

**Columbia County ARPA
HOUSING REHABILITATION PROGRAM
WORK WRITE-UP/BID FORM**

OWNER: William Walker & Hattie Hawkins

ADDRESS: 852 NE Joe Coney Ter. Lake City FL32055

PHONE #: 386-697-0877

DATE: April 2022

Home Built in: 1960.

- Lead Base Paint Safe Construction Actions **Do Apply:**
- ACM Actions May Apply:
- Mold Actions May Apply

If this unit was constructed prior to 1979: Take Notice of any material that may contain Regulated Asbestos Containing Material (RACM), Lead Based Paint (LBP) or Mold and follow all safe LBP and ACM recommended actions for safe repairs and/or disposal. If there are not attachments pertaining to RACM, LBP, or Mold it is not reasonable to assume that no actions are required.

Note	System	Description of Work	Location	Price	Contractor Initials
A.	REHABILITATION	Special attention should be directed to all contractor obtained LBP/ ACM/Mold reports regarding Lead Base Paint, Asbestos, and/or Mold. Any recommendations included in the reports regarding such material shall become part of the Work.	Unit	N/A	
B.	SITWORK	Rehabilitation of unit shall include as applicable: 1. Re-connects all existing TV & Phone Jacks. Install 911 addressing as required. 2. Disconnect and re-connect to community water/sewer systems if required by code or specification within this document. 3. Demolition and safe, legal, disposal of all materials, removal of all construction and replacement debris. Note: An on-site dumpster shall be maintained on site.	All/Site	\$_____:	

THIS PAGE MUST BE INCLUDED WITH THE BID FOR IT TO BE VALID

All work to be performed in a workmanlike manner, in accordance with the ARPA Program Specifications, Florida Building Code, local codes, and manufacturer's specifications. The contractor shall be responsible for the repairs and/or reinstallation of materials/equipment/fixtures damaged or removed due to any work item contained herein. Contractors shall properly dispose of all fixtures, materials and other items removed from the dwelling unless otherwise specified herein. Bid will be accepted on the **TOTAL BID** submitted, and all items must be cost itemized in the space provided or the bid will be rejected.

This house may or may not require the homeowner to vacate the premises during the construction period. The period for Construction shall be 90 Business days (Mon-Sun) from the date of contract execution and acceptance.

This document may not be altered in any manner. The scope of work set forth in this document may not be changed without the written consent of Guardian CRM, Inc. under direct authorization from Columbia County and/or its official representatives.

I hereby certify that I am licensed by the State of Florida, Department of Business and Professional Regulation, and that I am eligible to participate in the ARPA program. I also agree that change orders above the original contract amount shall only be paid for with ARPA funds to correct documented code violations or to meet Section 8 Housing Quality Standards. Change orders must be approved by the homeowner or his/her representative, the contractor, and local government prior to any initiation of work based on that change order.

Contractor's Name (Print Name): _____

Contractor's Signature: _____

Contractor's Address: _____

Contractor's Phone Number: _____

**SCOPE OF WORK
("SOW")
(Work Listed Below)**

NOTICE TO BIDDING GENERAL CONTRACTORS

No contractor shall, without prior written approval from the Housing Specialist or ARPA Program Manager, deviate from any product recommendations listed within this Scope of Work (SOW). A notice of "or equal" exchange shall be provided to the Inspector within forty-eight (48) hours of the proposed "or equal" substitution. This notice shall contain:

- 1) The names of both the SOW recommended product and proposed substitute product specification
- 2) Comparable manufacturer specifications list, included but not limited to price, warranty information, consumer review reports
- 3) Any additional information requested by the ARPA Program or its agents.
- 4) All bids to include the repair/repaint to match existing, all damaged (plaster, stucco, Tile, or any other material), walls, ceilings, ECT... affected by construction.
- 5) The contractor will provide all material and shall be responsible for covering **all** homeowner belongings, including flooring that cannot be moved during rehabilitation: this is not the owner's responsibility: Daily clean-up within and around the home is required.
- 6) All measurements and material will be the responsibility of the contracting firm: substituting items to upgrade cabinet heights is prohibited.
- 7) All change order must be approved through the ARPA office prior to any change order work can begin.

Failure to provide any required notification will result in a violation of the terms and conditions of the SOW and Work Rehabilitation Contract and a loss of payment on the substituted product if it is not replaced with the SOW specified product. Approval will **NOT** be granted under any circumstance on or after the fact basis.

NOTE: Signature required for acknowledgment of Notice to Bidding General Contractors.

Printed Name

Signature

Date

1. General Construction and Operational:

1a. General Construction and Operational:

- The contractor shall be responsible for and provide all applications, permits, plans, engineering, or other required federal, state, and local documentation.
 - To Include all applicable Plans, Fees, Engineering, Drawings, and Permitting _____ \$ _____

1b. Manuals and Specifications:

- The contractor shall supply, at the time of the final ARPA Program inspection, all manufacturer manuals and specification booklets/packets for all supplied and installed products listed within the Scope of Work. Failure to do so will result in a failed final ARPA Program Inspection.
 - To Include all applicable Plans, Drawings, and Permits, & approved building department docs \$ N/A

2. HVAC & Electrical:

Preface: All electrical work shall be completed by a legal and appropriately licensed electrical firm. At the conclusion of the work the electrical company shall conduct a review of the electrical system and provide an affidavit stating that all work was completed to all specification and/or code requirements and provide notice that the units electrical system is in safe and code compliant working order. Any deficiencies found by the electrical contractor shall be provided to the GC listing any additional repairs needed above what is listed in the SOW. The Contractor understands that failure to provide this affidavit may result in nonpayment of this item and agrees that the owner, the County, and any of its agents will not be held liable due to contractor negligence in providing all required documentation needed for payment.

2a. HVAC (Complete Unit):

- Remove the existing HVAC system and all non-operational components. Install new complete HVAC unit (tonnage to be calculated based on required energy calcs), minimum 14 SEER central heating and air conditioning system. **Rheem Classic Series or approved equal in value and quality.**

The system is to include infrastructure to ensure service to all habitable rooms, including, cleaning, and adjusting the ducts/plenums to ensure maximum air flow: Installation shall also include new return grill, air handler, piping Electrical service connects/disconnects, programmable thermostat and all other infrastructure and components necessary for a complete working system.

Exterior compressor must be installed on a minimum 3X3 concrete pad and bolted to the pad. The contractor must provide a written statement from the HVAC firm performing the duct/plenum cleaning that the ducts have been cleaned in accordance with all governing regulations.

Line-Item Notes:

NOTE 1: Contractor shall provide drawings, preliminary manual J calculations/documents as required to perform the SOW.

NOTE 2: All interior vents shall be checked and adjusted to ensure max airflow inside each room.

- HVAC (1 complete unit; spot ceiling repair/repaint) _____ \$

3. Interior Rehabilitation: Bath and Electrical

INTRO: All electrical work shall be completed by a legal and appropriately licensed electrical firm. At the conclusion of the work the electrical company shall conduct a review of the electrical system and provide an affidavit stating that all work was completed to all specification and/or code requirements and provide notice that the units electrical system is in safe and code compliant working order. Any deficiencies found by the electrical contractor shall be provided to the GC listing any additional repairs needed above what is listed in the SOW. The Contractor understands that failure to provide this affidavit may result in nonpayment of this item and agrees that the owner, the County, and any of its agents will not be held liable due to contractor negligence in providing all required documentation needed for payment.

3a. Bathroom #1 -Toilet:

- Remove existing and Install a new white, elongated, comfort height/handicapped (18"), maximum 1.6 gallon per flush toilet, *including all required hardware and components to ensure complete installation and operational order.* **Recommended product: American Standard or equal in quality and value).**

Line-Item Notes

NOTE 1: Where the toilet and components cannot be placed in the exact footprint of the removed item(s) the contractor is responsible for making all repairs to the affected area to match the existing flooring, etc...affected by the replacement(s).

- Bathroom #1Toilet (1-Unit) _____ \$

3b. Bathroom #1 (Tub/Shower):

- Remove existing/damaged tub-shower assembly: Prepare the wall for cementitious tile backer in preparation for the construction of a new accessible shower assembly. Install cementitious tile backer per manufacturer's recommendations in the footprint of removed wall covering. Cementitious tile backer shall be equal to or better than "Wonderboard". The new shower shall, as closely as possible, be installed in the footprint.

Make all repairs to the wall, framing, furring, and supports as required to ensure the structure is code compliant. Prepare and modify the existing floor/subfloor to accommodate the installation of a new accessible shower assembly, including fiberglass "roll-in" pan/floor, and tile wall surround to the building code/UPC of the jurisdiction.

Install new 12"x12"x1/4" ceramic tile with appropriately sized bull nose trim around the tub/shower perimeter: Tile to finish-starting from top of shower floor and extending to the ceiling on all three (3) walled sides of the shower enclosure.

Accessories shall include a shower curtain rod, ceramic soap dish and towel bar placed in the same setting material used for the ceramic tile. Color choice shall be by owner. (See Notes below).

Line-Item Notes:

NOTE 1: Bid to include stripping, prepping, sealing, priming, and repaint of all non-tiled bathroom walls and ceilings. Paint shall be applied in accordance with normal ARPA requirements for interior wall repair/repaint.

NOTE 2: The bid shall include the following: Installation of 2 properly anchored 500lb Grab bars at the side and rear wall spans of the shower enclosure or as specified by the owner (2 units): Installation to include all required hardware and components to ensure proper, safe, and intended operation. The owner shall have final input on the location of the two grab bars.

- Bathroom #1 Bathtub & Shower Assembly/Enclosure (Full Enclosure) _____ \$ _____

3c. Bathroom #1 Vanity:

- Remove existing (including plumbing connections) and install new, accessible, wall-mounted complete vanity and fixtures (example below)



Vanity height should be at a height accessible to the owner. Vanity to include a new sink and new (appropriate for vanity type) water supply valves, lines and escutcheons, strainer assembly, p-trap and tail assembly; Installation to include all other required hardware and components (center set, low flow single lever faucet and fixtures/drain stop) to ensure for complete installation. (Recommended product: Pegasus set or equal in quality and value)

Line Item Notes:

NOTE 1: Where the Vanity and any ancillary components (light bar, etc...) cannot be placed in the exact footprint of the removed item(s) the contractor is responsible for making all repairs to the affected area to match the existing walls, flooring, painting, etc...affected by the replacement(s).

NOTE 2: This line item includes the removal and replacement of the existing vanity mirror and light bar in the style and footprint of the removed fixtures. .

- Bathroom #1 Vanity and Components (1 Unit & Set) _____ \$ _____

3d. Hot Water Heater:

- Remove existing hot water heater and replace with new, electric, 40 Gallon hot water heater with dual 250volt, 4500-watt heating elements, water supply valves, pressure relief valve with 3/4" copper piped to the exterior, drip pan. Sweat solders the copper fittings to connect the new water heater. Ensure that the new heater is in optimal operating order and is able to service
- the housing unit in the most efficient manner in accordance with the current code/UPC. Installation shall be to manufacturer's specifications and shall include all required hardware and components. (Recommended Product: Whirlpool or equal in value and quality).

Line Item Notes:

NOTE 1: Bid to include expansion tank and all associated components.

- Hot Water Heater (1 unit) _____ \$ _____

4. Structural and Interior Flooring Components:

4a. Interior Flooring and Components:

- Remove any existing floor covering and subfloors in the areas Listed below:

Rear Living Area; Master Bedroom, Bedroom #2

- Properly dispose of the existing floor covering in the areas of the home listed above. Make all appropriate modifications to prepare the underlying floor to accept new tile flooring (Scrape and clean the floor to ensure that it is free of all debris and protrusions. Repair (with like code/compliant materials) and patch all cracks and uneven sub-floor leveling in all affected areas to ensure a smooth uniform, surface).

Install new low maintenance, easy clean 12x12 ceramic floor tiles in the listed areas of the home. Installation to be complete and include all required components, to ensure proper installation to manufacturers specifications. *Exact dimensions and square footage to be determined by contracting firm.* (Recommended tile product: American Olean or equal in quality and value) *Owner to determine color.* Installation to include threshold strips at all exposed joints between rooms and/or at door openings.

Line-Item Notes

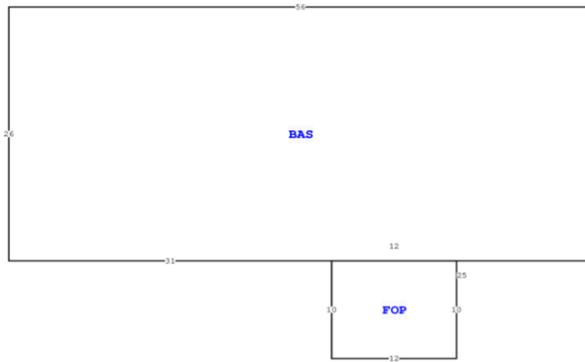
NOTE 1: Bid Line item to include removal and replacement of all existing door thresholds and all baseboard in the footprint of the removed material. New Baseboard shall be painted white.

NOTE 2: Owner shall be provided color selection for the new flooring material.

- Flooring Repairs and Components- (As Listed including all components) _____ \$ _____

-END SOW-

----- EXISTING DWELLING FOOTPRINT -----



----- EXISTING DWELLING FOOTPRINT -----

****SPECIAL NOTES****

All requests for information (RFI's) shall be submitted in writing/via email to:

Antonio Jenkins

Antonio.jenkins@guardiancrm.com

863-899-6695

Any and all products or services included in this scope of work shall be installed to the manufactures specifications and in compliance with all applicable Columbia CountyCounty, Health Department, NEC, and/or Florida Building Codes.

All NOA product numbers can be found at www.miamidade.gov/buildingcode/pc-search_app.asp.

All products with no NOA # number can be found at www.homedepot.com, www.lowes.com, or other retail outlets where such products are sold:

OFFICIAL USE ONLY

WORK WRITE-UP PREPARED BY: Dwelly Brown **Date:** April 2022

WORK WRITE-UP AMENDED BY: Antonio Jenkins **Date:** August 26 2022



REQUIRED ADDENDUM PAGE(S) TO FOLLOW

READ CAREFULLY-WHEN THIS BID ESTIMATE/CONTRACT IS SIGNED, YOU ARE LEGALLY RESPONSIBLE.

NOTE:

- Only licensed and insured contractors legally able to perform work within the State of Florida may submit bids/estimates. A copy of your license and certificate of insurance (listing the County and owner as additional insured) is required to be submitted with your bid.
- For Housing units constructed prior to 1978 where lead-based paint may be present, contractors must have, be able to obtain, or procure a properly licensed/certified EPA-RRP firm in order to complete rehabilitation/abatement on properties where lead is found to be present.
- The bid estimates must be based on the work write-up provided by the County.
- No work shall begin and no material shall be ordered unless a NOTICE TO PROCEED is issued.
- BUILDING PERMIT MUST BE OBTAINED FOR ALL WORK PERFORMED.
- NO advance payment is allowed.
- Funds will be paid directly to the contractor upon submittal of a final invoice, a W-9 form, a notarized Prime Contractor and Sub-Contractor Release of Lien, a copy of the final inspection approval. For partial draws an inspection on partial work, a notarized Contractors Partial Affidavit plus other additional items identified above are required.
- No funds shall be paid to the property owner (applicant).
- All estimates must indicate if connection to public water or sewer service will be required and include all required utility capacity charges and permit fees for such services as part of the estimate.
- Owner/applicant and contractor must discuss and-on-all items related to this bid estimate, including color and type of material to be used (SEE Exhibit "A" to follow).
- All surfaces disturbed by construction shall be repaired in finished to match existing.
- Contractor shall take before pictures and document working condition of all areas, appliances, ect... in the immediate area of construction.
- Where owner claims of damage not related to a specific SOW is made the photos and notes referenced immediately above shall be utilized in resolving the dispute.

Contractors are prohibited from offering any additional work or favors outside of the SOW/work write-up proposed by the Housing Inspector. Any additional needed work must be done only through the County's approved ARPA change order process.

By signature below, I attest that I have read the Columbia CountyCounty Local Housing Assistance Program Publication for the ARPA Program Minimum Standards for Rehabilitation of residential properties and fully understand the requirements.

CONTRACTOR Print Name: _____

DATE: _____

CONTRACTOR Signature: _____

To receive consistent bid estimates, the Columbia County Local Housing Assistance program provides this form. The County nor its agents however, are not party to this agreement. Upon completion of any work identified in this bid estimate and approval of the final inspections by the appropriate jurisdiction building inspector, the County will release funds directly to the contractor.

NOTICE BE AWARE THAT:
FLORIDA STATUTE SECTION 837.06- FALSE OFFICIALS STATEMENTS LAW STATED THAT:

“WHOEVER KNOWINGLY MAKES A FALSE STATEMENT IN WRITING WITH THE INTENT TO MISLEAD A PUBLIC SERVANT IN THE PERFORMANCE OF HIS OFFICIAL DUTY SHALL BE GUILTY OF A MISDEMEANOR OF THE SECOND SEGREE, “ PUNISHABLE AS PROVIDED BY A FINE TO A MAXIMUM OF \$500.00 AND/OR MAXIMUM OF A SIXTY DAY JAIL TERM.

(PRINT or TYPE all information unless otherwise noted)

I/we, the undersigned contractor(s), do hereby present and propose the following cost estimate for construction/rehabilitation work to be completed on the identified residential unit. I/we further assure to the best of my ability, that the estimates contained within this bid are an accurate representation and estimate of all necessary work to be completed in relation to the identified residential unit, and **I/we acknowledge that no final payment for work shall be provided until all work has been completed and the corresponding building department has certified the residence** for occupancy, Including all necessary final inspections. All worked performed under this contract has a one (1) year warranty on all workman ARPA and material and a five (5) year warranty on roofing replacements from the date of the final project inspection.

Residential Unit Information:

Unit Address: _____

Owner Name: _____

Owner Phone #: _____

Contractor Information:

Contractor's Name: _____ Title: _____

Company Name: _____

Address: _____ (Street or PO Box) _____ (City, State, Zip)

Contractor License Information:

State of Florida
License Number: _____

Columbia County
License Number: _____

Applicant (Owner) and Contractor Contract

CONTRACTOR:

I, (the contractor) have read in its entirety, and understood and agree with all of the terms, and conditions contained within this contract and SOW documents.

Contractor's Name (Print): _____ Title: _____

Contractor's Name (Signature): _____ Date: _____

Company Name: _____ Phone: _____

Position/title/relation to Contractor (if not the Contractor): _____

ENTER FINAL TOTAL BID IN THE PRIC BOX BELOW

TOTAL Aggregate BID For: 852 NE Joe Coney Terr. ----->\$ _____

OWNER:

I/we, the listed owner(s)/applicant(s), have read in its entirety, and understood and agree with all of the terms, and conditions contained within this contract and SOW documents, and intend to select this contractor to complete the work identified in this estimate.

My/Our signature below reflects my understanding and acceptance of the aforementioned scope of work with a total project cost of

\$ _____ : (hand written by owner/applicant). I also understand and accept the possibility that this initial total project cost can change (increase or decrease) if unanticipated labor or materials changes are required for compliance with any applicable building codes or deemed necessary by the ARPA Program Manager. Any additional charges (increase or decrease) must be requested by the contractor in writing, submitted to the housing team for review, and must receive written approval from the ARPA Housing Program Manager BEFORE the additional or reduced services are to be performed.

Applicant Name (Print): _____ Initial: _____

Applicant Name (Signature): _____ Date: _____

Co-Applicant Name (Print): _____ Initial: _____

Co-Applicant Name (Signature): _____ Date: _____

“EXHIBIT A”

**COLUMBIA COUNTY
ARPA
HOUSING REHABILITATION PROGRAM
Subcontractor and Permit Listing**



List all subcontractors that will be used for the work completed on this property: Failure to complete this Exhibit may result in this bid being considered incomplete and ineligible for award.

SUBCONTRACTING FIRM NAME	SUBCONTRACTING FIRM PHONE #
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.



List all permits that will be required for the work completed on this property: Failure to complete this Exhibit may result in this bid being considered incomplete and ineligible for award.

REQUIRED PERMITS	PRINT NAME OF ENTITY RESPONSIBLE FOR PERMIT
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

Contractor's Name (Print Name): _____
Contractor's Signature: _____
Title of signatory: _____

“EXHIBIT B”

**COLUMBIA COUNTY
ARPA
HOUSING REHABILITATION PROGRAM
HOUSING REHABILITATION PROGRAM COLOR/STYLE SELECTION**

1. Contractor must provide at least three (3) color choices for each eligible item.

NOTE: See attached scope of work for highlighted eligible items.

2. Columbia County reserves the right to veto a color choice made by the homeowner.

3. It is the contractor’s responsibility to provide selections for the homeowner to select the colors and designs, and then sign this form.

4. Any deviations from this process must be submitted via email to the Housing Inspector (antonio.jenkins@guardiancrm.com) for approval.

5. Color/Style selections are to be signed and forwarded to the Housing Program Inspector no later than five (5) calendar days after the NTP takes effect.

COLORS AND STYLES TO BE LISTED IN THE GRID BELOW:

ITEM LOCATION	ITEM PRODUCT #	ITEM STYLE CODE	ITEM COLOR CODE

(NOTE: PLEASE MAKE A DUPLICATE COPY IF MORE SPACE IS REQUIRED. ALL COPIES MUST BE SIGNED)

The signatures on this document confirm acknowledgment of the above listed items:

Homeowner Signature: _____	Date: _____
Contractor Signature: _____	Date: _____
Housing Inspector Signature: _____	Date: _____