



Educational Steel Products, LLC

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765-534-4092

www.educationalsteelproducts.com • www.educationalsteelproducts.com • www.educationalsteelproducts.com

Proposal: 250902
Project: Band Tower
BuyBoard: Contract 712-23
Line Item: 4j

Owner: Christian County S. D.
Location: Christian County HS
220 Glass Ave
Hopkinsville, KY 42240
Phone: (270) 887-7050

Contact: Kevin Hitchel
Contractor: Alliance Corp.
Address: 360 8TH Avenue Suite 330
Bowling Green, KY 42101
Phone: 270-842-0789
Cell: 270-404-0687
Email: khitchel@alliancecorporation.com

Proposal for One Band Tower

1. Model: FWS32 (#635-32S) Fixed with stairs
Viewing levels: Four (4), located at 32', 24', 16', and 8'.
Capacity: Eight (8) persons (2 per level) – or as allowed by local authorities
Tower wind rating: 115 mph
2. Construction and materials:
Overall size: Approximately 5' 10" X 9' 8½" X 35'6"
Orientation: Narrow dimension parallel to field
Main frame: Structural steel tubing and angle iron
Platforms: Diamond grip-strut treads.
Safety grates: galvanized expanded metal.
3. Concrete base requirements:
Size: Minimum 11' x 11' x 18" on normal soil
Wind rating: 115 mph
Anchor bolts as specified in drawings (provided in install pack)
Rebar grid as specified in drawings (provided in install pack)
4. Safety items:
Lockable/padlock-ready door on the narrow end toward the field
Twelve-foot (12') expanded metal enclosure
Safety signage – OSHA color-compliant
Safety chain – on top level
5. OSHA standards: Deemed to meet or exceed 1910.25 including railing height, landing size, and handrail details.
6. Finishes:
The main frame is to be primed with zinc-rich primer and painted with Rustoleum 9800 series urethane in Owner's choice of color (please specify a ®Pantone or national brand color code on the PO or specify and initial here

*At **ESP** we already know what you want!*

Stairs, platforms, door, and safety panels are to be galvanized.

7. Concrete installation package (delivered to the job site in advance of the tower) contains:
 - Custom Anchor Bolts
 - Drawings
 - Instructions
8. Sequence of Events:
 - Customer/Contractor sends PO to ESP
 - *ESP sends the customer/contractor a PDF of the submittal package
 - Upon approval of the submittal package and the owner/contractor obtaining any permits required, ESP will begin fabrication with project-specific details
 - ESP ships installation package
 - Customer/contractor sends pre-pour photos, installs concrete pad, and sends post-pour photos to ESP
 - ESP ships fully assembled tower to the site
 - Customer/Contractor performs installation and sends photos to ESP
 - ESP performs the final vendor inspection, which may be done via photographs, at the vendor's discretion.

*Submittal package requires a separate \$600 charge.
9. Option included in price: None
10. Owner/Contractor responsibilities:
 - Purchase of forms, rebar, concrete, etc.
 - Install concrete slab/base, utilizing the provided anchor bolts
 - Meet all state and local requirements, including any licenses or permits, and schedule any associated inspections
 - Any necessary taxes (including applicable sales/use tax)
 - Installation, including crane and manpower to hoist and attach fully assembled tower
 - Accept delivery within 30 days of tower completion, regardless of site readiness, and to make payment within 30 days of delivery. Installation after this time incurs additional fees.
11. Warranty: One year for defects in materials or workmanship (specifically excludes weathering, maintenance, and the wear and tear of normal use).
12. Delivery schedule:
 - Please allow approximately 4-6 months from project submittal approval (and permitting BY OTHERS, if required). Please indicate the date desired on the Purchase Order.
 - This date is NOT guaranteed. All dates are subject to prior orders ... first come-first served.
13. Proposal expiration: **This proposal is valid if the signed proposal and/or purchase order are received within 30 days of the date of this proposal.** If the proposal has expired, please contact ESP to obtain a new proposal. This proposal serves as ESP's primary document and may not be superseded by any other document unless agreed to in writing by ESP.

Price: We propose to provide ONE unit to the above specifications for the sum of eighty-three thousand, nine hundred eighty and 68/100 dollars (\$83,980.68). A 35% materials deposit is required. The balance is due upon tower delivery. This pricing includes the inflation factor for 2026 delivery. If 2027 delivery is required, the project will be repriced when 2027 pricing becomes available.

****BuyBoard does not allow us to include sealed drawings in our charges, so please issue a separate \$600 check for the submittal package.***

All material is guaranteed to be as specified. All work to be completed in a substantial workmanlike manner according to specifications submitted, per standard practices. Any alteration or deviation from the above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the proposal. All agreements are contingent upon strikes, accidents, or delays beyond ESP/Fabricator's control. Customer/Contractor/Property owner agrees to indemnify and hold vendor/fabricator harmless for any event arising from the use or misuse of this equipment. ESP and PO/Contract Holder reserve the right to determine creditworthiness and retain security interest in the equipment until final payment has been received. If the purchase order is rescinded for any reason, all amounts accrued up to the date of written cancellation will be the customer/contractor's responsibility. ESP, the fabricator, and the Customer/Contractor agree that all work performed for this project must be inspected and approved by ESP before equipment is used to ensure a safe, quality, and lasting product.

Prepared by: Kimberly J. Beaver, Member of LLC

The above specifications, conditions, and prices are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above. Issuance of a purchase order for this project is deemed as acceptance of the terms of this proposal, unless amended and agreed upon in writing by both parties.

Purchaser

Authorized Signature

Date Signed

Name Printed

Title of Signatory



The following COI indicates the available insurance for ESP; however, the PE and the fabricator both have full coverage, as well.

		CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY) 7/16/2025															
<p>THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.</p>																			
<p>IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).</p>																			
PRODUCER Priority Risk Management 7050 E 116th St Ste 50 Fishers IN 46038			CONTACT NAME: Certificate Department PHONE (A/C, No, Ext): 317-713-2959 FAX (A/C, No): 317-863-1313 E-MAIL ADDRESS: certs@priorityrisk.com <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> <tr> <td>INSURER A : Scottsdale Ins Co.</td> <td>41297</td> </tr> <tr> <td>INSURER B : National Indemnity Co.</td> <td>20087</td> </tr> <tr> <td>INSURER C : SENTINEL INS CO LTD</td> <td>11000</td> </tr> <tr> <td>INSURER D : THE HARTFORD</td> <td>00914</td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>			INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Scottsdale Ins Co.	41297	INSURER B : National Indemnity Co.	20087	INSURER C : SENTINEL INS CO LTD	11000	INSURER D : THE HARTFORD	00914	INSURER E :		INSURER F :	
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<div style="display: flex; justify-content: space-between;"> COVERAGES CERTIFICATE NUMBER: REVISION NUMBER: </div>																			
<p>THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.</p>																			
INSR LTR	TYPE OF INSURANCE	ADDITIONAL INSURED	SUBROGATION WAIVED	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS												
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> CLAIMS-MADE </div> <div> <input checked="" type="checkbox"/> OCCUR </div> </div> GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y		CPS8232641	6/26/2025	6/26/2026	EACH OCCURRENCE \$ 1000000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100000 MED EXP (Any one person) \$ 5000 PERSONAL & ADV INJURY \$ 1000000 GENERAL AGGREGATE \$ 2000000 PRODUCTS - COMPIOP AGG \$ 2000000 \$												
B	AUTOMOBILE LIABILITY <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS </div> <div> <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS </div> </div>			70APS126915	6/27/2025	6/27/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$												
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$												
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N <input type="checkbox"/> N / A	N / A				PER STATUTE <input type="checkbox"/> OTHER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$												
C	Installation Floater			36SBAAR1018	6/26/2025	6/26/2026	\$80,000												
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)																			
CERTIFICATE HOLDER SAMPLE ONLY				CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 															

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