

APPENDIX

CONSTRUCTION & ADMINISTRATION FORMS

date

DELIVERY

(name of contractor & address)

RE: **NOTICE-OF-AWARD** – EMM993330B CREP Wetland Project

Dear *(name)*:

This is to notify you that the Division of Soil Conservation and Water Quality has determined _____ is the successful bidder for the EMM993330B CREP Wetland Project. Award is being made for the base bid of \$_____.

In accordance with Item #9 of the Instructions to Bidders, Document BB, you have fourteen (14) calendar days from the date of receipt of this notice to obtain the Performance Bond and execute the Contract. In addition, the Division must be provided with a Certificate of Insurance pursuant to the INSURANCE AND RELATED PROVISIONS of the General Conditions.

Please note that Iowa Code Section 91C.7, requires that all construction contractors awarded a contract to perform work for the state or an agency of the state must be registered with the Iowa Division of Labor. The Division of Soil Conservation and Water Quality cannot execute a contract with your firm unless you provide proof of this registration. Be sure to fill in the Division of Labor registration number blank on the Contract (*Document DD*).

Enclosed are four copies of the Contract and the Performance Bond document. Please complete, sign and return all four copies along with completed Performance Bond. In addition, we must have the Certificate of Insurance pursuant to the General Conditions and/or Special Conditions.

Congratulations on being the successful bidder. We look forward to working with your company on this project. If you have any questions, please contact Mike Bourland, Engineer, (515) 242-6130, or Judie Krebsbach, (515) 725-7032.

Sincerely,

Jake Hansen, Chief
Water Resources Bureau
Division of Soil Conservation and Water Quality

/mjb
Enclosures
CC:

(Date)

DELIVERY

RE: **NOTICE-TO-PROCEED** - EMM993330B CREP Wetland Project

Dear :

The Division of Soil Conservation and Water Quality has received the signed construction contract, the completed Performance Bond, and the Certificate of Insurance from _____. These documents were found to be in order and the Division executed this contract with _____ dated _____, 2016. Executed copies of the contract and performance bond are enclosed.

A Preconstruction Conference, as required in Item 12 of the Instructions to Bidders, (*Document BB*), must be scheduled with the Division and held prior to the initiation of any work on the site. This Preconstruction Conference must be held within ten (10) days of the receipt of this Notice-to-Proceed. No work may commence on site prior to the Preconstruction Conference.

In accordance with the Contract, (*Document DD*), _____ must commence work under this contract for the EMM993330B CREP Wetland Project within fourteen (14) calendar days of the date of receipt of this notice. You have until _____, 2016, to complete all the awarded work.

If you have any questions, please contact Mike Bourland at 515-242-6130.

Sincerely,

Jake Hansen, Chief
Water Resources Bureau
Division of Soil Conservation and Water Quality

/mjb
Enclosures
CC:

APPLICATION AND CERTIFICATE FOR PAYMENT

TO DIVISION: **FROM CONTRACTOR:**

Iowa Division of Soil Conservation
 Wallace State Office Building
 Des Moines, IA 50319-0050

PROJECT:
 Bid No. _____
 Project I.D. _____
 Date: _____
 Period To: _____

DISTRIBUTION TO:
 DIVISION (2)
 CONTRACTOR (1)
 ENGINEER (1)

Summary of Approved Change Orders & Contract Amendments

Number	Addition	Deduction

Net change by Change Orders and Contract Amendments	PAYMENT #1 LESS RETAINAGE DATE: / /	PAYMENT #2 LESS RETAINAGE DATE: / /	FINAL PAYMENT LESS RETAINAGE DATE: / /	RETAINAGE ONLY DATE: / /
1. ORIGINAL CONTRACT SUM:	\$0.00	\$0.00	\$0.00	\$0.00
2. Net Changes by Change Orders/Amendments (from table)				
3. Contract Sum to Date (Line 1+2)	\$0.00	\$0.00	\$0.00	
4. Total Completed & Stored to Date (Column G on Continuation Sheet)	\$0.00	\$0.00	\$0.00	
5. Retainage (5% of Line 4)	\$0.00	\$0.00	\$0.00	
6. Total Earned Less Retainage (Line 4 less Line 5)	\$0.00	\$0.00	\$0.00	
7. Previous Certificates For Payment (Line 6 from prior Certificate)				
8. Balance to Finish, Plus Retainage (Line 3 less Line 6)	\$0.00	\$0.00	\$0.00	
9. Current Payment Due (Line 6 less Line 7)	\$0.00	\$0.00	\$0.00	\$0.00

The undersigned Contractor certifies that to the best of Contractor's knowledge, information, and belief, the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid to Contractor for which previous Certificates for Payment were issued and payments received from the Division and that current payment shown herein is now due.

In accordance with the Contract Documents, based on on-site observations and the data comprising this application, Engineer certifies to the Division that to the best of the Engineer's knowledge, information, and belief, the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and Contractor is entitled to payment of the AMOUNT CERTIFIED.

By: _____ Date: _____
CONTRACTOR

By: _____ Date: _____
ENGINEER'S CERTIFICATE FOR PAYMENT

AMOUNT CERTIFIED \$ _____

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment, and acceptance of payment are without prejudice to any rights of Contracting Officer or Contractor under this Contract.

CHANGE ORDER REQUEST
CONSERVATION RESERVE ENHANCEMENT PROGRAM
DIVISION OF SOIL CONSERVATION AND WATER QUALITY
STATE OF IOWA

Change Order Request No. _____

Project ID (File) No.: _____

Date: _____

Name of Project: _____

Location of Project: _____

Name of Contractor: _____

Architect/Engineer: _____

Contract Plan and
Detail Reference: _____

Change Order Request
Drawing No. and Date: _____

Contract Specification
Reference: _____

Description of Change: _____

BREAKDOWN OF CONTRACT COST:

Original Project Contract Amount: \$ _____

Approved Change Orders No. _____ thru _____: \$ _____

Pending Recommended Change Order Requests Nos. _____: \$ _____

This Change Order Request: \$ _____

Resulting Total Recommended Amount: \$ _____

Reason for Contract Change: _____

Change Requested by: _____

(Signature) (Date)

CONTRACTOR APPROVAL

(Company) By: _____ (Signature)

(Address) (Date)

CREP COORDINATOR RECOMMENDATIONS

_____ Concur _____ Recommend Rejection (Attach Explanation)

CREP Coordinator: _____ (Signature) (Date)

DIVISION OF SOIL CONSERVATION AND WATER QUALITY AUTHORIZATION

Change Order required due to: _____

Immediate authorization to proceed granted: _____ Yes _____ No

APPROVED:

DENIED:

Director
Division of Soil Conservation and Water Quality
Iowa Department of Agriculture
and Land Stewardship

Director
Division of Soil Conservation and Water Quality
Iowa Department of Agriculture
and Land Stewardship

(Date)

(Date)

END OF DOCUMENT HH

State of Iowa

DIVISION OF SOIL CONSERVATION AND WATER QUALITY

Iowa Department of Agriculture and Land Stewardship

EMM993330BCREP Wetland Project Construction Contract Amendment

THIS AMENDMENT, made this _____ day of _____, 2016, by and between the State of Iowa, acting through:

Division of Soil Conservation and Water Quality
Iowa Department of Agriculture and Land Stewardship

hereinafter called the ***DIVISION***, and

(Name of Company)

(Address)

(City, State, Zip)

hereinafter called the ***CONTRACTOR***.

WITNESSETH: That the ***DIVISION*** and the ***CONTRACTOR*** mutually agree to amend the agreement made _____, 2016 for the EMM993330B CREP Wetland Project as described below:

Description of Amendment(s):

Contract Plan Sheet(s) and/or

Detail Reference(s): _____

Contract Construction Specification
Reference(s): _____

Amendment No. _____
Drawing No. and Date: _____

Reason for Revision of
Contract Completion Date: _____

Original Contract Completion Date: _____

Current Contract Completion Date: _____

Revised Contract Completion Date, This Amendment: _____

BREAKDOWN OF AMENDMENT CONTRACT COST BY BID ITEM:

Original Project Contract Amount:	\$ _____
Approved Change Orders No. ____ thru ____:	\$ _____
Approved Amendments No. ____ thru ____:	\$ _____
This Amendment:	\$ _____
Resulting Total Amended Contract Amount:	\$ _____

IN WITNESS WHEREOF, the parties hereto have executed this Amendment, in the day and year first above mentioned.

FOR THE DIVISION

Michael L. Naig, Deputy Secretary
Iowa Department of Agriculture and Land Stewardship

(Date)

FOR THE CONTRACTOR

(Company Representative)

(Date)

(Name of Company)

(Address of Company)

(City, State, Zip Code)

Seal if by a corporation

CONSENT FROM SURETY:

BY: _____
(Surety Representative)

(Name of Surety)

(Date)

END OF DOCUMENT II

IOWA
Department of Revenue
www.state.ia.us/tax

**Designated Exempt Entity
Iowa Construction Sales Tax Exemption Certificate**

This document may be completed by a designated exempt entity and given to their contractor and/or subcontractor along with an authorization letter. *Seller:* Keep this certificate in your files. *Contractor/Exempt Entity:* Keep a copy of this certificate for your records. **Do not send this to the Department of Revenue**

Designated Exempt Entity Division of Soil Conservation and Water Quality Iowa Department of Agriculture and Land Stewardship		
Address 1 502 East 9th Street		
Address 2		
City Des Moines	State IA	Zip Code 50319
Construction Project Name EMM993330B CREP Wetland Project		
Construction Project Number (if used) Job No. 16-02		

General Contractor or Subcontractor Name Sample		
Address 1 123 Construction Ave		
Address 2		
City Diggerville	State IA	Zip Code 55555

Description of contract/subcontract (please print/type clearly)

Construction of wetland using a steel sheet pile weir and an earthen embankment.

The named contractor may purchase building materials used in the contract, exempt from sales tax. This exemption does NOT apply to materials, equipment and supplies consumed by the contractor or subcontractor.

Designated Exempt Entity Authorized Agent _____ Date: _____

Authorization Letter From Division of Soil Conservation and Water Quality - Agriculture and Land Stewardship

Pursuant to Iowa Code Sections 422.42 (16) & (17), and 422.47 (5), you are authorized to purchase construction materials tax free for the contract specified above.

The exemption certificate (or a copy of the certificate) may be provided to the suppliers of your construction materials and will authorize them to sell you the materials exempt from Iowa sales tax and any applicable local option sales tax and school infrastructure local option sales tax. Complete information on qualifying materials can be found at www.state.ia.us/tax, the Department of Revenue (IDR) website.

It is your responsibility to have records identifying the materials purchased and verifying they were used on this contract. Any materials purchased tax-free and not used on the construction project are subject to sales and applicable local option taxes. Should this occur, the tax must be paid directly by you to IDR in the same calendar quarter the project is completed. E-mail the department at: idr@idrf.state.ia.us if you have questions on this requirement.

Contractors should be aware that use of the certificate to claim exemption from tax for items not used on this project or that do not qualify for exemption could result in civil or criminal penalties.

31-013 (12/10/02)

END OF DOCUMENT QQ