

JUNE 24, 2013

APPROVAL OF BID
BRECKINRIDGE METROPOLITAN HIGH SCHOOL

The following resolution was offered by _____ and seconded by _____, that;

WHEREAS, plans and specifications were prepared by Biagi, Chance, Cummins, London, & Titzer for Intercom Replacement at Breckinridge Metropolitan High School and;

WHEREAS, by authorization of the Director of Facilities and Environmental Services, bids were received, publicly opened and read aloud on May 29, 2013 and;

WHEREAS, one (1) contractor bid for one prime contract which includes the furnishing of all labor, materials and related work to complete this project, and;

WHEREAS, this bid includes all sub-contractors, allowances, types of equipment and material required to complete this project, and;

WHEREAS, the following is a statement of the lowest qualified bid submitted and recommended by the Architect for this project:

Delta Services, LLC	\$73,340
4676 Jennings Lane	
Louisville, KY 40218	

WHEREAS, this work is to be financed by the Cash General Fund

Section 1 - This Board does hereby approve the recommendation of the Superintendent that a contract be awarded to the qualified bidder.

Respectfully,
Donna M. Hargens
Superintendent

Secretary, Board of Education

Chairman, Board of Education

After full discussion, the Chairman put the question of the adoption of this resolution before the Jefferson County Board of Education on June 24, 2013 and the following voted:

VOTING AYE: _____

VOTING NAY: _____

PASSED AND APPROVED: _____

BID TABULATION

INTERCOM REPLACEMENT
BRECKINRIDGE METROPOLITAN HIGH SCHOOL
JUNE 24, 2013

BIDDER	BASE BID
DELTA SERVICES, LLC	73,340

Participation by Minority/Women Business

Minority	0%
Women	8%
Self-Performed	92%

II PROPOSED PLAN TO FINANCE APPLICATION

A. Statement of Probable Cost:

1. Total Construction Cost <i>(Minus Asbestos)</i>	<u>73,340</u>
2. Architect/Engineer Fee	<u>6,967</u>
3. Construction Manager Fee	_____
4. Bond Discount	_____
5. Fiscal Agent Fee	_____
6. Contingencies	<u>3,667</u>
7. Site Acquisition	_____
8. Equipment/Furnishings	_____
9. Equipment/Computers	_____
10. Technology Network System (KETS)	_____
11. Other* <u>Reimbursables</u>	<u>661</u>
12. Other*	_____
13. Other*	_____
Total Estimated Cost	<u>84,635</u>

B. Funds Available:

1. SFCC Cash Requirement	_____
2. SFCC Bond Requirement	_____
3. SFCC Bond Sale	_____
4. Local Bond Sale	_____
5. Cash - General Fund	<u>84,635</u>
6. Cash - Capital Outlay	_____
7. Cash - Building Fund	_____
8. Cash - Investment Earnings	_____
9. KETS	_____
10. Other*	_____
11. Other*	_____
12. Other*	_____
13. Other*	_____
Total Funds Available	<u>84,635</u>

*Define

THE ABOVE INFORMATION IS A STATEMENT OF PROBABLE COST AND FUNDS AVAILABLE AND IS REQUIRED TO BE REVISED TO CORRESPOND TO ACTUAL BIDS RECEIVED PRIOR TO THE SIGNING OF CONSTRUCTION CONTRACTS

TO BE COMPLETED ON INITIAL & REVISED APPLICATION: The signing of this financial document certifies the above stated funds are available and designated for this project during this fiscal year.

_____	Superintendent	_____	Date
_____	Finance Officer	_____	Date
_____	Chairman	_____	Date

ORIGINAL SIGNATURES REQUIRED

NOTE: Any district anticipating the financing of this and/or other projects in a combined school revenue Bond should discuss the financing with the Director/Branch Manager, Division of District Operations.

TO BE COMPLETED ON INITIAL APPLICATION:

This building project application is approved by the Division of Facilities Management indicating compliance with current Facility Plan or minor project under 702 KAR 4:180.

Comments: _____

Director/Branch Manager, Facilities Management

Date: _____

TO BE COMPLETED ON INITIAL & REVISED APPLICATION:

Tentative financial approval: based upon information provided to this office in support of projected cost.

Comments: _____

Director/Branch Manager, Division of Finance
Date: _____

TO BE COMPLETED ON INITIAL APPLICATION:

This building project application is hereby approved according to the condition outlined in the application. Proceed in accordance with the attached submittal checklist.

Comments: _____

Associate Commissioner, District Support Services
Date: _____

LOCAL BOARD ORDER AUTHORIZING PROJECT MUST BE ATTACHED ON INITIAL & REVISED APPLICATIONS