

Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: 03/10/21 ending: _____
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: Town of } Harrison
 Village of }
 City of }

County of Calumet Aldermanic Dist. No. _____
(if required by ordinance)

Check one: Individual Limited Liability Company
 Partnership Corporation/Nonprofit Organization

Applicant's Wisconsin Seller's Permit Number <u>456-1030597569-02</u>	
FEIN Number <u>86-1846602</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$
TOTAL FEE	\$

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)
Salt LLC

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the full name and place of residence of each person.

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
<u>Schmidt</u>	<u>Ross</u>	<u>M.</u>	<u>1141 Paramant Dr. Chilton WI 53014</u>
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name Salt LLC Business Phone Number 920-851-8621

2. Address of Premises N9650 Friendship Dr. Kaukaun Post Office & Zip Code 54130

3. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.)

Bar Area Sold, Outside Patio Area
Storage in dry storage Area under Locked doors w/ cameras

4. Legal description (omit if street address is given above): _____

5. (a) Was this premises licensed for the sale of liquor or beer during the past license year? Yes No

(b) If yes, under what name was license issued? Little Chicago

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? If yes, explain Yes No
7. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
If yes, explain.
8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? If yes, explain Yes No
9. (a) Corporate/limited liability company applicants only: Insert state Wi and date Feb. 12, 21 of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? If yes, explain Yes No
- (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? If yes, explain. Yes No
10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] Yes No
11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

Contact Person's Name (Last, First, M.I.) <u>Schmidt, Ross, M</u>	Title/Member <u>Owner</u>	Date <u>3/8/21</u>
Signature <u>Ross Schmidt</u>	Phone Number <u>920-851-8621</u>	Email Address <u>Ross@industriesllc.com</u>

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk	Date reported to council / board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Schmidt		Ross		M	
Home Address (street/route)		Post Office		City	
1141 Paramount Dr.				Chilton	
Home Phone Number		Age		State	
920-851-8621		33		Wi	
		Date of Birth		Zip Code	
		11/13/87		53014	
				Place of Birth	
				Appleton	

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an individual.
- A member of a partnership which is making application for an alcohol beverage license.

Member of Salt LLC
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)

which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? 33 years
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? Yes No
 If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)
OWI, 2013
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? Yes No
 If yes, describe status of charges pending.
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
 If yes, identify. Salt LLC
(Name, Location and Type of License/Permit)
- Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? Yes No
 If yes, identify.
(Name of Wholesale Licensee or Permittee) (Address By City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
R Industries LLC	W2096 City Rd KK	2012	Current
Employer's Name	Employer's Address	Employed From	To
R Industries Recycling LLC		2020	Current

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.


(Signature of Named Individual)

SCHEDULE FOR APPOINTMENT OF AGENT BY CORPORATION/NONPROFIT ORGANIZATION OR LIMITED LIABILITY COMPANY

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village City of Harrison County of Calumet

The undersigned duly authorized officer(s)/members/managers of Salt LLC
(registered name of corporation/organization or limited liability company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as Salt LLC
(trade name)

located at N9650 Friendship Dr. Kaukauna, WI 54130

appoints Ross Schmidt
(name of appointed agent)
1141 Paramount Drive Chilton WI 53014
(home address of appointed agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 0 years

Place of residence last year New Restaurant

For: _____
(name of corporation/organization/limited liability company)

By: _____
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Salt LLC, Ross Schmidt
(print/type agent's name), hereby accept this appointment as agent for the

corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

Ross Schmidt 3/8/14 Agent's age 33
(signature of agent) (date)

1141 Paramount Drive Chilton WI 53014 Date of birth 11/13/1987
(home address of agent)

APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on _____ by _____ Title _____
(date) (signature of proper local official) (town chair, village president, police chief)



APPLICATION FOR LICENSE TO SERVE FERMENTED MALT BEVERAGES AND INTOXICATING LIQUORS

Village of Harrison, Wisconsin

To the Village of Harrison, WI:

I hereby apply for a license to serve, from date hereof to June 30, 2021, inclusive (unless sooner revoked), Fermented Malt Beverages and Intoxicating Liquors, subject to the limitation imposed by Section 125 of the Wisconsin Statutes and all acts amendatory thereof and supplementary thereto, and hereby agree to comply with all laws, resolutions, ordinances and regulations, Federal, State or Local, affecting the sale of such beverages and liquors if a license be granted to me.

I understand that any falsification, omissions, or misleading information on this application is grounds for denial of my license application or revocation of any license issued.

Last Name: Schmidt First Name: Ross Middle I: M
 Street Address: 1141 Arcambant Dr. City: Chilton WI Zip: 53014
 Day Phone: 920-851-8621 Evening Phone: _____
 Date of Birth: 11/13/1987 Where will you be working?: R Industries LLC
 Driver's License Number: 5530-7338-7413-09

Do you currently hold or have held an operator's license within the last 2 years? YES NO

If yes, please list the municipality which issued your license: _____

List any offenses you have been convicted of in the last 5 years which were felony, misdemeanor, or local ordinance. Include juvenile convictions and alcohol related traffic violations (drunk driving, open intoxicant in vehicle, etc.) Failure of full disclosure may prohibit approval of license.

Violation	County or Municipality	Approximate Date
N/A		

WITNESS SIGNATURE:

Subscribed and sworn to before me this 10 day
of March 2020/20201

X Ross Schmidt 3/10/21
Applicant Signature Date

[Signature]
Witness Signature

Witness Address: 11050 Woody Rd
Kaukaun WI 53130

Office Use Only: \$35.00 Background Check
Approved: _____ Course Completion

Village of Harrison

Policy Guidelines for Operator Licenses

Intent.

Any person 18 or older who is serving or selling alcohol beverages in an establishment with a Class A, B, or C license must obtain an operator's license (commonly referred to as a bartender's license), unless the person is under (a) the immediate supervision of someone with the privilege of an operator's license, (b) the approved agent of a corporation or limited liability company, (c) a person with an operator's license, or (d) a person with a manager's license. It is the responsibility of the Village to issue an operating license to any applicant who is qualified under state law.

All applications for operators' licenses are processed in the Office of the Village Clerk and background checks are conducted.

Because individuals granted an operator's license must act in cooperation with the Calumet Co. Sheriff's Department to enforce the alcohol beverage laws, drunk driving laws, and assist with minimizing disturbances of the peace and maintaining the safety of the community, individuals with a past history of negative or uncooperative contacts with police agencies will be scrutinized. The following guidelines have been adopted to help the board in making its decision and determining what circumstances are more likely to result in denial of a license application.

Guidelines.

Wisconsin's Fair Employment law prohibits the denial of a license based on a pending arrest or conviction unless the record "*substantially relates*" to the licensing activity. However, the law does not specifically define this term. For the purposes of licensing, the board determines that:

there is a *substantial* relationship between the illegal purchase, use, and sale of controlled substances AND engaging in bartending which involves the purchase and sale of a closely regulated substance;

there is a *substantial* relationship between offenses of drunk driving and underage drinking AND engaging in bartending; and that

committing law violations while under the influence of drugs or alcohol shall be considered as reasons for denial.

Subject to Wisconsin's Fair Employment Law, an applicant may not be a "habitual law offender". For the purposes of licensing, the board further determines that "habitual" refers to:

Two (2) or more offenses within the past five (5) years.

Three (3) or more offenses within the past seven (7) years.

Six (6) or more offenses within the past ten (10) years.

Grounds for Denial.

Any person who has been convicted of a felony, unless duly pardoned, does not qualify for an operator's license.

Any person who has not truthfully and completely filled out the application does not qualify for an operator's license.

Any person who has been convicted (or charges pending) of the following does not qualify for an operator's license:

1 or more offenses within the last 5 years related to battery, sexual assault, injury by negligent use of a vehicle, hit and run, or intimidation of a witness or victim. These offenses are all ~~considered to be crimes against other persons.~~

1 or more offenses within the last 5 years related to resisting or obstructing a police officer, bribery of a public employee or official, bail jumping, or perjury. These offenses are all considered to be crimes involving lack of cooperation with law enforcement.

1 or more offenses within the last 5 years of maintaining a drug trafficking place, possession ~~with intent to manufacture, or distribution of illegal substance.~~

2 or more offenses within the last 5 years of possession of a controlled substance or drug paraphernalia.

2 or more offenses within the last 5 years of operating a motor vehicle while under the influence of intoxicants or drugs.

2 or more offenses within the last 5 years of open intoxicants in public places or in a motor vehicle.

2 or more offenses within the last 5 years of disorderly conduct or damage to property.

Applicant's Right to Appeal.

If the application is denied by the board, the Village Clerk shall, in writing, inform the applicant of the denial, the reasons therefore, and of the opportunity to request a reconsideration of the application by the board in a closed session. Such notice must be sent by registered mail to, or served upon, the applicant at least ten days prior to the board's reconsideration of the matter. At such reconsideration hearing, the applicant may present evidence and testimony as to why the license should be granted.

If, upon reconsideration, the board again denies the application, the Village Clerk shall, in writing, inform the applicant of the reasons. An applicant who is denied any license, upon reconsideration of the matter, may apply to circuit court, pursuant to Wis. Stats. § 125.12(2)(d), for review.

Conclusion.

This policy attempts to set standards for the denial of an operator's license and ensures that any denial shall be consistent with the criteria outlined above.

This policy was adopted by the Village Board on February 28, 2017.

Updated May 11, 2020

To:	Village of Harrison Attn: Travis Parish, Village Manager W5298 State Road 114 Harrison, WI 54952	Certificate of Payment No. 4 - Final Issue Date: December 9, 2020 Abandon Lift Station No. 5 Village of Harrison Calumet County, Wisconsin M&E Project No. 1-0038-039
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This is to certify that in accordance with terms of the Agreement dated: February 28, 2020

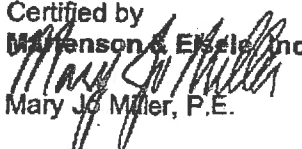
Contractor: DeGroot, Inc.
4201 Champion Road
Green Bay, WI 54311

is entitled to (final) payment for work performed through: December 9, 2020

Attached herewith you will find:

- () Contractor's Application for Payment
- (X) Itemized Cost Breakdown

<u>Payment/Contract Summary</u>	
Original contract	\$536,521.65
Actual Units and/or Changes	\$27,068.98
Contract Plus Changes	\$563,590.63
Work Completed to Date (see Attached)	\$563,590.63
Retainage (0%)	\$0.00
Amount Due Contractor	\$563,590.63
Less Previous Payments	\$491,183.41
Amount due this Payment (mail to Contractor)	\$72,407.22

Certified by

Mary Jo Miller, P.E.

C: DeGroot, Inc.

*cleared the final payment
with Mary Jo Miller from M&E
Lift Station 5 Abandonment Project.
Tom Van Zeebroek 3-23-2021*



Martenson & Eisele, Inc.

CHANGE ORDER NO. 4
September 28, 2020
Abandoning Lift Station No. 5
Village of Harrison, Calumet County, Wisconsin
M&E Project No. 1-0038-039

DeGroot, Inc.
Attn: Mark DeGroot
4201 Champion Road
Green Bay, WI 54311

You are hereby directed to make the following changes for the Abandoning Lift Station No. 5 Project, Village of Harrison, Wisconsin.

Revision of Bid Item #9 (Remove and Replace Landscape Berm and Trees at North Shore Drive) to replace one tree instead of three
= -\$1,845.00

The above changes result in the following adjustments:

Contract Amount Prior to Change	\$ 636,621.65
Adjustments previous Changes	\$ 12,000.00
Adjustments this Change (Deduct)	\$ -1,845.00
	=====
Contract Amount After Change	\$ 646,676.65

Recommended by: Martenson & Eisele, Inc., September 28, 2020

Mary Jo Miller

Approval by Contractor:

Mark DeGroot

Date: 10-15-2020

Approval by Owner:

Tom Van Zeebuck

Date: 3-23-2021



Martenson & Eisele, Inc.



CHANGE ORDER NO. 3
September 29, 2020
Abandoning Lift Station No. 5
Village of Harrison, Calumet County, Wisconsin
M&E Project No. 1-0038-039

DeGroot, Inc.
Attn: Mark DeGroot
4201 Champion Road
Green Bay, WI 54311

You are hereby directed to make the following changes for the Abandoning Lift Station No. 5 Project, Village of Harrison, Wisconsin.

Always Contractors, Inc. Remobilization for Surface Restoration Work = \$700.00

The above changes result in the following adjustments:

Contract Amount Prior to Change	\$ 530,521.85
Adjustments previous Change	\$ 11,300.00
Adjustments this Change (Addition)	\$ 700.00
	<hr/>
Contract Amount After Change	\$ 548,521.85

Recommended by: Martenson & Eisele, Inc., September 29, 2020

Mary Jo Miller

Approval by Contractor:

[Signature]

Date:

10-15-2020

Approval by Owner:

Tom Van Zeebroek

Date:

3-23-2021

The above changes result in the following adjustments:

Contract Amount Prior to Change	\$536,521.65
Adjustments previous Change	\$ 10,155.00
Adjustments this Change	\$ 16,913.98
	=====
Contract Amount After Change	\$563,590.63

Recommended by: Martenson & Eisele, Inc., October 14, 2020

Mary J. Miller

Approval by Contractor:

Mark O'Keefe

Date:

10-15-2020

Approval by Owner:

Tom Van Zeeband

Date:

3-23-2021



Martenson & Eisele, Inc.

professionals dedicated to serving people committed to improving their communities

Planning
Environmental
Surveying
Engineering
Architecture

LETTER OF TRANSMITTAL

To: Travis Parish
Village Manager
Village of Harrison
W5298 State Road 114
Harrison, WI 54952

Date: December 9, 2020

Re: Abandon Lift Station No. 5
Village of Harrison, Wisconsin
M&E Project No. 1-0038-039

Cc:

Copies	Date	Description
1	12/9/2020	Certificate of Payment No. 4 - Final
1	12/9/2020	Change Orders No. 3, 4 and 5

Transmitted as checked below:

- | | |
|--|--|
| <input type="checkbox"/> For Your Information | <input checked="" type="checkbox"/> For Necessary Action |
| <input type="checkbox"/> For Your Signature and Return | <input type="checkbox"/> Per Your Request |
| <input type="checkbox"/> For Review and Comment | <input type="checkbox"/> Per Our Conversation |
| <input type="checkbox"/> For Recording and/or Filing | <input type="checkbox"/> For Your Files |
| <input type="checkbox"/> Returned for Corrections | |

Remarks:

Please mail payment directly to DeGroot, Inc., 4201 Champion Road, Green Bay, WI 54311.

If you have questions or comments, please call me at (920) 203-0865. Thank you.

By: Mary Jo Miller
Mary Jo Miller, P.E., Project Engineer

c: Marty Jensen, DeGroot, Inc.



Martenson & Eisele, Inc.

Planning Environmental Surveying Plan It Design Engineering Architecture

CHANGE ORDER NO. 5
October 14, 2020
Abandoning Lift Station No. 5
Village of Harrison, Calumet County, Wisconsin
M&E Project No. 1-0038-039

DeGroot, Inc.
 Attn: Mark DeGroot
 4201 Champion Road
 Green Bay, WI 54311

The following adjustments are made to Bid Quantities.

Bid Item	Bid Quantity	Construction Quantity	Bid Price	Price Adjustment
Bid Item 6: Each Stone Tracking Pad	1 Each	0 Each	\$1,615.00 per Each	-\$1,615.00
Bid Item 7: Square Yards Erosion Matting	810 SY	3,320 SY	\$9.08 per SY	+\$7,908.80
Bid Item 8: Square Yards Gravel Shoulder Restoration with 3/4 -inch Base Course Material	200 SY	60 SY	\$26.76 per SY	-\$3,664.00
Bid Item 11: Linear Feet 8-inch Sanitary Sewer	468	468	80.60	+161.80
Bid Item 12: Linear Feet 12-inch Sanitary Sewer	1,030 LF	1,040 LF	\$93.47 per LF	+\$93.47
Bid Item 13: Linear Feet 15-inch Sanitary Sewer	660 LF	663 LF	\$104.07 per LF	+\$312.21
Bid Item 14: Linear Feet 24-inch Steel Casing Pipe - Bored and Jacked, with Appurtenances	65 LF	83 LF	\$601.07 per LF	+\$12,021.40
Bid Item 15: Linear Feet 30-inch Steel Casing Pipe - Bored and Jacked, with Appurtenances	288 LF	280 LF	\$514.86 per LF	+\$2,069.44
Bid Item 16: Vertical Feet Sanitary Manhole	145 VF	145.18 VF	\$247.27 per VF	+\$39.66
Total Addition Change Order No. 5				\$16,913.43

PAY REQUEST NO. 4 - FINAL

Abandon LRT Station No. 5
 Village of Harrison, Cabinet County, Wisconsin
 Owner: Village of Harrison
 Contractor: Blacrott Inc.
 Engineer: Mary Jo Miller, P.E.

Prepared By:
 Mansson & Elnak, Inc.
 1377 Midway Rd., Menasha, WI 54952
 (920) 791-0391
 www.mansson-elnak.com

Item	Description	Bid Costs and Quantities			Construction Costs and Quantities		
		Unit Bid	Total	Total	Unit Bid	Total	Total
		Quantity	Amount	Quantity	Cost	Amount	
2	Lump Sum Installation and Maintenance of Traffic Control	1.00	\$4,448.00	1.00	\$4,448.00	\$4,448.00	
3	Lump Sum Delivery and Grubbing	1.00	\$4,548.00	1.00	\$4,548.00	\$4,548.00	
4	Lump Sum Topsoil Spreads, Stockpiling, Hauling and Fines (24" dia)	1.00	\$12,822.00	1.00	\$12,822.00	\$12,822.00	
5	Soil Compaction	1.00	\$1,218.00	1.00	\$1,218.00	\$1,218.00	
6	Soil Compaction	1.00	\$1,218.00	1.00	\$1,218.00	\$1,218.00	
7	Soil Compaction	1.00	\$1,218.00	1.00	\$1,218.00	\$1,218.00	
8	Lump Sum Erect and Erect Lanes with 3/4" x 1/2" Steel Deck Material	200.00	\$2,464.00	200.00	\$2,464.00	\$2,464.00	
9	Lump Sum Erect and Erect Lanes with 3/4" x 1/2" Steel Deck Material	60.00	\$729.60	60.00	\$729.60	\$729.60	
10	Lump Sum Erect and Erect Lanes with 3/4" x 1/2" Steel Deck Material	1.00	\$1,218.00	1.00	\$1,218.00	\$1,218.00	
11	Lump Sum Erect and Erect Lanes with 3/4" x 1/2" Steel Deck Material	1.00	\$1,218.00	1.00	\$1,218.00	\$1,218.00	
12	Lump Sum Erect and Erect Lanes with 3/4" x 1/2" Steel Deck Material	1.00	\$1,218.00	1.00	\$1,218.00	\$1,218.00	
13	Lump Sum Erect and Erect Lanes with 3/4" x 1/2" Steel Deck Material	1.00	\$1,218.00	1.00	\$1,218.00	\$1,218.00	
14	Lump Sum Erect and Erect Lanes with 3/4" x 1/2" Steel Deck Material	1.00	\$1,218.00	1.00	\$1,218.00	\$1,218.00	
15	Lump Sum Erect and Erect Lanes with 3/4" x 1/2" Steel Deck Material	1.00	\$1,218.00	1.00	\$1,218.00	\$1,218.00	
16	Lump Sum Erect and Erect Lanes with 3/4" x 1/2" Steel Deck Material	1.00	\$1,218.00	1.00	\$1,218.00	\$1,218.00	
17	Lump Sum Erect and Erect Lanes with 3/4" x 1/2" Steel Deck Material	1.00	\$1,218.00	1.00	\$1,218.00	\$1,218.00	
18	Lump Sum Erect and Erect Lanes with 3/4" x 1/2" Steel Deck Material	1.00	\$1,218.00	1.00	\$1,218.00	\$1,218.00	
TOTAL BASE BID 1							
CHANGE ORDERS							
Change Order No. 1	Convert 15" diameter manhole to 24" diameter manhole		\$3,400.00			\$3,400.00	
Change Order No. 1	Remove and re-lay 70 linear feet of 24" diameter manhole		\$1,740.00			\$1,740.00	
Change Order No. 1	Remove and re-lay 70 linear feet of 24" diameter manhole		\$1,740.00			\$1,740.00	
Change Order No. 2	Subcontractor to install 15" diameter manhole		\$3,400.00			\$3,400.00	
Change Order No. 2	Remove and re-lay 70 linear feet of 24" diameter manhole		\$1,740.00			\$1,740.00	
Change Order No. 3	Remove and re-lay 70 linear feet of 24" diameter manhole		\$1,740.00			\$1,740.00	
Change Order No. 4	Remove and re-lay 70 linear feet of 24" diameter manhole		\$1,740.00			\$1,740.00	
Change Order No. 5	Remove and re-lay 70 linear feet of 24" diameter manhole		\$1,740.00			\$1,740.00	
Change Order No. 6	Remove and re-lay 70 linear feet of 24" diameter manhole		\$1,740.00			\$1,740.00	
TOTAL BASE BID 1 AND CHANGE ORDERS							