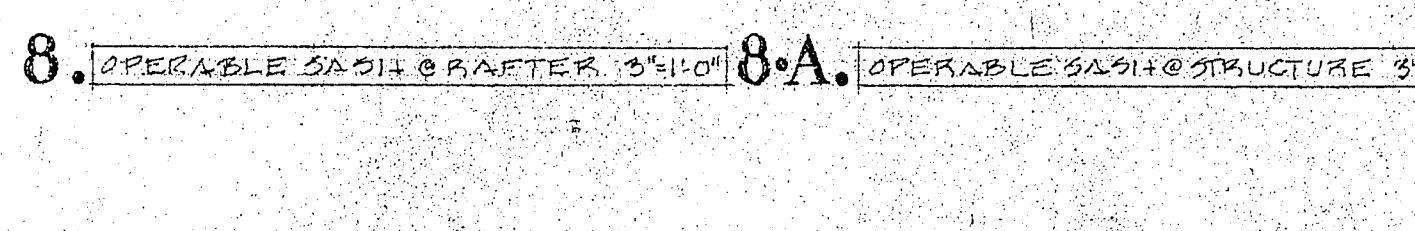
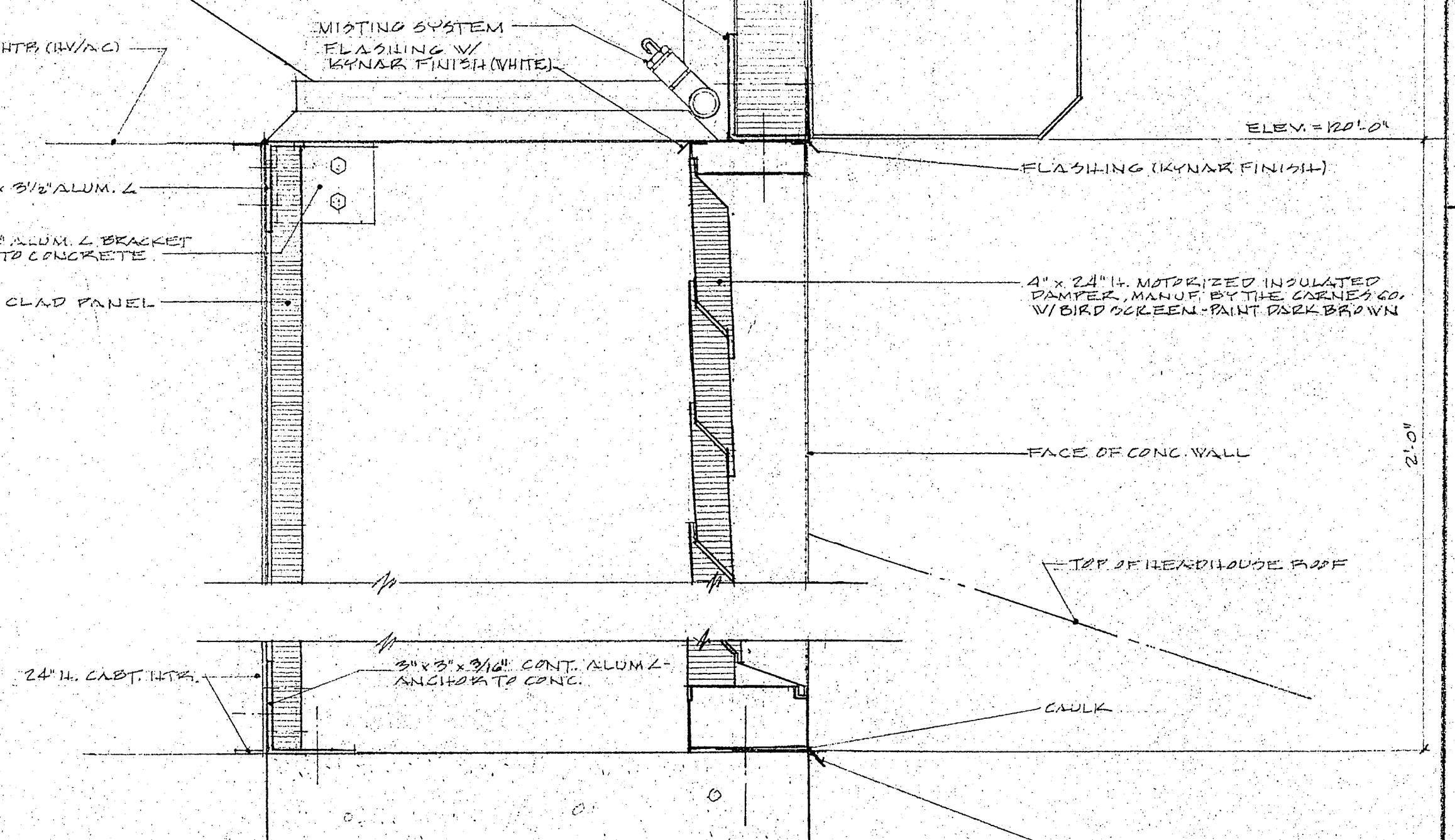
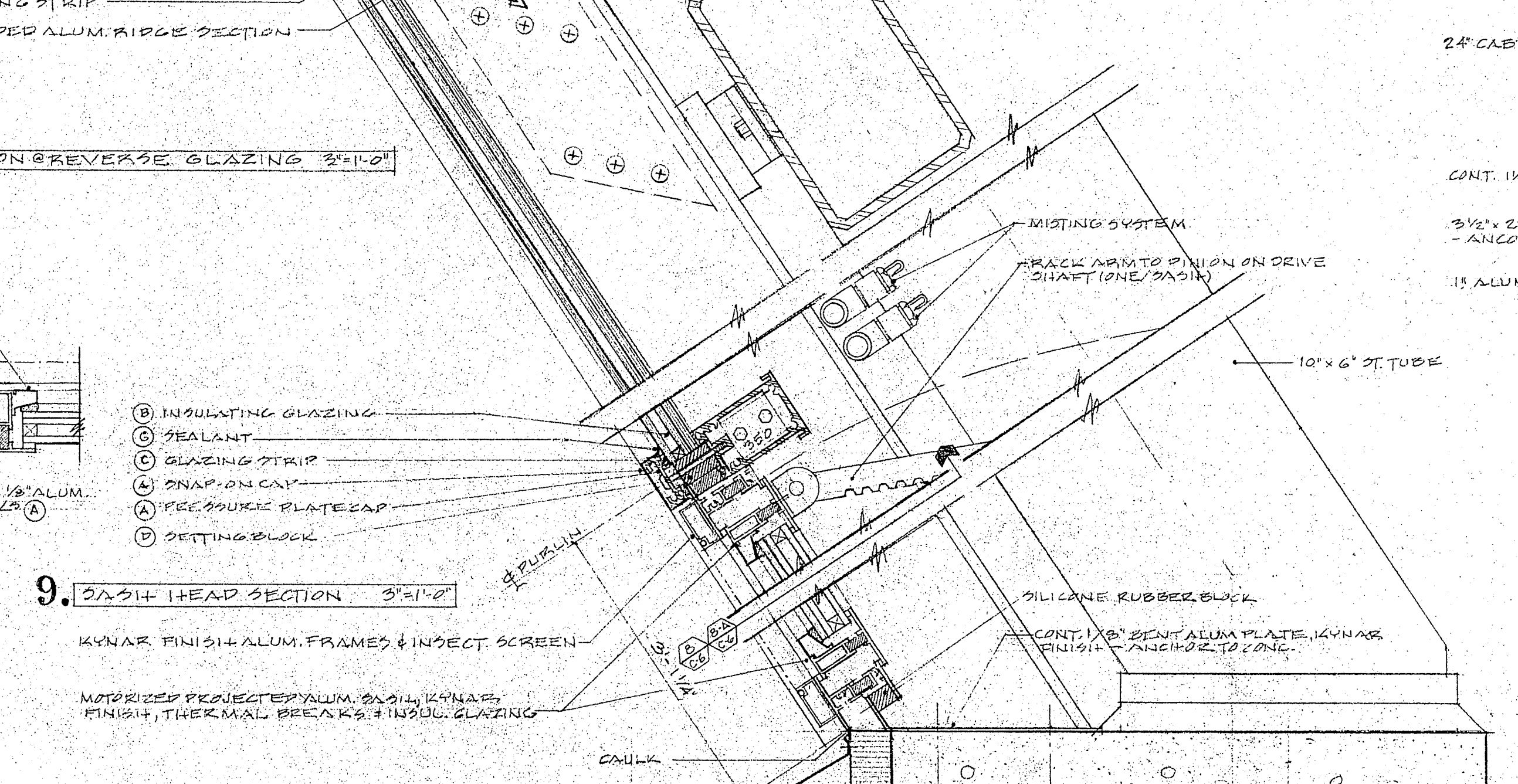
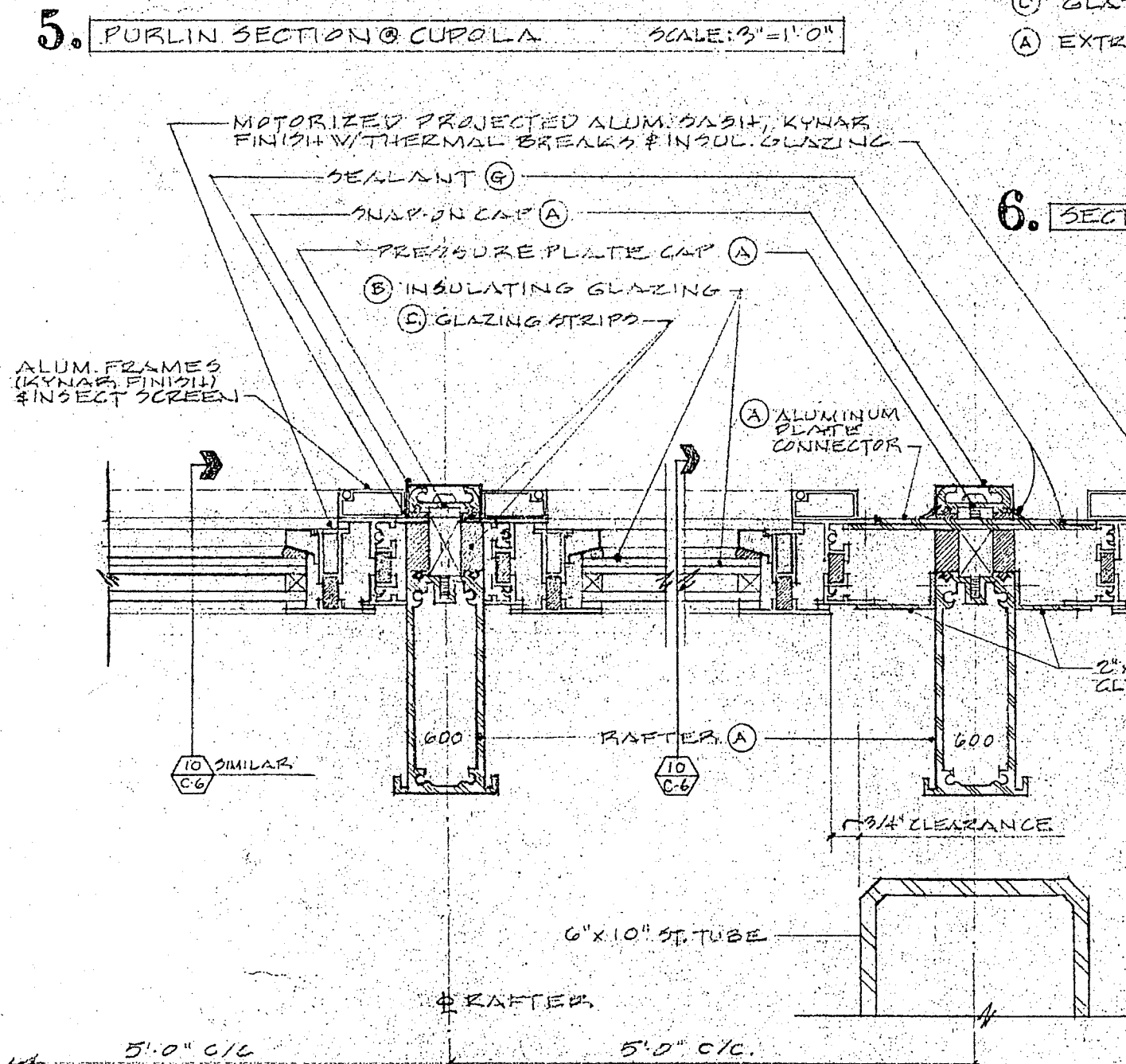
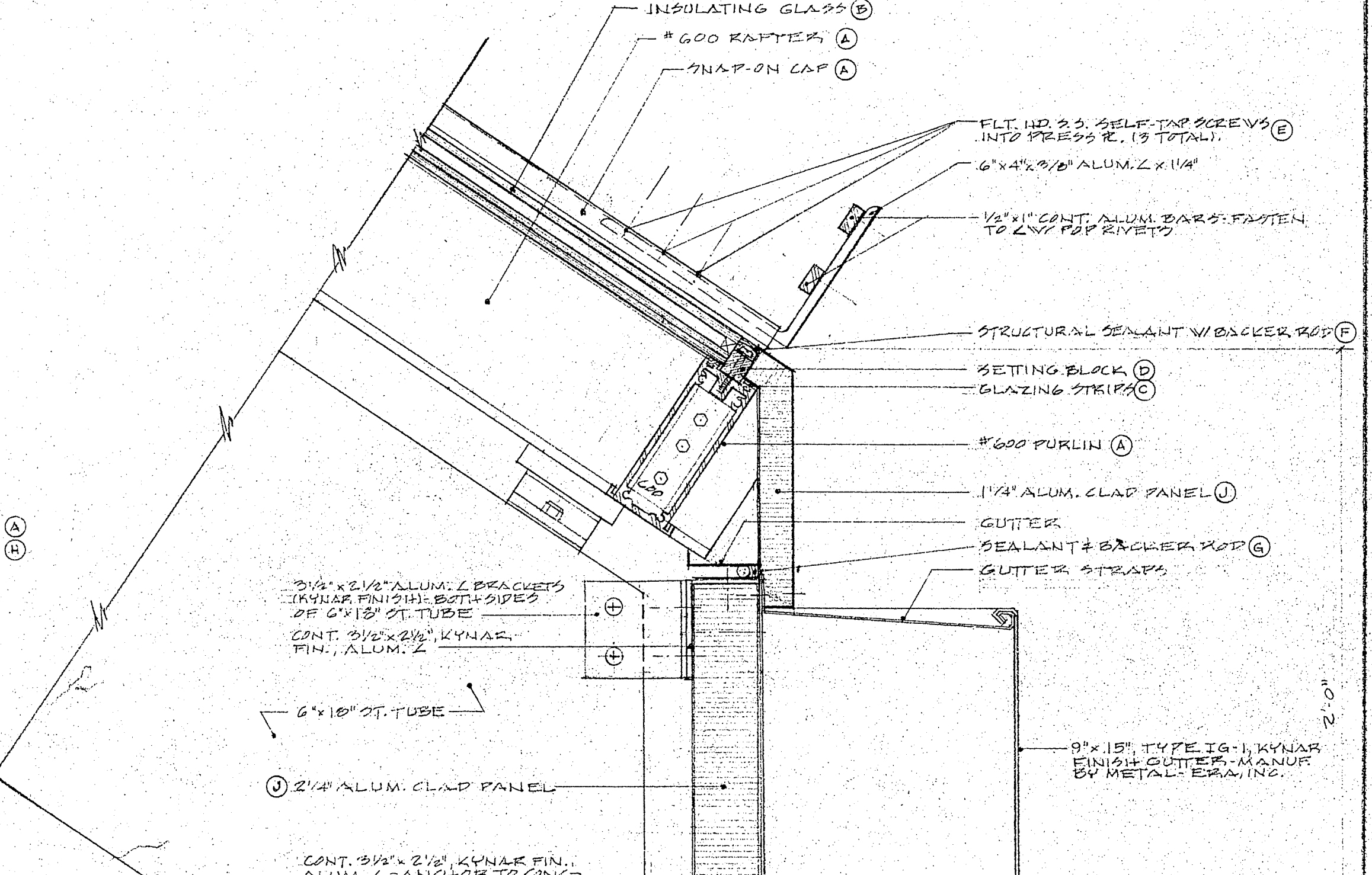
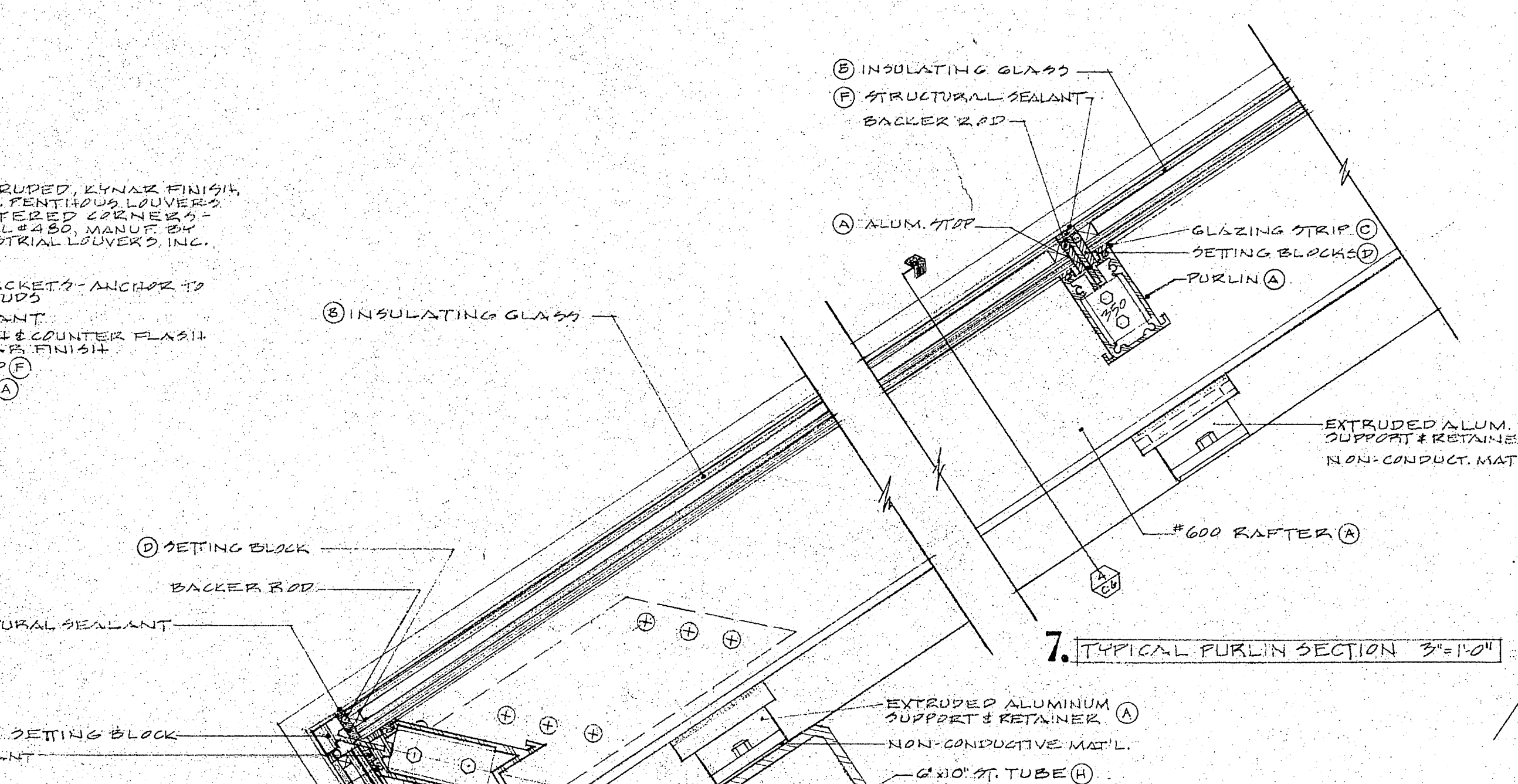
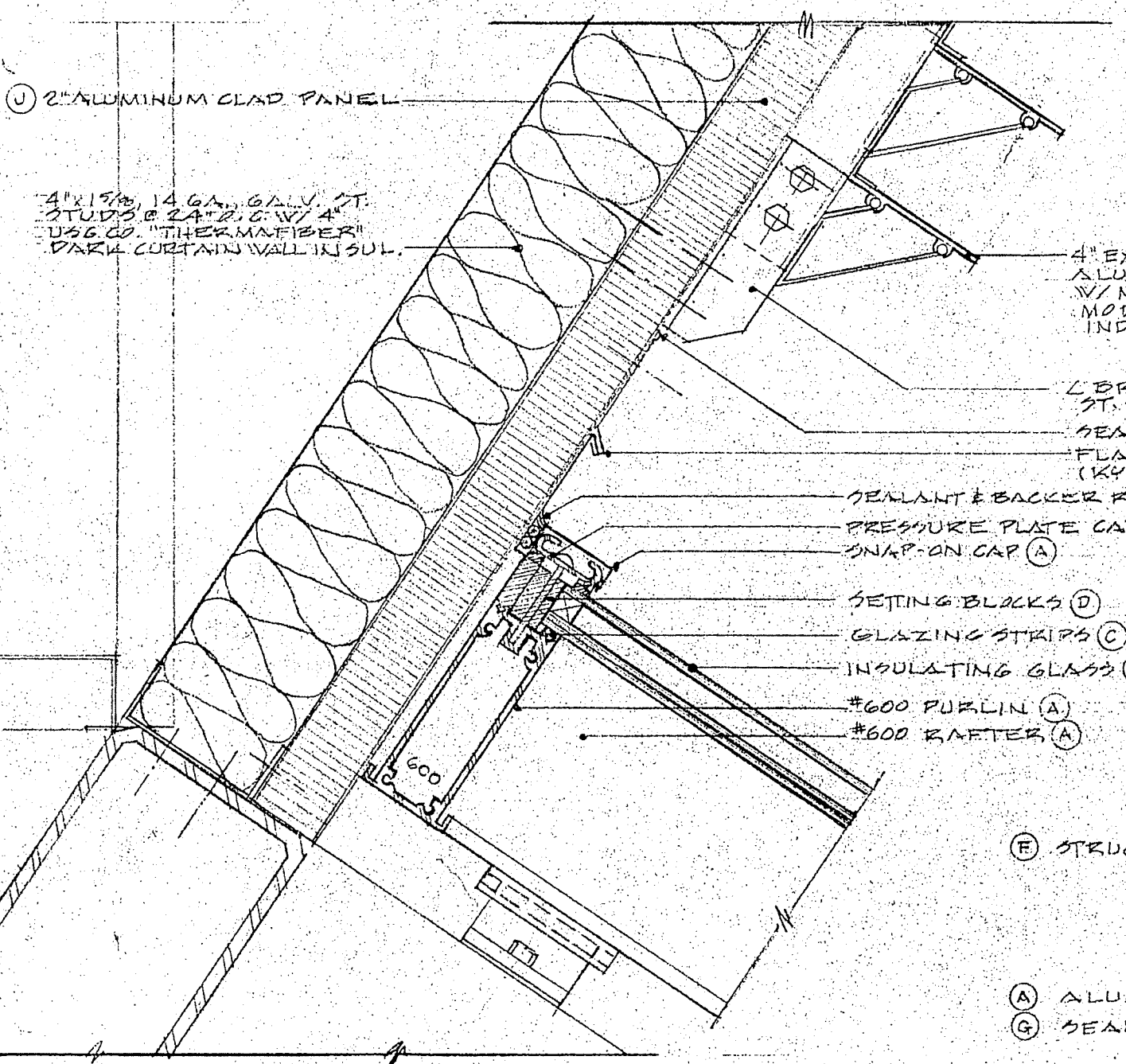
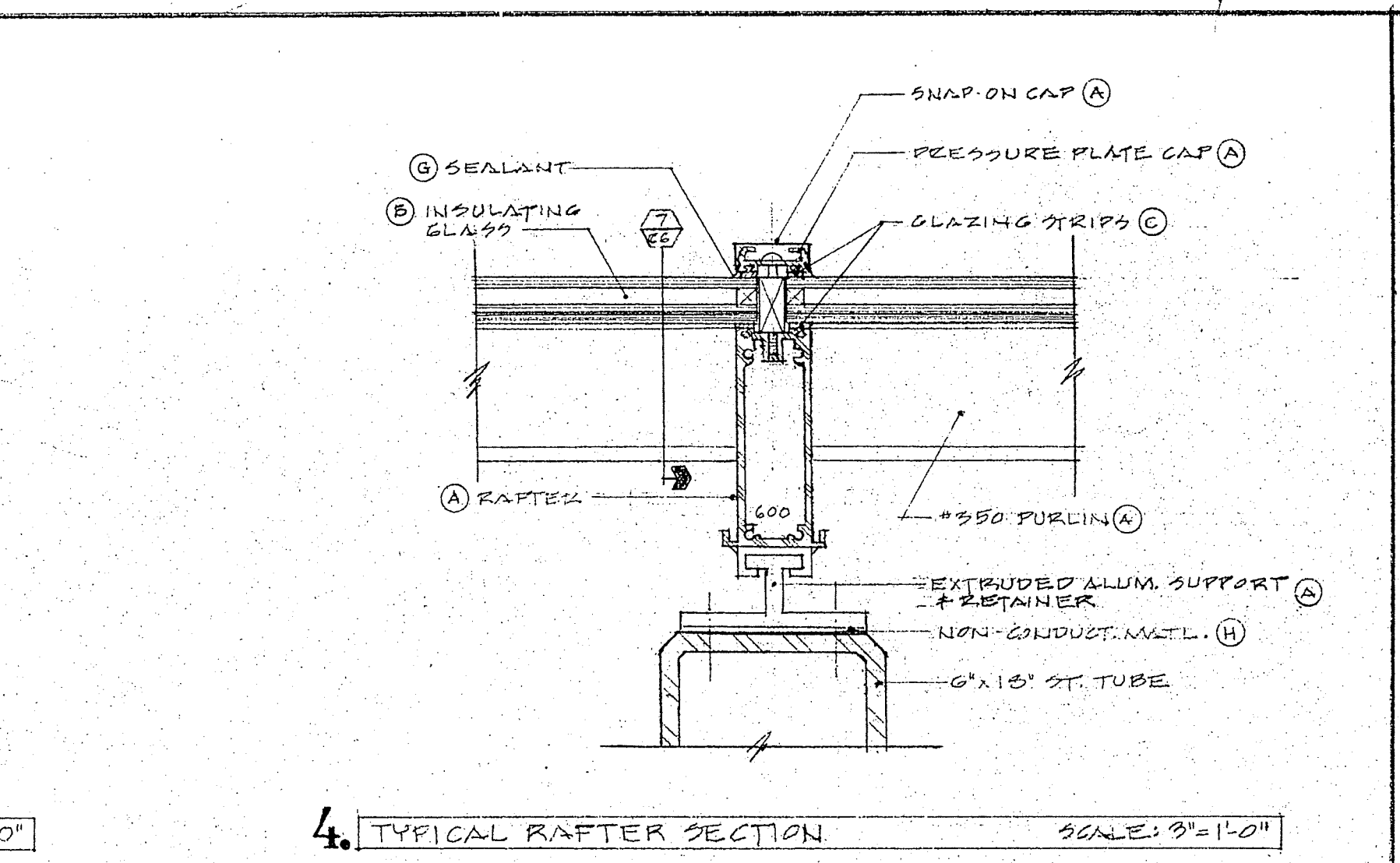
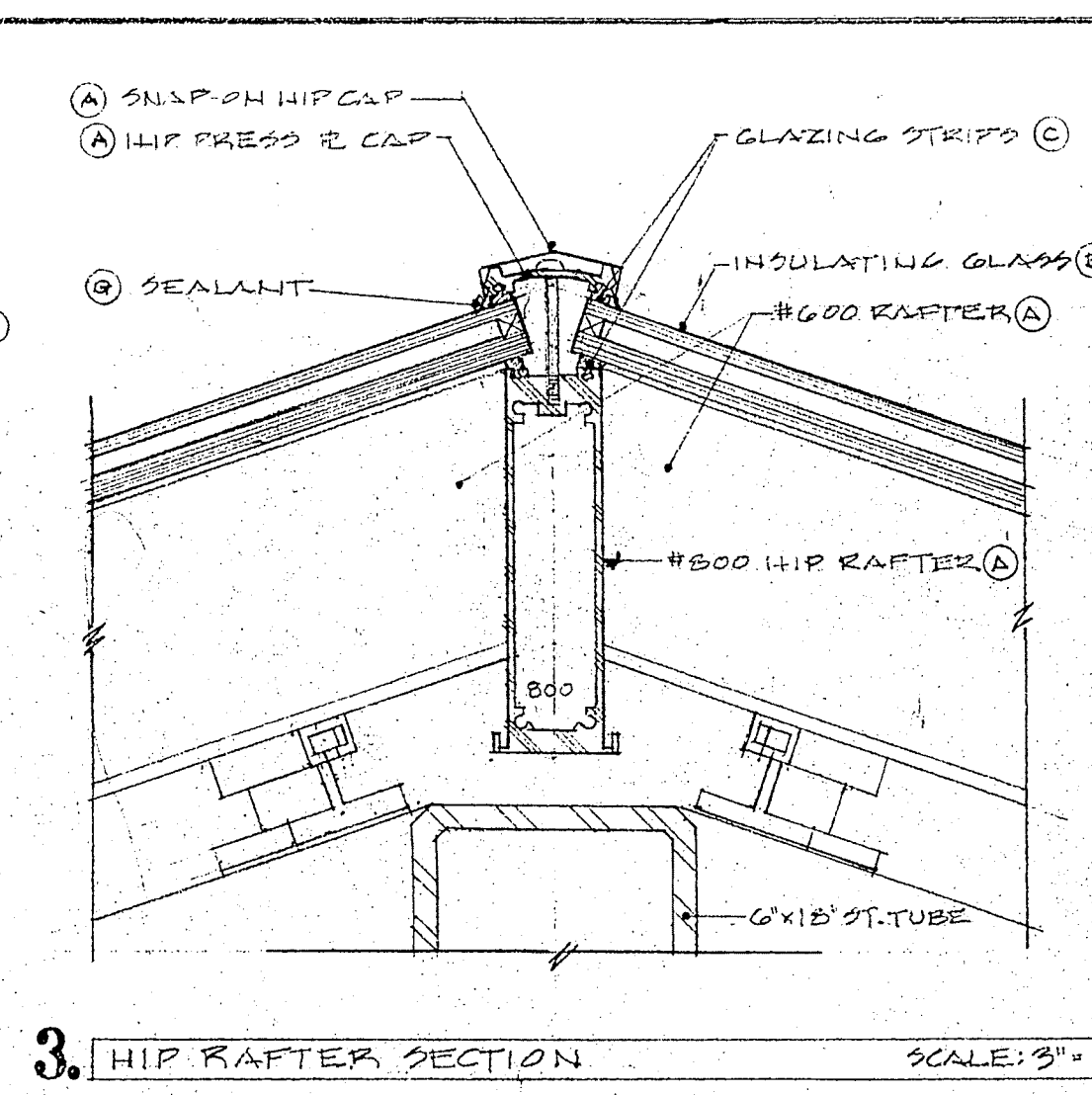
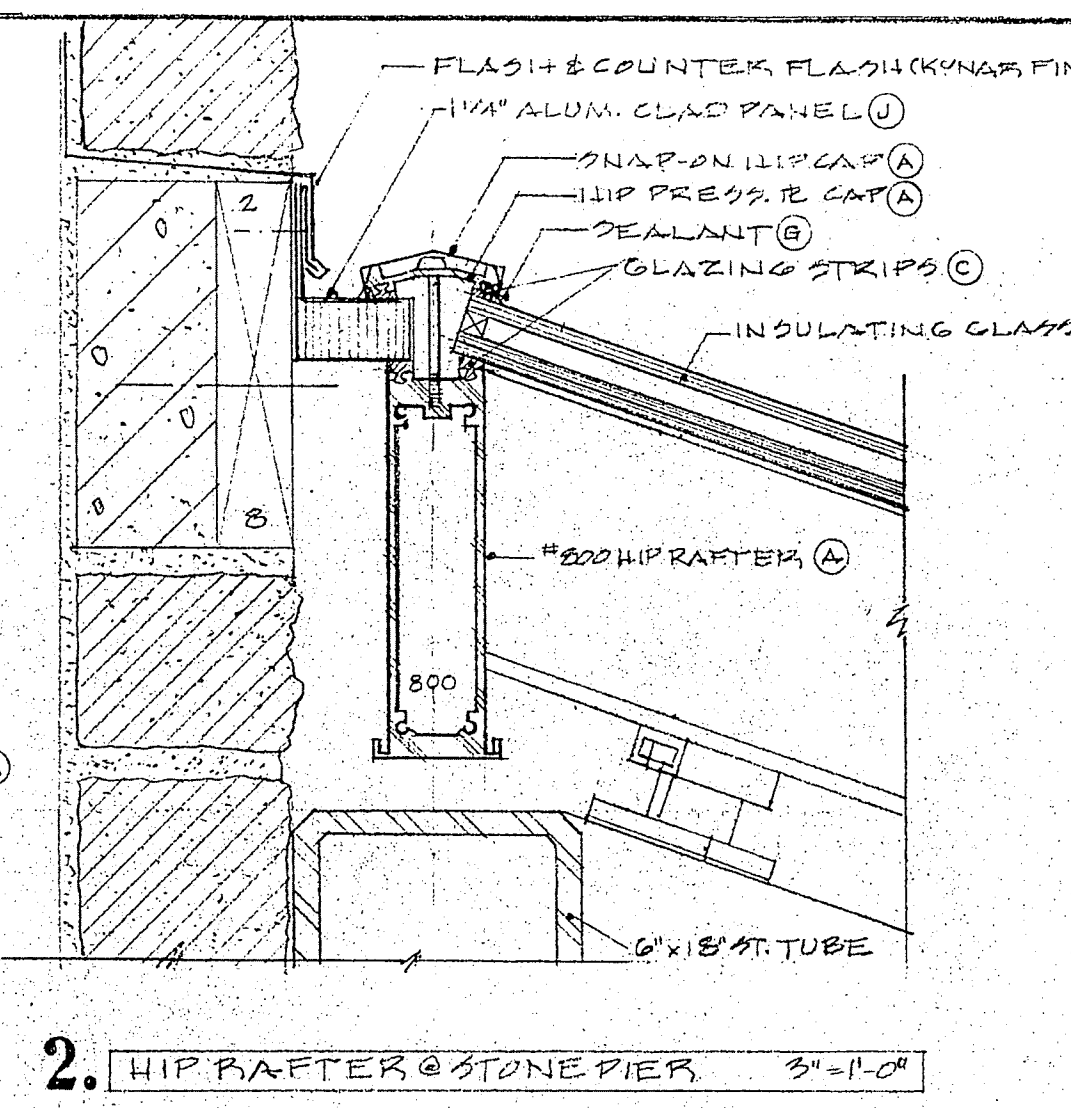
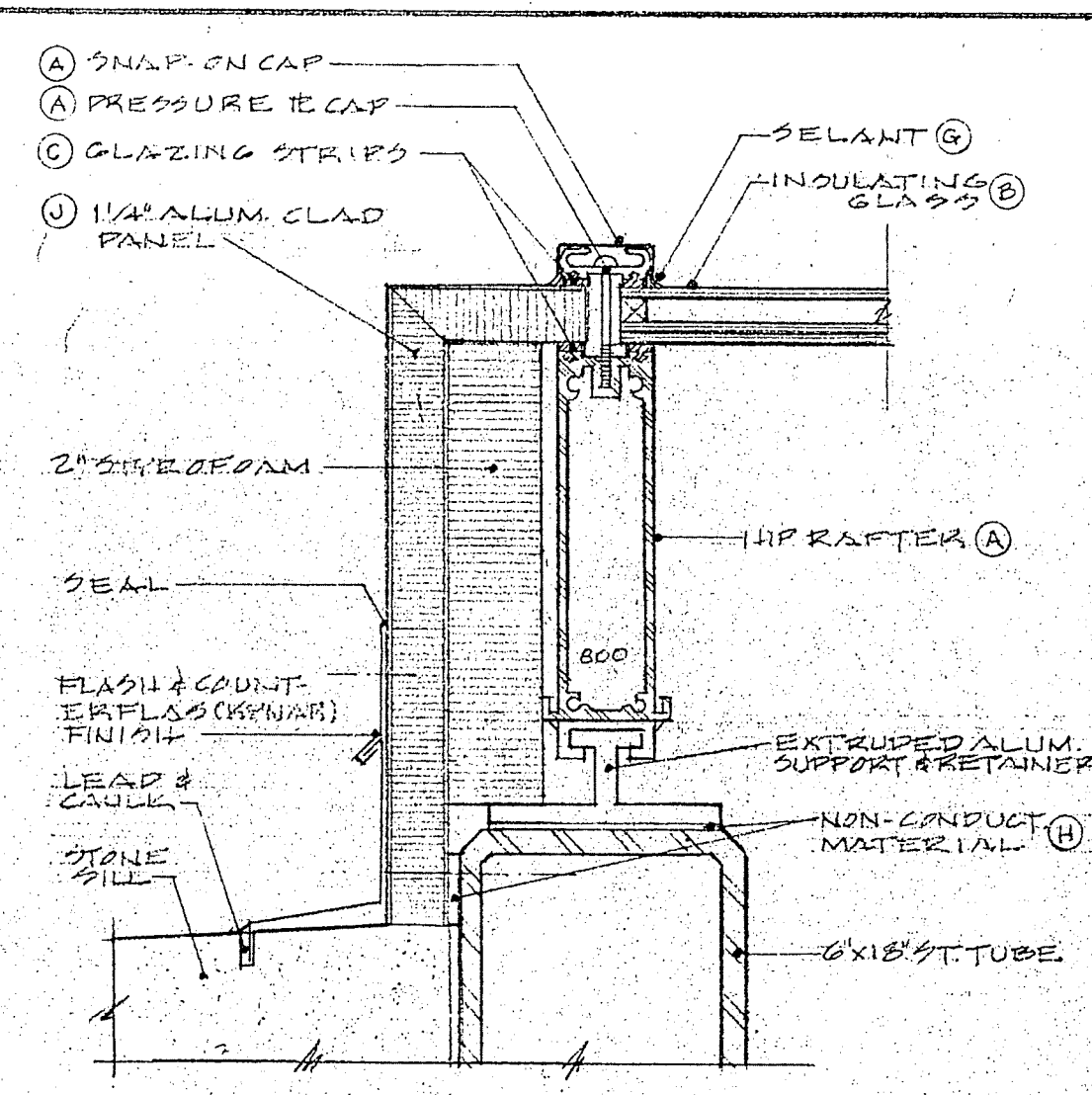
**SKYLIGHT/CONSERVATORY CONTRACTOR QUALIFICATIONS**

ENGINEERING, FABRICATION, FINISHING PREPARATION AT THE JOB SITE, ERECTION & GLAZING OF THE CONSERVATORY & SKYLIGHT SYSTEMS SHALL BE DONE BY THE CONTRACTOR/ SKYLIGHT MANUFACTURER.

THE MANUFACTURER SHALL HAVE & SUBMIT A RECORD OF 5 YEARS EXPERIENCE IN THIS TYPE OF WORK.

**WARRANTIES**

THE INSTALLED SYSTEMS SHALL BE FREE FROM DEFECTS IN DESIGN, MATERIAL, CONSTRUCTION & LEAKAGE. FINISHED SHALL NOT COLOR, FADE, CHIP OR PIT, AND SEALANTS SHALL NOT BLEED, LOOSE, CRACK, OR OVER HARDEN FOR 10 YEARS AFTER SUBSTANTIAL COMPLETION.



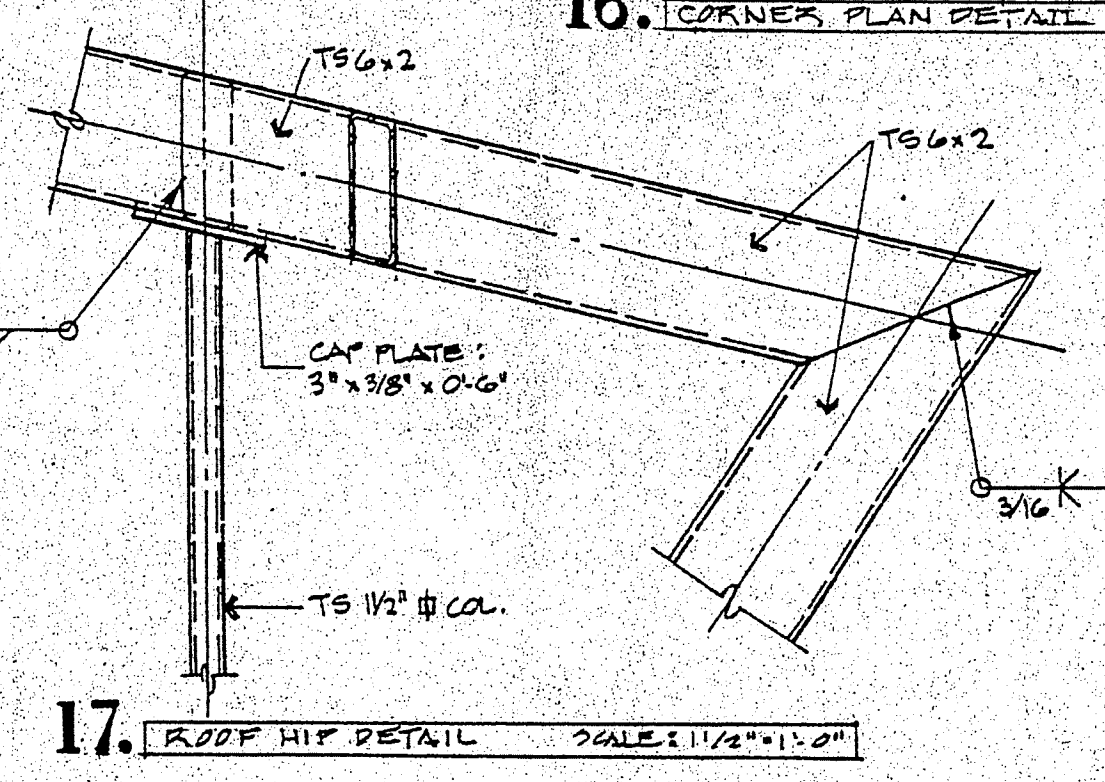
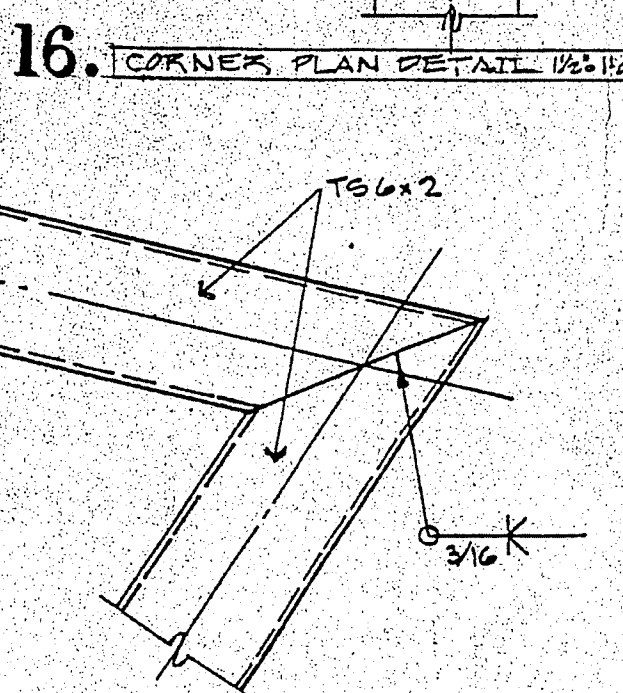
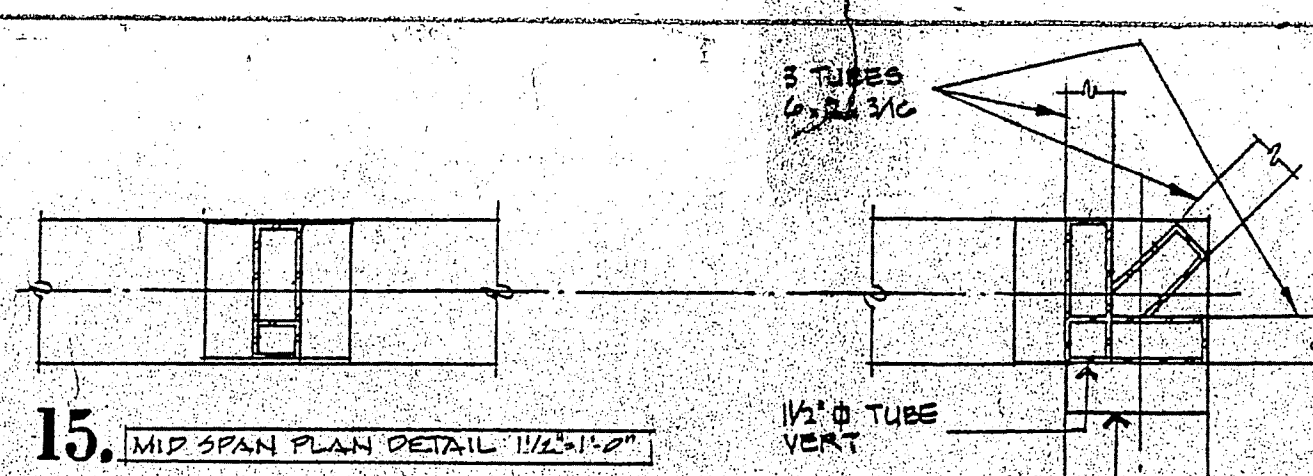
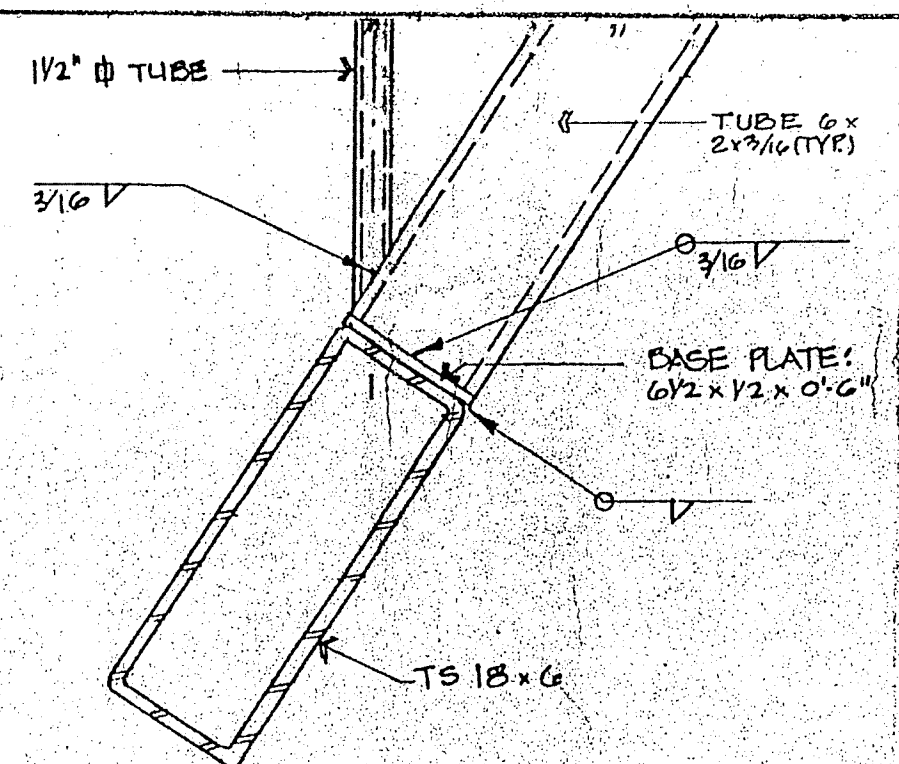
STUART WILLIAM GLEASER, ARCHITECT, INC. 702 NORTH BLACKHAWK AVENUE MADISON, WISCONSIN

OLBRICH BOTANICAL COMPLEX 3325 ATWOOD AVENUE MADISON, WISCONSIN

AS BUILT AUGUST 1, 1992

REVISED 4.14.99, 5.12.99, 6.15.99, 7.15.99, 8.15.99, 9.15.99, 10.15.99, 11.15.99, 12.15.99

C-6.

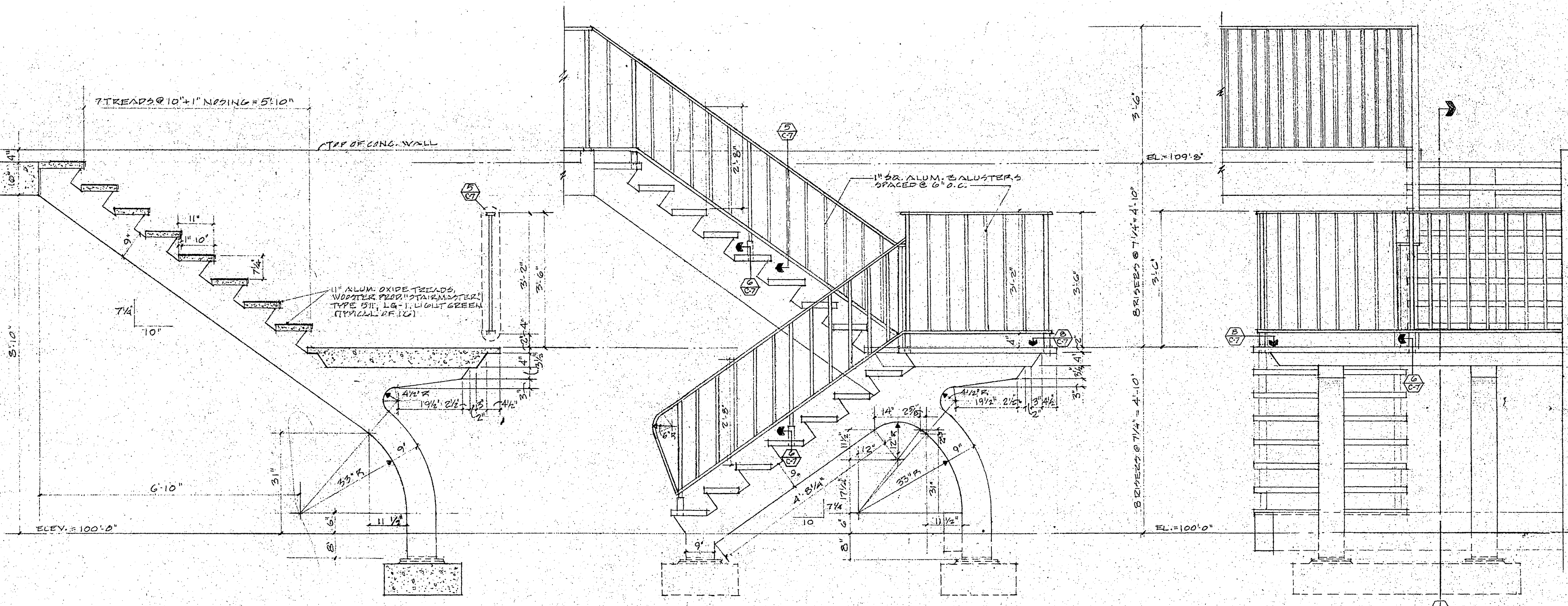


14. CUPOLA FRAMING DETAIL SCALE: 1/2" = 1'-0"

15. MID SPAN PLAN DETAIL SCALE: 1/2" = 1'-0"

16. CORNER PLAN DETAIL SCALE: 1/2" = 1'-0"

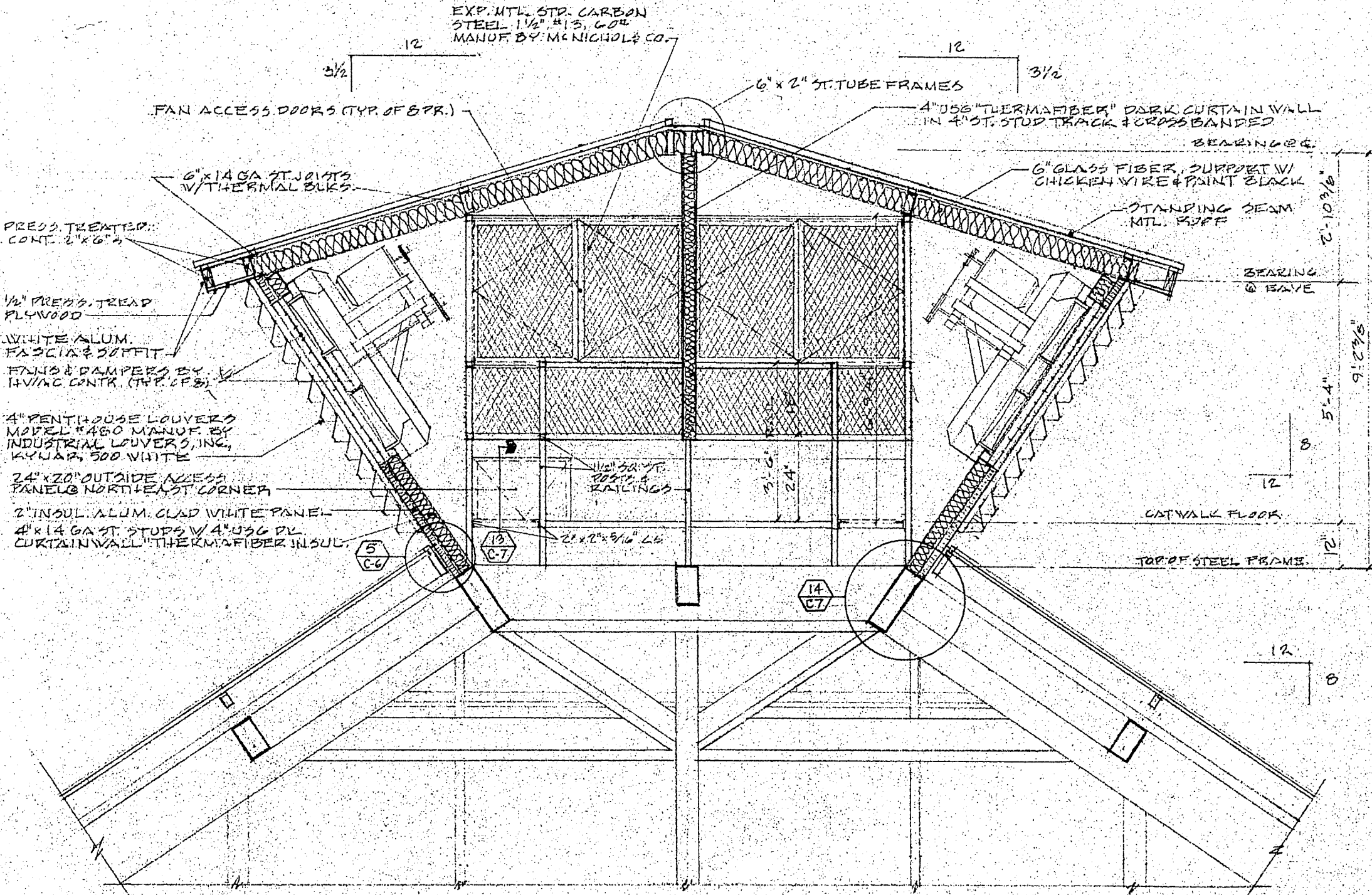
17. ROOF HIP DETAIL SCALE: 1/2" = 1'-0"



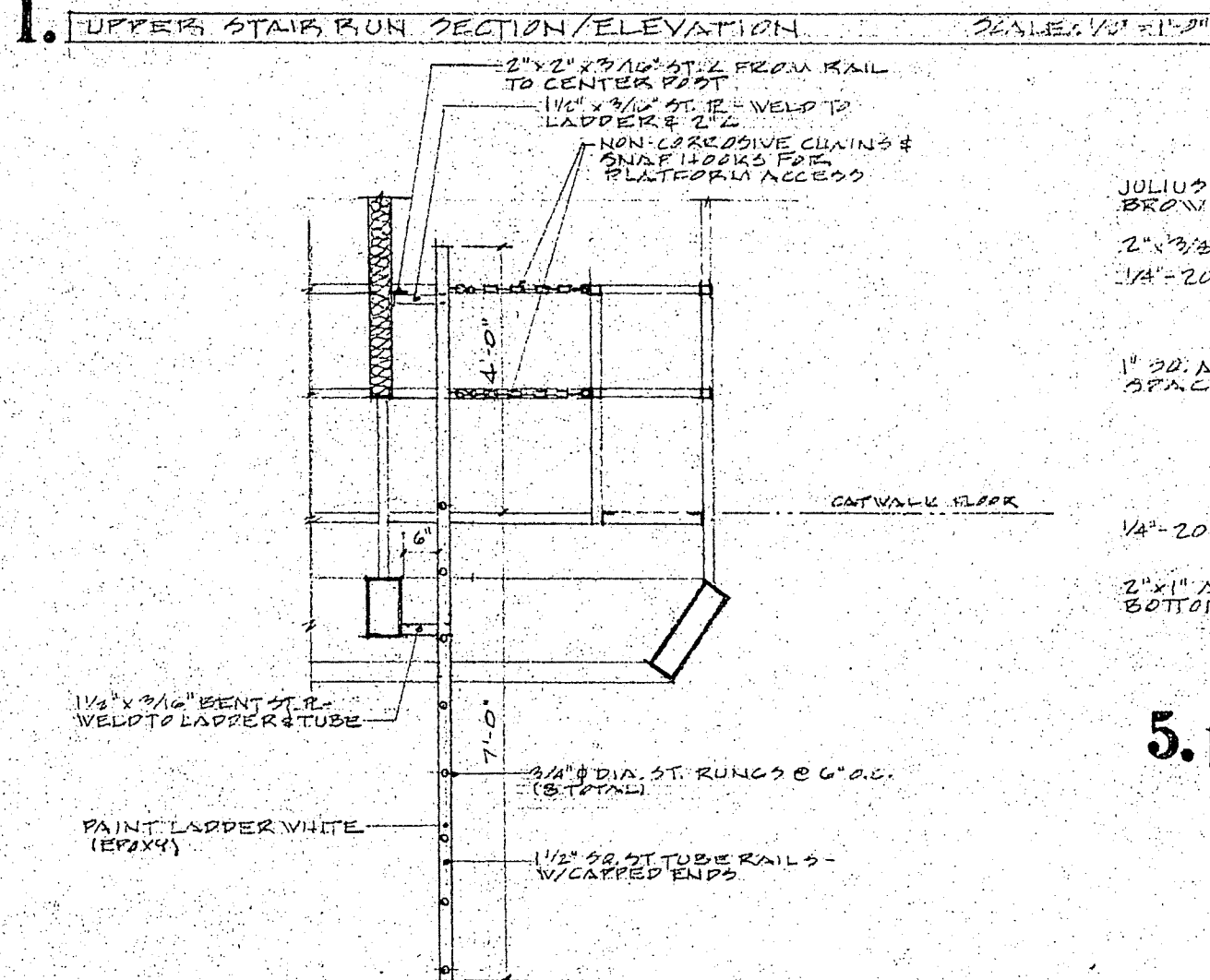
1. UPPER STAIR RUN SECTION/ELEVATION SCALE: 1/2" = 1'-0"

2. STAIR ELEVATION SCALE: 1/2" = 1'-0"

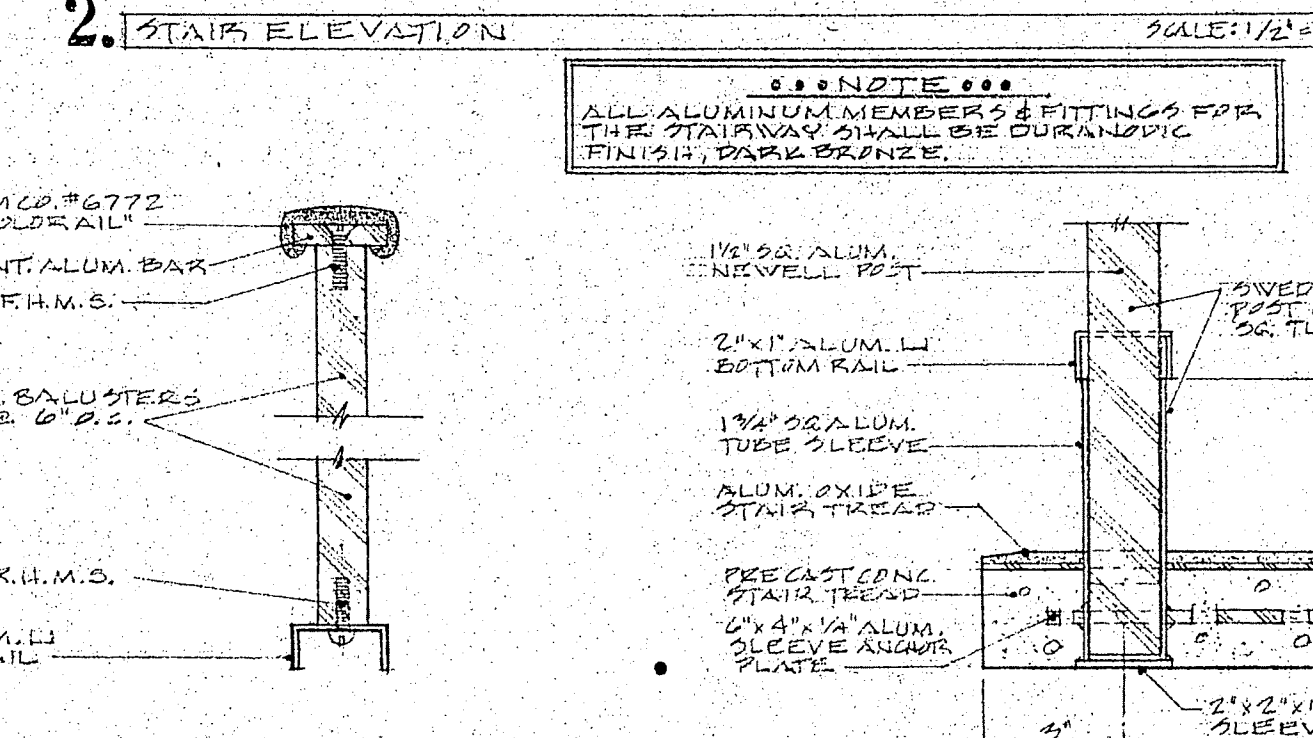
3. STAIR ELEVATION SCALE: 1/2" = 1'-0"



10. CONSERVATORY CUPOLA SECTION SCALE: 3/8" = 1'-0"

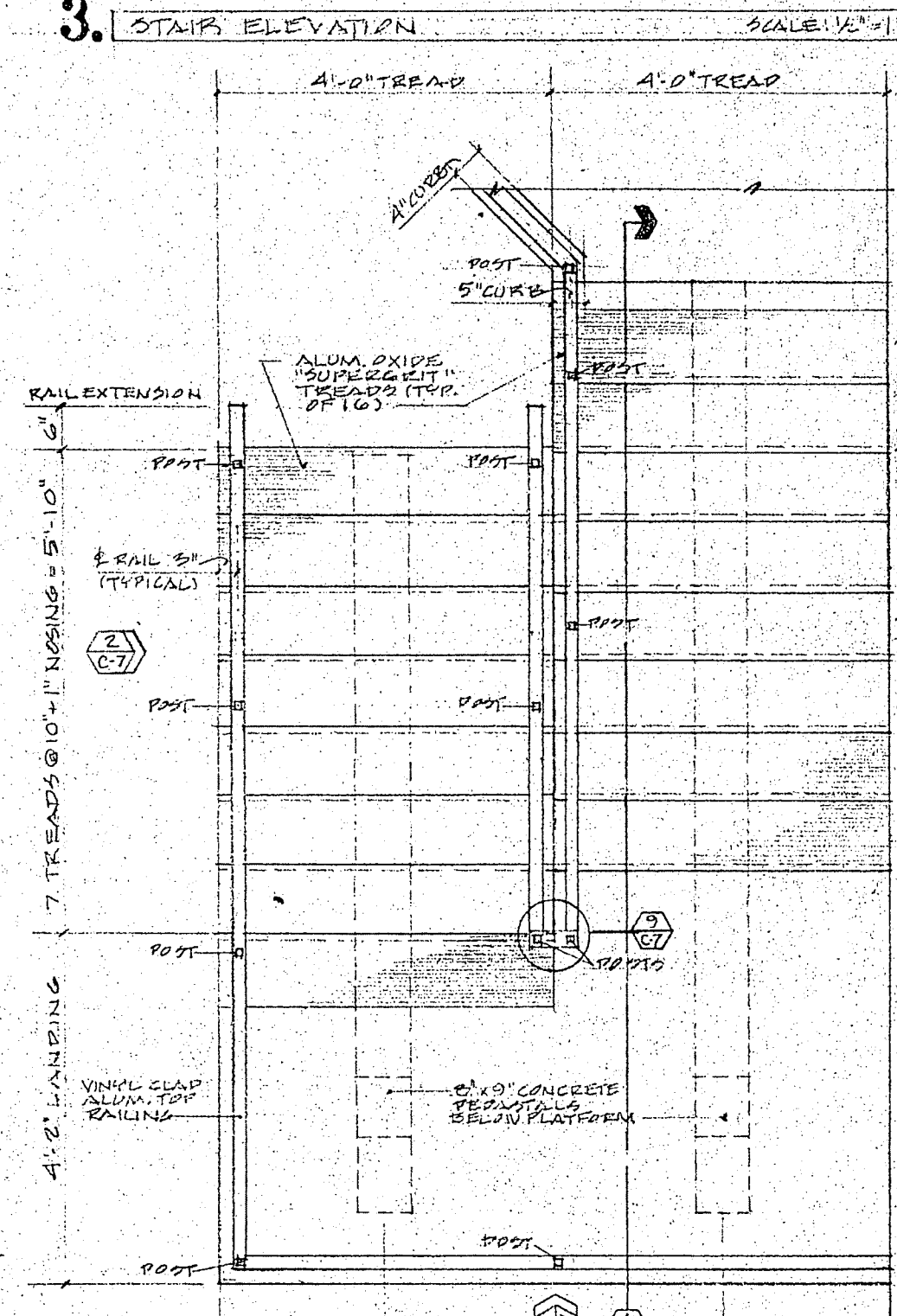


12. ACCESS LADDER SECTION SCALE: 3/8" = 1'-0"



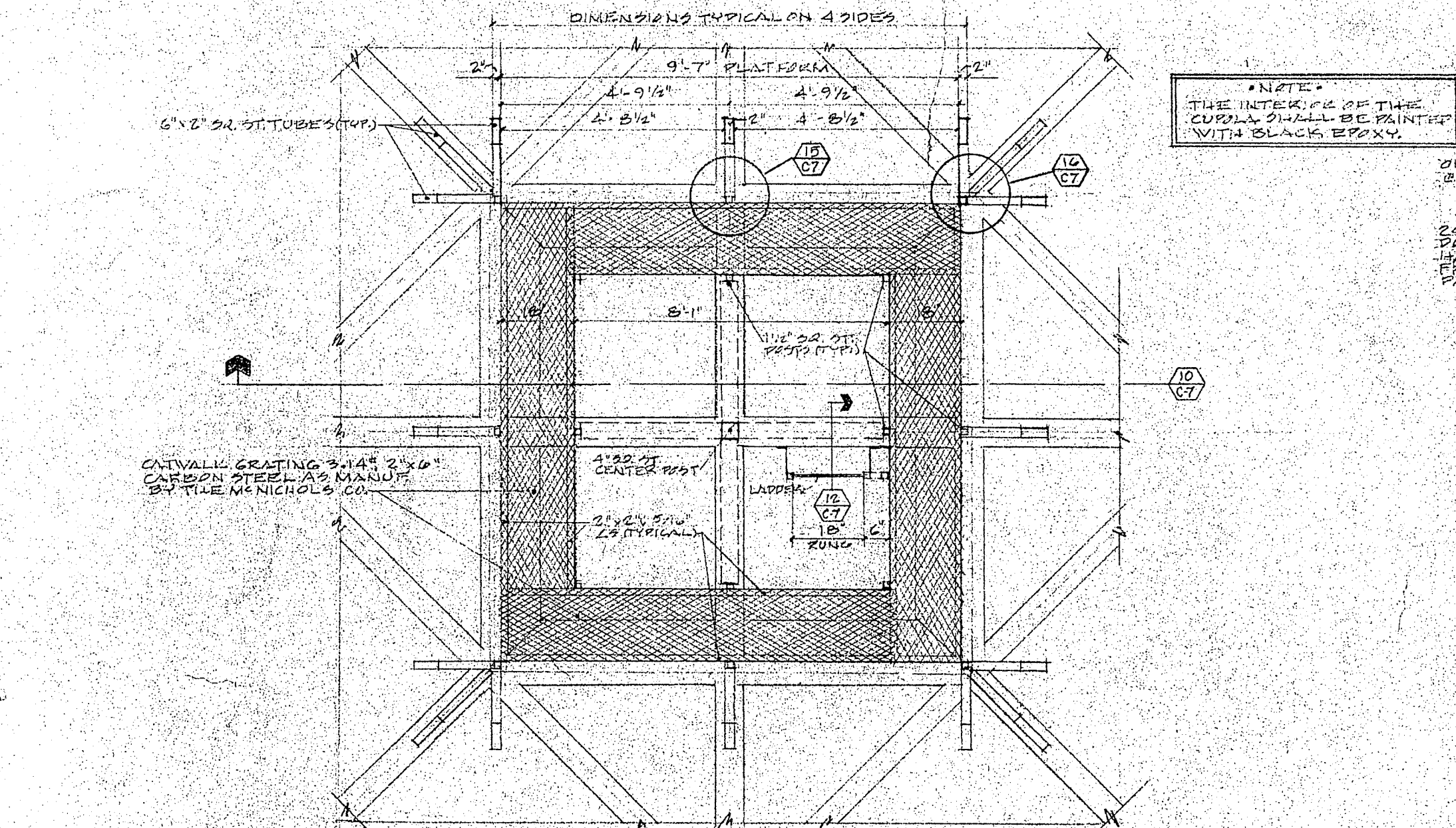
5. BALUSTER SECTION SCALE: 3/4" = 1'-0"

6. POST SLEEVE SECTION SCALE: 3/4" = 1'-0"

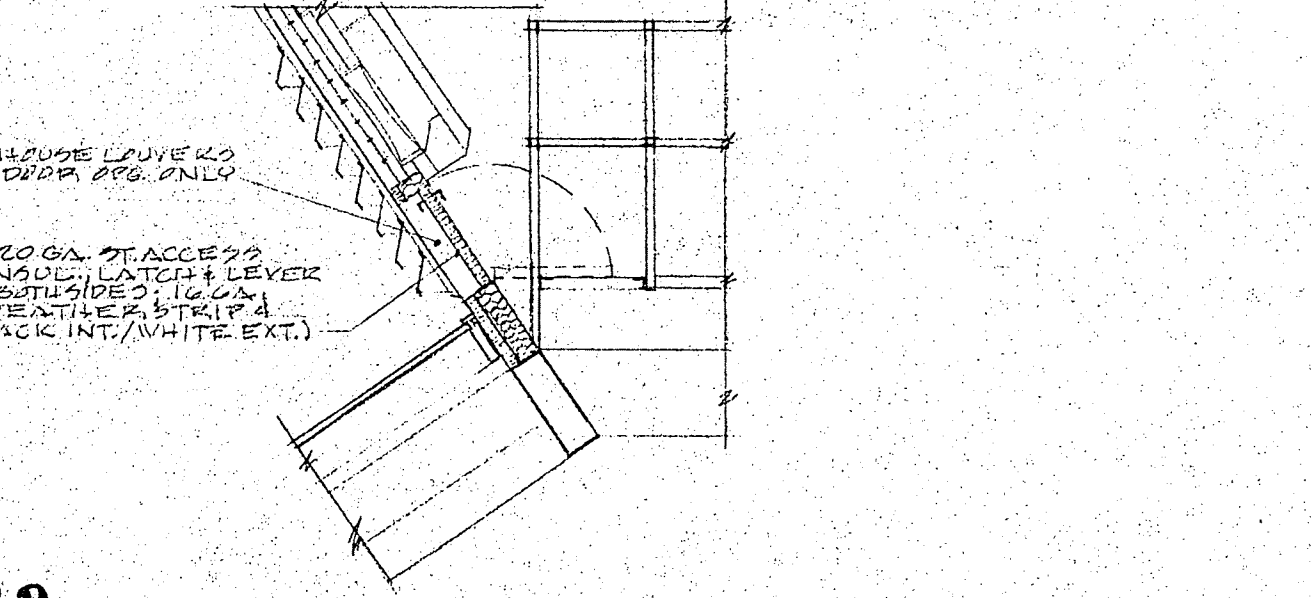


7. POST SLEEVE CONN. PLAN SCALE: 3/4" = 1'-0"

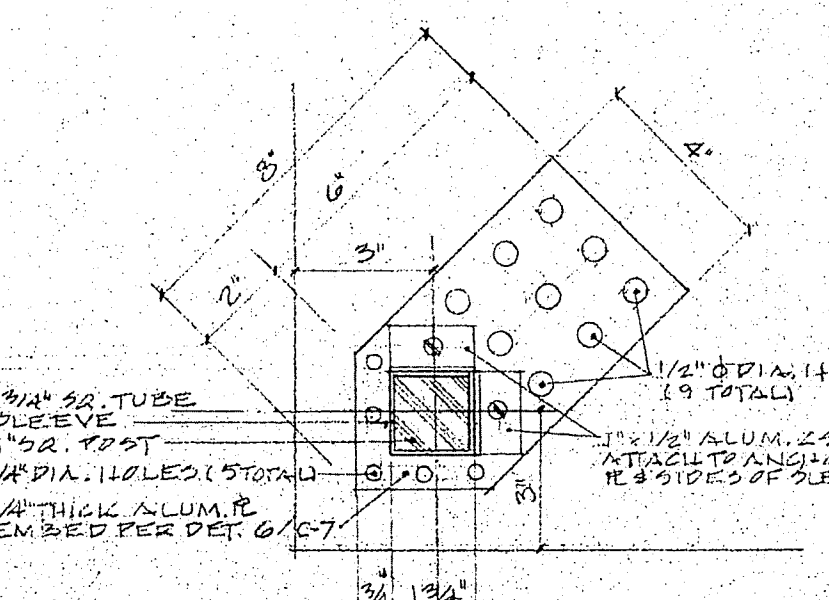
4. CONSERVATORY STAIR PLAN SCALE: 1/8" = 1'-0"



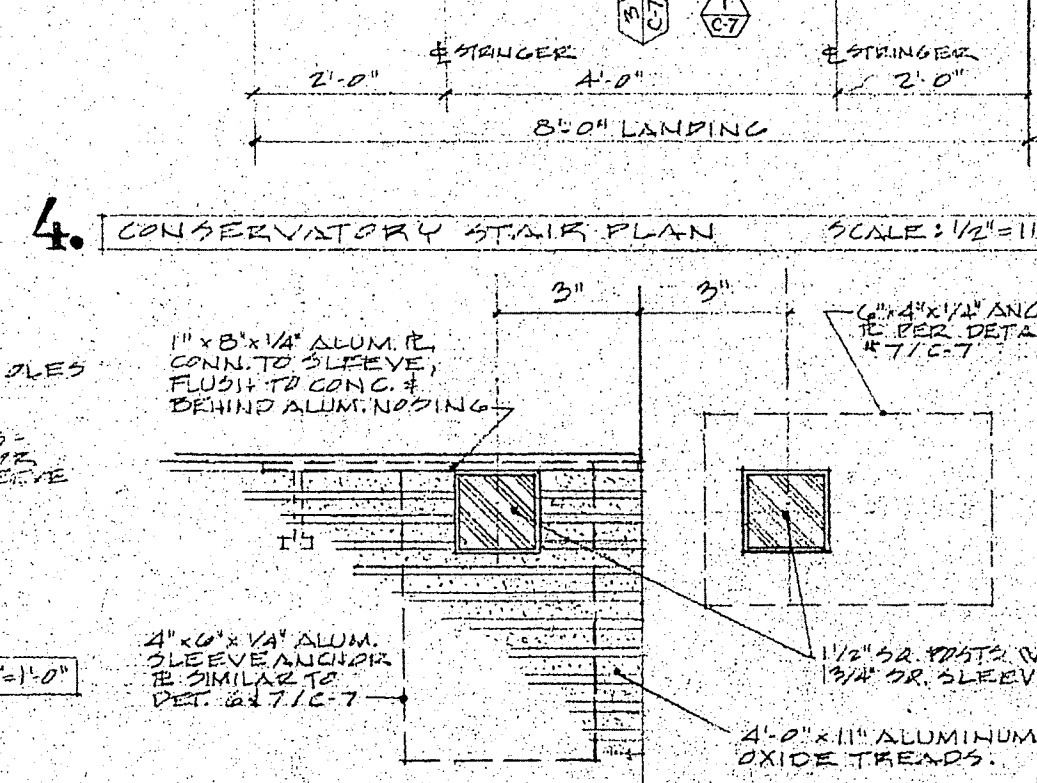
11. CONSERVATORY CUPOLA PLAN SCALE: 3/8" = 1'-0"



13. ACCESS DOOR SECTION SCALE: 1/8" = 1'-0"



8. CORNER POST SLEEVE ANCHOR SCALE: 3/4" = 1'-0"

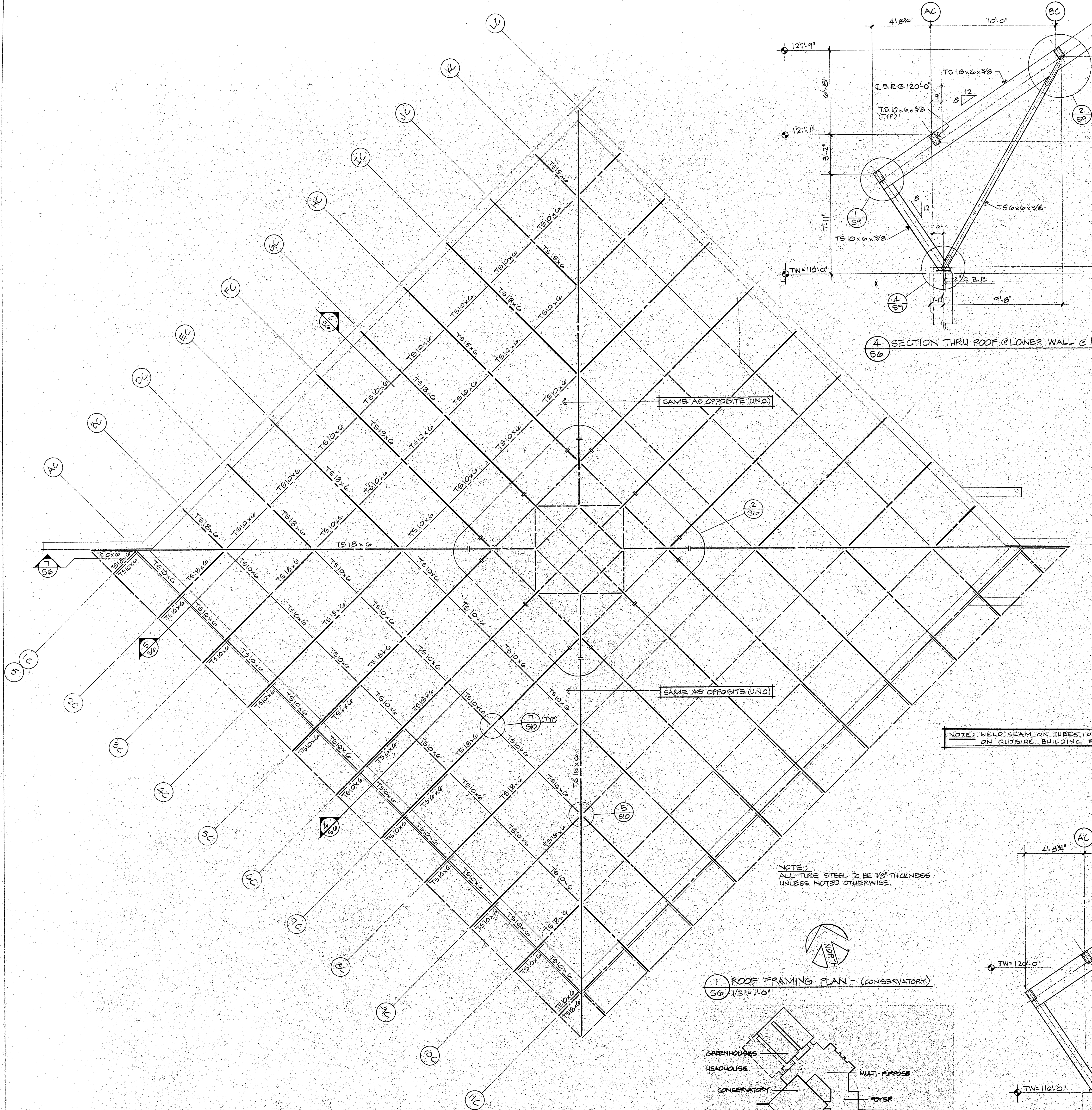


9. LANDING CENTERPOST PLAN SCALE: 3/4" = 1'-0"

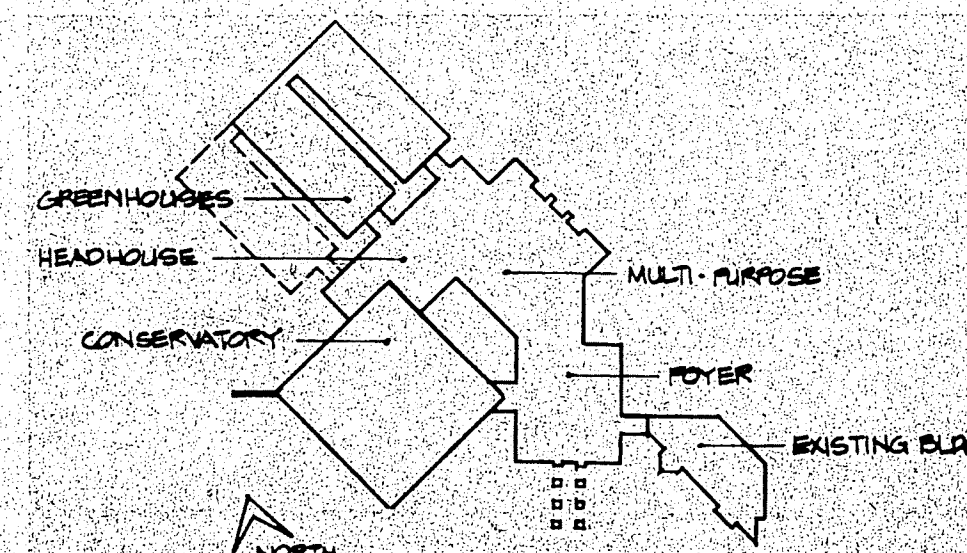
NOTE: THE INTERFACES OF THE CUPOLA SHALL BE PAINTED WITH BLACK BRONZE.

24" x 20" x 2" CO. GA. OF ACCESS DOOR INSUL. LATCH & LEVER HANDLE (IDENTICAL TO 16 GA. BRASS WEATHER STRIP & PAINT (BLACK INT./WHITE EXT.))

NOTE: ALL ALUMINUM MEMBERS & FITTINGS FOR THE STAIRWAY SHALL BE CURRANT FINISH, PARK BRONZE.

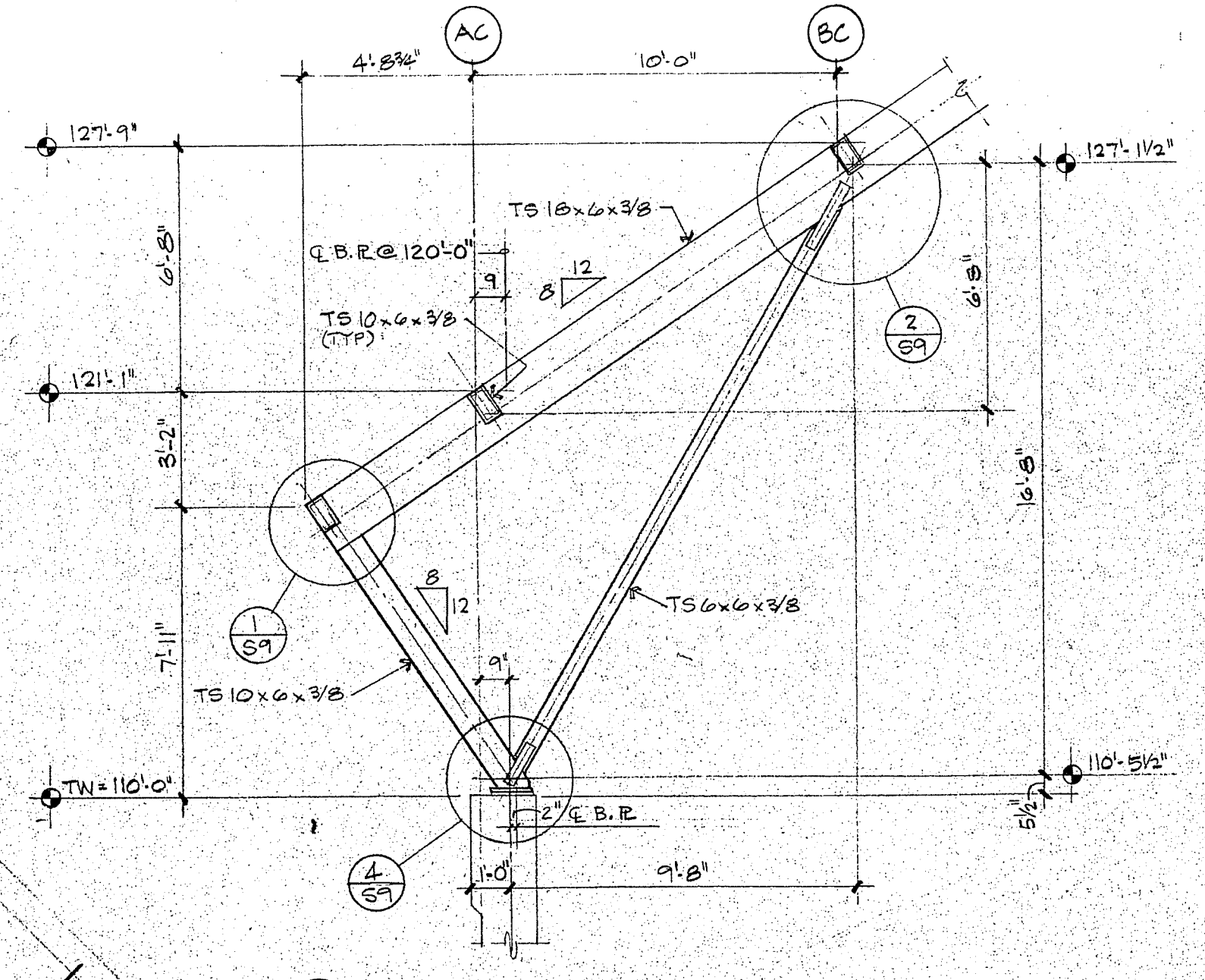


1 ROOF FRAMING PLAN - (CONSERVATORY)  
S/G 1/8" = 1'-0"

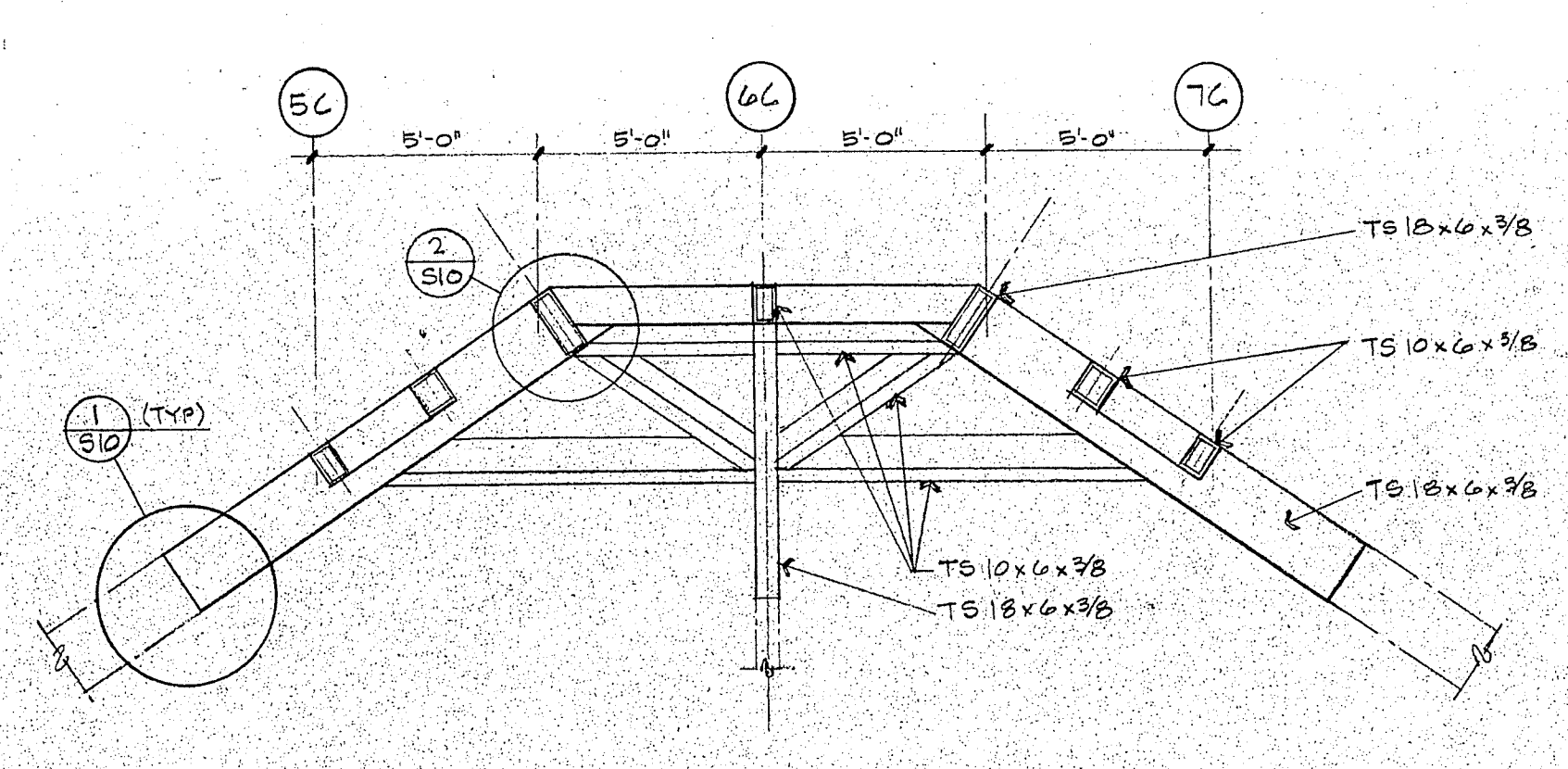


NOTE: ALL TUBE STEEL TO BE 3/8" THICKNESS UNLESS NOTED OTHERWISE.

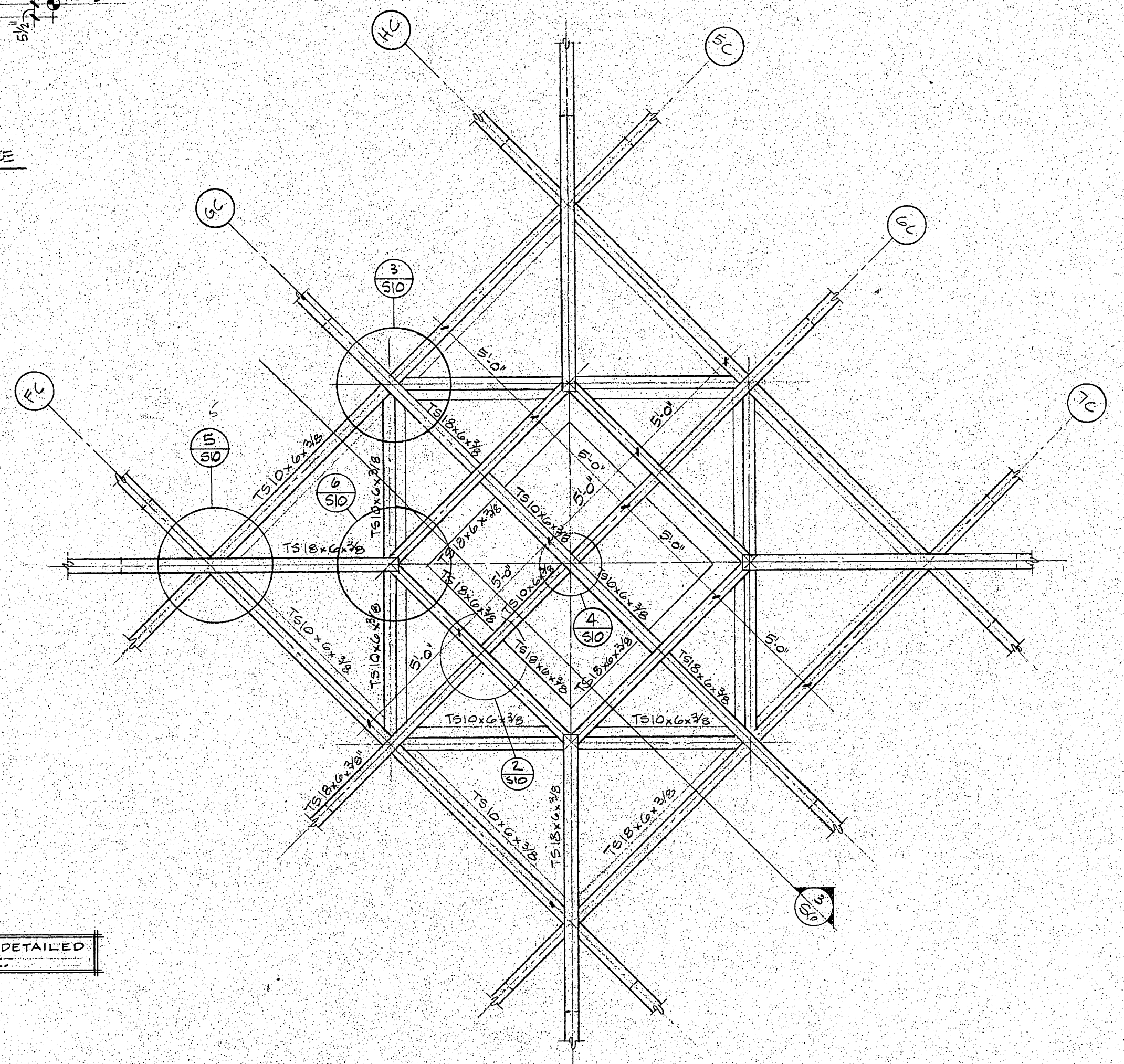
NOTE: WELD SEAM ON TUBES TO BE DETAILED ON OUTSIDE BUILDING FACE.



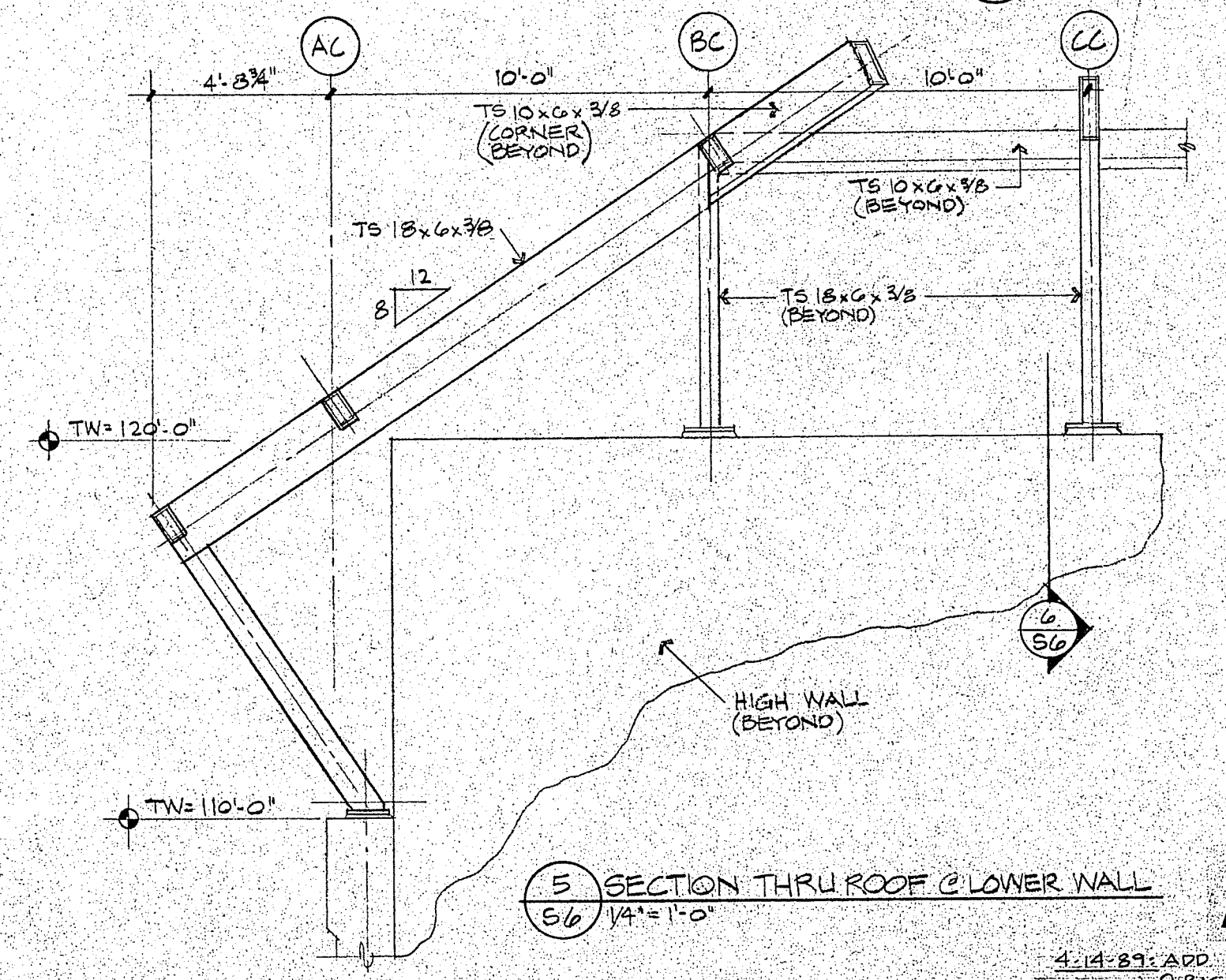
4 SECTION THRU ROOF @ LOWER WALL @ BRACE  
S/G



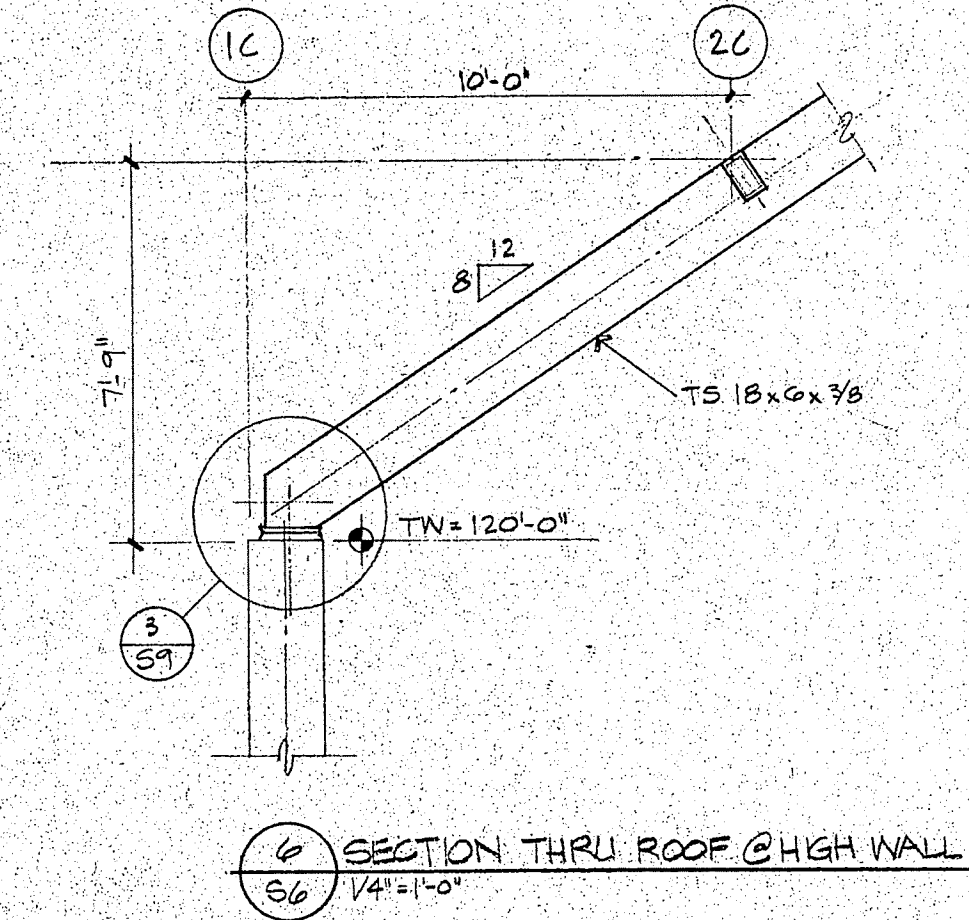
3 SECTION THRU ROOF AT PEAK  
S/G 1/4" = 1'-0"



2 FRAMING DETAIL @ ROOF PEAK  
S/G



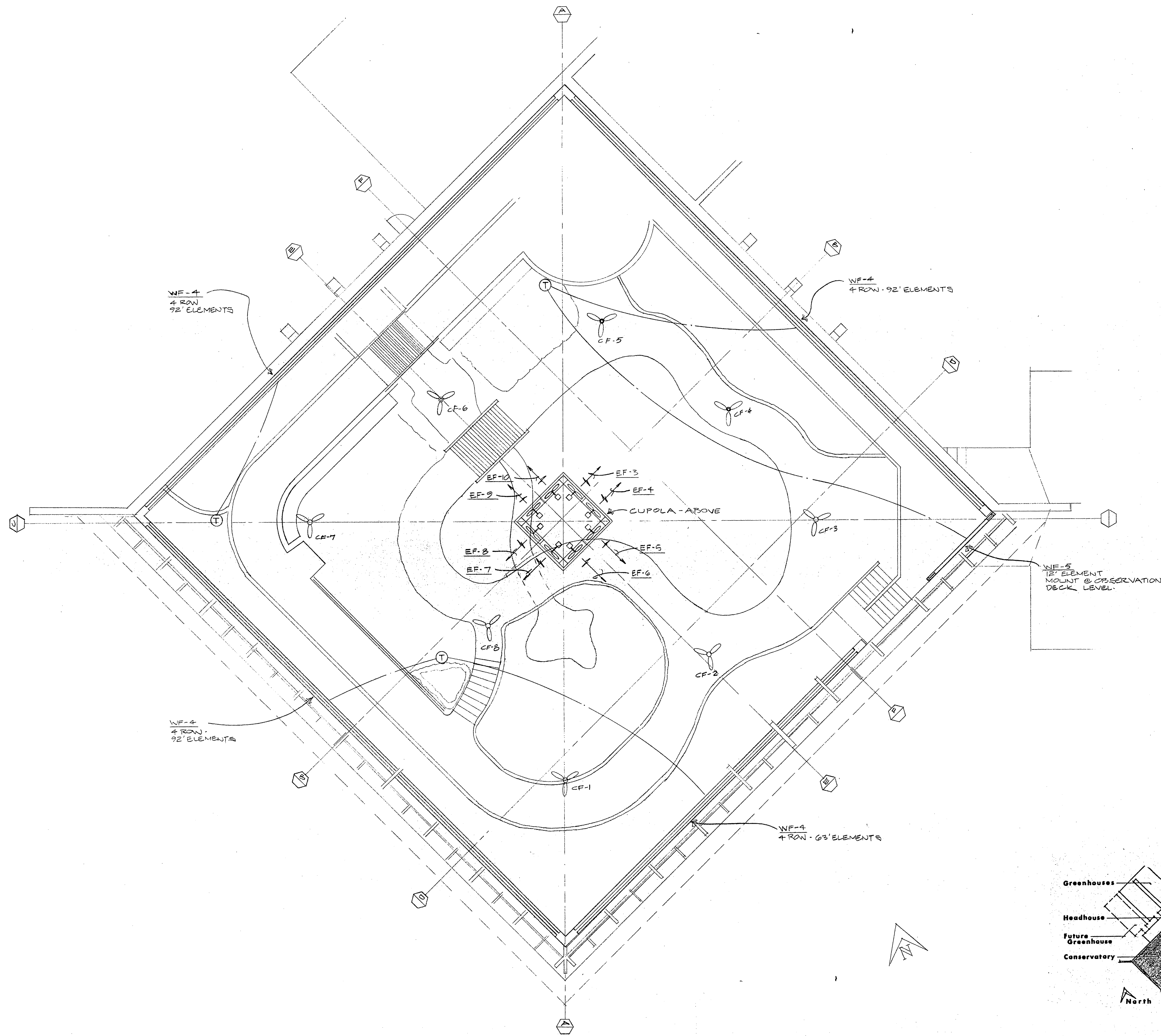
5 SECTION THRU ROOF @ LOWER WALL  
S/G 1/4" = 1'-0"



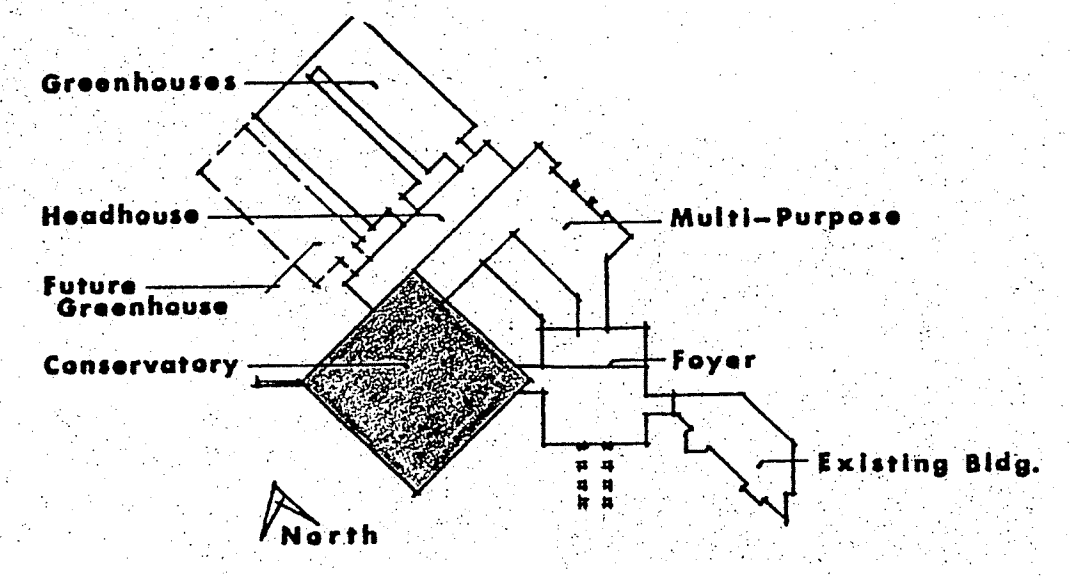
6 SECTION THRU ROOF @ HIGH WALL  
S/G 1/4" = 1'-0"

AS BUILT  
AUGUST 1, 1992  
4-14-89 ADD. NOTE: SEE WELD SEAM...  
@ RIGHT OF PLAN.

ARNOLD & O'SHERIDAN, INC.  
CONSULTING ENGINEERS  
825 FORWARD DRIVE MADISON, WISCONSIN 53711  
JOB NO. 874185



CONSERVATORY UPPER LEVEL FLOOR PLAN SCALE: 1/8"=1'-0"



AS BUILT  
AUGUST 1, 1992  
11-18-88

**ARNOLD & O'SHERIDAN, INC.**  
CONSULTING ENGINEERS  
626 FORWARD DRIVE MADISON, WISCONSIN 53711  
608-871-8881

### CABINET UNIT HEATER SCHEDULE

Symbol	CUH-1	CUH-2	CUH-3
Service	VESTIBULE - 1	Foyer	VESTIBULE-37
Manufacturer	TRANE	TRANE	TRANE
Model No.	M46A003	M46A003	D46A003
Mounting	VERTICAL	VERTICAL	HORIZONTAL
Recess (IN)	-----	-----	-----
Air Flow (CFM)	300	300	300
E.A.T. (°F)	60	60	60
Capacity (MBH)	21.5	21.5	21.5
G.P.M.	2.0	2.0	2.0
E.W.T. (°F)	180	180	180
M.P.D. (Ft)	0.97	0.97	0.97
T.C.V. Size	1/2	1/2	1/2
Motor H.P.	1/30	1/30	1/30
Fan Speed	1100/900/700	1100/900/700	1100/900/700

### UNIT HEATER SCHEDULE

Symbol	UH-1	UH-2	UH-3	UH-4	UH-5
Service	BOILER ROOM	GEN. ROOM	CONSERVATORY ELECTRICAL ROOM	CONSERVATORY MECHANICAL ROOM	CONSERVATORY STORAGE
Manufacturer	MODINE	MODINE	MODINE	MODINE	MODINE
Model No.	HS-165L	HS-108L	HS-108L	HS-86L	HS-108L
Type	HORIZONTAL DEL.	HORIZONTAL DEL.	HORIZONTAL DEL.	HORIZONTAL DEL.	HORIZONTAL DEL.
Throw (Ft)	69"	54"	54"	55"	54"
Air Flow (CFM)	3480	2150	2150	1510	2150
E.A.T. (°F)	60	60	60	60	60
Capacity (MBH)	112.0	65.0	65.0	44.0	65.0
GPM	11.0	6.5	6.5	4.4	6.5
E.W.T. (°F)	180	180	180	180	180
T.C.V. SIZE	3/4	1/2	1/2	1/2	1/2
MOTOR H.P.	1/3	1/8	1/8	1/8	1/8
FAN SPEED	1075	1625	1625	1625	1625

### AIR COOLED CONDENSING UNIT SCHEDULE

Symbol	ACCU-1	ACCU-2	ACCU-3	ACCU-4	ACCU-5	ACCU-6
Service	AHU-1	AHU-2	AHU-3	FCU-1	FCU-2	FCU-3
Manufacturer	TRANE	TRANE	TRANE	TRANE	TRANE	TRANE
Model No.	RA1B-C304	BT120C400H	BT120C400H	TT879A	TT8712A	TT8712A
Capacity Total (MBH)	351	92.5	92.5	13.1	8.5	8.5
Ambient Temp. (°F)	95	95	95	95	95	95
Refrigerant Type	22	22	22	22	22	22
Vibration Type	B	B	B	-----	-----	-----
Isolator Deflection	.75	.75	.75	-----	-----	-----
EER	10.5	8.7	8.7	B.35	8.8	8.8
No. of Compressors	1	1	1	1	1	1
Stages of Capacity	3	3	3	-----	-----	-----
Hot Gas By-Pass	NO	NO	NO	NO	NO	NO
No. of Circuits	-----	-----	-----	-----	-----	-----

### EXHAUST FAN SCHEDULE

Symbol	EF-1	EF-2	EF-3 THRU 10	EF-11	EF-12	EF-13 THRU 7
Service	TOILET	TOILET	CONSERVATORY	HEADHOUSE	ROOM 40	CONSERVATORY
Manufacturer	GREENHECK	GREENHECK	GREENHECK	GREENHECK	GREENHECK	LEADING EDGE
Model No.	050-120-B	6B-14-4	SPN-4B	6B-30-10	SDE-B-24-0	AT-72
Air Flow (CFM)	900	1640	16,500	8000	200	52,000
Static Press (In. W.C.)	0.250	0.250	0.125	0.125	0.10	-----
Motor H.P.	1/6	1/4	1.0	1	1/80	220 WATTS
Blower RPM	DIRECT	BELT	BELT	BELT	DIRECT	DIRECT
Vibration Type	-----	-----	-----	-----	-----	-----
Isolator Deflection	-----	-----	-----	-----	-----	-----

### BOILER SCHEDULE

Symbol	B-1	B-2	B-3
Manufacturer	Kewanee	Kewanee	Kewanee
Model No.	M-265	M-265	M-265
Boiler Type	PACKAGE	PACKAGE	PACKAGE
Type of Heating	HOT WATER	HOT WATER	HOT WATER
Boiler Working Press.	30 PSI	30 PSI	30 PSI
Gross Output (MBH)	2650	2650	2650
Boiler Horsepower	80	80	80
Firing Rate (Gas CFH)	3313	3313	3313
Htg Surface (W.S. SF)	343	343	343
Burner Type	GAS	GAS	GAS
Boiler Draft	FORCED	FORCED	FORCED
Fan H.P.	1 1/2	1 1/2	1 1/2
Burner Fuels	NATURAL GAS	NATURAL GAS	NATURAL GAS
Gas Train Input Press.	8" W.C.	8" W.C.	8" W.C.

### AIR HANDLING UNIT SCHEDULE

Symbol	AHU-1	AHU-2	AHU-3	AHU-4	AHU-5
Service	Foyer	MULTI-PURPOSE INTERIOR	MULTI-PURPOSE EXTERIOR	HEAD HOUSE WEST	HEAD HOUSE EAST
Manufacturer	TRANE	TRANE	TRANE	TRANE	TRANE
Model No.	25	10	10	T6	T6
Air Flow (CFM)	11,500	3420	3608	1800	1800
% Outside Air	10.0	20.3	18.0	8.6	8.6
Total S.P. (In. W.C.)	2	2	2	.50	.50
Unit Arrangement	HORIZONTAL	HORIZONTAL	HORIZONTAL	HORIZONTAL	HORIZONTAL
Unit Face & By-Pass	-----	-----	-----	-----	-----
Number of Zones	1	1	1	1	1
Filter Type	TA	TA	TA	TA	TA
Filter Arrangement	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
Vibration Type	B	B	B	D	D
Isolator Deflection	0.75	0.75	0.75	0.75	0.75
Blower (RPM)	835	893	894	1740	1740
Motor H.P.	10	5	5	2.0	2.0

### FAN COIL UNIT SCHEDULE

Symbol	FCU-1	FCU-2	FCU-3
Service	DIRECTOR	HORTICULTURE	WORKROOM
Manufacturer	TRANE	TRANE	TRANE
Model No.	TW718	TW718	TW718
Air Flow (CFM)	550	450	450
% Outside Air	7	6	13
Ext. S.P. (In. W.C.)	0.36	0.51	0.51
Motor H.P.	1/4	1/4	1/4
Filter Arrangement	1"	1"	1"

### RELIEF FAN SCHEDULE

Symbol	RF-1
Service	AHU-1
Manufacturer	GREENHECK
Model No.	PFE-36
Air Flow (CFM)	11500
Static Press (In. W.C.)	.250
Motor H.P.	1 1/2
Blower RPM	730
Vibration Type	-----
Isolator Deflection	-----

### CONVECTOR SCHEDULE

Symbol	C-1	C-2	C-3	C 4 6 5	C-6
Service	WOMEN TOILET	MEN TOILET	RM 25	RM 28	RM 26
Manufacturer	TRANE	TRANE	TRANE	TRANE	TRANE
Model No.	SK	SK	SK	SK	SK
Mounting	SEMI-RECESSED	SEMI-RECESSED	SEMI-RECESSED	SEMI-RECESSED	SEMI-RECESSED
Recess (IN)	4"	4"	2"	4"	2"
Size (L X H X D)	68X38X6	56X38X6	32X30X4	32X26X6	28X24X4
E.A.T. (°F)	65	65	65	65"	65"
Capacity (MBH)	10.7	8.7	3.2	3.5	2.3
G.P.M.	1.1	.87	.43	.35	.31
E.W.T. (°F)	190	190	190	190	190
T.C.V. Size	1/2	1/2	1/2	1/2	1/2

### CIRCULATION PUMP SCHEDULE

Symbol	P-1	P-2	P-3	P-4
Service	HEATING H2O	HEATING H2O	HEATING H2O	
Manufacturer	BELL & GOSSET	BELL & GOSSET	BELL & GOSSET	
Model No.	1510-56	1510-56	1510-56	
G.P.M.	375	375	375	
Pump Head (Ft)	60'	60'	60'	
Vibration Type	A	A	A	
Isolator Deflection	.35	.35	.35	
Motor RPM	1150	1150	1150	
Motor H.P.	7 1/2	7 1/2	7 1/2	
Fluid Pumped	WATER	WATER	WATER	
Pump Efficiency (Min)	70	70	70	

### HEATING COIL

E.A.T. (°F)	61.5	53	55	63	63
L.A.T. (°F)	95	85	90	120	120
Capacity (MBH)	430.1	140.8	177.1	111.5	111.5
Face Velocity (FPM)	477	423	423	340	340
A.P.D. (In. W.C.)	0.15	0.15	0.15	0.15	0.15
Hot Water (GPM)	29	9.33	11.8	7.43	7.43
E.W.T. (°F)	180	180	180	180	180
M.P.D. (Ft)	1.0	0.15	0.25	0.15	0.15
T.C.V. Size	1 1/2"	1"	1"	1"	1"
T.C.V. P.D. (Ft)	8	8	8	8	8

### COOLING COIL

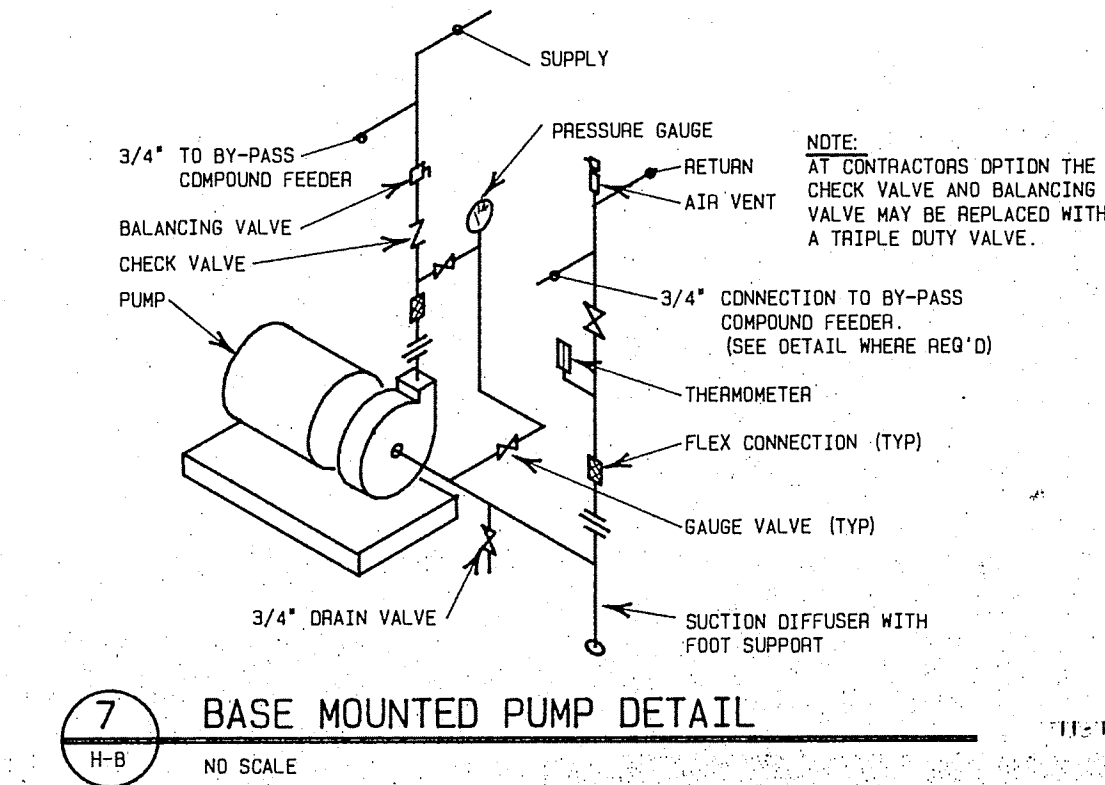
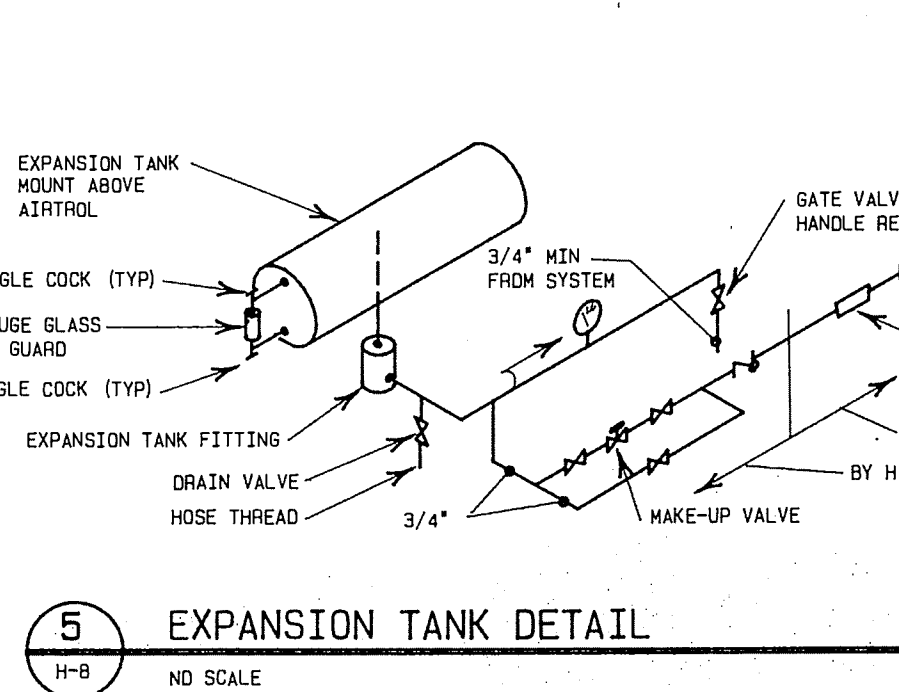
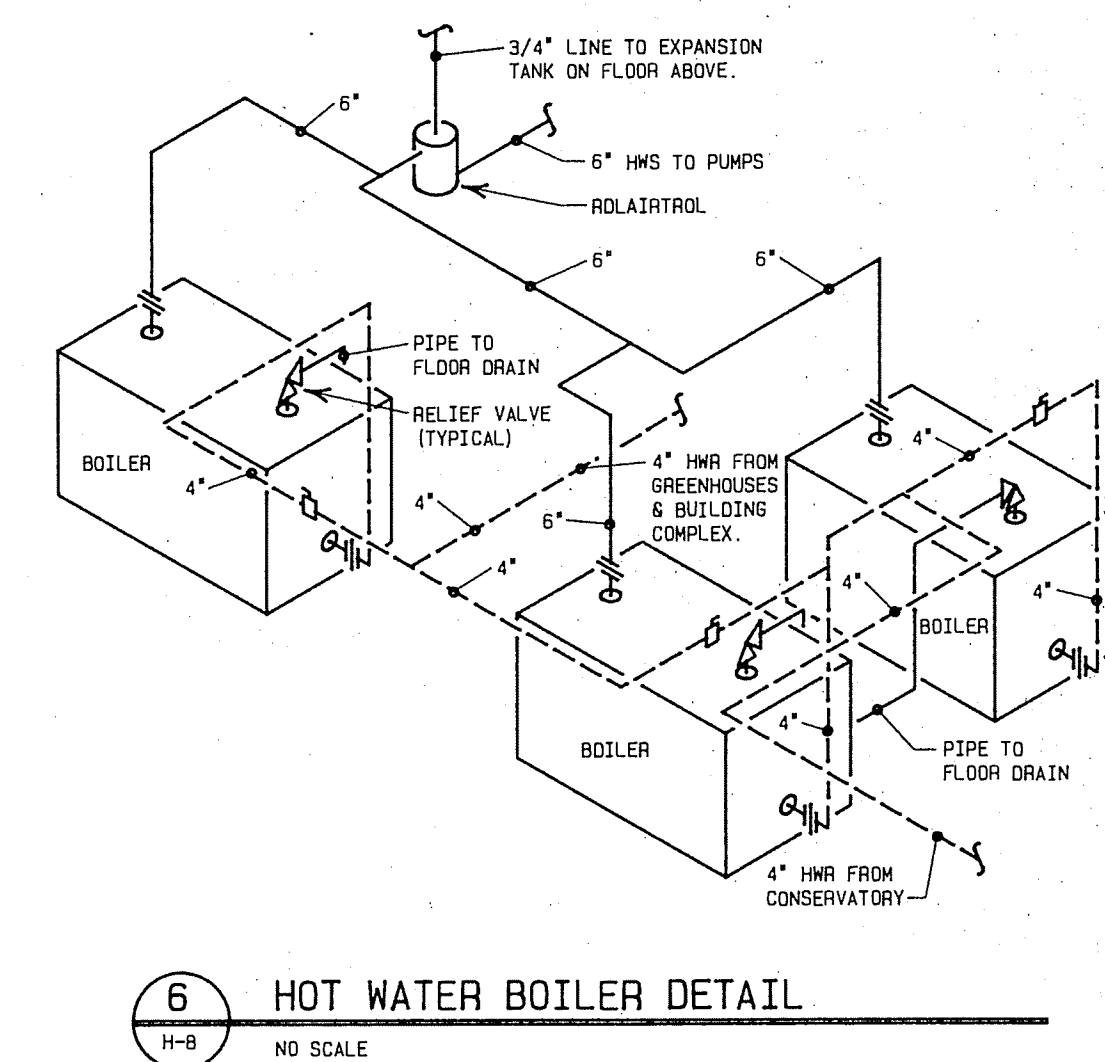
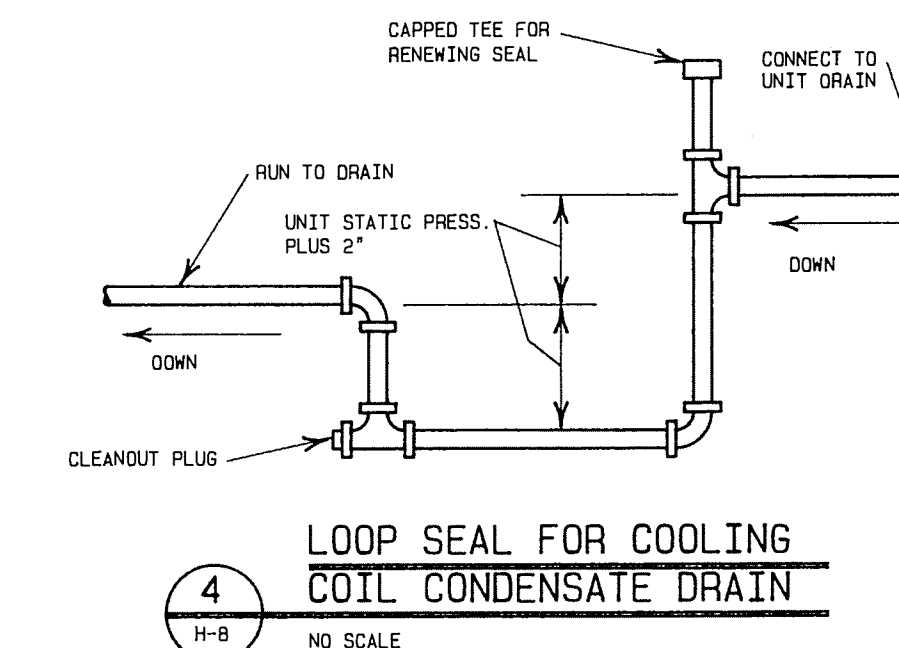
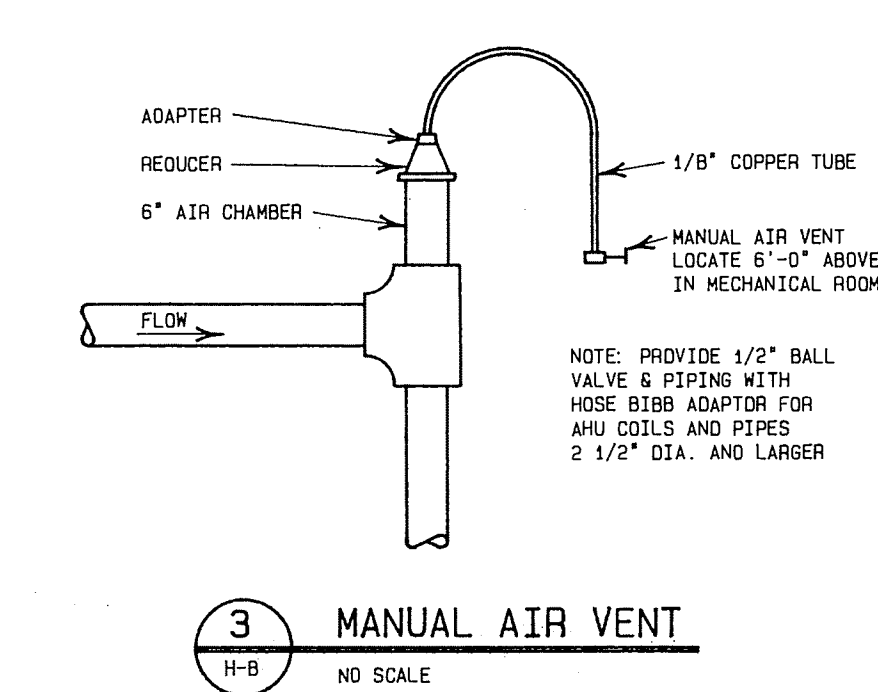
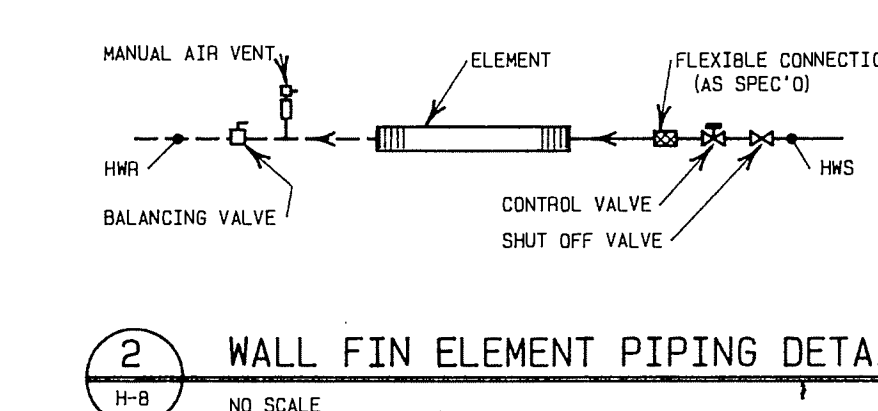
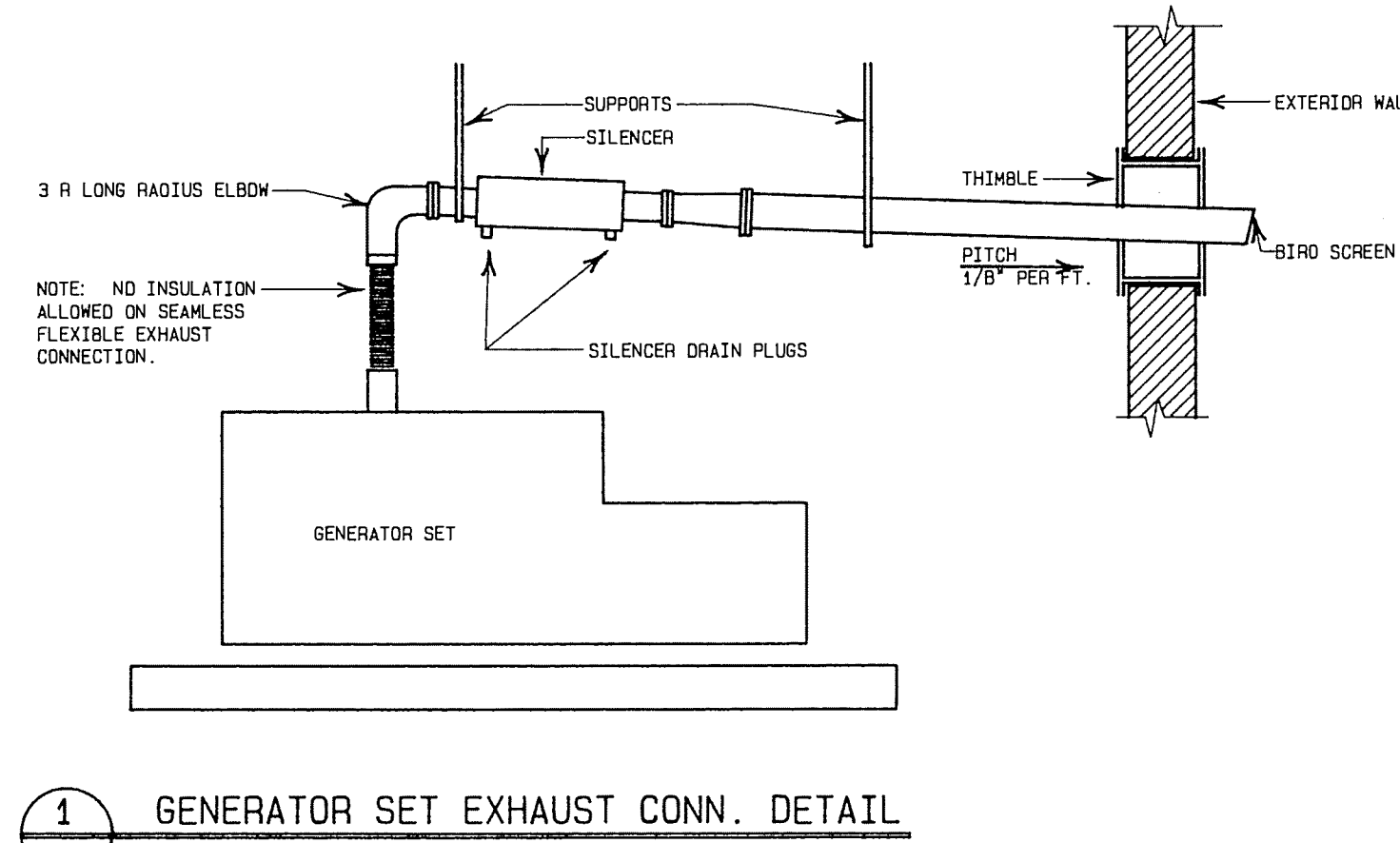
Manufacturer	TRANE	TRANE	TRANE		
Model No.					
Air In DB/WB (°F)	80/67	82/69	81/69		
Air Out DB/WB (°F)	56/55	56/55	56/55		
Capacity (MBH)	471.2	165.1	188.8	NONE	NONE
Face Velocity (FPM)	477	423	423		
A.P.D. (In. W.C.)	0.60	0.50	0.70		
Refrigerant Type	R-22	R-22	R-22		
Suction Temp. (°F)	40	40	40		

### WALL FIN SCHEDULE

Symbol	WF-1	WF-2	WF-3	WF-4	WF-5
Manufacturer	TRANE	TRANE	TRANE	TRANE	TRANE
Cabinet Type	12TA FRONT INLET	10TA	BAREFIN	CUSTOM	20 E3-2 W
Tube & Element Material	CU/AL	CU/AL	CU/AL	CU/AL	CU/AL
Row & Series	1/50	1/35	3/50	4/58	2/50
Tube Size	1 1/4"	3/4"	1 1/4"	1 1/4"	1 1/4"
Fins Size (In)	3 1/4 X 5 1/4	3 1/4 X 3 1/4	3 1/4 X 5 1/4	3 1/4 X 5 1/4	3 1/4 X 5 1/4
E.A.T. (°F)	65	65	65	65	65
A.W.T. (°F)	180	180	180	180	180
Capacity/Ft. (BTU/hr)	1320	705	295	4580	2260
Installed Height (In)	15	13 1/16	17 1/2		
T.C.V. Size					

Notes: 1. Wall-fin zone T.C.V.'s shall be 1/2" unless otherwise indicated.  
 2. Cabinet length shall be as drawn.  
 3. Element length shall be as noted on drawings.

B.1.02: WF-3 IS ORIGINAL DESIGN, NOT AS-BUILT, FOR GREENHOUSE HEATING SYSTEM.



### VARIABLE VOLUME BOX SCHEDULE

Symbol	VVB-1	VVB-2	VVB-3	VVB-4
Service	GIFT SHOP	LIBRARY	INTERIOR OFFICES	
Manufacturer	TRANE	TRANE	TRANE	
Model No.	VSM0307	VSM0111	VSM0307	
Air Flow (CFM) Min/Max	440/730	560/1070	440/730	
Inlet S.P. (In. W.C.)	0.35	0.07	0.35	
<b>HEATING COIL</b>				
E.A.T. (°F)	60	60	60	
Capacity (MBH)	15.0	18.0	15.0	
A.P.D. (In. W.C.)	0.10	0.10	0.10	
G.P.M.	1.5	1.8	1.5	
E.W.T. (°F)	180	180	180	
M.P.D. (Ft)	0.3	0.3	0.3	
T.C.V. Size	1/2	1/2	1/2	
<b>FAN POWER BOX</b>				
Fan Arrangement	FC	FC	FC	
Fan Motor HP	1/8	1/4	1/8	
Fan C.F.M.	440	560	440	
External S.P. (In. W.C.)	0.5	0.9	0.5	

HARDWARE LIST

G101. 1/4" BLOCK GASKET  
 G102. HALF ROUND GASKET  
 G117. GLAZING STOP 1/2" x 1-1/2" x 4" NEOPRENE  
 G118. BEVELED BLOCK GASKET (11" BEVEL)  
 G119. GLAZING STOP ALUMINUM 4"  
 G120. GLAZING STOP NEOPRENE 4"  
 G121. BEVELED BLOCK GASKET (30-22" BEVEL)  
 G122. .812 X .218 THK. SETTING BLK. (E SYS)  
 G123. 1/4" SPONGE GASKET (OUTER SURFACE)  
 G124. FOAM BACKER (FLUSH GLAZING)  
 G125. 1/4" X 1 1/4" X 4" SILICONE SETTING BLK.

F101. HEX HD. SCREW 1/4"-14 x 1"  
 F102. HEX HD. SCREW 1/4"-14 x 1 1/2"  
 F103. HEX HD. SCREW 1/4"-14 x 1 1/4"  
 F104. HEX HD. SCREW 1/4"-14 x 1 3/4"  
 F105. HEX HD. SCREW 1/4"-14 x 2"  
 F106. HEX HD. SCREW 1/4"-14 x 2 1/4"  
 F107. HEX HD. SCREW 1/4"-14 x 2 1/2"  
 F108. HEX HD. SCREW 1/4"-14 x 3/4"

F201. HEX HD. LAG SCREW 1/4" x 1 1/2"  
 F202. HEX HD. LAG SCREW 1/4" x 3"  
 F203. HEX HD. LAG SCREW 1/4" x 4"  
 F204. HEX HD. LAG SCREW 3/8" x 2"  
 F205. HEX HD. LAG SCREW 3/8" x 4"  
 F206. HEX HD. LAG SCREW 1/2" x 5"  
 F207. HEX HD. LAG SCREW 3/8" x 1"

F301. CONCRETE ANCHOR 1/4" x 3"  
 F302. CONCRETE ANCHOR 3/8" x 3 1/2"  
 F303. CONCRETE ANCHOR 1/2" x 5"  
 F304. HEX SCREW "BF" 3/8"-12 x 2"  
 F305. HEX SCREW "BF" 3/8"-12 x 1"

F401. HEX HD. BOLT 1/4"-20 x 1 1/2"  
 F402. HEX HD. BOLT 1/4"-20 x 5/8"  
 F403. HEX HD. BOLT 1/4"-20 x 3/4"  
 F404. HEX HD. BOLT 1/4"-20 x 1"  
 F405. HEX HD. BOLT 1/4"-20 x 1 1/4"  
 F406. HEX HD. BOLT 1/4"-20 x 1 3/4"  
 F407. HEX HD. BOLT 1/4"-20 x 2"  
 F408. HEX HD. BOLT 1/4"-20 x 2 1/4"  
 F409. HEX HD. BOLT 1/4"-20 x 2 1/2"  
 F410. HEX HD. BOLT 1/4"-20 x 3 1/4"  
 F411. HEX HD. BOLT 3/8"-16 x 2"  
 F412. HEX HD. BOLT 1/4"-20 x 4"  
 F413. HEX HD. BOLT 1/4"-20 x 4 1/2"  
 F414. HEX HD. BOLT 3/8"-16 x 1"  
 F415. HEX HD. BOLT 3/8"-16 x 3"  
 F416. HEX HD. BOLT 3/8"-16 x 4 1/2"  
 F417. HEX HD. BOLT 1/2"-13 x 1 3/4"  
 F418. HEX HD. BOLT 1/2"-13 x 2"  
 F419. HEX HD. BOLT 1/2"-13 x 2 1/2"  
 F420. HEX HD. BOLT 1/2"-13 x 3"  
 F421. HEX HD. BOLT 1/2"-13 x 1"  
 F422. HEX HD. BOLT 1/4"-20 x 2 3/4"  
 F423. HEX HD. BOLT 1/4"-20 x 3"  
 F424. HEX HD. BOLT 1/4"-20 x 3 1/2"  
 F425. PAN HD. PHIL. BOLT 3/8"-16 x 3/4"  
 F426. HEX HD. BOLT 3/8"-16 x 3/4"

F501. HEX NUT 1/4"-20  
 F502. HEX NUT 3/8"-16  
 F503. HEX NUT 1/2"-13  
 F602. WASHER LOCK 1/4"  
 F603. WASHER LOCK 3/8"  
 F604. WASHER LOCK 1/2"  
 F605. WASHER FLAT 1/4"  
 F606. WASHER FLAT 3/8"  
 F607. WASHER FLAT 1/2"  
 F608. WASHER BEVELED 3/8"  
 F609. WASHER UNIVERSAL 1/4"  
 F610. WASHER UNIVERSAL 3/8"  
 F611. WASHER SEALED 1/4"

F701. PHIL. TRUSS HD. 1/4"-20 x 1"  
 F702. PHIL. TRUSS HD. 1/4"-20 x 1 1/2"  
 F703. PHIL. TRUSS HD. 1/4"-20 x 2"  
 F704. PHIL. TRUSS HD. 1/4"-20 x 2 1/4"  
 F705. PHIL. TRUSS HD. 1/4"-20 x 2 1/2"  
 F706. PHIL. TRUSS HD. 1/4"-20 x 3/4"  
 F707. PHIL. TRUSS HD. 1/4"-20 x 3"  
 F709. PHIL. TRUSS HD. 1/4"-20 x 3 1/2"  
 F710. PHIL. TRUSS HD. 3/8"-16 x 1"  
 F711. PHIL. TRUSS HD. 1/4"-20 x 1 3/4"

F801. COUNTERSUNK PHIL. SCREW #14 x 3/4"  
 F802. TRUSS HD. SCREW #10 x 5/8"  
 F803. PAN HD. PHIL. SCREW #14 x 1"  
 F804. PAN HD. PHIL. SCREW #14 x 3/4"

F903. TAPE 4930 .025 (3M DBL. ADHESIVE)  
 F905. SHIMS (SHIMMER SHIM OR EQUAL)  
 F906. G.E. SILPRUF SCS 2003 BLACK 10.3 OZ.  
 F907. G.E. SILPRUF SCS 2009 ALUMIN. 10.3 OZ.  
 F910. G.E. SILPRUF SCS 2097 BRONZE 10.3 OZ.  
 F911. G.E. PRIMER SCP 3153 METAL (PINT)  
 F912. G.E. PRIMER SCP 3154 CONCRETE (PINT)  
 F913. G.E. PRIMER SS 4179 KYNAR (PINT)  
 F914. M.E.K. SOLVENT (PINT)  
 F915. BOND BREAKER TAPE 3/8"  
 F916. 1/8" x 1/4" POP RIVETS  
 F917. 1/8" x 3/8" POP RIVETS  
 F918. 1/4" x 1 1/2" METAL HIT ANCHOR  
 F920. BACKER ROD 1/2"  
 F921. BACKER ROD 3/4"  
 F922. 707B BLACK SEALANT 90  
 F923. G.E. SILICONE CLEAR  
 F924. G.E. SILPRUF SCS 2020 PRECAST WHITE  
 F925. SHIMMED BUTYL TAPE 1/2" X 1/4" (25' ROLL)

COMPONENT LIST

B101. ADJUSTABLE ALUM. BASE PLATE (3,4 & 5)  
 B102. ADJ. ALUM. BASE PLATE (7 & 9)  
 B103. ADJ. ALUM. BASE PLATE (10)  
 B104. ADJ. ALUM. HEADER PLATE (3,4 & 5)  
 B105. ADJ. ALUM. HEADER PLATE (7,9 & 10)  
 B106. ALUM. SILL FLUSH GLAZING CLIP  
 B107. ALUM. GLAZING SPACER

C101. ALUM. RAFTER / PURLIN CAP  
 C102. ALUM. SILL CAP  
 C103. ALUM. HIP / RIDGE CAP  
 C104. ALUM. SNAP FIT COVER (3" V. SILL)  
 C105. ALUM. SNAP FIT COVER (4" V. SILL)  
 C106. ALUM. SNAP FIT COVER (5" V. SILL)  
 C107. ALUM. SILL CAP  
 CC101. ALUM. RAFTER / PURLIN CLOSURE CAP  
 CC102. ALUM. SILL CLOSURE CAP  
 CC103. ALUM. HIP / RIDGE CLOSURE CAP  
 CC104. ALUM. SILL CLOSURE CAP  
 CC105. ALUM. CLOSURE CAP

H301. 3" ALUM. HIP RAFTER (SOCKET)  
 H302. 3" ALUM. HIP RAFTER (BALL)  
 H303. 3" ALUM. HIP RAFTER 45° (SOCKET)  
 H304. 3" ALUM. HIP RAFTER 45° (BALL)  
 H401. 4" ALUM. HIP RAFTER (SOCKET)  
 H402. 4" ALUM. HIP RAFTER (BALL)  
 H403. 4" ALUM. HIP RAFTER 45° (SOCKET)  
 H404. 4" ALUM. HIP RAFTER 45° (BALL)  
 H501. 5" ALUM. HIP RAFTER (SOCKET)  
 H502. 5" ALUM. HIP RAFTER (BALL)  
 H503. 5" ALUM. HIP RAFTER 45° (SOCKET)  
 H504. 5" ALUM. HIP RAFTER 45° (BALL)  
 H701. 7" ALUM. HIP RAFTER (SOCKET)  
 H702. 7" ALUM. HIP RAFTER (BALL)  
 H703. 7" ALUM. HIP RAFTER 45° (SOCKET)  
 H704. 7" ALUM. HIP RAFTER 45° (BALL)  
 H901. 9" ALUM. HIP RAFTER (SOCKET)  
 H902. 9" ALUM. HIP RAFTER (BALL)  
 H903. 9" ALUM. HIP RAFTER 45° (SOCKET)  
 H904. 9" ALUM. HIP RAFTER 45° (BALL)  
 H1001. 10" ALUM. HIP RAFTER (SOCKET)  
 H1002. 10" ALUM. HIP RAFTER (BALL)  
 H1003. 10" ALUM. HIP RAFTER 45° (SOCKET)  
 H1004. 10" ALUM. HIP RAFTER 45° (BALL)  
 H1201. 12" ALUM. HIP RAFTER (SOCKET)  
 H1202. 12" ALUM. HIP RAFTER (BALL)  
 H1203. 12" ALUM. HIP RAFTER 45° (SOCKET)  
 H1204. 12" ALUM. HIP RAFTER 45° (BALL)

P101. .73" ALUM. PURLIN  
 P102. 2.5" ALUM. PURLIN  
 P105. 7" ALUM. MULLION (TOP)  
 P106. 7" ALUM. MULLION (BOTTOM)  
 P107. 2.5" ALUM. PURLIN (FLUSH GLAZING)  
 P108. 2.5" ALUM. PURLIN (FLUSH GLAZING)

R301. 3" ALUM. RAFTER  
 R402. 4" ALUM. RAFTER  
 R503. 5" ALUM. RAFTER  
 R701. 7" ALUM. RAFTER  
 R705. 7" ALUM. RAFTER (HEAVY)  
 R710. 7" ALUM. VERTICAL RAFTER  
 R904. 9" ALUM. RAFTER  
 R1000. 10" ALUM. RAFTER  
 R1201. 12" ALUM. RAFTER

S301. 3" ALUM. SILL  
 S303. 3" x 30" ALUM. SILL  
 S321. 3" ALUM. VERTICAL SILL  
 S401. 4" ALUM. SILL  
 S421. 4" ALUM. VERTICAL SILL  
 S501. 5" ALUM. SILL  
 S521. 5" ALUM. VERTICAL SILL  
 S701. 7" ALUM. SILL  
 S903. 9" ALUM. SILL  
 S1000. 10" ALUM. SILL  
 S1201. 12" ALUM. SILL

VR101. S.G. ALUM. VERTICAL END RAFTER  
 VR102. I.G. ALUM. VERTICAL END RAFTER

AL03. .030" ALUM. SHEET  
 AL05. .050" ALUM. SHEET  
 AL06. .063" ALUM. SHEET  
 AL09. .093" ALUM. SHEET  
 AL12. .125" ALUM. SHEET  
 AL18. .1875" ALUM. SHEET  
 AL25. .25" ALUM. SHEET  
 AL37. .375" ALUM. SHEET  
 AL50. .50" ALUM. SHEET

GENERAL NOTES:

- EXTRUDED ALUMINUM ALLOY AND TEMPER: 6063 - T6
- BRAKE FORMED ALUMINUM TO BE 5052-H34 ALLOY AND TEMPER
- EXTRUDED ALUMINUM SILLS, RAFTERS AND PURLINS TO HAVE A MINIMUM EFFECTIVE THICKNESS OF 0.109". EXTRUDED ALUMINUM GLAZING CAPS AND RETAINERS TO HAVE A MINIMUM EFFECTIVE THICKNESS OF 0.090".
- ALL FASTENERS TO BE 300 SERIES STAINLESS STEEL.
- ALUMINUM FINISH: 2 COAT KYNAR (COLOR TO BE DETERMINED)
- GLAZING:  
 SLOPED GLASS: VERTICAL GLASS:  
 1 5/16" INSULATING GLASS 1 5/16" INSULATING GLASS
- OUTER LITE: OUTER LITE:  
 1/4" CLEAR HEAT STRENGTHED 9/16" CLEAR HEAT STRENGTHENED LAMINATED
- INNER LITE: INNER LITE:  
 9/16" CLEAR HEAT STRENGTHENED LAMINATED 1/4" CLEAR HEAT STRENGTHED
- INSTALLATION BY: BY WASCO
- DESIGN CRITERIA:  
 BUILDING CODE: WISCONSIN BOCA 1987, ANSI A58.1  
 LOADS: DEAD: 12 SNOW: 30 PSF  
 (PSF) LIVE: - WIND SPEED: 80 MPH  
 ALLOWABLE DEFLECTIONS: +20.5 PSF  
 VERTICAL: 1/175 -28.3 PSF  
 HORIZONTAL: - N/A
- MAXIMUM REACTION AT EACH RAFTER CONNECTION (POUNDS)  
 FOR DETAILED DESCRIPTIONS, SEE STRUCTURAL CALCULATIONS.  
 VERTICAL HORIZONTAL  
 DEAD : 903 --  
 LIVE (SNOW) : 1490 --  
 WIND : +1140, -1575 +760, -1050

IMPORTANT NOTE:  
 IN ORDER FOR THE SKYLIGHT TO PREFORM AS DESIGNED,  
 THE MAXIMUM DEFLECTION OF THE SUPPORT STRUCTURE  
 MUST NOT EXCEED THE FOLLOWING LIMITS. SEE NOTE 9  
 FOR LOADS.  
 VERTICAL: 7/8" HORIZONTAL: 1/2"

AUTHORIZED SIGNATURE REQUIRED FOR FABRICATION RELEASE.

ARCHITECT: HERE DETAILED CONFORM WITH THE DESIGN CONCEPTS AND INTENT OF THE CONTRACT DOCUMENTS AND ARE HEREBY RELEASED FOR FABRICATION.  
 CONTRACTOR: HERE DETAILED ARE AS REQUESTED IN THE BID INVITATION. THESE DETAILS ACCURATELY REFLECT THE FIELD DIMENSIONS AND CONDITIONS AND ARE RELEASED FOR FABRICATION.  
 DATE: APPROVED BY: TITLE: DATE: APPROVED BY: TITLE:

WARNING!

SAFETY CONSIDERATIONS:  
 WHILE WASCO SKYLIGHTS ARE DESIGNED TO SUPPORT THE WEIGHT OF SNOW ICE AND THE FORCE OF NORMAL WINDS THEY ARE NOT DESIGNED TO SUPPORT THE WEIGHT OF PEOPLE. IF HUMAN SAFETY BECOMES A CONSIDERATION, SKYLIGHTS SHOULD BE PROTECTED BY RAILINGS, GRIDS OR SCREENS.  
 DANGER!  
 KEEP OFF- GLAZING WILL NOT SUPPORT BODY WEIGHT.

PROJECT: OLBRICH BOTANICAL CONSERVATORY  
 LOCATION: MADISON, WISCONSIN  
 ARCHITECT: STUART WILLIAM GALLAHER  
 CONTRACTOR: FINDORFF & SONS  
 WASCO REP: LINDEMANN GROUP

DRAWING REVIEW  
 Review is for general compliance with contract documents. No responsibility is assumed for correctness of dimensions or details. Contractor is responsible for approval of shop drawings and for complete compliance with the requirements of the contract documents.  
 REVIEWED W/ COMMENTS AS NOTED  
 REVIEWED W/ COMMENTS AS NOTED  
 AMEND AND RESUBMIT  
 REJECTED-SEE ATTACHED COMMENTS  
 STUART WILLIAM GALLAHER  
 Architect, Inc.  
 By: [Signature] Date: 7/6/89

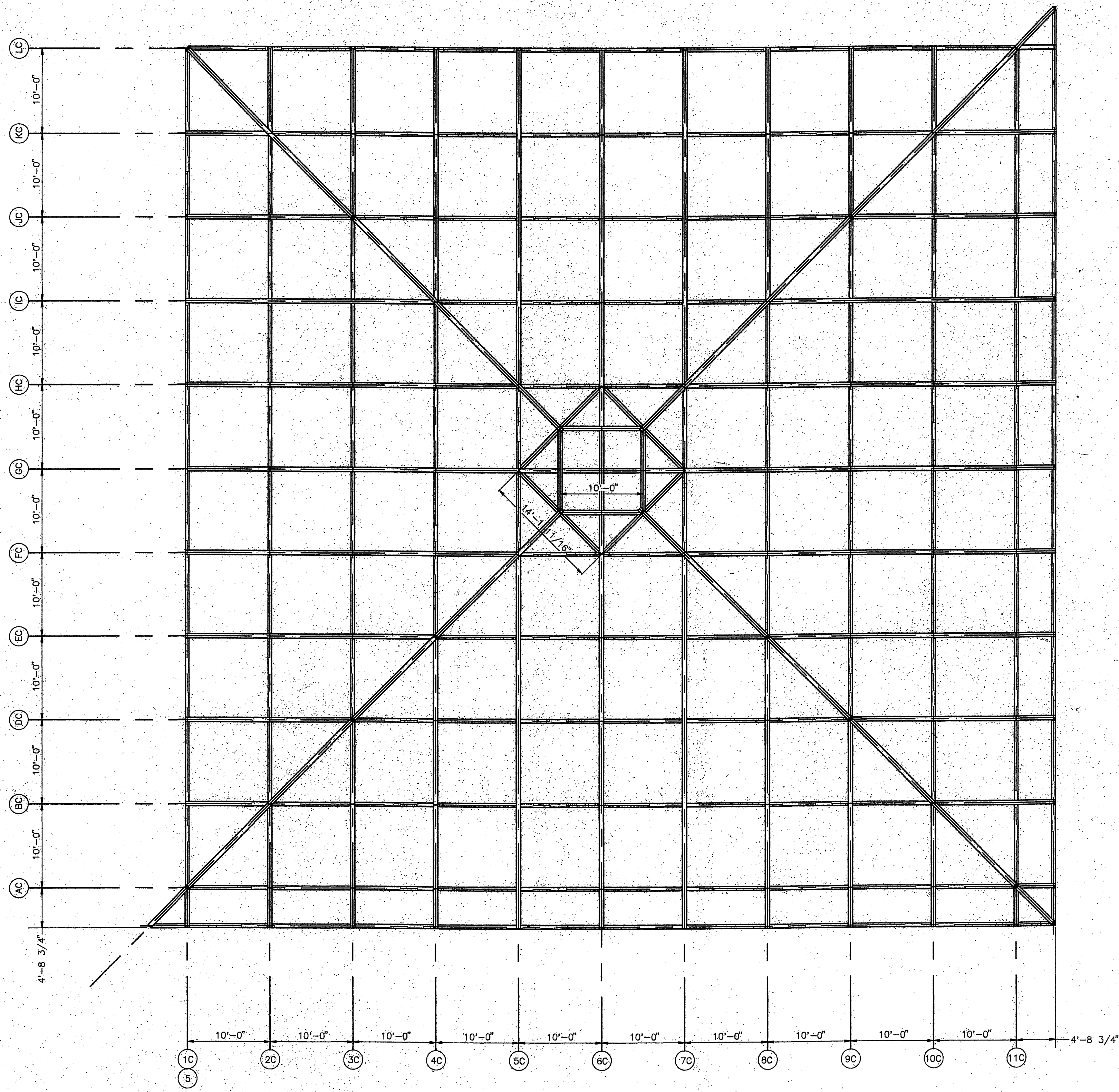
Reviewed and in conformance with contract documents.  
 J. H. FINDORFF & SON, INC.  
 By: [Signature] Date: 7/15/89

WASCO PRODUCTS, INC.  
 ARCHITECTURAL SKYLIGHT DIVISION  
 P.O. BOX 351, SANFORD, MAINE 04073

TEL. 1-800-345-7899

INQUIRY NO. 3193	SHEET 1 of 10
ORDER NO. 74640	DWG. NO. 74640
DWN. BY/DATE J BLANCHARD 5/12/89	PRO. MGR./DATE L. MULLER 5-30-89

REV.	REVISION DESCRIPTION	DWN. BY/DATE	PRO. MGR./DATE	STR. ENR./DATE
1	GENERAL REVISION	LM 6/30/89		



PLAN VIEW OF SUPPORT STEEL

23-044  
 15/16  
 3/4

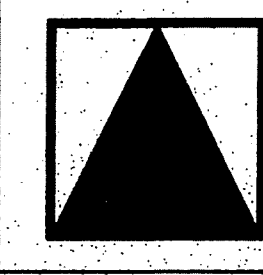
**DRAWING REVIEW**

Review is for general compliance with contract documents. No responsibility is assumed for correctness of dimensions or details. Contractor is responsible for approval of shop drawings and for complete compliance with the requirements of the contract documents.

REVIEWED W/O COMMENTS     AMEND AND RESUBMIT  
 REVIEWED W/COMMENTS     REJECTED-SEE ATTACHED COMMENTS AS NOTED

STUART WILLIAM GALLAHER  
 Architect, Inc.  
 By *[Signature]* Date 1/16/89

SCALE: 1/8" = 1'-0"

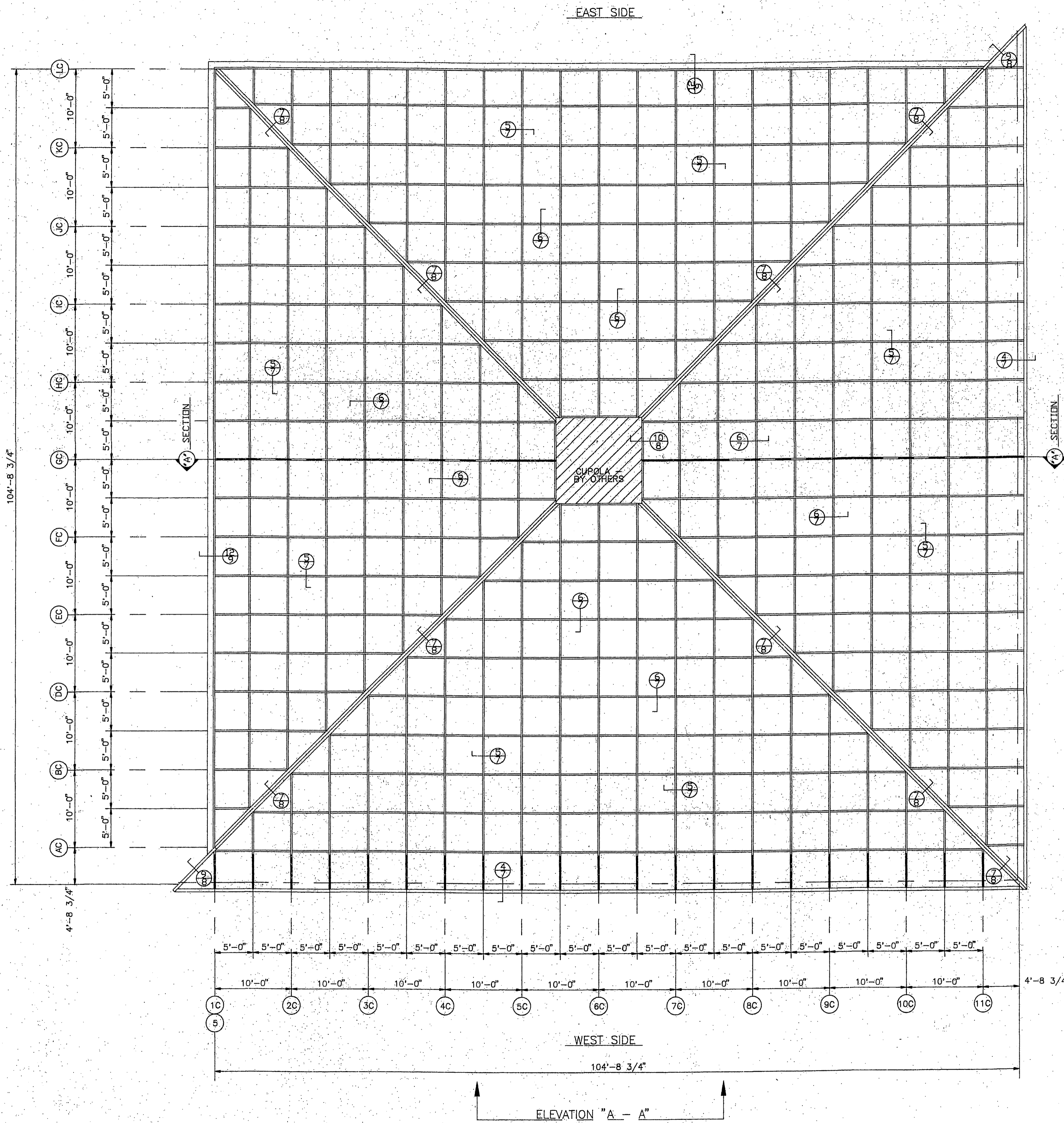


**WASCO PRODUCTS, INC.**  
 ARCHITECTURAL SKYLIGHT DIVISION  
 P.O. BOX 351, SANFORD, MAINE 04073

TEL. 1-800-345-7899

REV.	REVISION DESCRIPTION	DWN. BY/DATE	PRO. MGR./DATE	STR. ENR./DATE	INQUIRY NO. 3193	ORDER NO. 74640	SHEET 2 of 10
					DWN. BY/DATE J. BLANCHARD 5/12/89	PRO. MGR./DATE L. MARRAS May 30, 1989	DWG. NO. 74640A





ELEVATION "A - A"

PLAN VIEW OF (PY) PYRAMID UNIT  
 ONE UNIT REQ'D AS SHOWN  
 SCALE: 1/8" = 1'-0"

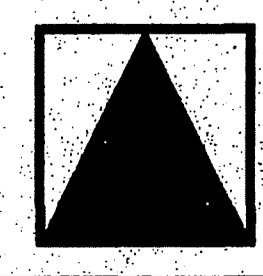
**DRAWING REVIEW**  
 Review is for general compliance with contract documents. No responsibility is assumed for correctness of dimensions or details. Contractor is responsible for approval of shop drawings and for complete compliance with the requirements of the contract documents.

REVIEWED W/NO COMMENTS  AMEND AND RESUBMIT  
 REVIEWED W/COMMENTS AS NOTED  REJECTED-SEE ATTACHED COMMENTS

STUART WILLIAM GALLAHER  
 Architect, Inc.  
 By: *[Signature]* Date: 2/6/89



SCALE: 1/8" = 1'-0"

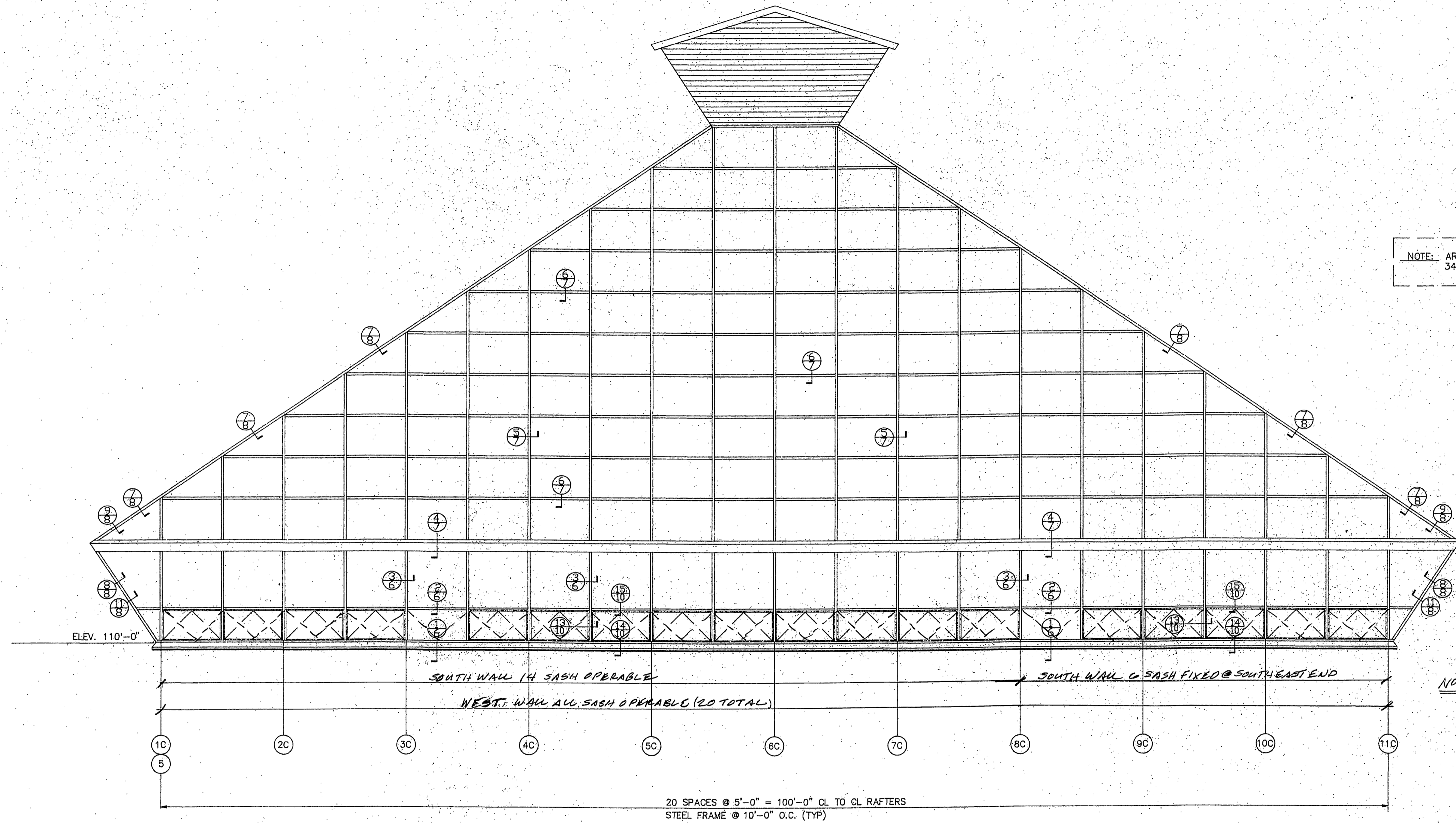


**WASCO PRODUCTS, INC.**  
 ARCHITECTURAL SKYLIGHT DIVISION  
 P.O. BOX 351, SANFORD, MAINE 04073

TEL. 1-800-345-7899

REV.	REVISION DESCRIPTION	DWN. BY/DATE	PRO. MGR./DATE	STR. ENR./DATE	INQUIRY NO. 3193
1	ADDED CUPOLA	L.M. 6/30/89		L.MURRAY 6/30/89	ORDER NO. 74640
					DWN. BY/DATE PRO. MGR./DATE STR. ENR./DATE
					J. BLANCHARD 5/12/89

SHEET 3 of 10  
 DWG. NO. 74640B



NOTE: ARCHITECT PLEASE VERIFY LOCATION OF VENT WINDOWS.  
34 WINDOWS ARE SPECIFIED IN WASCO'S QUOTE.

NOTE: ALL OPERATING SASH ARE  
BOTTOM HINGED.

ELEVATION "A - A" (TYPICAL FOR SOUTH AND WEST ENDS)

**DRAWING REVIEW**

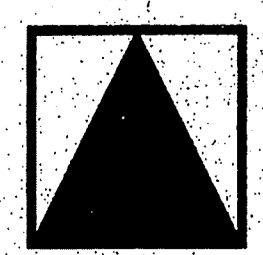
Review is for general compliance with contract documents. No responsibility is assumed for correctness of dimensions or details. Contractor is responsible for approval of shop drawings and for complete compliance with the requirements of the contract documents.

REVIEWED WHO COMMENTS AS WRITER  
 REVIEWED WHO COMMENTS AS WRITER  
 AMEND AND RESUBMIT  
 REJECTED-SEE ATTACHED COMMENTS

STUART WILLIAM GALLAHER  
Architect, Inc.

By: *[Signature]* Date: 1/11/89

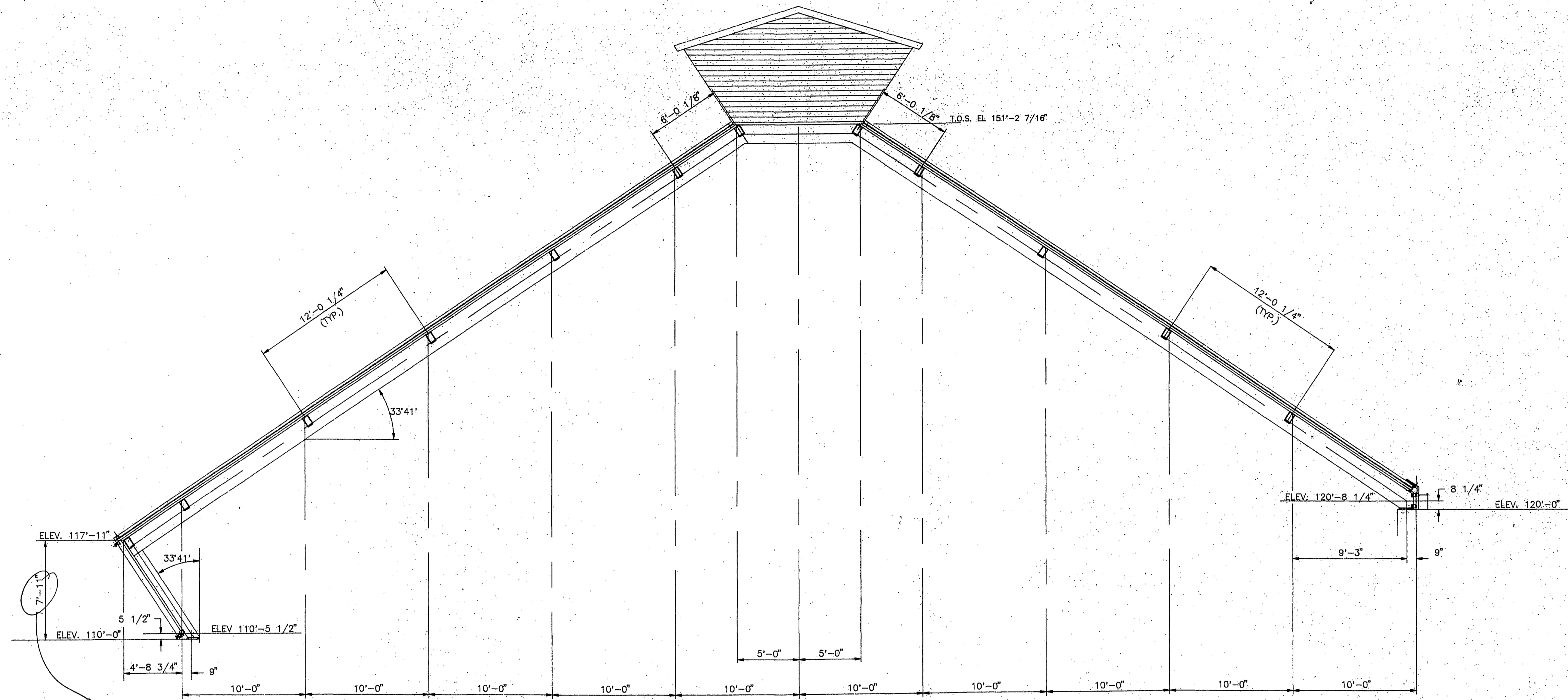
SCALE: 3/16" = 1'-0"



WASCO PRODUCTS, INC.  
ARCHITECTURAL SKYLIGHT DIVISION  
P.O. BOX 351, SANFORD, MAINE 04073

TEL. 1-800-345-7899

REV.	REVISION DESCRIPTION	DWN. BY/DATE	PRO. MGR./DATE	STR. ENR./DATE	INQUIRY NO. 3193	ORDER NO. 74640	SHEET 4 of 10
1	ADDED cupola			L. MURRAY 6/30/89	J. BLANCHARD 5/12/89		DWG. NO. 74640C



HOW DOES THIS RELATE TO DETAIL 4/17.

SECTION "A"

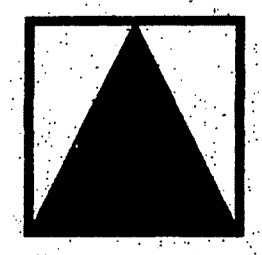
**DRAWING REVIEW**

Review is for general compliance with contract documents. No responsibility is assumed for correctness of dimensions or details. Contractor is responsible for approval of shop drawings and for complete compliance with the requirements of the contract documents.

REVIEWED W/NO COMMENTS     AMEND AND RESUBMIT  
 REVIEWED W/COMMENTS AS NOTED     REJECTED-SEE ATTACHED COMMENTS

STUART WILLIAM GALLAHER  
 Architect, Inc.  
 By: *[Signature]* Date: 11/1/89

TELBYNE DOT 11/89

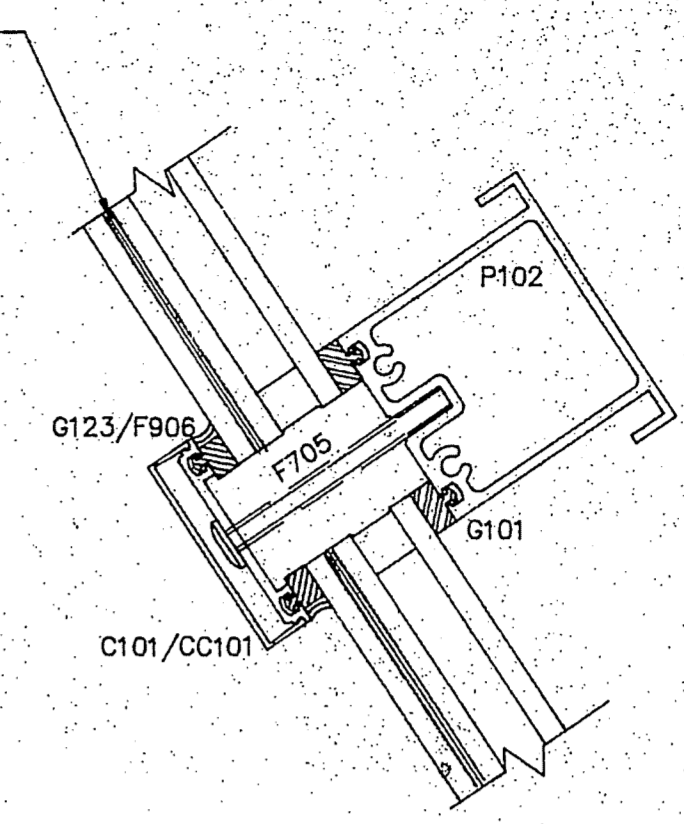


**WASCO PRODUCTS, INC.**  
 ARCHITECTURAL SKYLIGHT DIVISION  
 P.O. BOX 351, SANFORD, MAINE 04073

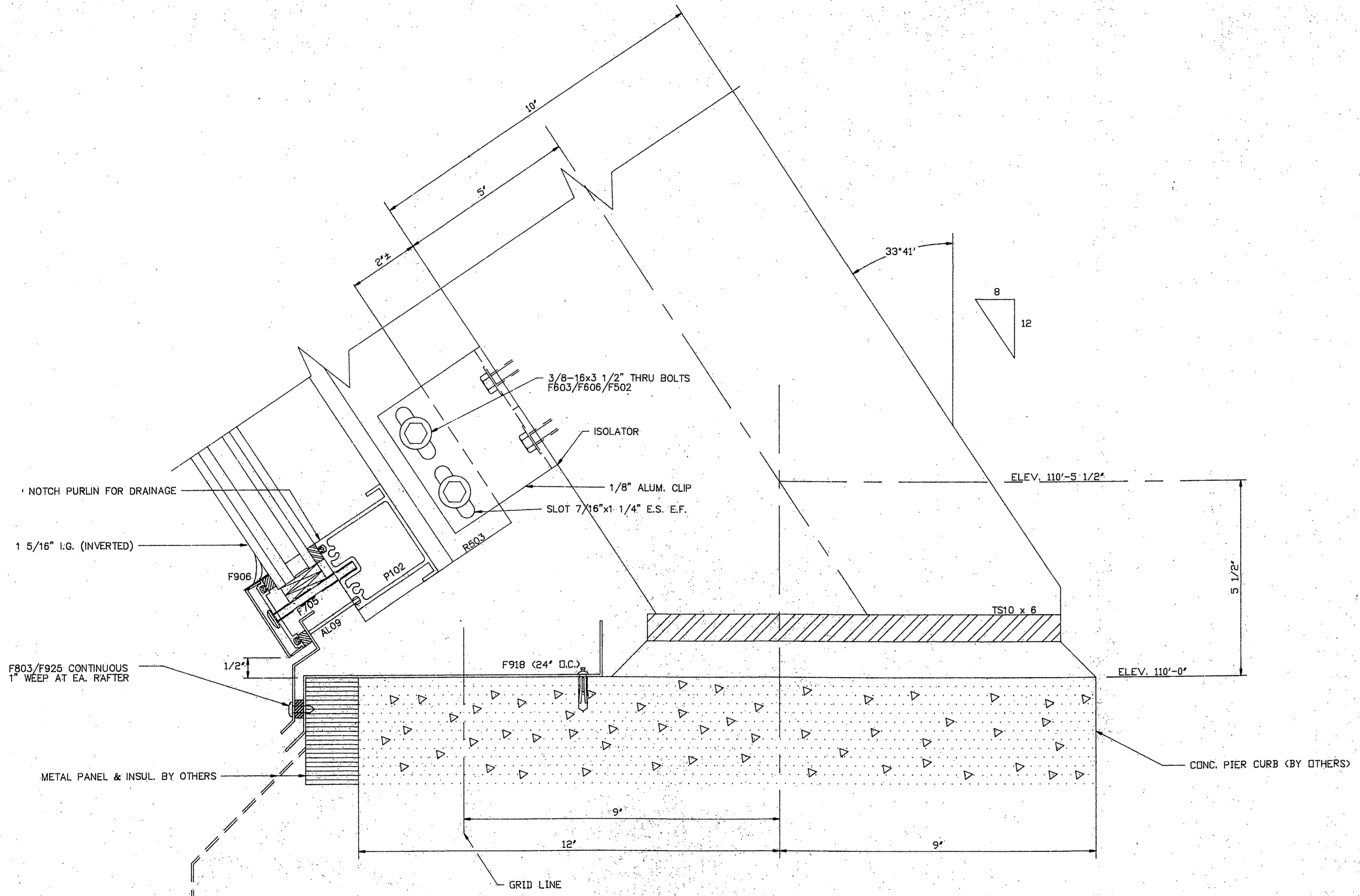
TEL. 1-800-345-7899

REV.	REVISION DESCRIPTION	DWN. BY/DATE	PRO. MGR./DATE	STR. ENR./DATE	INQUIRY NO. 3193
1	ADDED CUPOLA			LM 6/30/89	ORDER NO. 74640
					DWN. BY/DATE PRO. MGR./DATE STR. ENR./DATE
					J BLANCHARD 5/12/89
SHEET 5 of 10					
DWG. NO. 74640D					

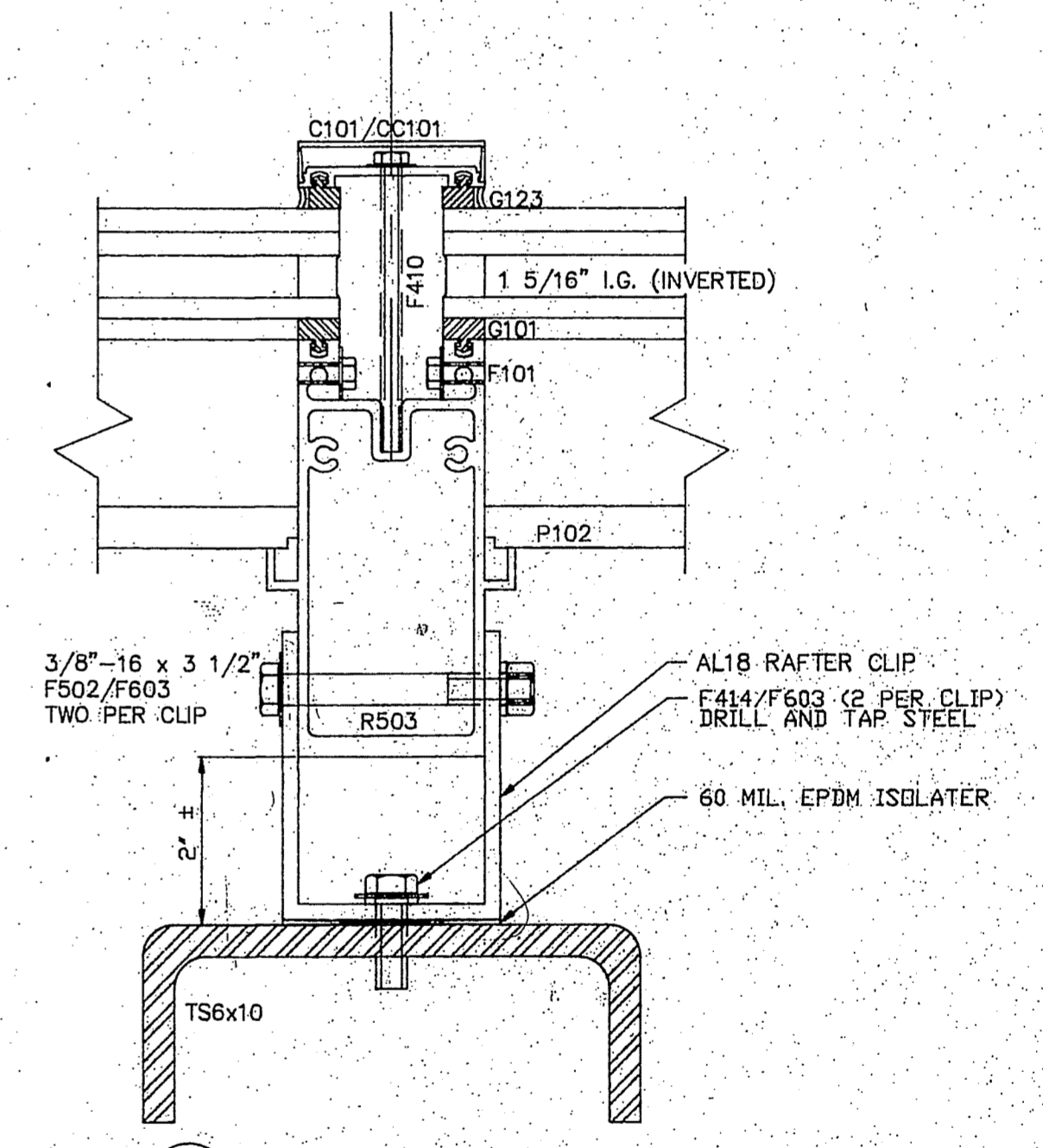
1 5/16" I.G. (INVERTED).  
 NOTE: GLAZE LAMINATED GLASS TO EXTERIOR  
 AT REVERSE SLOPE ONLY



2  
6  
INVERTED PURLIN DETAIL (GLASS)  
1/2" = 1"

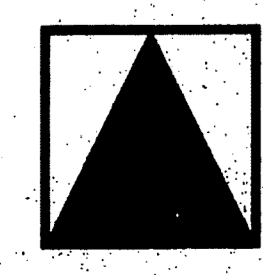


1  
6  
INVERTED SILL DETAIL (GLASS)  
1/2" = 1"



3  
6  
INVERTED RAFTER DETAIL (GLASS)  
1/2" = 1"

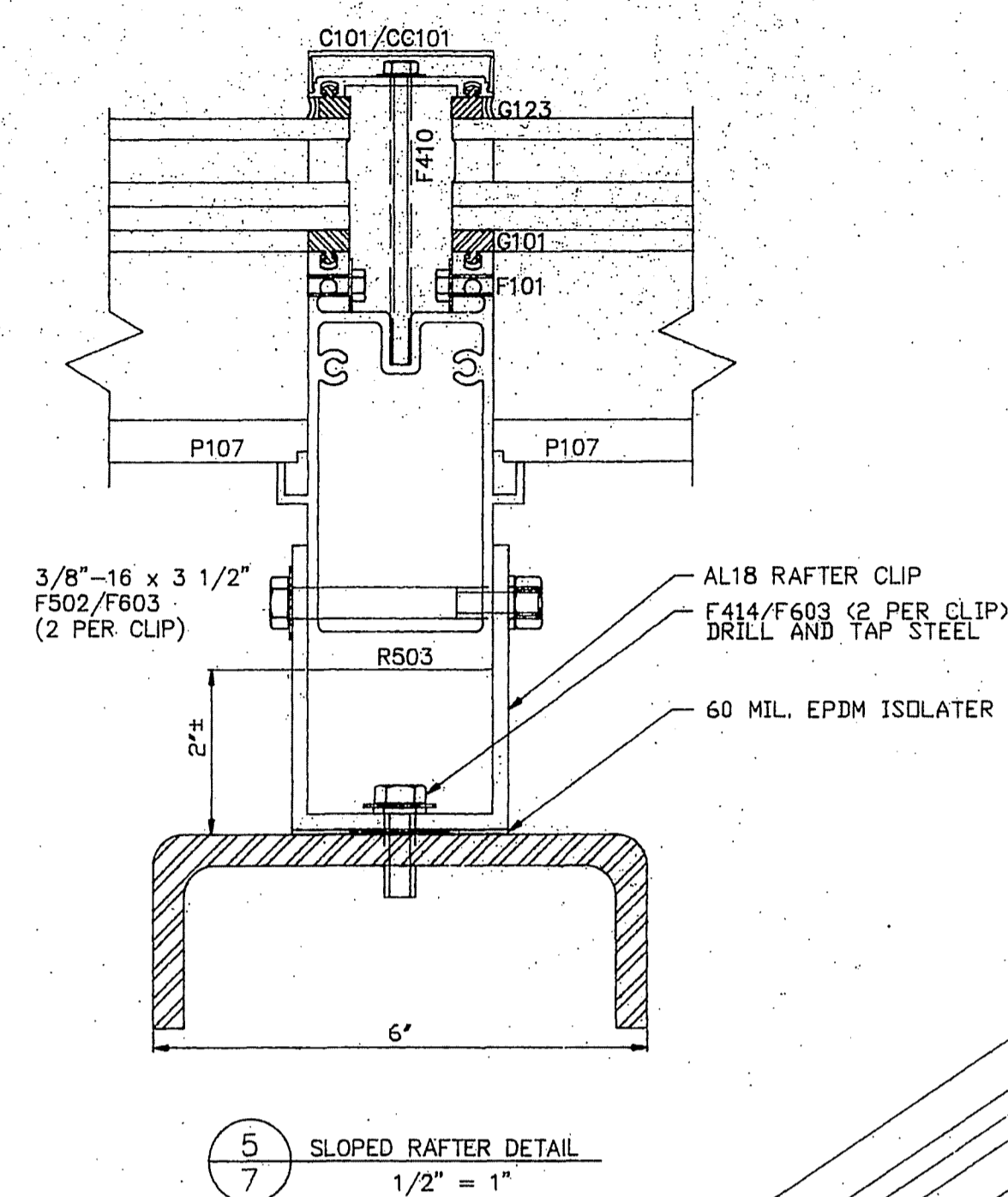
**DRAWING REVIEW**  
 Review is for general compliance with contract documents.  
 No responsibility is assumed for correctness of dimensions or  
 details. Contractor is responsible for approval of shop drawings  
 and for complete compliance with the requirements of the  
 contract documents.  
 REVIEWED W/COMMENTS  AMEND AND RESUBMIT  
 REVIEWED W/COMMENTS AS NOTED  REJECTED-SEE ATTACHED COMMENTS  
**STUART WILLIAM GALLAHER**  
 Architect, Inc.  
 By: *[Signature]* Date: 7/6/89



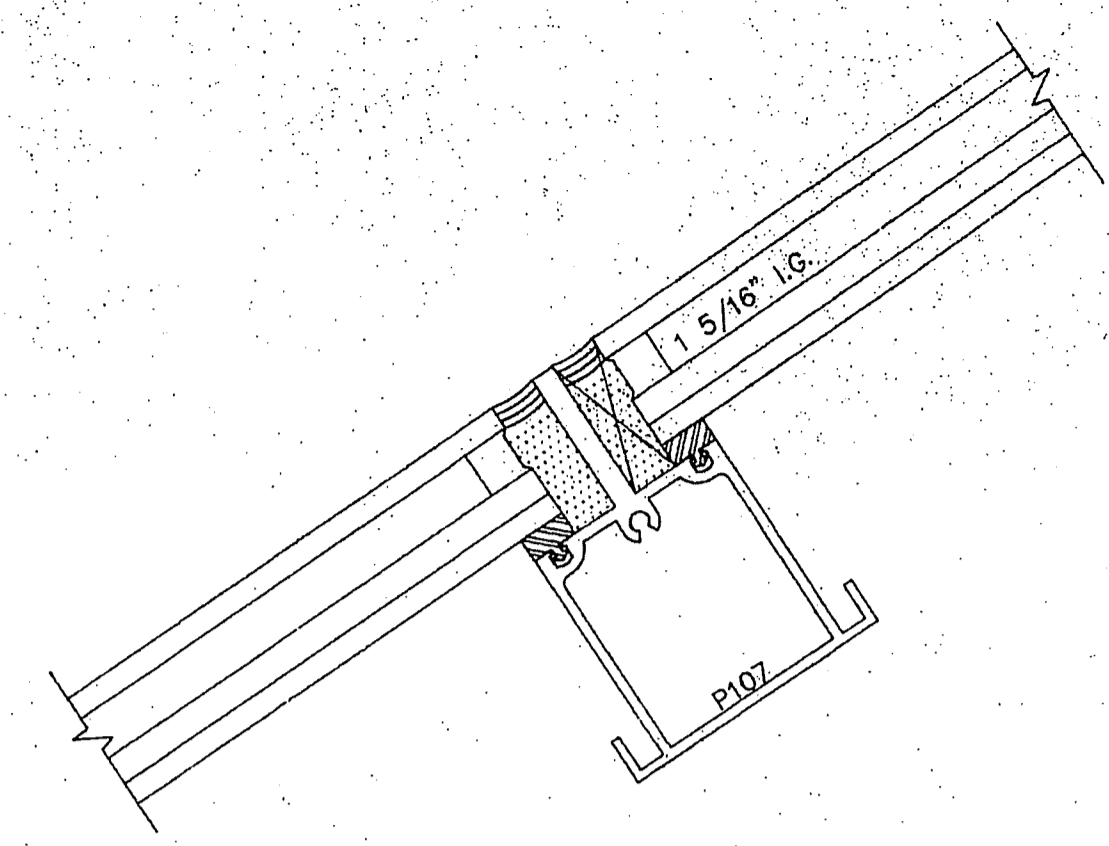
**WASCO PRODUCTS, INC.**  
 ARCHITECTURAL SKYLIGHT DIVISION  
 P.O. BOX 351, SANFORD, MAINE 04073

TEL. 1-800-345-7899

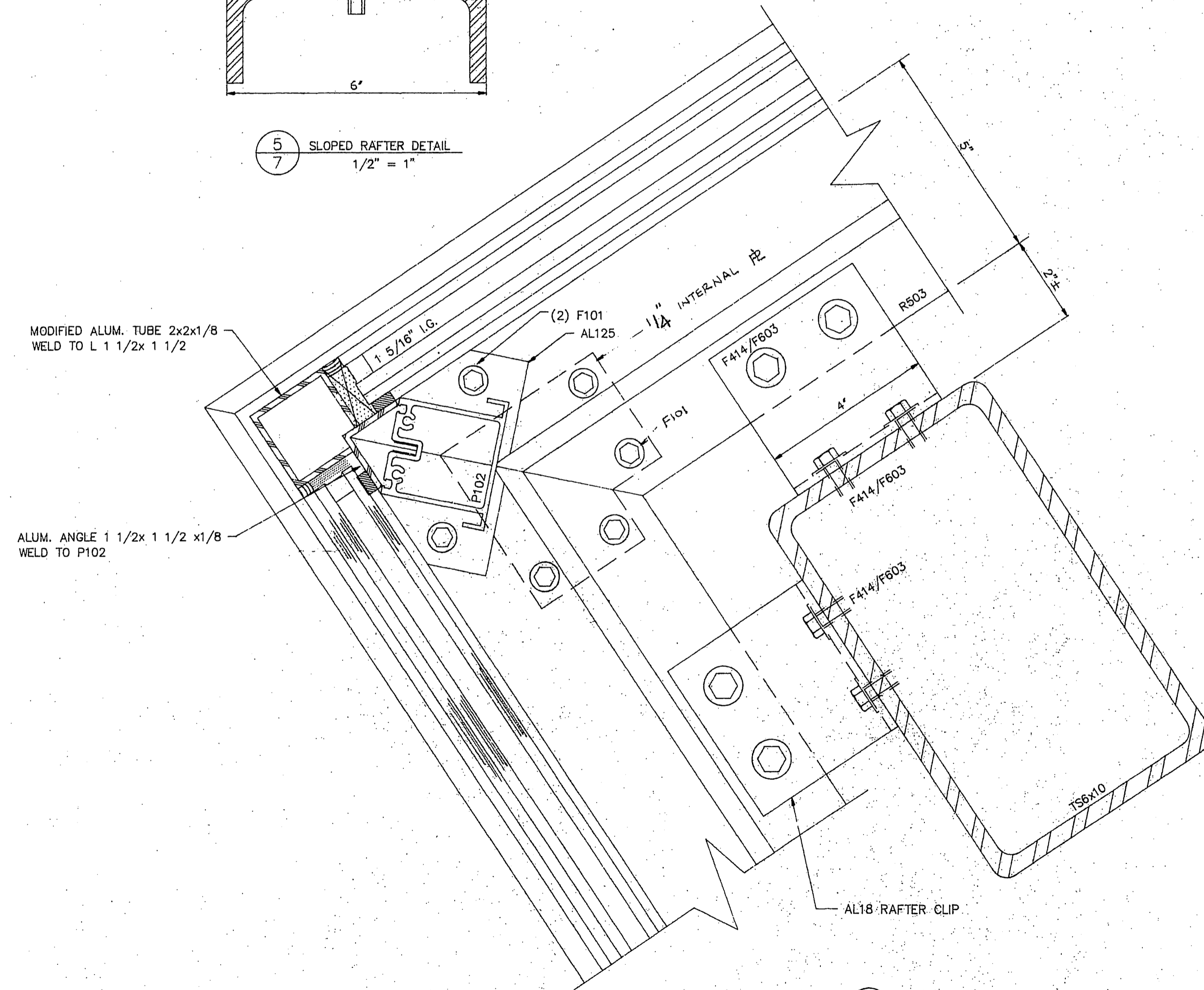
REV.	REVISION DESCRIPTION	DWN. BY/DATE	PRO. MGR./DATE	STR. ENR./DATE	INQUIRY NO. 3193	SHEET 6 of 10
1	DET. 1 & 2				ORDER NO. 74640 DWN. BY/DATE: J. BLANCHARD 5/12/89 PRO. MGR./DATE: [Blank] STR. ENR./DATE: [Blank]	
					DWG. NO. 74640E	



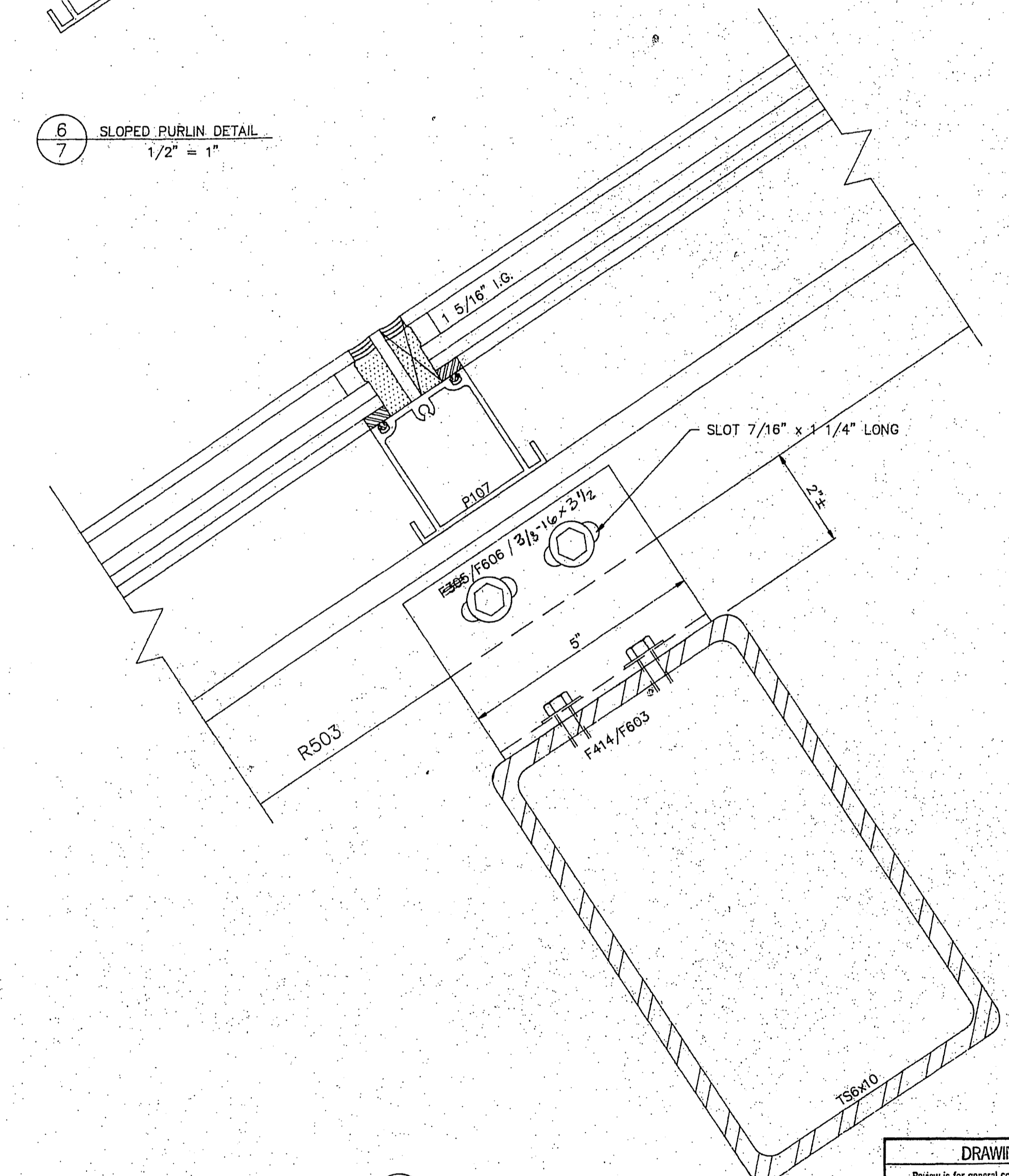
5 SLOPED RAFTER DETAIL  
1/2" = 1"



6 SLOPED PURLIN DETAIL  
1/2" = 1"



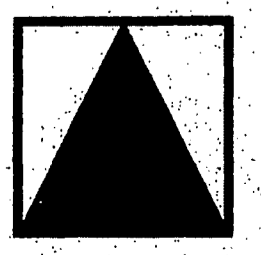
4 KNEE DETAIL  
1/2" = 1"



6A PURLIN DETAIL @ STEEL SUPPORT  
1/2" = 1"

**DRAWING REVIEW**  
 Review is for general compliance with contract documents. No responsibility is assumed for correctness of dimensions or details. Contractor is responsible for approval of shop drawings and for complete compliance with the requirements of the contract documents.  
 REVIEWED W/NO COMMENTS  AMEND AND RESUBMIT  
 REVIEWED W/COMMENTS  REJECTED-SEE ATTACHED COMMENTS AS NOTED  
 STUART WILLIAM GALLAHER  
 Architect, Inc.  
 Date 7/4/89

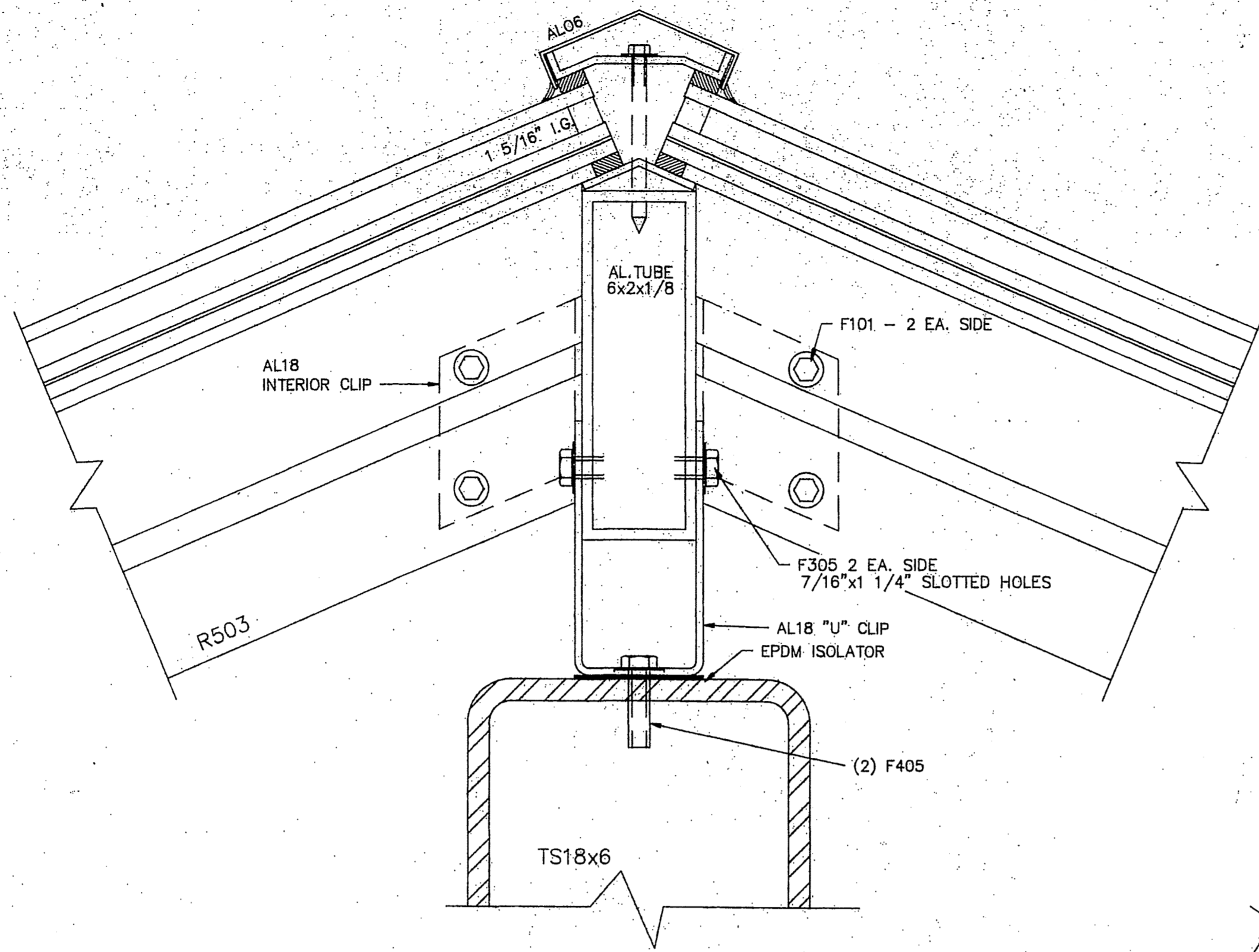
TEL: 1-800-345-7899



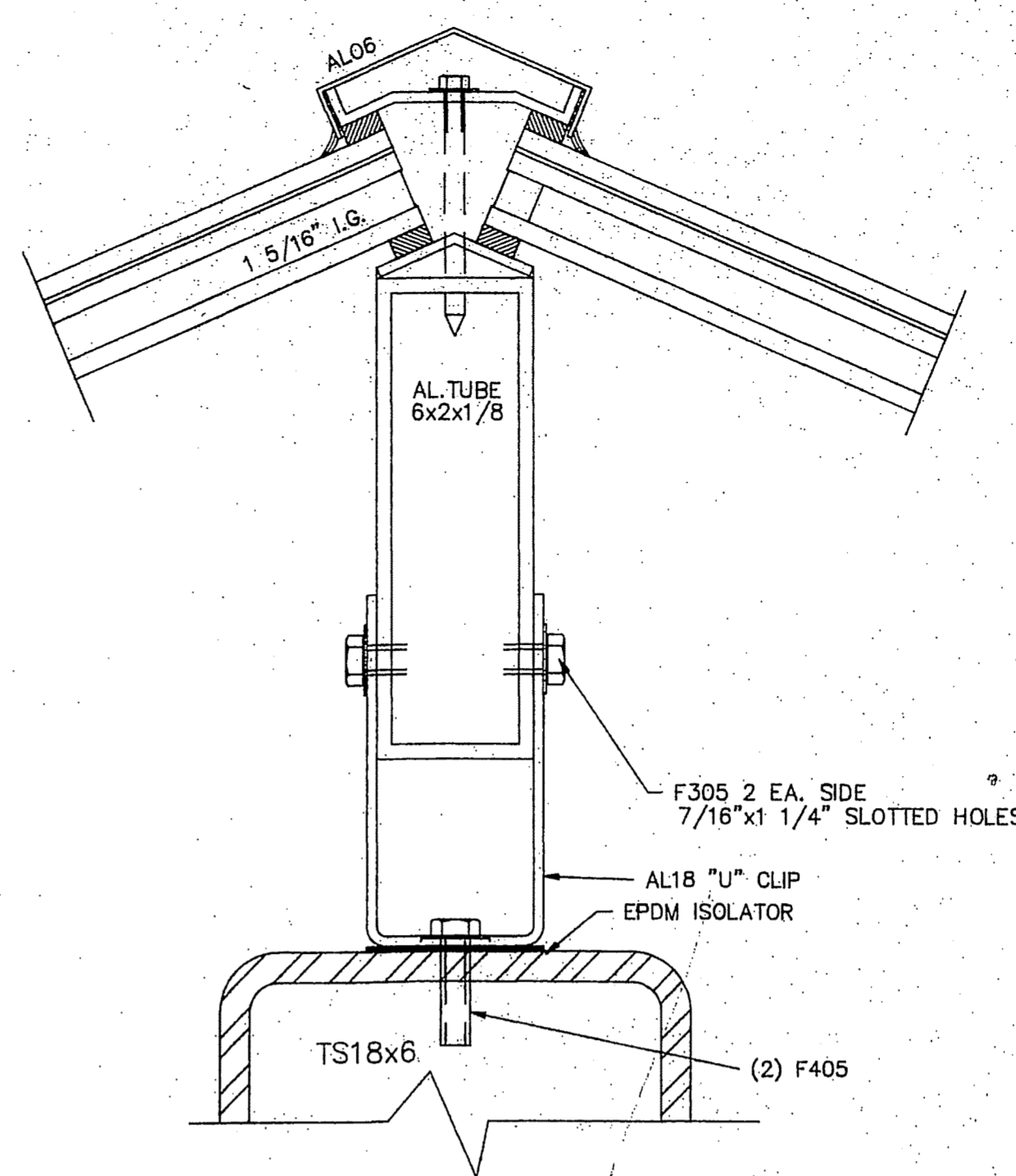
**WASCO PRODUCTS, INC.**  
 ARCHITECTURAL SKYLIGHT DIVISION  
 P.O. BOX 351, SANFORD, MAINE 04073

TEL. 1-800-345-7899

REV.	REVISION DESCRIPTION	DWN. BY/DATE	PRO. MGR./DATE	STR. ENR./DATE	INQUIRY NO. 3193
1	REVISED DET. 4/1; ADDED DET. 6A/7	MURRAY 5/9/89			ORDER NO. 74640
					DWN. BY/DATE: J BLANCHARD 5/12/89
					PRO. MGR./DATE: LEM 6/22/89
					STR. ENR./DATE: LEM 6/22/89
					SHEET 7 of 10
					DWG. NO. 74640F

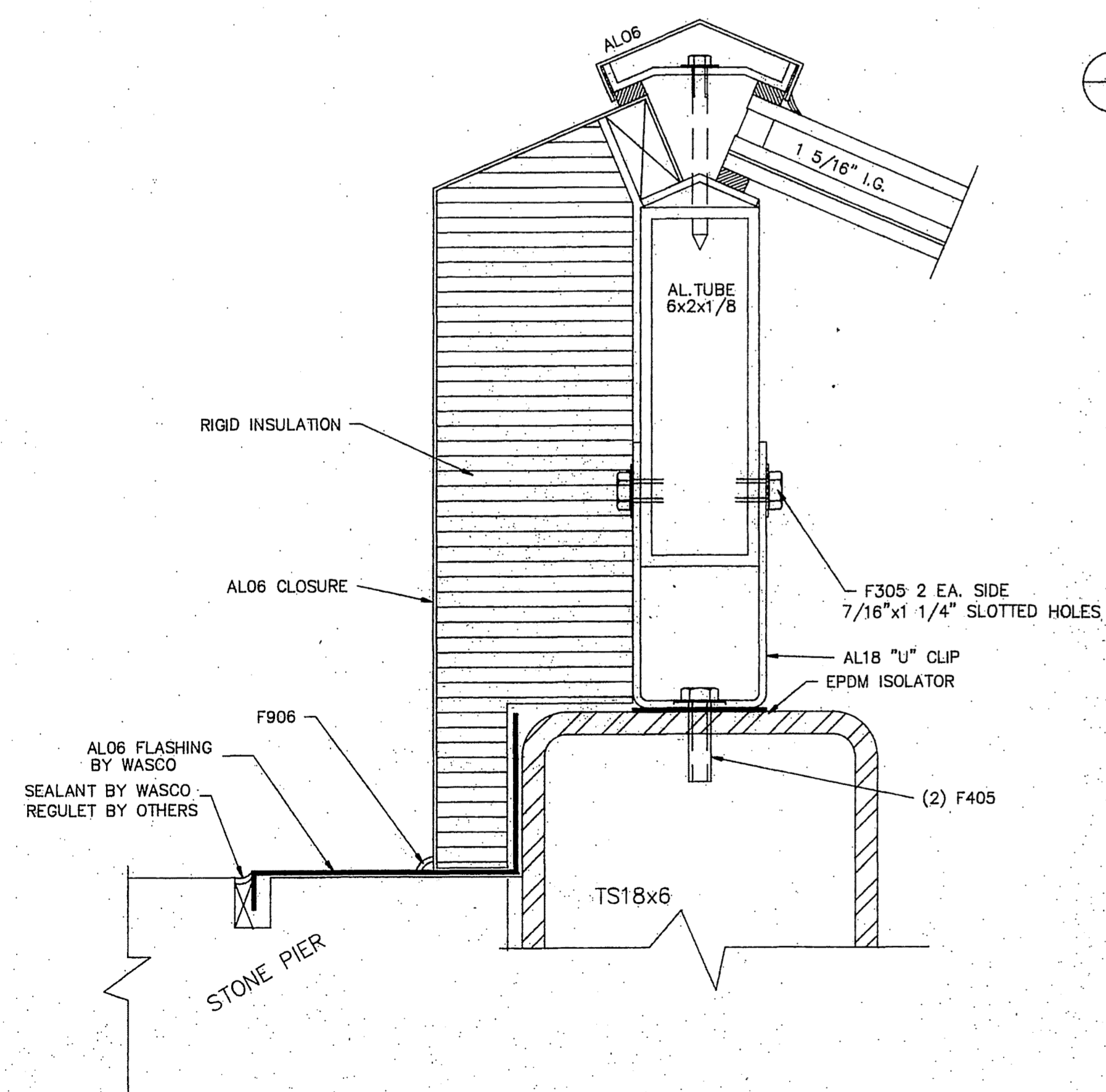


7  
8 SLOPED HIP RAFTER DETAIL  
1/2" = 1"

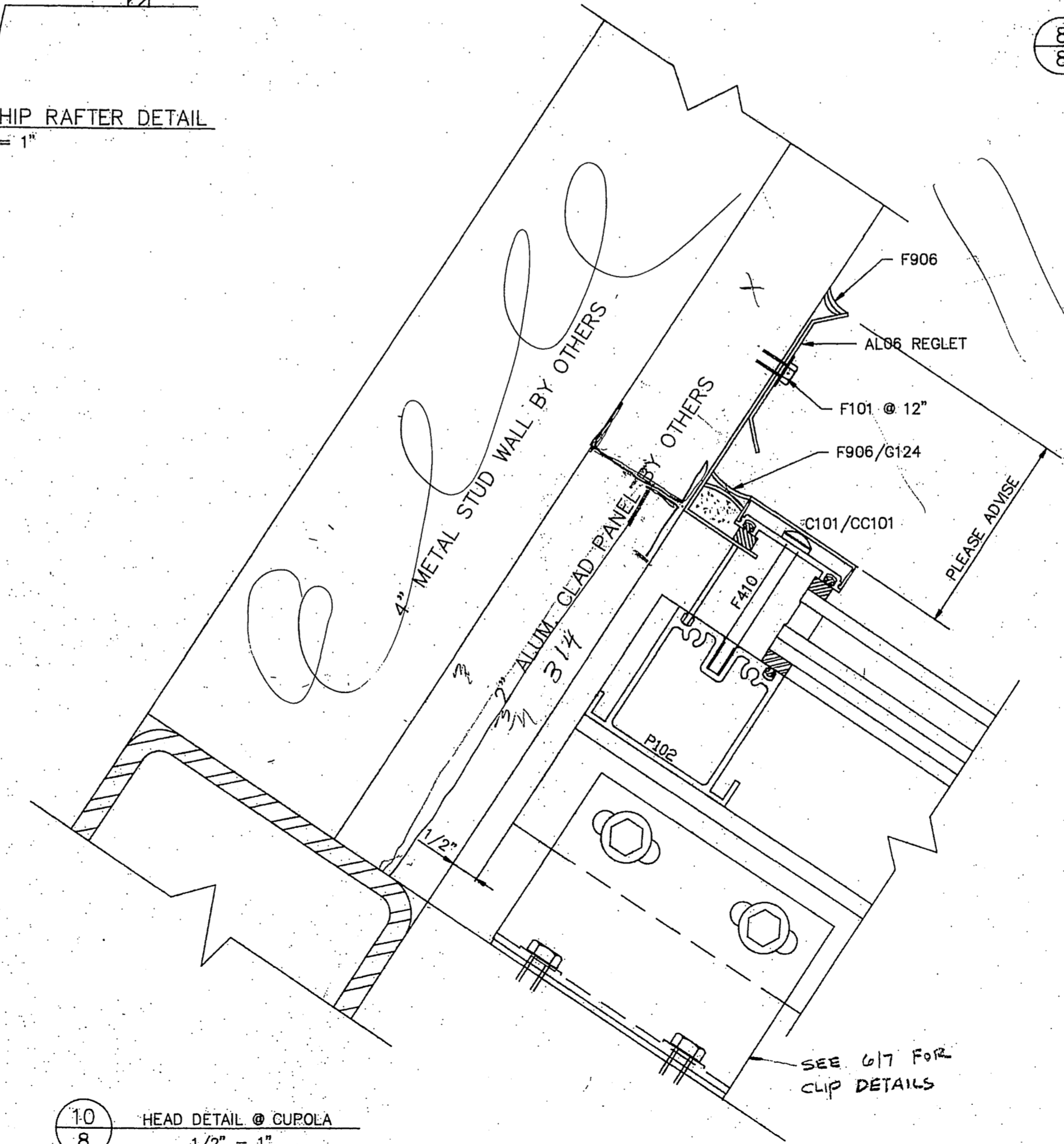


8  
8 INVERTED HIP RAFTER DETAIL  
1/2" = 1"

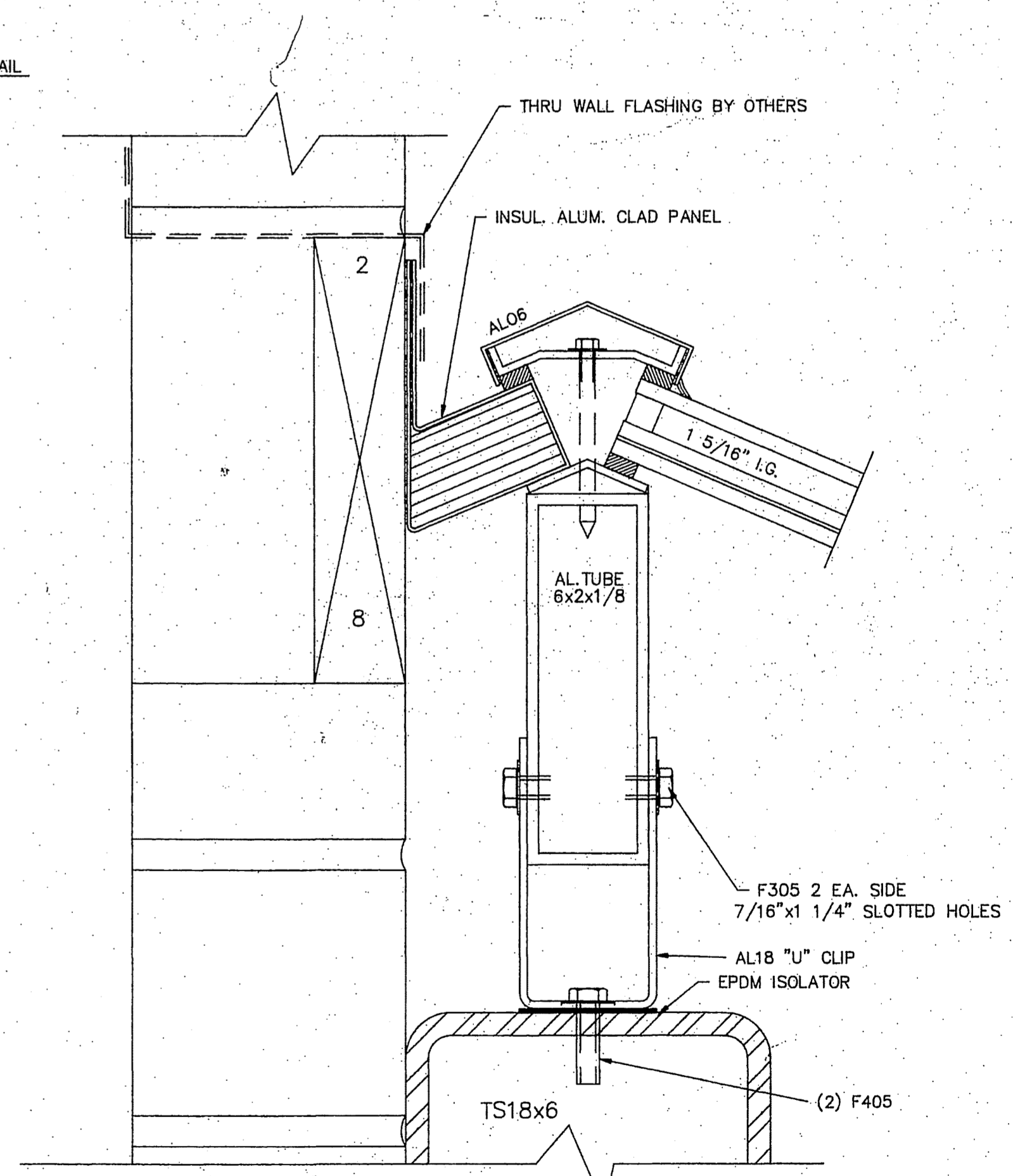
**DRAWING REVIEW**  
 Review is for general compliance with contract documents. No responsibility is assumed for correctness of dimensions or details. Contractor is responsible for approval of shop drawings and for complete compliance with the requirements of the contract documents.  
 REVIEWED W/D COMMENTS  AMEND AND RESUBMIT  
 REVIEWED W/C COMMENTS  REJECTED-SEE ATTACHED COMMENTS AS NOTED  
 STUART WILLIAM GALLAHER  
 Architect, Inc.  
 By: *[Signature]* Date: 7/1/89



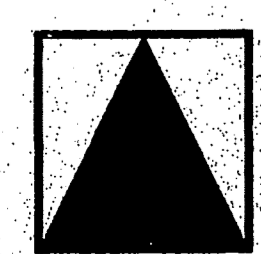
9  
8 SLOPED HIP RAFTER DETAIL (ABOVE STONE PIER)  
1/2" = 1"



10  
8 HEAD DETAIL @ CUROLA  
1/2" = 1"



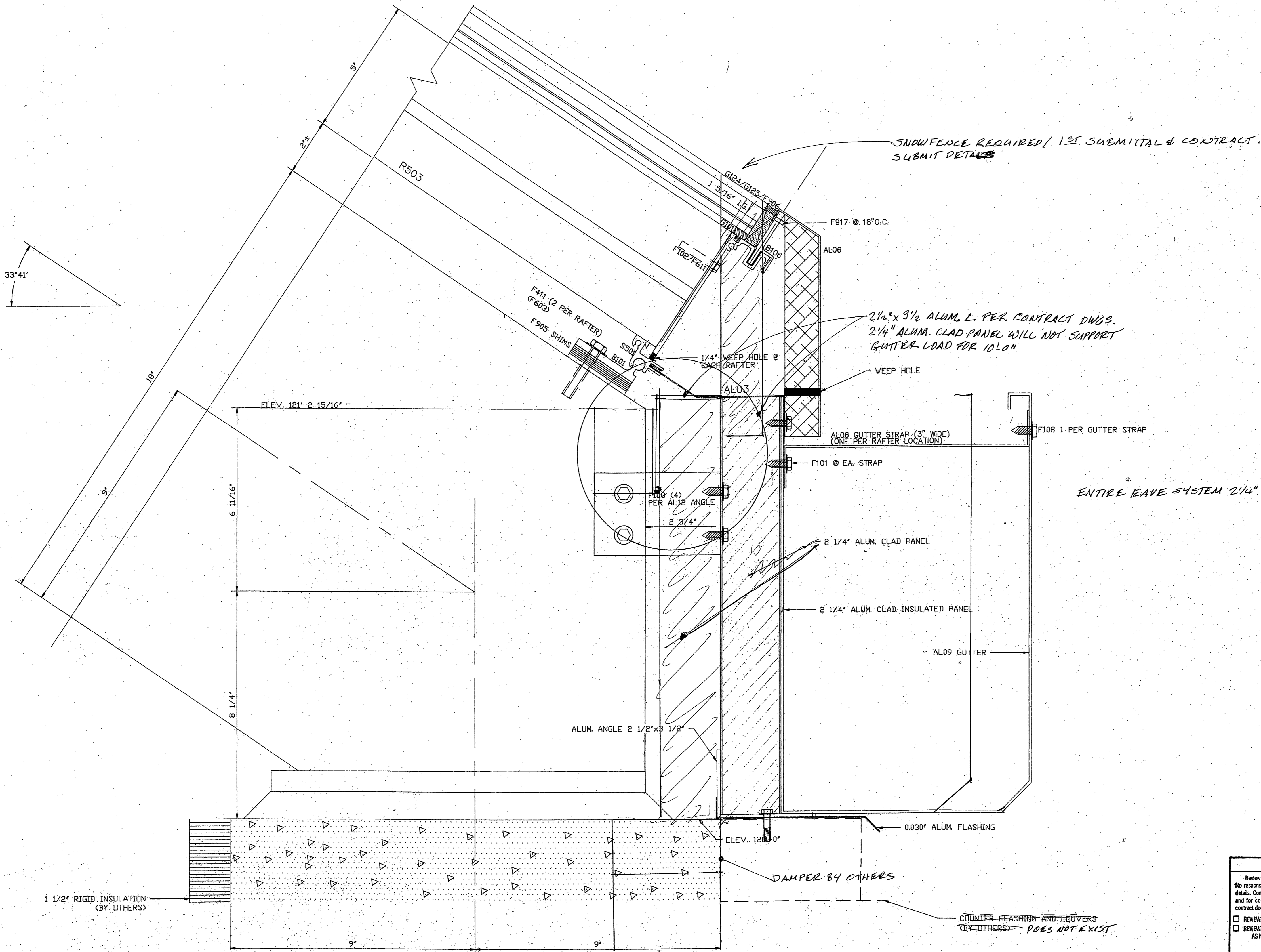
11  
8 INVERTED HIP RAFTER DETAIL (@ STONE PIER)  
1/2" = 1"



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TEL. 1-800-345-7899

INQUIRY NO. 3193	ORDER NO. 74640	SHEET 8 of 10
DWN. BY/DATE J BLANCHARD 5/12/89	PRO. MGR./DATE L MURRAY 6/30/89	STR. ENR./DATE
REV. 1	GENERAL REVISION	DWG. NO. 74640G
REV.	REVISION DESCRIPTION	DWN. BY/DATE
		PRO. MGR./DATE
		STR. ENR./DATE



12 SLOPED SILL DETAIL  
9 1/2" = 1"

**DRAWING REVIEW**

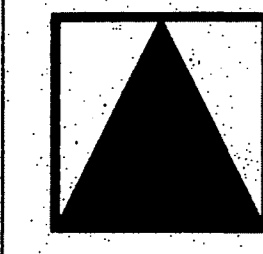
Review is for general compliance with contract documents. No responsibility is assumed for correctness of dimensions or details. Contractor is responsible for approval of shop drawings and for complete compliance with the requirements of the contract documents.

REVIEWED W/NO COMMENTS  AMEND AND RESUBMIT

REVIEWED W/COMMENTS AS NOTED  REJECTED-SEE ATTACHED COMMENTS

STUART WILLIAM GALLAHER  
Architect, Inc.

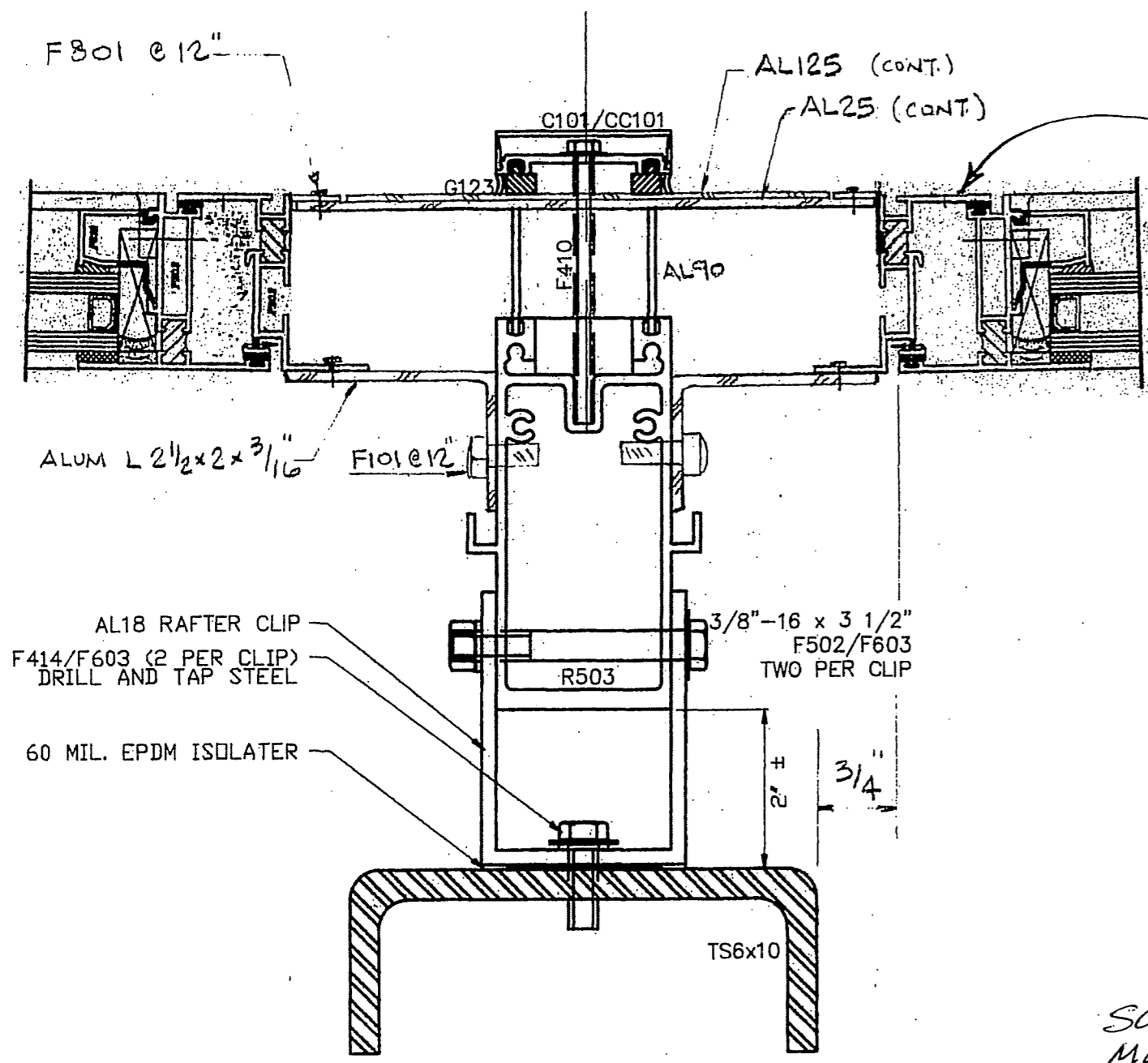
By: *[Signature]* Date: 7/6/29



**WASCO PRODUCTS, INC.**  
ARCHITECTURAL SKYLIGHT DIVISION  
P.O. BOX 351, SANFORD, MAINE 04073

TEL. 1-800-345-7899

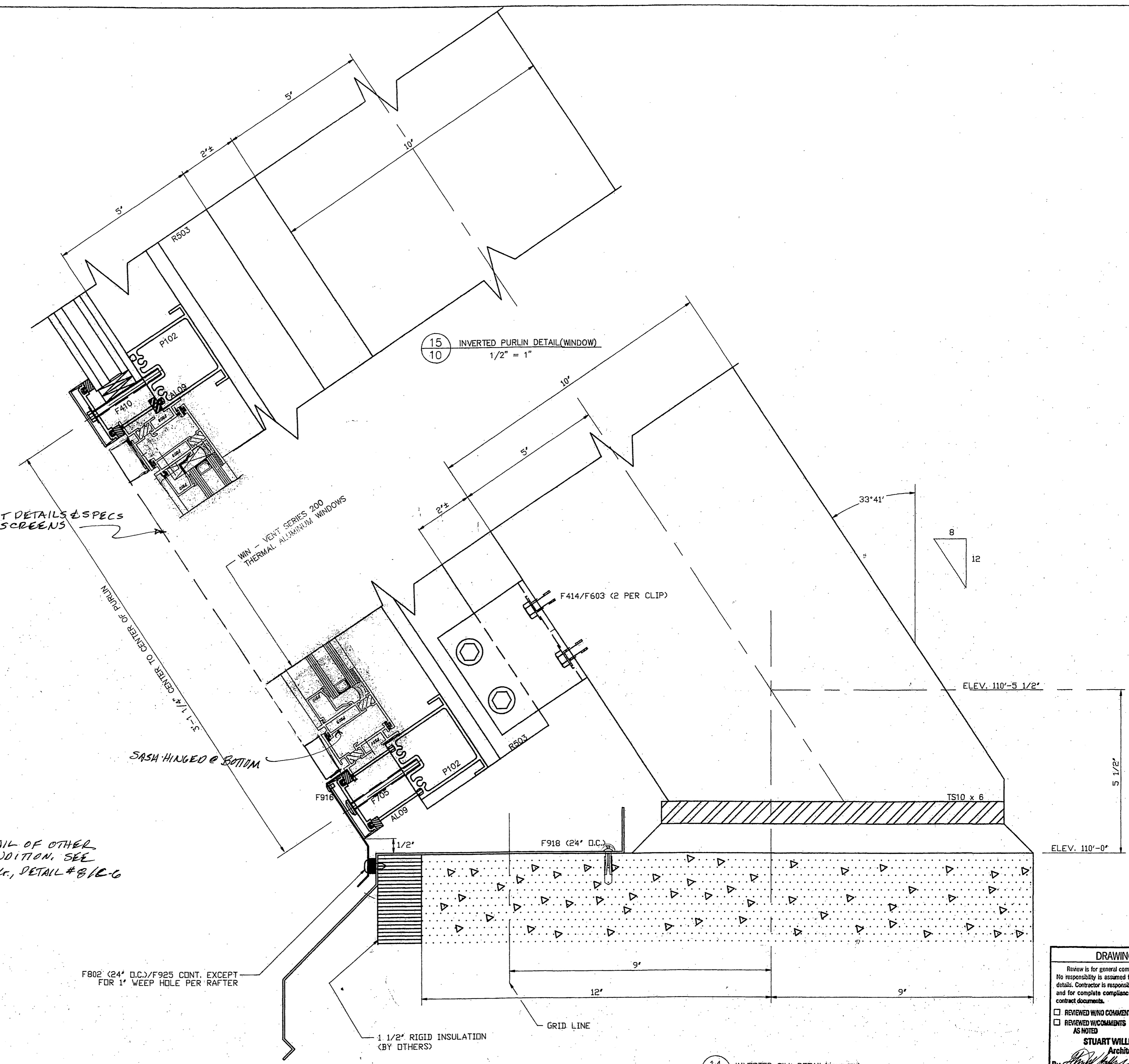
REV.	REVISION DESCRIPTION	DWN. BY/DATE	PRO. MGR./DATE	STR. ENR./DATE	INQUIRY NO. 3193	ORDER NO. 74640	SHEET 9 of 10
1	REVISED GUTTER	LM 6/30/29		L.MURRAY 6/30/29	JB		DWG. NO. 74640H



13 INVERTED RAFTER DETAIL (WINDOW)  
1/2" = 1"  
DETAIL @ STEEL RAFTER ONLY

SUBMIT DETAILS & SPECS FOR SCREENS

SUBMIT DETAIL OF OTHER MULLION CONDITION. SEE CONTRACT DWG., DETAIL #812-G



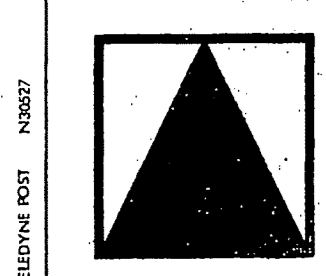
**DRAWING REVIEW**

Review is for general compliance with contract documents. No responsibility is assumed for correctness of dimensions or details. Contractor is responsible for approval of shop drawings and for complete compliance with the requirements of the contract documents.

REVIEWED W/NO COMMENTS  AMEND AND RESUBMIT  
 REVIEWED W/COMMENTS AS NOTED  REJECTED-SEE ATTACHED COMMENTS

**STUART WILLIAM GALLAHER**  
Architect, Inc.

By: [Signature] Date: 7/1/89

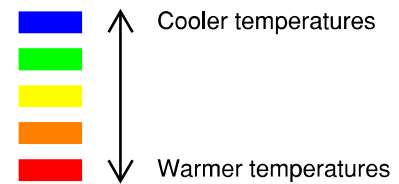
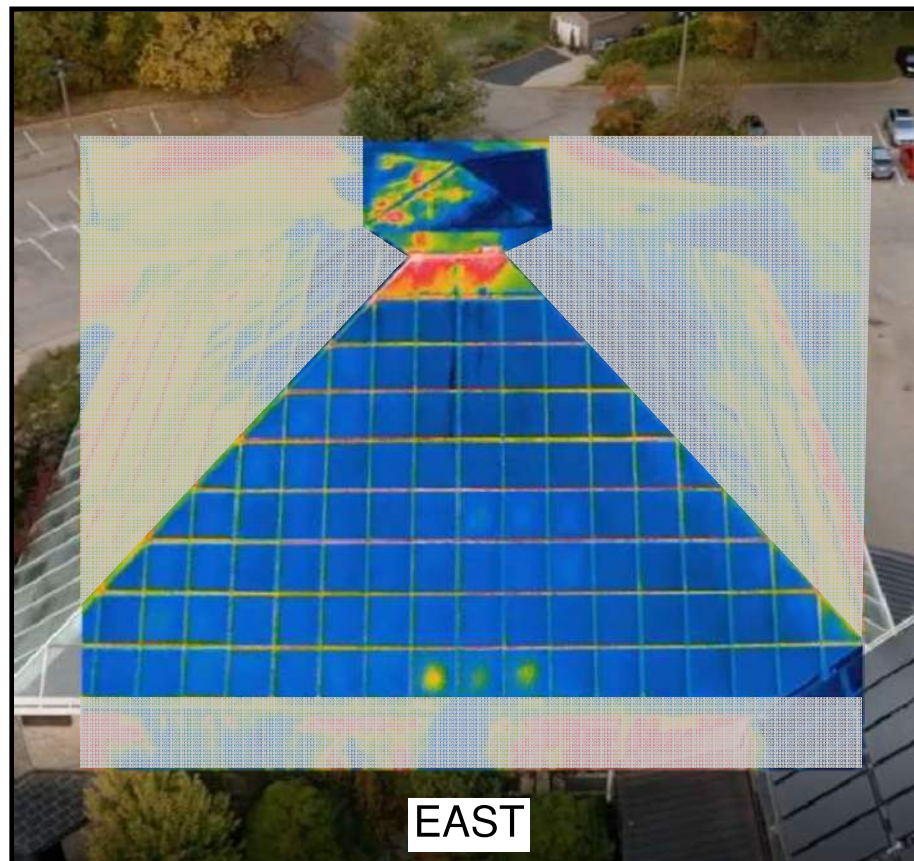
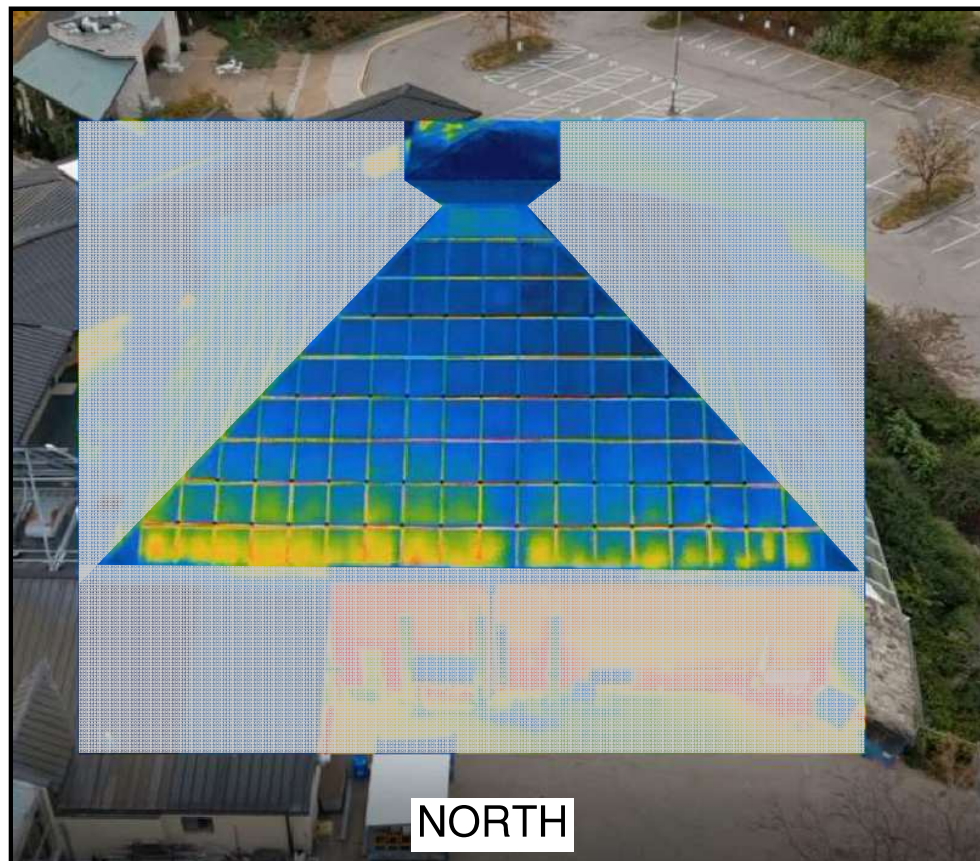
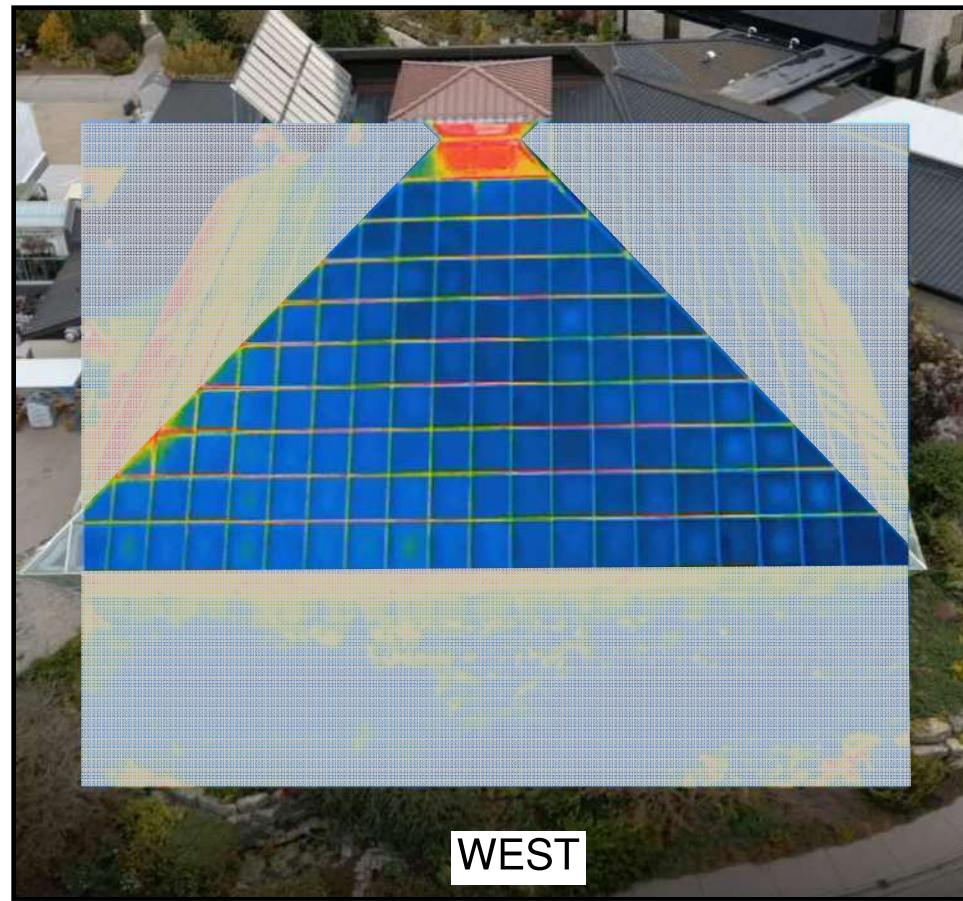
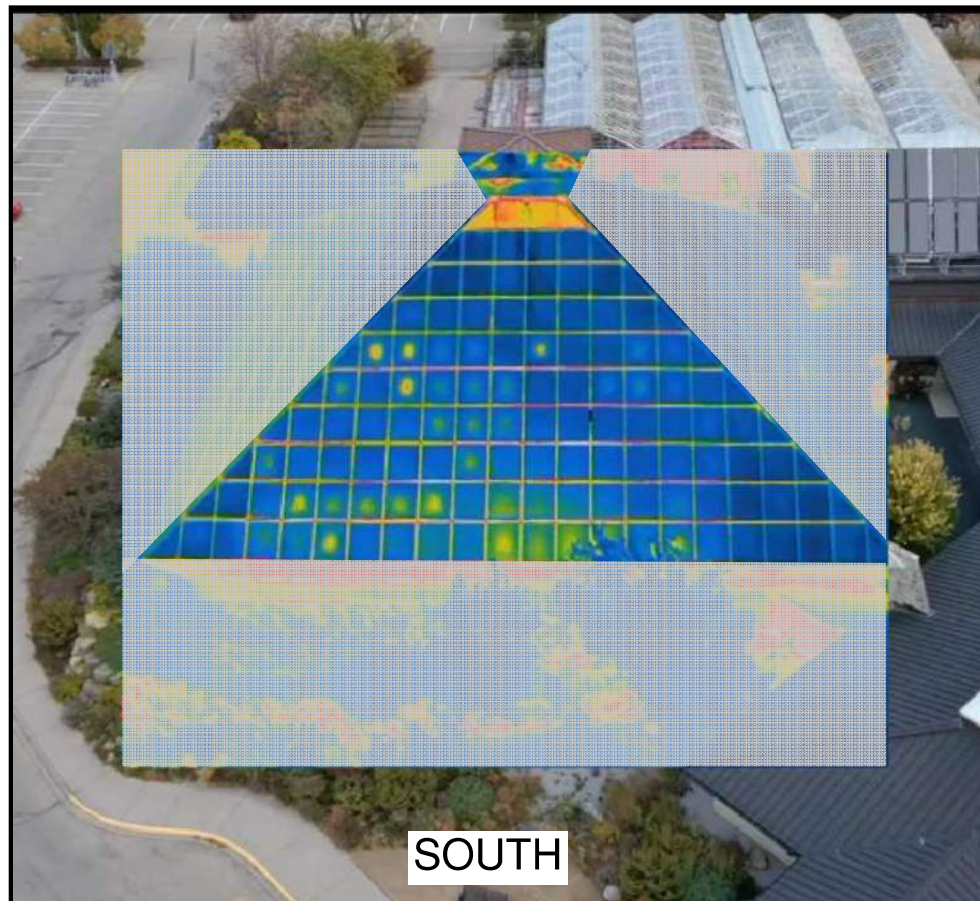


**WASCO PRODUCTS, INC.**  
ARCHITECTURAL SKYLIGHT DIVISION  
P.O. BOX 351, SANFORD, MAINE 04073

TEL. 1-800-345-7899

REV.	REVISION DESCRIPTION	DWN. BY/DATE	PRO. MGR./DATE	STR. ENR./DATE	INQUIRY NO. 3193	ORDER NO. 74640	SHEET 10 of 10
1	DETAIL 13/10				J BLANCHARD 5/12/89	J BLANCHARD 5-30-89	DWG. NO. 74640I





**Notes:**

1. Infrared images were reviewed for surfaces perpendicular to the camera. Areas in the background or around corners should be disregarded.
2. Additional images and video from the infrared camera are available in the supplemental information provided with this report.



1800 DEMING WAY SUITE 200  
MIDDLETON, WI 53562  
608.223.9600  
WWW.IMEGCORP.COM

KEYPLAN

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REVISIONS		
No.	Date	Revision / Issue

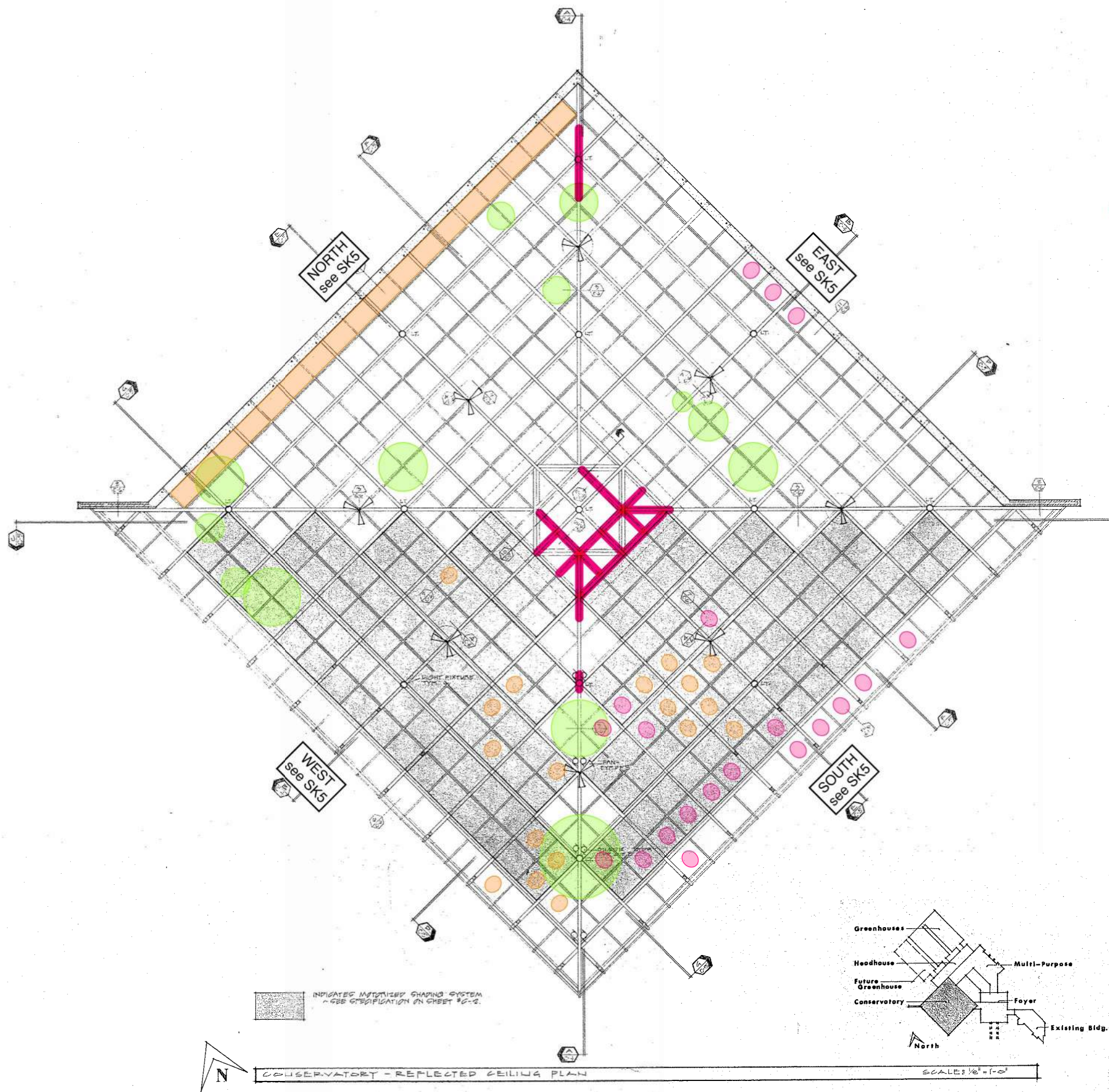
SHEET INFORMATION	
Issue	FCA
Date	1/27/2023
Job Number	22006549.00
Drawn	AAP
Checked	AAP
Scale	

SHEET TITLE

**SKETCH**

SHEET NUMBER

**SK5**



- Areas of vegetation up against the glazing
- Moderate temperature variation at glazing panels
- Strong temperature variation at glazing panels or metal panel roofing
- Strong temperature variation at glazing joints

**IMEG**  
 1800 DEMING WAY SUITE 200  
 MIDDLETON, WI 53562  
 608.223.9600  
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REVISIONS		
No.	Date	Revision / Issue

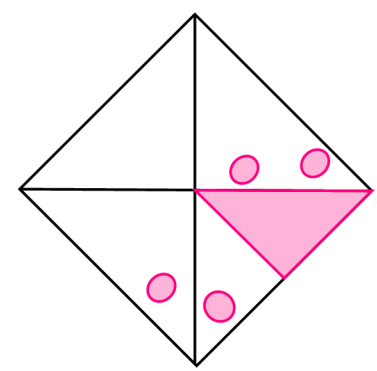
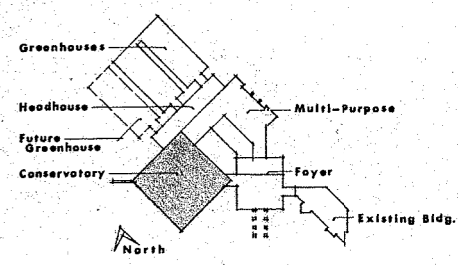
SHEET INFORMATION	
Issue	FCA
Date	1/27/2023
Job Number	22006549.00
Drawn	AAP
Checked	AAP
Scale	

SHEET TITLE

SKETCH

SHEET NUMBER

SK6



**CUPOLA ROOF**

CONSERVATORY - REFLECTED CEILING PLAN  
 SCALE: 1/8"=1'-0"

# Exhibit E

## Reimbursable Hourly Rate Worksheet

*(see bottom of page for instructions)*

Project Name: \_\_\_\_\_  
 Project Location: \_\_\_\_\_  
 Project Number: \_\_\_\_\_  
 Contractor: \_\_\_\_\_  
 Rates are based on the following documentaton: \_\_\_\_\_

Enter TRADE Here:

**Carpenter**

<u>Classification:</u>		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter **YOUR** percentage of base rate in the column below.

% of BR	
0	- Work. Comp
0	- Gen Liability
0	- WI Unemploy
0.6	- Fed Unemploy
7.65	- FICA

**Form Instructions:**

1. Provide a work sheet for ALL Trade Classifications that will be performing on site productive labor during the execution of this project.
2. Responsible contractor to complete only boxes that are shaded, all non-shaded boxes are formula driven.
3. Contractor shall provide the name of the source used for these rates. (union contract, Bureau of Labor and Statistics, AGC, ABC, etc.) and be prepared to provide copies if so requested.

# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

Enter TRADE Here:  
**Cement Finisher**

Classification:		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter **YOUR** percentage of base rate in the column below.

% of BR	
0	- Work. Comp
0	- Gen Liability
0	- WI Unemploy
0.6	- Fed Unemploy
7.65	- FICA

**Form Instructions:**

1. Provide a work sheet for ALL Trade Classifications that will be performing on site productive labor during the execution of this project.
2. Responsible contractor to complete only boxes that are shaded, all non-shaded boxes are formula driven.
3. Contractor shall provide the name of the source used for these rates. (union

contract, Bureau of Labor and Statistics, AGC, ABC, etc.) and be prepared to provide copies if so requested.

# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

Enter TRADE Here:

**Electrician**

Classification:		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter **YOUR** percentage of base rate in the column below.

% of BR

- 0 - Work. Comp
- 0 - Gen Liability
- 0 - WI Unemploy
- 0.6 - Fed Unemploy
- 7.65 - FICA

**Form Instructions:**

1. Provide a work sheet for ALL Trade Classifications that will be performing on site productive labor during the execution of this project.
2. Responsible contractor to complete only boxes that are shaded, all non-shaded boxes are formula driven.
3. Contractor shall provide the name of the source used for these rates. (union

contract, Bureau of Labor and Statistics, AGC, ABC, etc.) and be prepared to provide copies if so requested.

# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

Enter TRADE Here:  
**Elevator Installer**

Classification:		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter **YOUR** percentage of base rate in the column below.

% of BR	
0	- Work. Comp
0	- Gen Liability
0	- WI Unemploy
0.6	- Fed Unemploy
7.65	- FICA

**Form Instructions:**

1. Provide a work sheet for ALL Trade Classifications that will be performing on site productive labor during the execution of this project.
2. Responsible contractor to complete only boxes that are shaded, all non-shaded boxes are formula driven.
3. Contractor shall provide the name of the source used for these rates. (union



contract, Bureau of Labor and Statistics, AGC, ABC, etc.) and be prepared to provide copies if so requested.

# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

Enter TRADE Here:  
**General Laborer**

Classification:		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter **YOUR** percentage of base rate in the column below.

% of BR	
0	- Work. Comp
0	- Gen Liability
0	- WI Unemploy
0.6	- Fed Unemploy
7.65	- FICA

**Form Instructions:**

1. Provide a work sheet for ALL Trade Classifications that will be performing on site productive labor during the execution of this project.
2. Responsible contractor to complete only boxes that are shaded, all non-shaded boxes are formula driven.
3. Contractor shall provide the name of the source used for these rates. (union

contract, Bureau of Labor and Statistics, AGC, ABC, etc.) and be prepared to provide copies if so requested.

# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

Enter TRADE Here:  
**Iron Worker**

Classification:		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter **YOUR** percentage of base rate in the column below.

% of BR	
0	- Work. Comp
0	- Gen Liability
0	- WI Unemploy
0.6	- Fed Unemploy
7.65	- FICA

**Form Instructions:**

1. Provide a work sheet for ALL Trade Classifications that will be performing on site productive labor during the execution of this project.
2. Responsible contractor to complete only boxes that are shaded, all non-shaded boxes are formula driven.
3. Contractor shall provide the name of the source used for these rates. (union

contract, Bureau of Labor and Statistics, AGC, ABC, etc.) and be prepared to provide copies if so requested.

# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

Enter TRADE Here:

**Mason**

Classification:		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter **YOUR** percentage of base rate in the column below.

% of BR

- 0 - Work. Comp
- 0 - Gen Liability
- 0 - WI Unemploy
- 0.6 - Fed Unemploy
- 7.65 - FICA

**Form Instructions:**

1. Provide a work sheet for ALL Trade Classifications that will be performing on site productive labor during the execution of this project.
2. Responsible contractor to complete only boxes that are shaded, all non-shaded boxes are formula driven.
3. Contractor shall provide the name of the source used for these rates. (union

contract, Bureau of Labor and Statistics, AGC, ABC, etc.) and be prepared to provide copies if so requested.

# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

Enter TRADE Here:

**Operator**

<u>Classification:</u>		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter **YOUR** percentage of base rate in the column below.

% of BR	
0	- Work. Comp
0	- Gen Liability
0	- WI Unemploy
0.6	- Fed Unemploy
7.65	- FICA

**Form Instructions:**

1. Provide a work sheet for ALL Trade Classifications that will be performing on site productive labor during the execution of this project.
2. Responsible contractor to complete only boxes that are shaded, all non-shaded boxes are formula driven.
3. Contractor shall provide the name of the source used for these rates. (union



contract, Bureau of Labor and Statistics, AGC, ABC, etc.) and be prepared to provide copies if so requested.

# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

Enter TRADE Here:

**Pipe fitter**

Classification:		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter **YOUR** percentage of base rate in the column below.

% of BR		
0	-	Work. Comp
0	-	Gen Liability
0	-	WI Unemploy
0.6	-	Fed Unemploy
7.65	-	FICA

**Form Instructions:**

1. Provide a work sheet for ALL Trade Classifications that will be performing on site productive labor during the execution of this project.
2. Responsible contractor to complete only boxes that are shaded, all non-shaded boxes are formula driven.
3. Contractor shall provide the name of the source used for these rates. (union

contract, Bureau of Labor and Statistics, AGC, ABC, etc.) and be prepared to provide copies if so requested.

# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

Enter TRADE Here:

**Plumber**

<u>Classification:</u>		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter **YOUR** percentage of base rate in the column below.

% of BR

- 0 - Work. Comp
- 0 - Gen Liability
- 0 - WI Unemploy
- 0.6 - Fed Unemploy
- 7.65 - FICA

**Form Instructions:**

1. Provide a work sheet for ALL Trade Classifications that will be performing on site productive labor during the execution of this project.
2. Responsible contractor to complete only boxes that are shaded, all non-shaded boxes are formula driven.
3. Contractor shall provide the name of the source used for these rates. (union

contract, Bureau of Labor and Statistics, AGC, ABC, etc.) and be prepared to provide copies if so requested.

# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

Enter TRADE Here:

**Roofer**

Classification:		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter **YOUR** percentage of base rate in the column below.

%	of BR	
0		- Work. Comp
0		- Gen Liability
0		- WI Unemploy
0.6		- Fed Unemploy
7.65		- FICA

**Form Instructions:**

1. Provide a work sheet for ALL Trade Classifications that will be performing on site productive labor during the execution of this project.
2. Responsible contractor to complete only boxes that are shaded, all non-shaded boxes are formula driven.
3. Contractor shall provide the name of the source used for these rates. (union

contract, Bureau of Labor and Statistics, AGC, ABC, etc.) and be prepared to provide copies if so requested.

# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

Enter TRADE Here:  
**Sheet Metal Worker**

Classification:		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter **YOUR** percentage of base rate in the column below.

% of BR	
0	- Work. Comp
0	- Gen Liability
0	- WI Unemploy
0.6	- Fed Unemploy
7.65	- FICA

**Form Instructions:**

1. Provide a work sheet for ALL Trade Classifications that will be performing on site productive labor during the execution of this project.
2. Responsible contractor to complete only boxes that are shaded, all non-shaded boxes are formula driven.
3. Contractor shall provide the name of the source used for these rates. (union



contract, Bureau of Labor and Statistics, AGC, ABC, etc.) and be prepared to provide copies if so requested.

# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

Enter TRADE Here:  
**Sprinkler Fitter**

Classification:		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter **YOUR** percentage of base rate in the column below.

% of BR	
0	- Work. Comp
0	- Gen Liability
0	- WI Unemploy
0.6	- Fed Unemploy
7.65	- FICA

**Form Instructions:**

1. Provide a work sheet for ALL Trade Classifications that will be performing on site productive labor during the execution of this project.
2. Responsible contractor to complete only boxes that are shaded, all non-shaded boxes are formula driven.
3. Contractor shall provide the name of the source used for these rates. (union

contract, Bureau of Labor and Statistics, AGC, ABC, etc.) and be prepared to provide copies if so requested.

# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

Enter TRADE Here:

**Teamster**

Classification:		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter **YOUR** percentage of base rate in the column below.

%	of BR	
0		- Work. Comp
0		- Gen Liability
0		- WI Unemploy
0.6		- Fed Unemploy
7.65		- FICA

**Form Instructions:**

1. Provide a work sheet for ALL Trade Classifications that will be performing on site productive labor during the execution of this project.
2. Responsible contractor to complete only boxes that are shaded, all non-shaded boxes are formula driven.
3. Contractor shall provide the name of the source used for these rates. (union

contract, Bureau of Labor and Statistics, AGC, ABC, etc.) and be prepared to provide copies if so requested.

# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

**Enter TRADE Here:**

\_\_\_\_\_

<u>Classification:</u>		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter **YOUR** percentage of base rate in the column below.

% of BR

0	- Work. Comp
0	- Gen Liability
0	- WI Unemploy
0.6	- Fed Unemploy
7.65	- FICA

**Form Instructions:**

1. Provide a work sheet for ALL Trade Classifications that will be performing on site productive labor during the execution of this project.
2. Responsible contractor to complete only boxes that are shaded, all non-shaded boxes are formula driven.
3. Contractor shall provide the name of the source used for these rates. (union

contract, Bureau of Labor and Statistics, AGC, ABC, etc.) and be prepared to provide copies if so requested.

# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

**Enter TRADE Here:**

\_\_\_\_\_

<u>Classification:</u>		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter **YOUR** percentage of base rate in the column below.

% of BR

0	- Work. Comp
0	- Gen Liability
0	- WI Unemploy
0.6	- Fed Unemploy
7.65	- FICA

**Form Instructions:**

1. Provide a work sheet for ALL Trade Classifications that will be performing on site productive labor during the execution of this project.
2. Responsible contractor to complete only boxes that are shaded, all non-shaded boxes are formula driven.
3. Contractor shall provide the name of the source used for these rates. (union



contract, Bureau of Labor and Statistics, AGC, ABC, etc.) and be prepared to provide copies if so requested.

# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

**Enter TRADE Here:**

\_\_\_\_\_

<u>Classification:</u>		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

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# Reimbursable Hourly Rate Worksheet

(see bottom of page for instructions)

Project Name: 0

Project Location: 0

Project Number: 0

Contractor: \_\_\_\_\_

Rates are based on the following documentaton: \_\_\_\_\_

**Enter TRADE Here:**

\_\_\_\_\_

<u>Classification:</u>		<u>Foreman</u>	<u>Journeyman</u>	<u>Laborer</u>	<u>Apprt 1</u>	<u>Other</u>	<u>Other</u>	<u>Other</u>
<b>Base Rate (BR)</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Vacation		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
delta		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

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Health Insurance		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pension		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Apprenticeship		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
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Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>BR Sub-total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Work. Comp	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Gen Liability	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
WI Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Fed Unemploy	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
FICA	% of BR	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Sub-total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTAL COST</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
Over Time		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
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