

PROJECT MANUAL PREPARATION REQUEST CEDAR RAPIDS METROPOLITAN AREA SPECIFICATIONS FOR PUBLIC IMPROVEMENTS

PROJECT MANUAL REQUEST FORM SUBMITTAL HISTORY:

Project Manager Level Signatures

Submitted by _____ Date _____ Date _____ Date _____

Reviewed by _____ Date _____ Date _____ Approved _____
(Minimum 6 weeks prior to Filing)

Public Works Department Manager Level Signatures

Submitted by _____ Date _____ Date _____ Date _____

Reviewed by _____ Date _____ Date _____ Approved _____
(Minimum 4 weeks prior to Filing)

Public Works Financial Analyst Level Signatures

Submitted by _____ Date _____ Date _____ Date _____

Reviewed by _____ Date _____ Date _____ Approved _____
(Minimum 3 weeks prior to filing)

Utility Analyst Level Signatures

Submitted by _____ Date _____ Date _____ Date _____

Reviewed by _____ Date _____ Date _____ Approved _____
(Minimum 3 weeks prior to filing)

CERTIFICATION BY LEAD PROFESSIONAL OF RECORD:

I certify the Cedar Rapids Metropolitan Area Standard Specifications and Details for Public Improvements have been reviewed for suitability with this project, contingency bid quantities are included per Attachment A, and I am responsible for the corresponding Supplemental Conditions and Special Provisions and contract terms.

By _____ Date _____

CERTIFICATION BY PROPERTY ACQUISITION SUPERVISOR:

I certify permanent right-of-way for [#] parcels, permanent easements for [type of easement] for [#] parcels, and temporary construction easements for [#] parcels have been acquired as provided to me.

By: _____ Date _____
Right-of-Way Acquisition Supervisor

I certify the above-referenced acquisitions are all that are required for the following bid documents.

By: _____ Date _____
Project Manager

PROJECT MANUAL PREPARATION SIGNATURES:

I certify all "Instructions to Specifier" information within this approved project manual request form have been inserted into the prepared bid project manual exactly as noted in the "Instructions to Preparer".

Public Works Department Support Staff or Consultant (circle) _____ Date _____
Name

Quality Control Checked by _____ Date _____ Date _____
(final version) (preparer's signature) (preparer's secondary reviewer)

INSTRUCTIONS TO SPECIFIER (Complete all of the following)	INSTRUCTIONS TO PREPARER (Insert responses in the following locations)
PROJECT NAME (Include facility, location, type, & applicable phase; same as drawings)	Title Page, 00005-1 00100-1, 00300-1, 00300-A, 00300-B, 00300-C, 00500-1, 00500-A, 00500-B ; Recommendation to File, website
CONTRACT NUMBER (<input type="checkbox"/> Request <u>and</u> Check after supplied by Accounts Payable Specialist) XXXXXXXX-XX	Title Page, 00005-1, 00100-1, 00300-1, 00300-A, 00300-B (if used), 00300-C (if used), 00500-1, 00500-A, 00500-B (if used) Recommendation to File, website

INSTRUCTIONS TO SPECIFIER (Complete all of the following)	INSTRUCTIONS TO PREPARER (Insert responses in the following locations)
MUNICIPAL OWNER:	Title Page, 00100-1, 00100-2, 00200-1, 00300-1, 00300-A, 00300-B, 00300-C, 00500-1, 00500-A, 00500-B
CONTRACT PREPARED BY (Department Or Firm):	Title Page
CERTIFICATION PAGE Engineer of Record: _____ License No.: _____ License Expires: _____	00005-1
PROJECT CONTACT PERSON for PLANHOLDER INQUIRIES Name _____ Agency _____ Phone _____ Fax _____	00200, Article 7
PROJECT CONSTRUCTION ADMINISTERED BY: Name _____	00500, Article 3
PROJECT LOCATION:	Recommendation to File 00100-1 (Description of Work) 00500-1 (Article 2- Summary of Project) 00800, SC-18.01B
PROJECT GOAL:	Recommendation to File
PROJECT DESCRIPTION:	Website Recommendation to File 00100-1 (Description of Work) 00500-1 (Article 2-Summary of Project) Recommendation to File
PROJECT IMPACTS: A. Estimated Remaining Service Life of Existing Street, Sewer, Sidewalk _____ yrs Etc. Proposed for Replacement B. Landscaping 1. # of City street right-of-way trees planted: _____ 2. # of City street right-of-way trees removed: _____ 3. Net increase in City street right-of-way trees: _____ 4. Borrow topsoil included <input type="checkbox"/> Yes <input type="checkbox"/> No 5. Removal of inadequate topsoil included debris <input type="checkbox"/> Yes <input type="checkbox"/> No C. Property Owner Coordination 1. # of Driveways within project limits: _____ 2. # of Driveways affect by temporary closure/loss of access: _____ 3. Access arrangements made directly with all property Owners with temporary driveway closure/loss of access <input type="checkbox"/> Yes <input type="checkbox"/> No 4. Property Access Survey Form completed for each property owner identifying health issues for temporary access, number of vehicles requiring temporary parking location and special events during Driveway reconstruction. <input type="checkbox"/> Yes <input type="checkbox"/> No 5. Construction staging plan identifies temporary parking locations <input type="checkbox"/> Yes <input type="checkbox"/> No 6. Driveway closure days incentive/disincentive <input type="checkbox"/> Yes <input type="checkbox"/> No 7. # of Driveways constructed one-half at a time _____ 8. Privately owned items within right-of-way <input type="checkbox"/> Yes <input type="checkbox"/> No 9. Arrangements made for removal prior to construction <input type="checkbox"/> Yes <input type="checkbox"/> No D. Public Contact Highlights • Dates of mailings with project info: _____ • Dates of public info meeting (s): _____	Recommendation to File

PROJECT IMPACTS cont.:	Recommendation to File
<p>E. Lane Closures</p> <p>1. Identify lane closures in plan <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. Provisions in the plan that address length of time lanes can be closed <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3. Included incentive/disincentive to limit lane closure <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>4. Advance placement of construction advisory sign(s) included in contract provisions <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>F. Pedestrian Detour Routes</p> <p>1. # of locations where trail and pedestrian facilities will be closed _____</p> <p>2. Detour routes included in plans for trail and pedestrian facilities <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>G. Seeding`</p> <p>1. Seeding milestones included in project <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. Incentives/disincentives include in contract documents related to completion of all work items in sections of the project for timely seeding <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>H. Parking</p> <p>1. # of on-street and off-street parking spaces lost as a result of the project.</p> <p style="padding-left: 20px;">On-Street _____ Off-Street _____</p> <p>2. Provisions in contact documents to address the loss of on-street and off-street parking for business and residents <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>I. Utilities</p> <p>1. # of utilities needing relocations _____</p> <p>2. Scope and time needed for relocation of utilities determined <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3. Final plans provided to utilities 60 to 90 days prior to early construction start date <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>4. List provided to City PM of utilities within project limits, whether or not relocation is required; date from utility company for the completion of relocation <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>J. Material Recycling</p> <p>1. Recycling of asphalt, concrete, parking bumpers <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. How much concrete will be recycled? _____ tons</p> <p>3. How much asphalt will be recycled? _____ tons</p> <p>4. Recycled material will be hauled and stored at City Storage Yard <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>PERMITS:</p> <p>A. Water Main and/or Sanitary Sewer construction permits required <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>B. I.D.O.T. permit(s) required? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="padding-left: 20px;">1. Work in right-of-way <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="padding-left: 20px;">2. Utility accommodations <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="padding-left: 20px;">3. Traffic control devices <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>C. Linn County permit(s) required? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="padding-left: 20px;">1. Work in right-of-way <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="padding-left: 20px;">2. Utility accommodations <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="padding-left: 20px;">3. Flood plain <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>D. Railroad crossing or right-of-way permit / license agreement required? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>E. Corps of Engineers permit required? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>F. Other permits required? List each below. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	

INSTRUCTIONS TO SPECIFIER (Complete all of the following)							INSTRUCTIONS TO PREPARER (Insert responses in the following locations)
FUNDING INFORMATION	CIP #1	CIP #2	CIP #3	CIP #4	CIP #5	Total	
GO Bonds (Prior FY)*	\$						Recommendation to File
GO Bonds (Current FY)*	\$						Recommendation to File
GO Bonds (Future FY)*	\$						Recommendation to File
TIF GO Bonds (Prior FY)*	\$						Recommendation to File
TIF GO Bonds (Current FY)*	\$						Recommendation to File
TIF GO Bonds (Future FY)*	\$						Recommendation to File
Federal Grant	\$						Recommendation to File
State Grant	\$						Recommendation to File
Local 28E Grant	\$						Recommendation to File
Contribution/Donation	\$						Recommendation to File
Road Use Tax	\$						Recommendation to File
Special Assessment	\$						Recommendation to File
Transfer request to be made from project (Project # _____)	\$						Recommendation to File
Transfer request to be made from project (Project # _____)	\$						Recommendation to File
Transfer request to be made from project (Project # _____)	\$						Recommendation to File
Cash on hand (including previous transfers)	\$						
TOTAL FUNDING	\$						Recommendation to File
*Note: GOB line item does not include previous transfers made. FUNDING INFORMATION:							Recommendation to File.

INSTRUCTIONS TO SPECIFIER (Complete all of the following)							INSTRUCTIONS TO PREPARER (Insert responses in the following locations)	
PROJECT COST OPINION	CIP #1	CIP #2	CIP #3	CIP #4	CIP #5	Total		
Construction Cost Opinion	\$						Recommendation to File	
Construction Contingency	\$						Recommendation to File	
Incentive Payment	\$						Recommendation to File	
ROW/Easement Acquisition	\$						Recommendation to File	
Professional Services (design)	\$						Recommendation to File	
Bidding (printing, publishing, etc.)	\$						Recommendation to File	
Owner -Furnished Mat'l & Equipment	\$						Recommendation to File	
Internal Costs							Recommendation to File	
Administration (3%)	\$						Recommendation to File	
Design (8%) (if applicable)	\$						Recommendation to File	
Construction (6%)	\$						Recommendation to File	
Non-construction Contingency	\$						Recommendation to File	
TOTAL BUDGET	\$						Recommendation to File	
Construction Cost Opinion (rounded) PUBLISHED AMOUNT							\$	00100-1 (PUBLISHED AMOUNT on Notice of Hearing & Letting / City Website)

INSTRUCTIONS TO SPECIFIER (Complete all of the following)		INSTRUCTIONS TO PREPARER (Insert responses in the following locations)
BIDDING SCHEDULE: Draft Project Manual Preparation Request to Project Manager (7 weeks prior to filing with City Clerk)	DATE:	
Draft Project Manual Preparation Request <u>and</u> 100% drawings to Public Works Manager with project manager sign-off (6 weeks prior to filing with City Clerk)		
Final Project Manual Preparation Request <u>and</u> Final printable drawings to Public Works Manager with project manager sign off (5 weeks prior to filing with City Clerk)		Recommendation to File
Final Project Manual Preparation Request to Financial Analyst (s) with Public Work's Manager sign off (4 weeks prior to filing with City Clerk)		Recommendation to File
Signed off Project Manual Preparation Request back to Lead Professional certifying documents (3 weeks prior to filing with City Clerk)		Recommendation to File
Print Contract Documents , Recommendation to File and other required documents to Public Works Administrative Staff with departmental approval signatures on cover sheet (2 weeks prior to filing with City Clerk)		Recommendation to File
Motion by City Council to File with City Clerk and advertise for bids/hearing (2 nd or 4 th Tuesday in CR Gazette)		Recommendation to File, Title Page, 00100-2 (City Clerk Date)
Advertise for Notice of Hearing and Letting (Between 5 & 20 days before Public Hearing, Typically Saturdays in CR Gazette, unless required to be Friday for 5-day Notice.		Recommendation to File, 00100-2
Public Hearing (Tuesdays - either 2 nd or 4 th Tuesday Council Meeting of the Month)		Recommendation to File, 00100-1
Receive Bids (Wednesdays at CR City Clerk's Office)		Recommendation to File, 00100-1, website
Report on Bids (next immediate Tuesday council mtg. after bids received)		Recommendation to File
Award Contract (Tuesdays - either 2 nd or 4 th Tuesday Council Meeting of the Month, Max 27 days after receiving bids)		Recommendation to File

INSTRUCTIONS TO SPECIFIER (Complete all of the following)				INSTRUCTIONS TO PREPARER (Insert responses in the following locations)
CONSTRUCTION SCHEDULE START DATES				
Contract Language	Site 1/overall Desc:	Site 2/Phase 2 Desc:	Site 3/Phase 3 Desc:	
Early Start (min 4.5 weeks after council award)				Recommendation to File 00100-1, 00500, Article 4.01 00800 SC - 18.01B, website
Late Start				Recommendation to File 00100-1, 00500, Article 4.01 00800 SC - 18.01B, website
CONSTRUCTION SCHEDULE COMPLETION DATES				
Contract Terms (choose only one type of schedule. Write "NOT USED" for the other two)	Site 1/overall Desc:	Site 2/Phase 2 Desc:	Site 3/Phase 3 Desc:	Recommendation to File, 00100-1, 00500, Article 4.02 (delete the two non-applicable 4.02 paragraphs)
COMPLETION DATE -OR-				00500, Article 4.02.A. 00800 SC-18.01B, website OR
CALENDAR DAYS -OR-				00500, Article 4.02.A 00800 SC-18.01B, website OR
WORKING DAYS				00500, Article 4.02.A 00800 SC-18.01B, website
Construction Milestone 1 (Write NONE if none) Date: _____ Description: _____ _____ _____				1. Recommendation to File (Additional Info.) 2. 00100-1 (Write "NONE" if none) 3. 00500-2, Article 4.03 If none, do the following: 4. Delete 00500-2, Article 4.03.A 5. Type "NOT USED" after 4.03 6. Delete 00500-2, Article 4.04.B
Construction Milestone 2 (Write NONE if none) Date: _____ Description: _____ _____ _____				Recommendation to File (Additional Info.) 00100-1 00500, Article 4.03
Construction Milestone 3 (Write NONE if none) Date: _____ Description: _____ _____ _____				Recommendation to File (Additional Info.) 00100-1 00500, Article 4.03

INSTRUCTIONS TO SPECIFIER: (Complete all of the following)				INSTRUCTIONS TO PREPARER (Insert responses in the following locations)	
LIQUIDATED DAMAGES (Write "NONE" if none)				00500, Article 4.04 If both 4.04.A and B are deleted, type "NOT USED" after 4.04	
FINAL COMPLETION	\$ _____			00500, Article 4.04.A. (delete paragraph if none)	
MILESTONE'S COMPLETION	\$ _____			00500, Article 4.04.B. (delete paragraph if none)	
ROAD CLOSURE INCENTIVE/DISINCENTIVE (Write "NONE" if none)				If "None" Delete applicable paragraphs If either 18.01A or B are used, 18.02 & 18.03 remain	
	Incentive 1	Incentive 2	Incentive 3	00800 SC - 18.01A; SC - 18.02; SC - 18.03	
Site/Phase Description:	_____	_____	_____	00800 SC - 18.01A; SC - 18.02; SC - 18.03	
Number of Closure Days:	_____	_____	_____	0800 SC - 18.01A; SC - 18.02; SC - 18.03	
Daily Incentive/Disincentive Rate:	\$ _____	\$ _____	\$ _____	0800 SC - 18.01A; SC - 18.02; SC - 18.03	
Maximum Incentive Payment:	\$ _____	\$ _____	\$ _____	00800 SC - 18.01A; SC - 18.02; SC - 18.03	
Early Closure Date	_____	_____	_____		
Late Closure Date	_____	_____	_____		
WORKING DAY COMPLETION INCENTIVE/DISINCENTIVE					
	Incentive 1	Incentive 2	Incentive 3		
Site/Phase Description:	_____	_____	_____	00800 SC - 18.01B; SC - 18.03	
Daily Incentive/Disincentive Rate:	\$ _____	\$ _____	\$ _____	00800 SC - 18.01B; SC - 18.03	
Maximum Incentive Payment:	\$ _____	\$ _____	\$ _____	00800 SC - 18.01B; SC - 18.03	
SPECIFIED DATE COMPLETION INCENTIVE					
	Incentive 1	Incentive 2	Incentive 3		
Site/Phase Description:	_____	_____	_____	00800 SC - 18.01B; SC - 18.03	
All work completed no later than: (date)	_____	_____	_____	00800 SC - 18.01C; SC - 18.03	
Incentive payment	\$ _____	\$ _____	\$ _____	00800 SC - 18.01C; SC - 18.03	
RETAINAGE				00500, Article 6.02.A.1.a.	
PROGRESS PAYMENT FOR WORK COMPLETED (DEFAULT 95%) _____ %					
PROGRESS PAYMENT FOR MATERIALS AND EQUIPMENT NOT INCLUDED IN THE WORK (DEFAULT 100%) _____ %				00500, Article 6.02.A.1.b.	
Bid Security Opinion Default: 10% if cost less than/equal to \$500,000; _____ 5% if cost opinion greater than \$500,000				00100-2	
PRE-BID CONFERENCE (Write "NONE" if none)				00100-1, Use applicable paragraph; delete other two	
TIME:	_____			00200, Article 5	
DATE:	_____			Use applicable Article 5.01, delete other	
LOCATION:	_____				
IS ATTENDANCE AT PRE-BID CONFERENCE MANDATORY ? YES <input type="checkbox"/> NO <input type="checkbox"/>					
SPECIAL FACTORS IN BID EVALUATION (Write "NONE" if none)				00200, Article 14.06 If None, delete Article 14.06	
1.	_____				
2.	_____				
ADDITIONAL SPECIFICATION SECTIONS TO BE INCLUDED BEYOND CR METRO SPECS (Write "NONE" if none)				Include in Section 00500 Article 9.01, Item 12.e. field for other exhibits and check box included.	
1.	_____				
2.	_____				

INSTRUCTIONS TO SPECIFIER: CHECK YES OR NO TO THE FOLLOWING	INSTRUCTIONS TO PREPARER (Insert responses in the following locations)
YES NO <input type="checkbox"/> <input type="checkbox"/> IS THIS A UNIT PRICE CONTRACT?	If Yes, enter "unit price" in third paragraph (Type of Bid) 00100-1 If Yes, delete 00300-C, 00500-B If No, ask ENGINEER if 00300-C and 00500-B are needed
<input type="checkbox"/> <input type="checkbox"/> IS AN AFFIRMATIVE ACTION PROGRAM REQUIRED? (REQUIRED FOR ALL PROJECTS THAT ARE FEDERAL OR STATE FUNDED OR PARTIALLY FUNDED)	If Yes, Include: a) 00800, SC-6.02.B and in Table of Contents If No: a) Delete 00100, Applicable Laws and Regulations, third paragraph on affirmative action b) Delete 00200, Article 15.01 A & B c) Delete 00800, SC-6.02AB
<input type="checkbox"/> <input type="checkbox"/> IS THERE A TSB REQUIREMENT? IF YES, GOAL IS _____ %	If Yes, enter goal % in a) 00200, Article 25.02 If No: Delete Article 25.01 thru 25.08 from Section 00200 including in both Tables of Contents.
<input type="checkbox"/> <input type="checkbox"/> IS THERE A DBE REQUIREMENT? IF YES, GOAL IS _____ %	If Yes, enter goal % in a) 00200, Article 25.09 If No: d) Delete Article 25.09 from Section 00200 including in both Tables of Contents e) Delete 00800, SC 6.02D and in Table of Contents
<input type="checkbox"/> <input type="checkbox"/> IS THIS A FTA FUNDED PROJECT?	If Yes, Include: a) Bid Form Attachments V – IX b) 00800, SC 6.03D If No; delete Bid Form Attachments V – IX 00800, SC 6.03D and in Table of Contents
<input type="checkbox"/> <input type="checkbox"/> ARE THERE FEDERAL WAGE RATE REQUIREMENTS?	If Yes, Include: a) 00800, SC-6.09 b) 00200, Article 15.03 and 15.04 c) 00100-2, Paragraph on Wage Rates Remains If No, Delete: a) 00800, SC 6.09 and in Table of Contents b) 00200, Article 15.03 and 15.04 c) 00100-2, Delete Paragraph on Prevailing Wage Rates
<input type="checkbox"/> <input type="checkbox"/> IS THIS A SPECIAL ASSESSMENT PROJECT?	If Yes, Include: a) 00100-2, Paragraph on Special Assessment Projects If No, Delete: a) 00100-2, Paragraph on Special Assessment Projects
<input type="checkbox"/> <input type="checkbox"/> IS THIS A HUD OR ECONOMIC DEVELOPMENT AGENCY (EDA) PROJECT?	If Yes, Include: a) 00801, Supplemental EDA Specs b) Bid Form Attachments V, VI, VIII, IX c) 00800, SC. 6.03
<input type="checkbox"/> <input type="checkbox"/> IS THIS A CEDAR RAPIDS PARKING LOT PROJECT?	If Yes, Include: a) 00800, SC. 6.08.B and in Table of Contents If No, Delete a) 00800, SC.6.08.B and in Table of Contents
<input type="checkbox"/> <input type="checkbox"/> IS THIS A CEDAR RAPIDS PROJECT?	If Yes, Include: a) 00800, SC-2.08 and in Table of Contents
<input type="checkbox"/> <input type="checkbox"/> IS ONE (1) ACRE OR MORE OF LAND BEING DISTURBED AND REQUIRING IDNR STORM WATER DISCHARGE INDIVIDUAL PERMIT?	If Yes,: a) Include 00800, SC-6.08A and SC-6.08C and in the Table of Contents. b) Complete appropriate form(s) from: (http://www.iowadnr.gov/Portals/idnr/uploads/water/npdes/GP2_2012.pdf) and give to Constr. Engineering Manager for submittal to IDNR. If No, Delete: c) 00800, SC-6.08A and SC-6.08C and delete from Table of Contents

INSTRUCTIONS TO SPECIFIER: CHECK YES OR NO TO THE FOLLOWING	INSTRUCTIONS TO PREPARER (Insert responses in the following locations)		
YES NO			
<input type="checkbox"/> <input type="checkbox"/> IS ANY PORTION OF WORK ON THIS PROJECT WITHIN A PUBLIC STREET OR ALLEY RIGHT-OF-WAY?	If Yes, Include: a) 00800 SC-6.08D and list in Table of Contents. If No, Delete: a) SC-6.08D and delete listing from Table of Contents		
<input type="checkbox"/> <input type="checkbox"/> DOES THIS PROJECT INCLUDE A ROAD CLOSURE INCENTIVE/DISINCENTIVE?	If Yes, Include: a) 00800 SC-18.01A and in Table of Contents If No, Delete a) 00800 SC-18.01A and in Table of Contents		
<input type="checkbox"/> <input type="checkbox"/> DOES THIS PROJECT INCLUDE A WORKING DAY INCENTIVE/DISINCENTIVE?	If Yes, Include: a) 00800 SC-18.01B and in Table of Contents If No, Delete a) 00800 SC-18.01B and in Table of Contents		
<input type="checkbox"/> <input type="checkbox"/> DOES THIS PROJECT INCLUDE A NO EXCUSE COMPLETION INCENTIVE?	If Yes, Include: a) 00800 SC-18.01D and in Table of Contents If No, Delete a) 00800 SC-18.01D and in Table of Contents		
<input type="checkbox"/> <input type="checkbox"/> IS THE CONTRACT A CALENDAR DAY CONTRACT?	If Yes, Include: a) 00800 SC-6.02C and list in Table of Contents b) 00800 SC-18.04 and list in Table of Contents If No, Delete a) SC-6.02C and in Table of Contents b) 00800 SC-18.04 and in Table of Contents		
<input type="checkbox"/> <input type="checkbox"/> IS THIS A SIDEWALK REPAIR <u>PROGRAM</u> PROJECT?	If Yes, a) 00100-3, use Chapter <u>364</u> in paragraph on Special Assessment projects (if applicable) and remove highlight. b) 00100-3, delete sentence "An estimate of special assessments is on file with the City Clerk" in paragraph on Special Assessment projects. If No, a) 00100-3, use Chapter <u>384</u> in paragraph on Special Assessment projects (if applicable) b) 00100-3, keep sentence "An estimate of special assessment is on file with the City Clerk" in paragraph on Special Assessments, but remove highlight.		
<input type="checkbox"/> <input type="checkbox"/> IS THIS A JOINT PROJECT WITH THE CEDAR RAPIDS WATER DEPARTMENT?	If Yes, a) Add signature line to cover sheet 00001-1 for Water Utility Director below that of City Engineer. If No, a) Do not include additional signature line.		
<input type="checkbox"/> <input type="checkbox"/> IS THIS A JOINT PROJECT WITH IOWA DOT OR IS THERE ANY IOWA DOT FUNDING IN THIS PROJECT?	If Yes, a) Add signature line to cover sheet 00001-1 for Iowa DOT District 6 Local Systems Engineer. If No, a) Do not include additional signature line.		
<input type="checkbox"/> <input type="checkbox"/> IS I-JOBS FUNDING ANY PART OF THIS PROJECT?	<table border="0"> <tr> <td style="vertical-align: top;"> If Yes, Include: 00800 SC-5.01E 00800 SC-5.02 00800 SC-5.06G 00800 SC-5.11 </td> <td style="vertical-align: top;"> If No, Replace paragraph with "Not Used" In: a) 00800 SC-5.01E b) 00800 SC-5.02 c) 00800 SC-5.06G Delete words highlighted in yellow from: a) 00800 SC- 5.06H Only use the sentence "Contractor shall pay all insurance deductible amounts." in SC5.11. Delete rest of sentence. 00800 SC-5.06A Paragraph 5.06A.1, Remove highlighted "State of Iowa, Iowa Jobs Board, Iowa Finance Authority" Paragraph 5.06A.2 Remove "earthquake and flood", remove highlight from ", and" </td> </tr> </table>	If Yes, Include: 00800 SC-5.01E 00800 SC-5.02 00800 SC-5.06G 00800 SC-5.11	If No, Replace paragraph with "Not Used" In: a) 00800 SC-5.01E b) 00800 SC-5.02 c) 00800 SC-5.06G Delete words highlighted in yellow from: a) 00800 SC- 5.06H Only use the sentence "Contractor shall pay all insurance deductible amounts." in SC5.11. Delete rest of sentence. 00800 SC-5.06A Paragraph 5.06A.1, Remove highlighted "State of Iowa, Iowa Jobs Board, Iowa Finance Authority" Paragraph 5.06A.2 Remove "earthquake and flood", remove highlight from ", and"
If Yes, Include: 00800 SC-5.01E 00800 SC-5.02 00800 SC-5.06G 00800 SC-5.11	If No, Replace paragraph with "Not Used" In: a) 00800 SC-5.01E b) 00800 SC-5.02 c) 00800 SC-5.06G Delete words highlighted in yellow from: a) 00800 SC- 5.06H Only use the sentence "Contractor shall pay all insurance deductible amounts." in SC5.11. Delete rest of sentence. 00800 SC-5.06A Paragraph 5.06A.1, Remove highlighted "State of Iowa, Iowa Jobs Board, Iowa Finance Authority" Paragraph 5.06A.2 Remove "earthquake and flood", remove highlight from ", and"		

INSTRUCTIONS TO SPECIFIER: CHECK YES OR NO TO THE FOLLOWING	INSTRUCTIONS TO PREPARER (Insert responses in the following locations)
<p>YES NO</p> <p><input type="checkbox"/> <input type="checkbox"/> IS THIS A JOINT PROJECT WITH ANY OTHER CEDAR RAPIDS CITY DEPARTMENT? IF SO, LIST NAME OF DEPARTMENT:</p> <p>_____</p>	<p>If Yes, a) Add signature line to cover sheet 00001-1 for listed City Department</p> <p>If No, b) Do not include additional signature line.</p>
<p>DOES THIS PROJECT INCLUDE</p> <p>A. <input type="checkbox"/> ONLY MINOR GRADING AND SEEDING?</p> <p>B. <input type="checkbox"/> ONLY GRADING, SEEDING, STONE AND/OR EROSION FABRIC?</p> <p>C. <input type="checkbox"/> (A) OR (B) AND/OR ANY OTHER WORK</p>	<p>Under 00800 SC13.07A A = 1 Year B = 2 Year C = 4 Year</p>

INSTRUCTIONS TO SPECIFIER (Complete all of the following)	INSTRUCTIONS TO PREPARER (Insert responses in the following locations)																																													
CHECK INCLUDE OR DON'T INCLUDE																																														
BID FORM ATTACHMENTS TO INCLUDE: (check for each line)																																														
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CONTRACT DRAWINGS (Not Bound in Project Manual) (Write "NONE" if none)	00500-6, 9.01.A.10 00800, SC 1.04																																													
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DRAWING LIST: _____	Type "NONE" if none																																													
SUBSURFACE REPORTS (Write "NONE" if none)	00800, SC 4.02.C. Type "NONE" if none																																													
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LOCATION TO VIEW REPORTS AND DRAWINGS:	00800, 4.02.E. Type "N/A" if none under 4.02.C. and D.																																													
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INSTRUCTIONS TO SPECIFIER (Complete all of the following)					INSTRUCTIONS TO PREPARER (Insert responses in the following locations)
INSURANCES SC 5.04 AND SC 5.06 (Section 00800)					Supplementary Conditions, Section 00800
Yes	No		Default	Use in Contract	
		WORKER'S COMPENSATION Use All Defaults		N/A	Use all defaults
		CONTRACTOR'S LIABILITY			
<input type="checkbox"/>	<input type="checkbox"/>	Property Damage liability insurance will provide Explosion, Collapse, and Underground coverages.			If checked, Yes: a) SC-5.04.C.2.g. remains If checked, No: b) Replace SC-5.04.C.2.g. with "Not Used"
<input type="checkbox"/>	<input type="checkbox"/>	Railroad protective insurance	\$5,000,000, Each Incident AND \$10,000,000 Aggregate OR	\$ _____ AND \$ _____	If checked, Yes: a) SC-5.04.C.2.h remains or enter alternate amount, if shown. If checked, No: b) Enter \$0 @ SC-5.04.C.2.h
<input type="checkbox"/>	<input type="checkbox"/>	Pollution Liability Insurance	\$1,000,000 OR	\$ _____	If checked, Yes: a) SC-5.04.C.6.c remains If checked, No: b) Replace SC-5.04.C.6.c paragraph with "Not Used"
<input type="checkbox"/>	<input type="checkbox"/>	Rider covering traffic control operations			If checked, Yes: a) SC-5.04.C.6.b remains If checked, No: b) Replace paragraph with "Not Used"
<input type="checkbox"/>	<input type="checkbox"/>	ADDITIONAL INSURANCES d. _____		\$ _____	Add to SC-5.04.C.6
<input type="checkbox"/>	<input type="checkbox"/>	ADDITIONAL INSUREDS other than the City of Cedar Rapids _____			Add to SC-5.04.C.7a.2 If none, enter "NO OTHERS" in SC-5.04.C.7a.2
		EXCESS UMBRELLA INSURANCE (Check Yes for one only)			
<input type="checkbox"/>	<input type="checkbox"/>	\$1 Million (Minor projects)	\$1,000,000		Enter in SC-5.04.C.8.a
<input type="checkbox"/>	<input type="checkbox"/>	\$2 Million (default)	\$2,000,000		
<input type="checkbox"/>	<input type="checkbox"/>	\$ Higher Amount for Complicated Projects (fill-in)		\$ _____	
		PROPERTY INSURANCE			
<input type="checkbox"/>	<input type="checkbox"/>	Boiler & Machinery Policy by Contractor	Bid Price	\$ _____	If Yes, Include SC-5.06 I If No, delete SC-5.06 I and in Table of Contents

**CEDAR RAPIDS METRO AREA CONSTRUCTION SPECIFICATIONS
PROJECT MANUAL PREPARATION REQUEST**

CHECKLIST FOR PREPARER

NOTE	INSERT RESPONSES IN THE FOLLOWING LOCATIONS
<p>A. FOR CEDAR RAPIDS PROJECTS</p>	<ol style="list-style-type: none"> 1. No Bid Deposit (00100-2) 2. Bid documents available at: <ul style="list-style-type: none"> • City Clerk • Public Works Department (00100-1) 3. Bid documents obtained from: <ul style="list-style-type: none"> Public Works Department 500 15th Avenue SW Cedar Rapids, IA 52404 (00100-2 Distributor) 4. Section 00200, Include 15.01 5. Bid is submitted to (00300-1) and address for giving notices (00500-7) to: <ul style="list-style-type: none"> City Clerk 1st Floor, City Hall 101 First Street SE Cedar Rapids, IA 52401 6. Include Bid Form Attachments (00410) I and II always Check included on 00500-5 7. Bid Security (00100-2) <ul style="list-style-type: none"> • 10% if Cost Opinion < \$500,000 • 5% if Cost Opinion > \$500,000 8. Project Administered By: <ul style="list-style-type: none"> Cedar Rapids Public Works Department (00500-1) Designated Representative: (00500-7) Construction Engineer (To be specific at time of Award) 500 15th Avenue SW Cedar Rapids, IA 52404 (319) 286-5802 Phone (319) 774-56531 Fax 9. Section 00800 Always include SC-5.01, SC-6.02.B, SC-13.07, 10. Section 00300-A, Unit Price Bid Bid quantities with 5% of additional quantity to account for typical/routine additions versus theoretical plan take-off quantity. Bid items on Attachment A will include a minimum of 5% contingency quantity. Preparer will use engineering judgment to account for other bid items with quantity adjustments. Please pay attention to those items which are paid on plan quantity and not measured.
<p>B. For Marion Projects</p>	<ol style="list-style-type: none"> 1. \$15 Bid Deposit (00100-2)

**CEDAR RAPIDS METRO AREA CONSTRUCTION SPECIFICATIONS
PROJECT MANUAL PREPARATION REQUEST**

CHECKLIST FOR PREPARER

Attachment A
List of Bid Items with Quantity Adjustments

Standard Bid Item No.	Description	Approximate % Increase
01400-10	Removal of Existing Pavements, Driveways, Curb, and Gutter	5%
01400-11	Removal of Existing Sidewalk	5%
01400-12	Removal of Curbing and Curb and Gutter	5%
01400-20	Milling of PCC Pavement	5%
01400-21	Milling of ACC Pavement	5%
02100-01	Subgrade Preparation	5%
02100-10	Subgrade Stabilization with Suitable Soil	5%
02100-20	Subgrade Stabilization with Crushed Rock Material	See 1)
02100-50	Granular Subbase	5%
02400-10	Subdrain	5%
02500-30	Fittings for Water Distribution Systems	5%
02500-40	Water Services	See 2)
02500-41	Water Services Reconnection	See 2)
02700 all	For <u>all</u> Portland Cement Concrete Bid Items (Section 02700) Payment for Cold Weather Protection	5%
02700-02	Portland Cement Concrete Pavement, Reinforced	5%
02700-10	Portland Cement Concrete Pavement Widening	5%
02700-20	Portland Cement Concrete Driveway	5%
02700-30	Portland Cement Concrete Pavement Repair	10%
02700-35	Portland Cement Concrete Joint Repair	10%
02700-36	Portland Cement Concrete Curb Repair	10%
02700-40	Portland Cement Concrete Overlay, Placement Only	5%
02700-41	Portland Cement Concrete Overlay, Furnish Only	5%
02700-50	Surface Preparation for PCC Overlay	5%
02700-60	Portland Cement Concrete Curb and Gutter	5%
02700-70	Portland Cement Concrete Sidewalk	5%
02700-75	Portland Cement Concrete Sidewalk Ramp	5%
02700-76	Portland Cement Concrete Ramp Curb Cut, 18" – 30"	5%
02700-77	Portland Cement Concrete Ramp Curb Cut, 31" – 42"	5%
02750-01	Asphalt Cement Concrete Pavement	5%
02750-10	Asphalt Cement Concrete Widening	5%
02750-20	Asphalt Cement Concrete Driveway	5%
02750-30	Asphalt Cement Concrete Trails	5%
02750-40	Asphalt Cement Concrete Pavement Repair	5%
02750-50	Asphalt Cement Concrete Overlay	5%

02750-60	Asphalt Cement Concrete Curb	5%
02750-70	Crack Control and Grade Control Fabric	5%
02750-80	Tack Coat	5%
02800-10	Asphalt Cement Concrete, Miscellaneous	5%
02800-20	Portland Cement Concrete Pavement Grinding and Profiling	5%
02800-30	Joint and Crack Routing and Sealing, All Classes	5%
02800-40	Aggregate Surfacing	5%
02800-50	Portland Cement Concrete Pavement Cracking and Sealing	5%
02800-60	Bituminous Seal Coat, Binder Bitumen	5%
02800-61	Bituminous Seal Coat, Cover Aggregate	5%
02850-01	Pavement Markings, Painted	5%
02850-10	Pavement Markings, Polymer Tape	5%
02900-01	Imported Topsoil	See 3)
16570-40	Wires and Cables	5%
16570-50	Conduit	5%

Notes:

- 1) Minimum quantity shall be 15% of full depth paving quantity at 6" thick.
- 2) Bid Item 02500-40 and 02500-41 required on all projects with sidewalk construction.
- 3) Bid Item 02900-01 minimum quantity required for all projects with seeding.