



# Village at Haile Condominium Association Milestone Exterior Restoration at Buildings A, B, C, D, E, F, G, H, and J



## GENERAL CONTRACTOR SERVICES PROPOSAL

Project Address: 9116 SW 51st Rd, Gainesville, FL 32608

05/14/2026

**I&E CONSTRUCTION**  
6565 Hazeltine National Drive #10, Orlando, FL 32822  
[www.ieconfl.us](http://www.ieconfl.us) | 407.737.8808 | [VasilyS@iecon.us](mailto:VasilyS@iecon.us)  
CGC 1532020

## I. FIRM BACKGROUND & QUALIFICATIONS

### A. OVERVIEW OF FIRM

I&E Construction is a general contractor specializing in multifamily rehabilitation, structural repairs, waterproofing systems, and exterior restoration. Founded in 1992, the company brings over 30 years of construction experience delivering projects ranging from targeted repairs to large-scale rehabilitation programs exceeding \$50 million.

Our Florida Division, established in 2016, works closely with engineers, property managers, and condominium boards to deliver durable solutions with a focus on quality, safety, and minimal disruption to residents.

State of Florida License Number: CGC 1532020

Years in Business: 9 in Florida, 34 years in Oregon

### B. LEADERSHIP



**Karl Ivanov**

#### **President/Founder**

As President, Karl provides strategic leadership and oversees company operations and client relationships. He founded I&E Construction in 1992 and brings 30 years of experience in multifamily construction and large-scale rehabilitations. Under his leadership, I&E has developed more than 3,000 multifamily units and 2,500 single-family lots, along with retail and mixed-use developments throughout multiple markets.

### C. FLORIDA MANAGEMENT



**Vasily Shadrin**

#### **General Manager**

Vasily oversees I&E Construction's Florida operations and manages project delivery across the state. He works closely with engineers, consultants, and ownership groups to ensure projects are completed on schedule, within budget, and to the highest quality standards. He also supports coordination with residents, property management, and project stakeholders throughout construction.

## D. REFERENCE PROJECTS

### VERANO OF BARTRAM PARK

41 BUILDINGS, 296 UNITS | JULY 2024 – APRIL 2025

**PAIGE GIBSON**

donitagibson@yahoo.com | 941.268.1449

- CLADDING REPLACEMENT BY REMOVING ALL STUCCO OVER SECOND-FLOOR EXTERIOR FRAMED WALLS
- INSTALLATION OF NEW CONCEALED BARRIER COMPONENTS
- INTEGRATE ALL CONCEALED BARRIER COMPONENTS WITH WINDOWS, ROOF COMPONENTS, AND OTHER PENETRATIONS
- INSTALLED NEW JAMES HARDIE CEMPLANK LAP SIDING
- PULL, REFLASH, AND RESET EXISTING WINDOW ASSEMBLY AS WELL AS INSTALLATION OF NEW WINDOWS
- FULL REPAINT OF SHERWIN WILLIAMS SUPER PAINT



### GEORGETOWN TOWNHOMES

33 BUILDINGS, 192 UNITS | MAY 2023 – APRIL 2025

**MONICA MAYES** | Board President

mays.georgetown@gmail.com | 561.876.8532

- PERFORMED TARGETED FRAMING, STUCCO, STONE MASONRY VENEER, AND BRICK REPAIRS
- REFLASH SELECTED SLIDING GLASS DOORS
- REMOVE AND REINSTALL SELECTED ALUMINUM WINDOWS
- ADDED NEW SHINGLE ROOFS AND TPO FLAT ROOFS
- FULL COMMUNITY REPAINT



### TOWNS OF WESTYN BAY

24 BUILDINGS, 172 UNITS | OCT. 2021 - DEC. 2022

**CLAIRE CARNEY** | First Service Residential

claire.carney@fsresidential.com | 703.980.7837

- REMOVED 55,000 SQ.FT. OF STUCCO CLADDING AND ASSOCIATED CONCEALED BARRIER COMPONENTS
- REMOVED AND REINSTALLED WINDOWS ON PAN FLASHINGS
- INSTALLED NEW CONCEALED BARRIER COMPONENTS AND 3-COAT STUCCO CLADDING WITH KNOCKDOWN TEXTURE
- PERFORM TARGETED STUCCO REPAIRS ON GROUND LEVELS
- SEALED AND PAINTED WITH QUALITY ACRYLIC PAINT
- RE-ROOFED ALL BUILDINGS IN COMMUNITY
- INSTALLED NEW PERGOLAS TO FRONT OF ALL BUILDINGS



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## II. PROPOSAL NOTES AND CLARIFICATIONS

### Proposal Submission

| VILLAGE AT HAILE CONDOMINIUM - REPAIR SPECIFICATIONS |                                                                                                                                            |                    |                   |            |              |            |
|------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------------|------------|--------------|------------|
| Item                                                 | Description of Work                                                                                                                        | Quantity           | Unit              | Unit Cost  | Total Cost   | Total Days |
| <b>I</b>                                             | <b>Structural Repairs</b>                                                                                                                  |                    |                   |            |              |            |
| A                                                    | Temporary shoring (2x6 framing @ 16" on center)                                                                                            | 152                | Per Bay           | \$258.19   | \$39,245.00  |            |
| B                                                    | Remove and replace wooden beams (4) 2x14                                                                                                   | 28                 | LF                | \$367.21   | \$10,282.00  |            |
| C                                                    | Remove and replace wooden beams (3) 2x14                                                                                                   | 425                | LF                | \$275.40   | \$117,045.00 |            |
| D                                                    | Remove and replace wooden beams (2) 2x14                                                                                                   | 425                | LF                | \$218.03   | \$92,661.00  |            |
| E                                                    | Remove and replace wooden columns 6x6                                                                                                      | 1,454              | LF                | \$34.43    | \$50,054.00  |            |
| F                                                    | Remove and replace deteriorated wood framing (Allowance)                                                                                   | 1,925              | LF <del>FSF</del> | \$13.77    | \$26,508.00  |            |
| F                                                    | Remove and replace deteriorated wood vertical sheathing (Allowance)                                                                        | 1,925              | LF <del>FSF</del> | \$ 5.74    | \$11,045.00  |            |
| <b>II</b>                                            | <b>Exterior Repairs</b>                                                                                                                    |                    |                   |            |              |            |
| A                                                    | Remove and replace stucco (as needed)                                                                                                      | 11,005             | SF                | \$26.39    | \$290,450.00 |            |
| B                                                    | Replace removed stucco (from DT)                                                                                                           | 583                | SF                | \$31.56    | \$18,398.00  |            |
| C                                                    | Remove and replace soffits(as needed) <sup>1</sup> (affected areas only; include electrical fixtures reset.)                               | 10,865             | SF                | \$9.75     | \$105,900.00 |            |
| D                                                    | Grout and seal all joint interfaces (doors, windows, sliding glass doors, slabs, walls, building perimeter, etc.) <sup>2</sup> (Allowance) | 4,000              | LF                | \$7.46     | \$29,835.00  |            |
| E                                                    | Install horizontal expansion joints                                                                                                        | <del>297</del> 187 | LF                | \$372.94   | \$67,129.00  |            |
| F                                                    | Install vertical expansion joints                                                                                                          | <del>486</del> 390 | LF                | \$137.70   | \$53,703.00  |            |
| G                                                    | Install expansion joint transitions                                                                                                        | <del>246</del> 36  | EA                | \$831.94   | \$29,950.00  |            |
| H                                                    | Remove and install EIFS trim                                                                                                               | 1,300              | SF                | \$20.66    | \$26,852.00  |            |
| I                                                    | Remove and replace architectural column casings (Square & Circle) <sup>3</sup>                                                             | 46                 | EACH              | \$1,147.50 | \$52,785.00  |            |
| J                                                    | Remove and replace exterior siding (as needed) <sup>4</sup>                                                                                | 1,980              | SF                | \$16.07    | \$31,809.00  |            |

| VILLAGE AT HAILE CONDOMINIUM - REPAIR SPECIFICATIONS |                                                                                                                                             |                                      |      |            |                       |            |
|------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------|------------|-----------------------|------------|
| Item                                                 | Description of Work                                                                                                                         | Quantity                             | Unit | Unit Cost  | Total Cost            | Total Days |
| III                                                  | <b>Painting &amp; Waterproofing</b>                                                                                                         |                                      |      |            |                       |            |
| 1                                                    | <b>Paint</b>                                                                                                                                |                                      |      |            |                       |            |
| A                                                    | Prime and Paint Exterior Stucco of Buildings A-J                                                                                            | 56,400                               | SF   | \$3.16     | \$177,978.00          |            |
| 2                                                    | <b>Balconies</b>                                                                                                                            |                                      |      |            |                       |            |
| A                                                    | Remove and reinstall all railing (to facilitate waterproofing) <b>Temporary railing included</b>                                            | 1,344                                | LF   | \$37.19    | \$49,989.00           |            |
| B                                                    | Remove Tile <b>(Unit Price, not included)</b>                                                                                               | 100 <sup>5</sup>                     | SF   | \$6.90     | \$690.00              |            |
| C                                                    | Re-slope balcony (only if not sloped away from the building) <b>(Unit Price, not included)</b>                                              | Contractor to Verify w/ EOR Approval | SF   | \$21.00/SF | \$21.00/SF            |            |
| D                                                    | Surface prep and install waterproofing membrane compatible with pedestrian Traffic                                                          | 5,600                                | SF   | \$16.07    | \$89,964.00           |            |
| 3                                                    | <b>Breezeways</b>                                                                                                                           |                                      |      |            |                       |            |
| A                                                    | Remove and reinstall all railing (to facilitate waterproofing) <b>Temporary railing included</b>                                            | 1,093                                | LF   | \$33.52    | \$36,638.00           |            |
| B                                                    | Re-slope breezeway (only if not sloped away from the building) <b>(Unit Price, not included)</b>                                            | Contractor to Verif w/ EOR Approv    | SF   | \$21.00/SF | \$21.00/SF            |            |
| C.1                                                  | <i>Replace wood-rot deck sheathing on affected breezeway areas with a proper vapor barrier and flashing.</i>                                | 3,235                                | SF   | \$13.77    | \$44,546.00           |            |
| C.2                                                  | <i>Remove deteriorated deck concrete to access and repair water-damaged wood. Replace with 3,500 PSI concrete prior to traffic coating.</i> | 3,235                                | SF   | \$32.39    | \$104,785.00          |            |
| C.3                                                  | <i>CMU column filling Building A, 1st floor per column</i>                                                                                  | 8                                    | EA   | \$803.25   | \$6,426.00            |            |
| C                                                    | Surface prep and install waterproofing membrane compatible with pedestrian traffic                                                          | 6,710                                | SF   | \$13.77    | \$92,397.00           |            |
| <b>TOTALS:</b>                                       |                                                                                                                                             |                                      |      |            | <b>\$1,656,374.00</b> |            |

Superscript Clarification Notes:

1. Soffit panels will require removal to allow for temporary shoring and framing work. This line item shall include removal and reinstallation of soffit systems, as well as replacement of any soffit panels damaged or rendered unsalvageable during construction. Contractor shall include an appropriate replacement quantity in the Proposal.
2. If this line item is priced as a percentage of the Contractor's waterproofing operation, the quantity for this line item shall be entered as zero (0) and the cost included within the applicable waterproofing unit pricing.
3. Existing architectural columns shall be removed and replaced to match existing condition, profile, and finish (where feasible) following installation of the structural 6x6 column. This line item shall account for full replacement of architectural columns if salvage or reuse of existing components is not possible. Contractor is advised that column types vary and include both square and circular configurations.
4. This line item is intended to account for architectural finish work specific to Building J, more specifically, the horizontal siding around the columns and beams.
5. The Board will provide information identifying which balconies include tile finishes. For bidding purposes, each tiled balcony may be assumed to be approximately 100 square feet. Contractor shall adjust quantities accordingly upon receipt of final information.

| General Conditions                                                                                                   |                                                          |      |           |              |            |
|----------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|------|-----------|--------------|------------|
| Description of Work                                                                                                  | Quantity                                                 | Unit | Unit Cost | Total        | %          |
| General Conditions<br>Include overhead protection, additional lighting, and portable restroom facilities, as needed. | 1                                                        | LS   |           | \$327,385.00 |            |
| Mobilization and Demobilization                                                                                      | 1                                                        | LS   |           | \$3,443.00   |            |
| Shoring (included in I. A.)                                                                                          | 1                                                        | LS   |           | Included     |            |
| Permits (9 Buildings) (Allowance)                                                                                    | 1                                                        | LS   |           | \$12,652.00  |            |
| Performance and Payment Bonds(not included)                                                                          | 1                                                        | LS   |           | \$25,351.00  |            |
|                                                                                                                      | <b>Grand Total (including allowances) \$1,999,854.00</b> |      |           |              |            |
|                                                                                                                      |                                                          |      |           |              |            |
|                                                                                                                      | <b>Project Duration (Days)</b>                           |      |           |              | <b>180</b> |

| UNIT PRICES |                                                    |          |      |           |            |
|-------------|----------------------------------------------------|----------|------|-----------|------------|
| Item        | Description of Work                                | Quantity | Unit | Unit Cost | Total Cost |
| Ad1         | 2x4 Vertical Stud                                  | 1        | LF   | \$ 12.00  | \$ 12.00   |
| Ad2         | 2x6 Vertical Stud                                  | 1        | LF   | \$ 14.00  | \$ 14.00   |
| Ad3         | 2x4 Bot Plate                                      | 1        | LF   | \$ 26.00  | \$ 26.00   |
| Ad4         | 2x4 Top Plate                                      | 1        | LF   | \$ 23.00  | \$ 23.00   |
| Ad5         | 15/32 CDX Plywood (Vertical Walls)                 | 16       | SF   | \$ 74.00  | \$ 74.00   |
| Ad6         | Remove & reinstall soffits                         | 1        | SF   | \$ 9.75   | \$ 9.75    |
| Ad7         | Remove & reinstall concrete 4" depth,3500 PSI      | 1        | SF   | \$ 32.39  | \$ 32.39   |
| Ad8         | Remove & reinstall pressure treated deck sheathing | 1        | SF   | \$ 13.77  | \$ 13.77   |
| Ad9         | Existing railing Modification                      | 1        | EA   | \$600.00  | \$600.00   |

## SECTION 1: GENERAL

This proposal outlines I&E Construction's scope of work for the Village at Haile Condominium project in accordance with the Bid Documents issued for bidding.

Work generally includes selective removal and replacement of exterior façade, selective deck replacement at breezeways, and structural components of Buildings A, B, C, D, E, F, G, H, and J at Village at Haile Condominium. Work shall be performed in occupied buildings and will be sequenced/phased to maintain Owner use and access.

Allowances (if applicable) are budget placeholders used only where specific products, quantities, or details are not fully defined in the Bid Documents at the time of proposal and will be reconciled based on final selections, confirmed quantities, and pricing.

Any items missing from the Bid Documents are specifically excluded; any items not completely defined are contractor-designed.

Unless otherwise indicated in the Bid Documents, normal working hours for the project are 8:00 a.m. to 5:00 p.m., Monday through Friday. Work outside of these hours, on weekends, or on federal holidays is not permitted unless specifically authorized by the Owner/Property Manager due to special circumstances.

## SECTION 2: BID DOCUMENTS

The estimate is based on a site walkthrough and the Bid Documents listed below (including all addenda issued prior to bid date):

- **Project Manual:** Village at Haile - Milestone Repairs Bid Package
  - **Project Drawings:** 1240125-0009412.00VLG@Haile Bldg A 03-06-2026  
1240125-0009412.00VLG@Haile Bldg B 03-06-2026  
1240125-0009412.00VLG@Haile Bldg C 03-06-2026  
1240125-0009412.00VLG@Haile Bldg D 03-06-2026  
1240125-0009412.00VLG@Haile Bldg E 03-06-2026  
1240125-0009412.00VLG@Haile Bldg F 03-06-2026  
1240125-0009412.00VLG@Haile Bldg G 03-06-2026  
1240125-0009412.00VLG@Haile Bldg H 03-06-2026  
1240125-0009412.00VLG@Haile Bldg J 03-06-2026
  - **Addendum #1:** 2026.03.31 Village at Haile - Milestone Repairs Bid Package Revised
  - **Addendum #2:** 2026-04-21 - Village at Haile - RFI
- Any other scope of work will be performed on a time & materials basis, or via change order.*

## SECTION 3: SCHEDULE

- Estimated project duration: **180 days** from written Notice to Proceed (or award authorization), subject to final phasing, access, and weather.
- Schedule compression/extension may increase labor, supervision, and general conditions.
- Assumes timely approvals, normal material lead times, and uninterrupted access per Bid Documents.

## SECTION 4: GENERAL CONDITIONS

The proposed work includes the following:

- Mobilization and demobilization
- Project management, administration, and coordination meetings
- Site supervision and safety program implementation
- Material receiving, staging, handling, and site logistics
- Temporary protection of adjacent areas/finishes outside work limits
- Temporary barricades/signage and pedestrian control in work areas
- Daily housekeeping and progressive clean-up
- Waste removal and disposal for debris generated by I&E.

## **SECTION 5: SCOPE OF WORK**

Scope includes structural repairs, exterior façade restoration, balcony and breezeway waterproofing, and repainting of Buildings A, B, C, D, E, F, G, H, and J, in accordance with project documents, codes, manufacturer requirements, and EOR direction.

### **STRUCTURAL REPAIRS**

- Provide all labor, materials, and equipment for demolition, temporary support, and replacement of deteriorated structural members.

#### **Shoring & Access**

- Provide temporary shoring at 156 locations and as required to support the structure during work.
- Maintain shoring until repairs are complete and approved by EOR.
- Provide scaffolding, overhead protection, and safe access at all public and occupied areas interferent with working area.

#### **Demolition & Inspection**

- Remove breezeway soffits, electrical fixtures, and selective concrete/finishes as required to access structural components.
- Perform selective demolition to access beams, columns, and framing.
- EOR to inspect exposed framing prior to replacement.

#### **Structural Replacement (Wood Framing)**

- Remove and replace deteriorated beams ((4), (3), (2) 2x14) and 6x6 columns.
- Use SYP No.2 or better, PT UC4A at concrete interfaces. Install members in-kind to match existing load path.
- Built-up beams: 10d nails @ 12" O.C. staggered.
- Use Simpson Strong-Tie connectors (or equal) and structural fasteners only (no drywall/deck screws). Lumber to be straight, dry, and defect-free.

#### **Column Installation (6x6)**

- Install PT 6x6 columns per plans with approved caps.
- Provide full bearing with 3/8" steel shims. Install flashing boots at bases (EOR approved).
- Set plumb and coordinate with waterproofing for continuous seal.

#### **Framing & Sheathing**

- Remove and replace deteriorated framing/sheathing to sound wood.
- Perform work under EOR observation. Replace in-kind and treat adjacent areas with borate where required.
- All connections to meet NDS requirements.

#### **Anchors & Fasteners**

- Use Simpson SET-XP, Hilti HY-200, or equal.
- Install per ESR including hole cleaning. All fasteners to be hot-dip galvanized (ASTM A153).
- Follow most stringent requirement between plans and manufacturer.

#### **Inspection Requirement**

- No structural work shall be concealed prior to EOR inspection and approval.

## **II. EXTERIOR REPAIRS**

- Perform exterior envelope repairs in coordination with structural and waterproofing work.

### **Stucco Removal & Substrate Preparation**

- Remove stucco only as required to facilitate structural repairs and waterproofing tie-ins.
- Remove finishes to fully expose damaged areas.
- Evaluate substrate and correct deficiencies prior to installation.

### **Stucco Installation**

- Install stucco system after completion of structural and waterproofing work.
- Install WRB, lath (Permalath 1000 or equal), and accessories per ASTM C1063.
- Apply scratch and brown coat (or equal) and finish to match existing.
- Blend texture and color to adjacent surfaces.
- Terminate stucco cleanly at expansion joints with proper sealant.

### **Expansion Joints (Critical Integration)**

- Install all expansion joints and transitions:
  - **Vertical joints:** Sika Emseal Colorseal
  - **Horizontal joints:** Sika Emseal SJS
  - **Transitions:** factory-fabricated Emseal units
- All joints shall be continuous, watertight, and properly integrated with coatings and waterproofing systems

### **Soffits & Fixtures**

- Replace damaged materials.
- Reset electrical fixtures after completion of work.

### **Cladding & Trim**

- Remove and replace EIFS trim, column casings, and siding to match existing conditions and integrate with new work.
- Sealants & Joint Treatment at windows and doors. (Allowance)
- Apply sealants at joints after stucco and cladding installation and prior to coatings.
  - Ensure proper preparation, tooling, and continuity
  - Integrate with expansion joint systems

## **III. BALCONIES & BREEZEWAYS – WATERPROOFING AND FINISHES**

### **Balconies**

- Surface Removal & Deck Preparation.
  - Remove railings, coatings, and finishes to expose substrate. Inspect and repair sheathing and framing as required.
- Install new decking where required:
  - APA-rated plywood (min. 23/32", Structural 1)
  - Fastening per Florida Building Code.
  - Slope min. 1/8" per foot toward drainage.
  - Seal joints with Sikaflex® HY-100 where required.
- EOR inspection prior to waterproofing.

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### **Waterproofing & Flashing**

- Cut back stucco at deck-to-wall interfaces
- Install flashing at all transitions
- Install waterproofing membrane system (Sikalastic or equal)
- Install drainage mat where required
- Extend membrane vertically at walls, curbs, and penetrations

### **Traffic Coating**

- Install Sikalastic 1500 system over approx. 5,600 SF.
- Ensure full integration with joints and transitions
- Reinstall railings after completion.

### **Breezeways**

- Surface Removal & Substrate Prep  
Remove coatings and finishes. Inspect and repair sheathing as required.
- Concrete Topping & Slope Correction
  - Install new concrete topping slab (3,000–3,500 PSI)
  - Provide minimum slope 1/4" per foot away from building
  - Install control joints at max. 10'-0"
  - Rebuild slab edges as required
- Grout at Columns
  - Use non-shrink grout (min. 5,000 PSI) at column/slab interfaces
  - Use for leveling, patching, and anchor pockets
  - Install per manufacturer requirements
- Waterproofing & Coating
  - Install waterproofing system integrated with flashing and joints
  - Apply Sikalastic 1500 system over approx. 6,710 SF
  - Ensure continuity with expansion joints and vertical transitions
- Reinstall railings after completion.

## **IV. PAINTING**

- Perform painting only after completion of all repairs, waterproofing, sealants, and coatings.
- Sealants
  - Install LOXON H1 sealant at dissimilar materials
  - Ensure sealants are cured prior to painting
- Surface Preparation
  - Clean all surfaces and repair cracks prior to coating.
- Stucco Coatings
  - Apply Loxon Conditioner where required
  - Apply one coat Latitude.
  - New stucco may receive direct finish coat per manufacturer
- Apply all coatings uniformly with proper coverage and curing.

## SECTION 6: CLARIFICATIONS

The proposed work includes the following terms and conditions:

- The quote does not cover the resolution of concealed conditions.
- This bid is based on the use of an AIA contract.
- Utilities (power and water) for construction will be provided by the Owner, who is also responsible for the associated costs.
- Closeout documentation, including operation and maintenance manuals, warranty information, and other relevant materials, will be provided only in digital format.
- Project delays caused by ownership, governing municipalities, or consultants may result in additional costs.
- All personal property must be removed from the exterior site before work begins.
- One mobilization is included; however, additional mobilizations will incur extra charges.
- Proposal is based on quantities provided in the bid form. Any additional work will be addressed by change order.
  - Quantities exceeding those indicated in the bid form will be addressed by change order and billed at the applicable unit prices.
  - Quantities below those indicated in the bid form will be returned as a credit.
- Selective replacement of existing second-floor breezeway wood deck sheathing and cast-in-place concrete slab as required.
- Our proposal assumes the existing railings will be carefully removed as required and reset/reinstalled in their original locations upon completion of the work. Any railing modification to be addressed to unit price Ad9.
- For the third-floor breezeways with concrete and wood deck surfaces, our proposal assumes application of a deck coating system only. Any repairs, replacement, or other work related to the existing concrete slabs or wood deck breezeway structures are not included in base bid price.
- The customer must provide a staging area and free parking space for service and employee vehicles.
- The owner is responsible for relocating traffic and pedestrians to allow contractor access to repair areas.
- Any vertical framing and sheathing replacement shall be covered under the allowance. Quantities exceeding 1,925 SF will be addressed by Change Order and billed at \$14.50 per SF.
- Base bid includes full repaint of stucco areas at Buildings A, B, C, D, E, F, G, H, and J. All prices for materials and equipment are valid for 30 days. After this period, prices may change if there are shortages, product unavailability, or market fluctuations, as long as they're not caused by the Service Contractor. If prices increase during the project, the contract price will be updated. Delays caused by the Service Contractor will not result in extra costs to the Client.

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## SECTION 7: EXCLUSIONS

The following items are specifically excluded from the scope of work unless otherwise noted:

- Surveying and testing
- Permits (included in allowance)
- Impact Fees and Utility Use Fees.
- Tenant Relocation Costs or Moving and Storage of Personal Items.
- Security System and Air Quality Monitoring or Testing.
- Hazardous Material Abatement.
- Railing Engineering Drawings.
- Wrap and Umbrella Insurance Policies.
- Liquidated Damages.
- Concrete and wood deck breezeways at third floor a
- Any permits required by the City for site access, street occupancy, or use of public right-of-way are not included in this proposal and will be provided at additional cost.
- Professional Window Cleaning.
- Landscaping.
- Stairwells: all work and painting are excluded.
- Mobilization Costs for Hurricanes or Other Extreme Weather Conditions
  - A reserve of \$5,000.00 is recommended.
  - Mobilization and Demobilization of I&E Forces for Weather Event Preparation.
  - Temporary Protection and/or Scaffold Dismantling.

Note:

Any work not included in the current proposal, including items listed under exclusions, will be performed on a Time & Materials (T&M) basis at a rate of \$85 per man-hour, plus the cost of materials.

## III. WARRANTIES AND INSURANCE

### SECTION 8: WARRANTIES:

- I&E: This work includes a 1-year workmanship warranty on all areas of work performed at no additional charge.
- Painting: Seven (7) Year Limited Material Warranty.
- Sikalastic 1500 System – One (1) Year limited warranty against manufacturing defects.

## IV. CERTIFICATE OF INSURANCE

| <b>CERTIFICATE OF LIABILITY INSURANCE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              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                                                                                                                                                                   | DATE (MM/DD/YYYY)<br>11/18/2024 |                               |                         |                                                                |                                                                                                                                                                                                 |                                        |       |                                                                                                                                                           |       |            |              |            |            |                                                                                                                                                                                    |                                      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| <p>THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.</p> <p><b>IMPORTANT:</b> If the certificate holder is an <b>ADDITIONAL INSURED</b>, the policy(ies) must have <b>ADDITIONAL INSURED</b> provisions or be endorsed. If <b>SUBROGATION IS WAIVED</b>, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| <b>PRODUCER</b><br>Zarosinski-Leavitt Ins Agency of Oregon, Inc<br>Leavitt Group of Portland<br>8285 SW Nimbus Ave, Ste 120<br>Beaverton OR 97008                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>CONTACT</b><br>NAME: Guadalupe Martinez Luna<br>PHONE (A/C, No, Ext): (503) 639-4220 FAX (A/C, No): (503) 639-4449<br>E-MAIL ADDRESS: gmartinezluna@leavitt.com                                                                                                                                                                                                                                                                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| <b>INSURED</b><br>Integrity & Excellence Construction, Inc & or I&E Construction Inc<br>6565 Hazeltine National Drive, Suite 10<br>Orlando FL 32822                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Upland Specialty Insurance Company</td> <td>16988</td> </tr> <tr> <td>INSURER B: Middlesex Insurance Company</td> <td>23434</td> </tr> <tr> <td>INSURER C: Zurich American Insurance Co</td> <td>16535</td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table> |                                 | INSURER(S) AFFORDING COVERAGE | NAIC #                  | INSURER A: Upland Specialty Insurance Company                  | 16988                                                                                                                                                                                           | INSURER B: Middlesex Insurance Company | 23434 | INSURER C: Zurich American Insurance Co                                                                                                                   | 16535 | INSURER D: |              | INSURER E: |            | INSURER F:                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                  |   |                                                                                                                                                                                               |     |     |   |               |            |                                                                                 |                                                                                                                        |   |                         |  |  |  |             |            |  |  |  |  |  |  |            |  |  |  |  |  |  |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                 |              |                                           |            |                          |             |                       |              |                   |              |                        |              |                   |              |                                     |              |                            |    |                              |    |                                |    |                 |              |           |              |  |    |
| INSURER(S) AFFORDING COVERAGE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | NAIC # 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| INSURER A: Upland Specialty Insurance Company                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          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| INSURER B: Middlesex Insurance Company                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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| INSURER C: Zurich American Insurance Co                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                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| INSURER D:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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| INSURER E:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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| INSURER F:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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| <b>COVERAGES</b> <b>CERTIFICATE NUMBER:</b> 24-25 GL/AL/WC/UM <b>REVISION NUMBER:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  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| THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       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| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">INSR LTR</th> <th style="text-align: left;">TYPE OF INSURANCE</th> <th style="text-align: left;">INSR WVD</th> <th style="text-align: left;">POLICY NUMBER</th> <th style="text-align: left;">POLICY EFF (MM/DD/YYYY)</th> <th style="text-align: left;">POLICY EXP (MM/DD/YYYY)</th> <th style="text-align: left;">LIMITS</th> </tr> </thead> <tbody> <tr> <td rowspan="4" style="text-align: center; vertical-align: middle;">A</td> <td> <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b><br/> <input type="checkbox"/> CLAIMS-MADE    <input checked="" type="checkbox"/> OCCUR           </td> <td rowspan="4" style="text-align: center; vertical-align: middle;">Y</td> <td rowspan="4" style="text-align: center; vertical-align: middle;">Y</td> <td rowspan="4" style="text-align: center; vertical-align: middle;">USPCL0133124</td> <td rowspan="4" style="text-align: center; vertical-align: middle;">02/20/2024</td> <td rowspan="4" style="text-align: center; vertical-align: middle;">02/20/2025</td> </tr> <tr> <td>           GEN'L AGGREGATE LIMIT APPLIES PER:<br/> <input type="checkbox"/> POLICY    <input checked="" type="checkbox"/> PRO-JECT    <input type="checkbox"/> LOC<br/> <input type="checkbox"/> OTHER:         </td> </tr> <tr> <td> <input type="checkbox"/> <b>AUTOMOBILE LIABILITY</b><br/> <input type="checkbox"/> ANY AUTO<br/> <input type="checkbox"/> OWNED AUTOS ONLY    <input checked="" type="checkbox"/> SCHEDULED AUTOS<br/> <input checked="" type="checkbox"/> HIRED AUTOS ONLY    <input type="checkbox"/> NON-OWNED AUTOS ONLY         </td> </tr> <tr> <td> <input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b>    <input checked="" type="checkbox"/> OCCUR<br/> <input type="checkbox"/> EXCESS LIAB    <input type="checkbox"/> CLAIMS-MADE<br/> <input type="checkbox"/> DED    <input checked="" type="checkbox"/> RETENTION \$         </td> </tr> <tr> <td rowspan="3" style="text-align: center; vertical-align: middle;">C</td> <td> <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br/>           ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br/>           If yes, describe under DESCRIPTION OF OPERATIONS below         </td> <td rowspan="3" style="text-align: center; vertical-align: middle;">Y/N</td> <td rowspan="3" style="text-align: center; vertical-align: middle;">N/A</td> <td rowspan="3" style="text-align: center; vertical-align: middle;">Y</td> <td rowspan="3" style="text-align: center; vertical-align: middle;">WC-1121378-07</td> <td rowspan="3" style="text-align: center; vertical-align: middle;">12/01/2024</td> </tr> <tr> <td> <input checked="" type="checkbox"/> PER STATUTE    <input type="checkbox"/> OTH-ER           </td> </tr> <tr> <td>           E.L. EACH ACCIDENT \$ 1,000,000<br/>           E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br/>           E.L. DISEASE - POLICY LIMIT \$ 1,000,000         </td> </tr> <tr> <td style="text-align: center; vertical-align: middle;">B</td> <td>           Leased/Rented Equipment         </td> <td></td> <td></td> <td></td> <td style="text-align: center; vertical-align: middle;">A0171517003</td> <td style="text-align: center; vertical-align: middle;">03/24/2024</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td style="text-align: center; vertical-align: middle;">03/24/2025</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>           DEDUCTIBLE \$1,000         </td> </tr> </tbody> </table> | INSR LTR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | TYPE OF INSURANCE               | INSR WVD                      | POLICY NUMBER           | POLICY EFF (MM/DD/YYYY)                                        | POLICY EXP (MM/DD/YYYY)                                                                                                                                                                         | LIMITS                                 | A     | <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b><br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR | Y     | Y          | USPCL0133124 | 02/20/2024 | 02/20/2025 | GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br><input type="checkbox"/> OTHER: | <input type="checkbox"/> <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY | <input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR<br><input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE<br><input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ | C | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below | Y/N | N/A | Y | WC-1121378-07 | 12/01/2024 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER | E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. 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| INSR LTR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               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                                                                                                                                                                   | Y                               | Y                             | USPCL0133124            | 02/20/2024                                                     | 02/20/2025                                                                                                                                                                                      |                                        |       |                                                                                                                                                           |       |            |              |            |            |                                                                                                                                                                                    |                                      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| DAMAGE TO RENTED PREMISES (Ea occurrence)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              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| PERSONAL & ADV INJURY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  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| GENERAL AGGREGATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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| PRODUCTS - COMP/OP AGG                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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| Employee Benefits                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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| COMBINED SINGLE LIMIT (Ea accident)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    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| BODILY INJURY (Per person)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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| BODILY INJURY (Per accident)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           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| PROPERTY DAMAGE (Per accident)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         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| EACH OCCURRENCE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        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| AGGREGATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              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| <b>DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)</b><br>Certificate holder(s) are named as a/an additional insured(s) when required by written contract or written agreement, with respects to the insured operations on their behalf. Waiver of subrogation and primary and non-contributory status applies when required by written contract or written agreement per the attached form(s).<br>30 day notice of cancellation applies. 10 days for non-payment of premium.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 45%;">CERTIFICATE HOLDER</th> <th style="width: 55%;">CANCELLATION</th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;">           City of Orlando<br/>           400 South Orange Avenue<br/>           Orlando FL 32801         </td> <td style="vertical-align: top;">           SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.<br/><br/>           AUTHORIZED REPRESENTATIVE  </td> </tr> </tbody> </table>                                                                                                                                                                                                                                                                                                                                                                                         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                                                                                                                                                                   |                                 | CERTIFICATE HOLDER            | CANCELLATION            | City of Orlando<br>400 South Orange Avenue<br>Orlando FL 32801 | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.<br><br>AUTHORIZED REPRESENTATIVE |                                        |       |                                                                                                                                                           |       |            |              |            |            |                                                                                                                                                                                    |                                      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| CERTIFICATE HOLDER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| City of Orlando<br>400 South Orange Avenue<br>Orlando FL 32801                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.<br><br>AUTHORIZED REPRESENTATIVE                                                                                                                                                                                                                                   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ACORD 25 (2016/03)

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## V. PROJECT ACCESS, COMMUNICATION & SAFETY

### A. SITE MAP (Potential Staging Area)



## B. COMMUNICATION

### Home Owner Communication

During construction, we communicate with the board and consultant primarily during weekly progress meetings and via email. We typically communicate with individual homeowners through a combination of notices on doors, calls, and emails. We prefer to attend a town hall ownership meeting at the outset of the project to explain the process and have smaller meetings (10-20 attendees) throughout the course of the project to address specific concerns. There is no additional cost for this time.

The Superintendent will be the community's first point of contact with project-specific questions, comments, or concerns. The Superintendent will work closely to help facilitate timely responses to resident inquiries and provide prompt community updates. In addition to this, they will also offer the following:

### Weekly Updates

- Weekly project schedule with a 3-week look-ahead.
- Short summary of progress.
- Copies posted on the Information Board.

### Meetings

- Weekly meeting with owner's representatives.

### Notices & Unit Access

- Notices posted 72+ hours in advance (Construction Start, Unit Access, No Parking, etc.).
- Unit-specific schedules shared with residents.

### Questions & Concerns

- Team available to answer community questions.

## Hours Of Operation

Common areas consist of (but are not limited to) elevator lobbies, corridors, parking garages, rooftops, stairways, and any other areas not inside of a private residence or level one commercial space.

Private Residences & Level One Commercial Space - Construction personnel will have access (following the posting of "Notice to Enter") to private residences and the level one commercial space Monday through Friday between accepted working hours.

No work will be conducted on Saturday or Sunday without prior written authorization.

## C. SAFETY

I&E believes all jobs can be performed injury-free, which can be achieved through proper preparation and training. Though it is not fully detailed in this document, we have an extensive safety policy in place to protect our employees and subcontractors. Further information regarding our safety program, policies, and procedures can be made available upon request.

### Safety Record:

I&E upholds a high safety standard, this is emphasized by our current EMR (Experience Modification Rating) of .74 with .69, and .72 in the previous two years.

### Injury Illness Prevention Plan:

The I&E Construction Project Superintendent has primary authority and responsibility to ensure the implementation of the Injury Illness Prevention Program and to ensure the health and safety of I&E Construction employees. This is accomplished by:

- Providing health and safety training
- Communicating I&E Construction emphasis on health and safety
- Analyzing work procedures for hazard identification and correction
- Ensuring regular workplace inspections
- Take Corrective Action on any worker who violates safety policy

**Training:**

I&E Utilizes in-house, OSHA Online, and third-party training to ensure all employees are prepared for the tasks they are asked to perform. All training compliance is tracked by the HR and Safety team. Workers will receive retraining upon expiration and in the event of any accident or near miss.

**Communication:**

Weekly safety meetings are held at all workplace Monday mornings with all employees and subcontractor teams on site. This time is to discuss ongoing tasks, changes in safety hazards, findings of job site safety inspections, emphasize existing practices, and open the floor to anyone who has concerns. I&E employees are encouraged to step forward with any concerns and are protected by our strict non-retaliation policy.

**Hazard Analysis:**

Jobsites are inspected daily, weekly, and as tasks change throughout the length of the job. This entails identifying and listing potential hazards along with the administrative or engineering controls that will be used to prevent injury.

**Workplace Inspections:**

I&E expects safety inspections to be performed by the Superintendents daily and the Safety Coordinator weekly. Subcontractors utilize the JHA (Job Hazard Analysis) form weekly to identify the hazards specific to their role, these are due to the superintendent by the end of the week. These inspections are documented, and in the event of identified hazards, work will cease until the hazards are corrected.

**Corrective Action:**

Any I&E employee found in violation of safety policies will receive in order; a verbal warning, write-up, then suspension or termination. If the violation is deemed severe enough, the Superintendent or HR Manager may bypass verbal and written warnings and proceed to suspension or termination. I&E has and exercises the authority to stop the Subcontractor's Work in the event the Subcontractor fails to comply with the Contractor's, Owner's, or any federal, state, or local safety requirements. If the Subcontractor's work is stopped, the Subcontractor shall take immediate steps to comply with such requirements. Subcontractors may resume work only after receiving I&E's written authorization to do so.

## GENERAL BID SUMMARY AND TERMS:

This Bid Proposal is valid for 30 days. If it becomes necessary for the Owner to extend the price hold, this can be accomplished by issuing a written notice to the contract. Thank you for the opportunity to serve. We look forward to working with you.

*Ion Popcov*

Ion Popcov  
Estimator, Florida Division  
I&E Construction, Inc.