

ANDERSON HOUSING AUTHORITY CABINETRY PROJECT

WESTVALE MANOR APARTMENTS – 2215 FULTON ST. ANDERSON INDIANA 46016



SPONSORED BY: CITY OF ANDERSON COMMUNITY DEVELOPMENT
CDBG PROGRAM



INSTRUCTIONS TO QUOTERS

1. Identification and Submission of Quote Proposal Form

Quote Proposal shall be enclosed in a sealed opaque envelope, properly marked with the name of the company of the quoter and bearing the following caption:

Quote for: Name of Project
 Address of Project
 Anderson, Indiana
 Date

2. Modification of Quote Proposal

Modification of quote proposal may be made up to the time quotes are to be received. Modifications shall be legible. A single ink line shall be drawn through the item being modified, and modification shall be printed or typed directly above.

3. Withdrawal of Quote Proposal

Any quoter may withdraw their quote proposal at any time until scheduled time for receipt of quote proposals. No quote proposal shall be withdrawn after scheduled time for receipt of quote proposals without consent of the Local Public Agency (Owner) of for a period of 45 days.

4. Award of Contract

a. A Contract – shall be deemed to have been awarded when notice of award shall be served upon the award by officer of agent of Local Agency (Owner) authorized to give such notice.

b. Irregularities – Local Public Agency (Owner) reserves the right to reject any and all quotes and to waive irregularities in quoting to extent provided by law.

c. N/A Security – shall be released to unsuccessful quoters when a Contract has been awarded, but shall not be longer than the 45 day period set for holding quotes.

5. Execution of Contract Agreement

Contract – shall be on a form, as provided, by Local Public Agency (Owner). The contract shall be examined by all parties before being executed.

6. Site Examination

All quoters shall examine Contract Documents and construction site in order to familiarize themselves with all conditions. Lack of familiarity with construction site and present conditions will not be considered as justification for any changes or extra charges of any kind.

7. Questions

Interpretation or explanation of Contract Documents will not be made by Local Public Agency (Owner). All such inquiries shall be made to the Architect or Engineer. If any person submitting a quote proposal for work is in doubt as to the true meaning of any part of Contract Documents, he may submit to the Architect or Engineer a written request for an interpretation. Any interpretation of such Contract Documents will be made to addendum issued.

Addendum issued by the Architect or Engineer during time of quoting, but not later than two (2) days before quote opening date, shall be mailed or delivered to each person receiving a set of Contract Documents, and to such other perspective quoters who shall have requested that they be furnished with a copy. All addenda shall be noted and dated in the quote proposal form, and in closing the Contract shall become a part of the Contract Documents. If there are no addenda issued, contractor must not assume that anything has been added or deleted from the original contract documents.

8. Substitutions

Where in the specifications one or more certain materials, trade names or articles or certain manufacturers are mentioned, it is done for the express purpose of establishing a basis of durability and efficiency and not for the purpose of limiting competitions. Other names of materials can be used, if in the opinion of the Architect, they are equal in durability and efficiency to those made mention of and of a design in harmony with the work outlined.

9. Basis of Quote Proposal

a. Legal and Acceptable Quotes – Shall only be from Contractors regularly engaged in the fields of business, for the project, as specified. The Prime or General Contractor will be required to perform at least 51% of the services required. The PHA will evaluate the entire breakdown of services to insure that subcontractors will not be performing more than 50% of the work.

b. Start – Contractor shall commence work immediately upon the issuance of Notice to Proceed after signing Contract and shall complete each division of the work within the period of time indicated in quote. If the contractor does not indicate to the owner during the pre-construction conference, of any reasons why work may not commence at the designated time, the date of completion will not change.

c. Coordination – The Contractor shall be obligated to commence, carry-on, coordinate, and complete work in its various stages so whole job will be accomplished in a scheduled manner, within completion date set forth.

10. **The Following Documents Apply Only to the Successful Quoter (Low Quoter)**

- a. Section 3 Affirmative Action Plan
- b. Certification of Quoter Regarding Equal Employment Opportunity; E. O. 11246
- c. Contractors Certification Concerning Labor Standards and Prevailing Wage Requirements
- d. Certification of Quoter regarding Non-Segregated Facilities

The above mentioned documents shall remain part of the quote package, but shall apply only to the successful quoter. Prior to the award of this contract, the successful quoter will be notified by Certified mail (Return Receipt Requested) that in order to be awarded said contract, the above mentioned documents must be on file in the office of the Anderson Housing Authority, 528 W. 11th Street., Anderson, Indiana within five (5) working days from date notification.

Quoters failure to produce all said documents in the allotted time shall forfeit accepted quoter's right to form a contract with the Local Public Agency.

MBE and WBE Participation

The City of Anderson encourages the use of Minority and Women owned business enterprises (MWBE) in all public construction contracts.

INVITING SEALED QUOTE PROPOSALS

The Anderson Housing Authority will receive sealed quotes until the hour of 3:00 p.m., on the 22nd day of March 2021 at their offices, 528 W. 11th Street for the following project:

Installation of Kitchen Cabinetry at Westvale Manor Apartments

At the above stated time and place, all quotes will be opened and reviewed by Agency. Any Quotes received after the designated time will be returned unopened.

Project Documents including drawings and specifications are on file and available at the Anderson Housing Authority, 528 W. 11th Street, Anderson, IN between the hours of 8:00 a.m. - 4:00 p.m., Monday through Friday, or online at www.ahain.org

All interested parties are required to attend a **Pre-Quote Conference which will be held on March 11, 1:30 p.m. at 2215 Fulton Street, Anderson, Indiana**

Quote proposals shall be submitted on the Itemized Quote Form found within the contract documents.

The Instructions to Quoters contained in the Contract Documents are by this reference, made a part hereof and all Quoters shall be deemed advised of provisions thereof and conditions of the Contract, Specifications and Drawings for this project

Civil Rights: The successful Quoter will be required to comply with Title VI and Title VII of the Civil Rights Act of 1964 and Title VIII of the Civil Rights Act of 1968.

Wage Rates: Attention is called to the fact that no less than minimum salaries, wages and applicable other benefits, as established by the United States Department of Labor and included within the contract documents must be paid on this project.

Other Federal Requirements: The successful Quoter will be required to provide a properly executed "Section 3 Affirmative Action Plan"; a properly executed "Certification of Bidder Regarding Equal Employment Opportunity"; E.O. 11246; a properly executed "Contractor's Certification Concerning Labor Standards and Prevailing Wage Requirements" and a properly executed "Certification of Bidder Regarding Non-Segregated Facilities."

One Hundred Percent (100%) of the funds for the undertaking of this project are provided and available under the Community Development Block Grant Agreement between the City of Anderson, Madison County, Indiana and the United States Department of Housing and Urban Development (HUD).

Please Note: Any outside firm wishing to obtain quoter information and plan and specifications must submit their requests in writing to: krensel@ahain.org and allow no less than five business days to receive a response.

Prepared by: Kimberly Townsend
Chief Executive Officer
Anderson Housing Authority

SCOPE OF WORK & QUOTE FORM



Anderson Housing Authority

Kimberly G. Townsend, Executive Director

528 W. 11th Street, Anderson, IN 46016

Telephone/TDD (765) 641-2620 Fax (765) 641-2629

Email: ahain@ahain.org

Thomas J. Broderick, Jr., Mayor

Westvale Manor Cabinetry Project

QUOTE FORM

Contractor Name: _____ Point of Contact: _____

Business Address: _____

Email Address: _____

Phone Number: _____

Secondary Contact: _____

Tax ID Number: _____

Insurance Carrier: _____

28 Cabinets: \$ _____

28 Countertops: \$ _____

28 Sinks: \$ _____

28 Faucets: \$ _____

Total Bid: \$ _____



Kitchen Cabinets for Westvale Manor

Replace all Kitchen cabinets.

Replace all countertops.

Replace Kitchen sink and basket.

Replace Kitchen faucet.

Replace Range Hood (ductless).

Install Vinyl Cove Base (color matching should be suitable to flooring).

Install LED Light located above sink where applicable.

Caulk countertop to walls (color should match countertop and/or wall).

Disposal of all old materials.

This bid package is for the replacement of Kitchen Cabinets, Countertops and other accessories named in the material list for 28 units at Westvale Manor. Each unit will present some variance from one another, so the estimate should be based on the following details only. Any variances will be addressed once the bid has been accepted.

Materials Per Unit

Qty. 1 - Straight Laminate Kitchen Countertop (12 ft. total).

Qty. 1 - 36" Door and Drawer – left of sink base

Qty. 1 - 36" Sink Base

Qty. 1 - 18" Door and Drawer – right of sink base

Qty. 1 - Fill Strip .75"dx3"wx35"h (to cover gap, water heater is in the corner).

Qty. 1 - 12" Door and Drawer – right of stove

Qty. 1 - 36"wx30"h Door Wall (upper) – far left

Qty. 1 - 36"wx14"h Door Wall (upper) – above sink

Qty. 1 - 18"wx30"h Door Wall (upper) – Right of center cabinet

Qty. 1 - Corner Wall (upper) 24"wx30"h

Qty. 1 - 30"wx14"h Door Wall (upper) – above stove

Qty. 1 - 12"wx30" Door Wall (upper) right of stove

Qty. 1 - Chrome Faucet 2-Handle High Arc w/ Sprayer

Qty. 1 - Under Cabinet LED Light, direct wire with switch.

Qty. 1 - Range hood, ductless, white.

Qty. 1 - Drop-In Stainless Steel Double Equal Bowl Sink w/ 4 holes 33"x22"x7".

Qty. 3 - 4"x4' Vinyl floor base (12 ft. total).

Qty. 1 - Tube of Caulk, matching in color.

The following is only a basis of acceptable material needed for the replacements. All materials shown here is from Lowe's unless stated otherwise.

VT Dimensions Formica 10-ft Lapidus Brown Fx Radiance Straight Laminate Kitchen Countertop Item #599585 Model #011358011013547FXRD

VT Dimension Lapidus Brown FX Radiance Laminate End Cap Item #599588 Model #016158169993547FXRD

Portland 36" Sink Base Item #140866 Model #22E SB36B

Portland 36" Door and Drawer Item #138651 Model #22E B36B

Portland 12" Door and Drawer Item #138569 Model #22E B12R

Portland 18" Door and Drawer Item # Item #138604 Model #22E B18R

Portland 12"wx30" Door Wall (upper) Item #140873 Model #22E W1230R

Portland 15"wx30"h Door Wall (upper) Item #140874 Model #22 W1530R

Portland 18"wx30"h Door Wall (upper) Item #140877 Model #22E W1830R

Portland 36"wx30"h Door Wall (upper) Item #140881 Model #22E W3630B

Portland 30"wx14"h Door Wall (upper) Item #581676 Model #22 W3014B (Above Stove).

Portland 36"wx14"h Door Wall (upper) Item #140870 Model #22 W3614B (Above Sink).

Portland Corner Wall (upper) 24"wx30"hx12"d Item #138681 Model #22E DC2430R

Portland Fill Strip .75"dx3"wx80"h Item #287336 Model #22E F380

Kingsford Drop-In 33"x22"x6" double bowl kitchen sink. Item #873618 Model #LWDB332264

Tuscany Drop-In 33"x22"x6" Model Number: ST3322A0-6 Menards® SKU: 6724105

Tuscany Drop-In 33"x22"x7" Model Number: ST3322A0-7 Menards® SKU: 6724106

Tuscany Drop-In 33"x22"x8" Model Number: ST3322A0-8 Menards® SKU: 6724107

Project Source Chrome 2-Handle High Arc w/ Sprayer. Item #865917 Model #21-K822-PSD

Under cabinet LED light, direct wire with switch. Item #774388 Model #UC1061-WH1-12LF0-G

Range hood, ductless, white. Item #53480 Model #413001

Vinyl floor base (color should be suitable to flooring). Item #234299 Model #F40CT3P022

Cabinet Replacements List - Westvale

1. 2207C
2. 2207H
3. 2211A
4. 2211B
5. 2211C
6. 2211D
7. 2211H
8. 2215E
9. 2215G
10. 2215H
11. 2219B
12. 2219C
13. 2219E
14. 2219F
15. 2223C
16. 2223F
17. 2305A
18. 2305B
19. 2305C
20. 2305G
21. 2309C
22. 2309D

23. 2309F

24. 2309G

25. 2315C

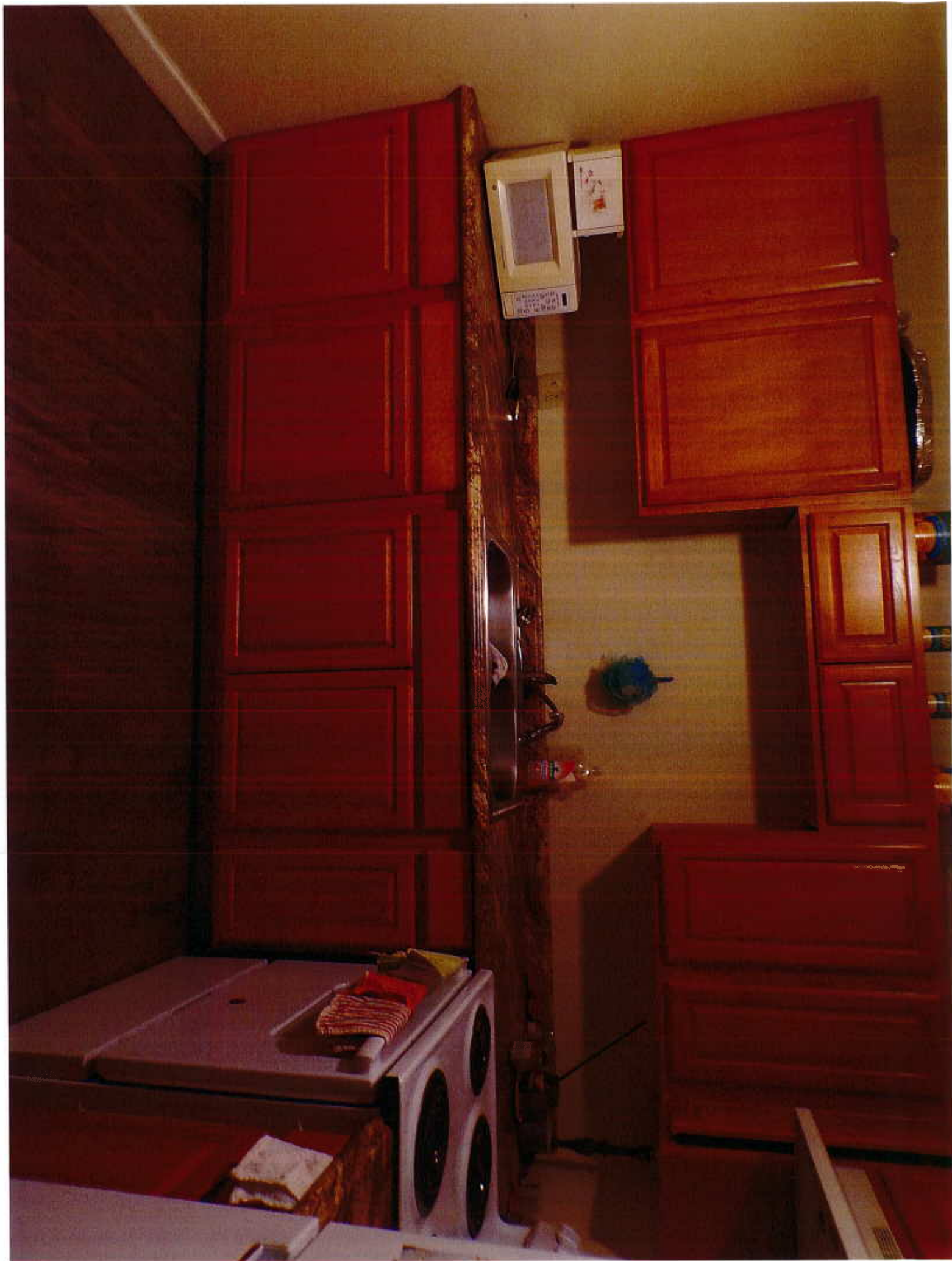
26. 2315D

27. 2315G

28. 2315H

29.

30.





FEDERAL CONTRACT PROVISIONS

INELIGIBLE CONTRACTORS

(Name of contractor or quoter)

hereby certifies that it _____ is/ _____ is not (check one)
included on the U.S. Comptroller General's Consolidated List of persons or firm currently
debarred for violations of various public contracts incorporating labor standards
provisions.

Date: _____

(Authorized Representative)



NON-COLLUSION AFFIDAVIT

State Form 4391 (R4 / 1-00)

STATE OF: _____ }
COUNTY OF: _____ } SS:

The undersigned, being duly sworn on oath says, that he is the contracting party, or that he is the representative, agent, member, or officer of the contracting party, that he has not, nor has any other member, employee, representative, agent or officer of the firm, company, corporation or partnership represented by him, directly or indirectly, entered into or offered to enter into any combination, collusion or agreement to receive or pay, and that he has not received or paid, any sum of money or other consideration for the execution of the annexed contract other than that which appears upon the face of the contract.

Signature
Printed name
Title
Company

Before me, a Notary Public in and for said County and State personally appeared, _____

who acknowledged the truth of the statements in the foregoing affidavit on this _____ day of _____, 20____

		Signature of Notary Public
County of residence	Commission expiration date	Printed or typed name of Notary Public

CERTIFICATION OF NONSEGREGATED FACILITIES

(Applicable to contracts, subcontracts, and agreements with applicants who are themselves performing federally assisted construction contracts exceeding \$10,000, which are not exempt from the provisions of the Equal Opportunity clause.)

By the submission of this bid, the bidder, offerer, applicant, or subcontractor certifies that he does not maintain or provide for his employees any segregated facilities at any of his establishments, and that he does not permit his employees to perform their services at any location under his control where segregated facilities are maintained. He certifies further that he will not maintain or provide for his employees any segregated facilities at any of his establishments, and that he will not permit his employees to perform their services at any location under his control where segregated facilities are maintained. The bidder, offerer, applicant, or subcontractor agrees that a breach of this certification is a violation of the Equal Opportunity clause in this proposed contract. As used in this certification, the term "segregated facilities" means any waiting rooms, work areas, rest rooms and wash rooms, restaurants, and other eating areas, time clocks, locker rooms and other storage or dressing areas, parking lots, drinking fountains, recreation or entertainment areas, transportation, and housing facilities provided for employees which are segregated by explicit directive, or are in fact segregated on the basis of race, creed, color, or national origin because of habit, local custom, or otherwise. He further agrees that (except where he has obtained identical certifications from proposed subcontractors for specific time periods) he will obtain identical certifications from proposed contractors for prior to the award of subcontracts exceeding \$10,000 which are not exempt from his provisions of the Equal Opportunity clause; that he will retain such certifications in files; and that he will forward the following notice to such proposed subcontractors (except where the proposed subcontractors have submitted identical certifications for specific time periods):

NOTICE TO PROSPECTIVE SUBCONTRACTORS OF REQUIREMENT FOR
CERTIFICATION OF NONSEGREGATED FACILITIES

A Certification of Nonsegregated Facilities, as required by the May 9, 1967, order (32 F.R. 7439, May 19, 1967) on Elimination of Segregated Facilities by the Secretary of Labor, must be submitted prior to the award of a subcontract exceeding \$10,000 which is not exempt from the provisions of the Equal Opportunity Clause. The certification may be submitted either for each subcontract or for all subcontracts during a period (i.e., quarterly, or annually).

NOTE: The penalty for making false statements in offers is prescribed in 18 U.S.C. 1001.

Respectfully submitted,

By: _____

Print: _____

Title: _____

Business Address: _____

***U.S. Department of Housing and Urban Development
Community Development Block Grant Program
Contractor's Certification
Concerning Labor Standards and Prevailing Wage Requirements***

To (Anderson Housing Authority:

Date:

Project No. (if any):

Project Name:

c/o

1. The undersigned, having executed a contract with _____
for the construction of the above-identified project, acknowledges that:

(a) The Labor Standards provisions are included in the aforesaid contract;

(b) Correction of any infractions of the aforesaid conditions, including infractions by any of his subcontractors and any lower tier subcontractors, in his responsibility;

2. He certifies that:

(a) Neither he nor any firm, partnership or association in which he has substantial interest is designated as an ineligible contractor by the Comptroller General of the United States pursuant to Section 5.6(b) of the Regulations of the Secretary of Labor, part 5 (29 CFR, Part 5) or pursuant to Section 3(a) of the Davis-Bacon Act, as amended (40 U.S.C. 276a-2 (a)).

(b) No part of the aforementioned contract has been or will be subcontracted to any subcontractor if such subcontractor or any firm, corporation, partnership or association in which such subcontractor has a substantial interest is designated as an ineligible contractor pursuant to any of the aforementioned regulatory or statutory provisions.

3. He agrees to obtain and forward to the aforementioned recipient within ten days after the execution of any subcontract, including those executed by his subcontractors and any lower tier subcontractors, a Subcontractor's certification Concerning Labor Standards and Prevailing Wage Requirements executed by the subcontractors.

4. He certifies that:

(a) The legal name and the business address of the undersigned are:

Contractors Internal Revenue Service Employer Identification Number:

(b) The undersigned is :

- (1) A single proprietorship _____
- (2) A partnership _____
- (3) A corporation _____
- (4) Other organization (describe) _____

c.) The name, title and address of the owner, partners or officers of the undersigned are:

<i>NAME</i>	<i>TITLE</i>	<i>ADDRESS</i>

(d) The names and addresses of all other persons, both natural and corporate, having substantial interest in the undersigned, and nature of the interest are (If none, so state):

<i>NAME</i>	<i>TITLE</i>	<i>NATURE OF INTEREST</i>

(e) The names, addresses and trade classifications of all other building construction contractors in which the undersigned has a substantial interest are (If none, so state):

<i>NAME</i>	<i>ADDRESS</i>	<i>TRADE CLASSIFICATION</i>

WARNING:

U.S. Criminal Code, Section 1010, Title 18, U.S.C., provides in part: "Whoever, ... makes, passes, utters or publishes any statement, knowing the same to be false Shall be fined not more than \$5,000 or imprisoned not more than two (2) years, or both."

Subcontractor Eligibility

Name of Firm _____

Business Address _____

Home Address _____

Business Phone _____

Home Phone _____

Social Security number _____

Amount of your subcontract on this project \$ _____

Sole Proprietor _____ Partnership _____ Corporation _____

Describe your work on this project:

Who pays for the building materials you use? _____

Is your work "labor only" service? _____

Do you provide your own tools on this project? _____

if not, who does? _____

Are you paid by:

Lump Sum _____ Amount \$ _____

Hourly _____ Amount \$ _____

Piece Work _____ Amount \$ _____

Other _____

Is this your first subcontract? _____

If not, list other construction projects you have worked on as a contractor or subcontractor:

On this project do you expect to hire or employ anyone else to work for you in completing your work? _____

***Affirmative Action Program Implementing
Section 3 of Housing and Urban Development Act of 1968***

**Employment Opportunities for Business and Lower Income Persons in Connection with
HUD-Assisted Projects**

Contractor's Name:	Project Name:
Address-Zip Code:	Project Number:
EEO Officer:	Project Location: (City, County, State)
Area Code-Phone Number:	Construction Starting & Completion Date (Project Starting & Completion Date):

I. Determination of Project Area Boundaries:

A. Address of Proposed Project:

(Street)

(City or Township)

(County)

B. Below, indicate whether this project is located in an Urban Renewal Area, Neighborhood Development Program Area, Model Cities Area, Metropolitan Development Plan Area of Indiana Reservation.

Yes _____

If yes, the project area for purposes of this Section 3 Affirmative Action Plan is coextensive with boundaries of the Urban Renewal, NDP, Model Cities, Metropolitan Plan or Indian Reservation boundaries. (Exception 701 Projects; see Toote/Meeker memo notice dated 7-1-74)

No. If no, specify the smallest political jurisdiction within which the project is located (i.e., township, city, village, county, etc.)

The project area for purposes of this Section 3 Affirmative Action Plan is coextensive with the political jurisdiction specified above.

C. Based on the information given in Columns 1, 2 and 3 (Table B), and the availability of eligible business concerns within the project area doing business in professions or occupations identified, set forth your goals for the number of contracts to be awarded to eligible project area businesses in Column 4, and for the approximate dollar amount to be awarded to project area businesses will be utilized to the greatest extent feasible.

Specific Affirmative Action Steps:

_____ agrees to
(Name of Contractor)

implement the following specific affirmative action steps directed at increasing the utilization of lower income residents and project area businesses.

- A. To ascertain from the HUD Area Office Director the exact boundaries of the Section 3 covered project area and where advantageous, seek the assistance of local officials of the Department in preparing and implementing the affirmative action plan.
- B. To attempt to recruit from the appropriate areas the necessary number of low income residents through: local advertising media, signs placed at the proposed site for the project, and community organizations and public or private institutions operating within or serving the project area such as Service Employment and Redevelopment (SER), Opportunities Industrialization Center (OIC), Urban League, Concentrated Employment Program, Hometown Plan, or the U.S. Employment Service.
- C. To maintain a list of all lower income area residents who have applied either on their own or on referral from any source, and to employ such person, if otherwise eligible and if a vacancy exists.
- D. To insert this affirmative action plan in all quote documents, and to require all quoters to submit a Section 3 affirmative action plan including utilization goals and the specific steps planned to accomplish those goals.
- E. To insure that contracts which are typically let on a negotiated rather than a quote basis in areas other than Section 3 covered project areas, are also let on a negotiated basis, whenever feasible, when let in a Section 3 covered project area.
- F. To formally contract unions, subcontractors and trade associations to secure their cooperation for this program.
- G. To insure that all appropriate project area business concerns are notified of pending contractual opportunities.
- H. To maintain records, including copies of correspondence, memoranda, etc., which document that all of the above affirmative action steps have been taken.
- I. To appoint or recruit an executive official of the company or agency as Equal Opportunity Officer to coordinate the implementation of this Section 3 affirmative action plan.
- J. To list on Table C, all projected workforce needs for all phases of this project by occupation, trade, skill level and number of positions.

As officers and representatives of

(Name of Contractor)

We the undersigned have read and fully agree to this Affirmative Action Plan, and become a party to the full implementation of this program.

Signature

Title

Date

Signature

Title

Date

PROPOSED CONTRACTS BREAKDOWN

Type of Contract (Business or Profession)	Total Number of Contracts	Total Approximate Dollar Amount	Estimated No. of Contracts to Project Area	Estimated Dollar Amount to Project Area Businesses

Company

Project Number

Project Name

EEO Officer (Signature)

Date _____

Job Category	Total Estimated Positions	Number of Positions Currently Occupied by Perm Employees	Number Positions Not Currently Occupied	Number Positions to be Filled with L.I.P.A.R.*
<i>Officers/Supervisors</i>				
<i>Professionals</i>				
<i>Technicians</i>				
<i>Housing Sales/Rental/Management</i>				
<i>Office Clerical</i>				
<i>Service Workers</i>				
<i>Others</i>				

Trade:	Total Estimated Positions	Number of Positions Currently Occupied by Perm Employees	Number Positions Not Currently Occupied	Number Positions to be Filled with L.I.P.A.R.*
<i>Journeyman</i>				
<i>Helpers</i>				
<i>Apprentices</i>				
<i>Maximum No. Trainees</i>				
<i>Others</i>				
<i>Total:</i>				

Trade:	Total Estimated Positions	Number of Positions Currently Occupied by Perm Employees	Number Positions Not Currently Occupied	Number Positions to be Filled with L.I.P.A.R.*
<i>Journeyman</i>				
<i>Helpers</i>				
<i>Apprentices</i>				
<i>Maximum No. Trainees</i>				
<i>Others</i>				
<i>Total:</i>				

Lower Income Project Area Resident

Individuals residing within the Section 3 determined project area boundaries whose family income does not exceed 90% median income.

Date _____

I, _____ (Name of Signatory Party) _____ (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

_____ (Contractor or Subcontractor) _____ on the _____ day of _____, _____; that during the payroll period commencing on the _____ day of _____, _____ and ending the _____ day of _____, _____

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said _____

_____ (Contractor or Subcontractor) _____ from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967, 76 Stat. 357; 40 U.S.C. § 3145), and described below: _____

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE

SIGNATURE

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

WAGE DECISION

"General Decision Number: IN20210032 01/01/2021

Superseded General Decision Number: IN20200032

State: Indiana

Construction Type: Residential

Counties: Bartholomew, Howard, Jackson, Madison and Tipton
Counties in Indiana.

Note: Under Executive Order (EO) 13658, an hourly minimum wage of \$10.95 for calendar year 2021 applies to all contracts subject to the Davis-Bacon Act for which the contract is awarded (and any solicitation was issued) on or after January 1, 2015. If this contract is covered by the EO, the contractor must pay all workers in any classification listed on this wage determination at least \$10.95 per hour (or the applicable wage rate listed on this wage determination, if it is higher) for all hours spent performing on the contract in calendar year 2021. If this contract is covered by the EO and a classification considered necessary for performance of work on the contract does not appear on this wage determination, the contractor must pay workers in that classification at least the wage rate determined through the conformance process set forth in 29 CFR 5.5(a)(1)(ii) (or the EO minimum wage rate, if it is higher than the conformed wage rate). The EO minimum wage rate will be adjusted annually. Please note that this EO applies to the above-mentioned types of contracts entered into by the federal government that are subject to the Davis-Bacon Act itself, but it does not apply to contracts subject only to the Davis-Bacon Related Acts, including those set forth at 29 CFR 5.1(a)(2)-(60). Additional information on contractor requirements and worker protections under the EO is available at www.dol.gov/whd/govcontracts.

Modification Number	Publication Date
0	01/01/2021

ENGI0103-018 04/01/2016

	Rates	Fringes
POWER EQUIPMENT OPERATOR:		
Backhoe/Excavator.....	\$ 33.65	16.40

ENGI0103-027 04/01/2016

	Rates	Fringes
POWER EQUIPMENT OPERATOR: (PAVER: Asphalt, Aggregate, and Concrete).....	\$ 33.65	16.40

ENGI0150-029 06/01/2014

	Rates	Fringes
POWER EQUIPMENT OPERATOR: (2) Loader.....	\$ 38.60	28.83

LABO0041-007 06/01/2020

	Rates	Fringes
LABORER (2) Mason Tender - Cement/Concrete.....	\$ 37.15	23.48

LABO0741-006 06/01/2020

	Rates	Fringes
LABORER (1) Pipelayer.....	\$ 23.13	16.00

PLUM0136-012 07/01/2020

	Rates	Fringes
PLUMBER.....	\$ 28.21	3.06

* ROOF0026-004 06/01/2020

	Rates	Fringes
ROOFER.....	\$ 38.64	21.08

SHEE0020-002 07/01/2020

	Rates	Fringes
SHEET METAL WORKER (Excludes HVAC Duct Installation).....	\$ 33.67	27.11

* UAVG-IN-0002 01/01/2019

	Rates	Fringes
TRUCK DRIVER (Dump).....	\$ 29.63	17.08

* UAVG-IN-0006 01/01/2019

	Rates	Fringes
POWER EQUIPMENT OPERATOR (Bobcat/Skid Steer/Skid Loader).....	\$ 32.00	30.65
POWER EQUIPMENT OPERATOR (Grader/Blade).....	\$ 35.71	29.55

SUIN2012-018 08/13/2012

	Rates	Fringes
CARPENTER.....	\$ 18.36	7.46
CEMENT MASON/CONCRETE FINISHER...	\$ 17.78	0.00
ELECTRICIAN.....	\$ 17.48	3.40
LABORER: Common or General.....	\$ 13.93	0.00
LABORER: Mason Tender - Brick...	\$ 14.00	0.00
OPERATOR: Bulldozer.....	\$ 27.35	13.44
PAINTER: Brush Only.....	\$ 18.29	7.43
PAINTER: Roller.....	\$ 18.29	7.43
PAINTER: Spray.....	\$ 18.29	7.43
SHEET METAL WORKER (HVAC Duct Installation Only).....	\$ 26.20	10.74

WELDERS - Receive rate prescribed for craft performing operation to which welding is incidental.

=====

Note: Executive Order (EO) 13706, Establishing Paid Sick Leave for Federal Contractors applies to all contracts subject to the Davis-Bacon Act for which the contract is awarded (and any solicitation was issued) on or after January 1, 2017. If this

contract is covered by the EO, the contractor must provide employees with 1 hour of paid sick leave for every 30 hours they work, up to 56 hours of paid sick leave each year. Employees must be permitted to use paid sick leave for their own illness, injury or other health-related needs, including preventive care; to assist a family member (or person who is like family to the employee) who is ill, injured, or has other health-related needs, including preventive care; or for reasons resulting from, or to assist a family member (or person who is like family to the employee) who is a victim of, domestic violence, sexual assault, or stalking. Additional information on contractor requirements and worker protections under the EO is available at www.dol.gov/whd/govcontracts.

Unlisted classifications needed for work not included within the scope of the classifications listed may be added after award only as provided in the labor standards contract clauses (29CFR 5.5 (a) (1) (ii)).

The body of each wage determination lists the classification and wage rates that have been found to be prevailing for the cited type(s) of construction in the area covered by the wage determination. The classifications are listed in alphabetical order of ""identifiers"" that indicate whether the particular rate is a union rate (current union negotiated rate for local), a survey rate (weighted average rate) or a union average rate (weighted union average rate).

Union Rate Identifiers

A four letter classification abbreviation identifier enclosed in dotted lines beginning with characters other than ""SU"" or ""UAVG"" denotes that the union classification and rate were prevailing for that classification in the survey. Example: PLUM0198-005 07/01/2014. PLUM is an abbreviation identifier of the union which prevailed in the survey for this classification, which in this example would be Plumbers. 0198 indicates the local union number or district council number where applicable, i.e., Plumbers Local 0198. The next number, 005 in the example, is an internal number used in processing the wage determination. 07/01/2014 is the effective date of the most current negotiated rate, which in this example is July 1, 2014.

Union prevailing wage rates are updated to reflect all rate changes in the collective bargaining agreement (CBA) governing

this classification and rate.

Survey Rate Identifiers

Classifications listed under the ""SU"" identifier indicate that no one rate prevailed for this classification in the survey and the published rate is derived by computing a weighted average rate based on all the rates reported in the survey for that classification. As this weighted average rate includes all rates reported in the survey, it may include both union and non-union rates. Example: SULA2012-007 5/13/2014. SU indicates the rates are survey rates based on a weighted average calculation of rates and are not majority rates. LA indicates the State of Louisiana. 2012 is the year of survey on which these classifications and rates are based. The next number, 007 in the example, is an internal number used in producing the wage determination. 5/13/2014 indicates the survey completion date for the classifications and rates under that identifier.

Survey wage rates are not updated and remain in effect until a new survey is conducted.

Union Average Rate Identifiers

Classification(s) listed under the UAVG identifier indicate that no single majority rate prevailed for those classifications; however, 100% of the data reported for the classifications was union data. EXAMPLE: UAVG-OH-0010 08/29/2014. UAVG indicates that the rate is a weighted union average rate. OH indicates the state. The next number, 0010 in the example, is an internal number used in producing the wage determination. 08/29/2014 indicates the survey completion date for the classifications and rates under that identifier.

A UAVG rate will be updated once a year, usually in January of each year, to reflect a weighted average of the current negotiated/CBA rate of the union locals from which the rate is based.

WAGE DETERMINATION APPEALS PROCESS

1.) Has there been an initial decision in the matter? This can be:

- * an existing published wage determination
- * a survey underlying a wage determination

- * a Wage and Hour Division letter setting forth a position on a wage determination matter
- * a conformance (additional classification and rate) ruling

On survey related matters, initial contact, including requests for summaries of surveys, should be with the Wage and Hour Regional Office for the area in which the survey was conducted because those Regional Offices have responsibility for the Davis-Bacon survey program. If the response from this initial contact is not satisfactory, then the process described in 2.) and 3.) should be followed.

With regard to any other matter not yet ripe for the formal process described here, initial contact should be with the Branch of Construction Wage Determinations. Write to:

Branch of Construction Wage Determinations
Wage and Hour Division
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, DC 20210

2.) If the answer to the question in 1.) is yes, then an interested party (those affected by the action) can request review and reconsideration from the Wage and Hour Administrator (See 29 CFR Part 1.8 and 29 CFR Part 7). Write to:

Wage and Hour Administrator
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, DC 20210

The request should be accompanied by a full statement of the interested party's position and by any information (wage payment data, project description, area practice material, etc.) that the requestor considers relevant to the issue.

3.) If the decision of the Administrator is not favorable, an interested party may appeal directly to the Administrative Review Board (formerly the Wage Appeals Board). Write to:

Administrative Review Board
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, DC 20210

4.) All decisions by the Administrative Review Board are final.

=====

END OF GENERAL DECISION

"