Bid Specs for Wastewater Treatment Facility Circuit Breaker Panels (Trace Out and Label)

Trace out and label circuit breaker panels in dewater building, influent pump building, blower room building and control building:

Building	Panel	Breaker Count		
Dewater Building	Panel A	5 labeled	2 unlabeled	7 total
Dewater Building	Panel B	10 labeled	1 unlabeled	11 total
Influent Pump Building Influent Pump Building Influent Pump Building	Panel A Panel B Panel C	29 labeled 3 labeled 5 labeled	20 unlabeled 9 unlabeled	29 total 23 total 14 total
Blower Room Building Blower Room Building Blower Room Building Blower Room Building	Panel A Panel B Panel C Panel D	19 labeled 9 labeled 10 labeled	23 unlabeled 9 unlabeled 18 unlabeled 5 unlabeled	23 total 28 total 27 total 15 total
Control Building Control Building Control Building	Panel A Panel B Panel C	7 labeled 33 labeled 10 labeled	14 unlabeled 15 unlabeled	21 total 33 total 25 total



1560 Brown Avenue/P.O. Box 809/Cookeville, TN 38503 931/526-7216 Fax 931/526/9408 www.lakelande.com Commercial / Industrial Electrical Contractors - State Licensed

- Electrical Construction
- Maintenance & Repair Services
- Infrared Thermography
- Machine Controls
- Voice / Data Cable Installation

PROPOSAL

To: Mr. Darian Dykes Crossville WWTP

Date: June 4, 2019

Job Name: Crossville WWTP 2019 06 04 Label

Electrical Panels

Location: Crossville, TN

We hereby submit specifications and estimates for:

Updating panel schedules and labeling panels per code requirements for eleven (11) panels per the bid specifications and site visit. All work is proposed for regular hours. This is a "not-to-exceed" proposal. Only actual time and materials required to complete the work will be invoiced. Estimated project duration will be ten (10) working days.

Upon acceptance, please provide authorized signature below and return a fax copy.

Thank you for the opportunity to make this proposal.

License No.: 10406

Classifications: MC-A, B, C, D; E; CMC; CE; Unlimited

Expires: January 31, 2020

THIS PROPOSAL IS VALID FOR 30 DAYS FROM THE ABOVE DATE

We Propose hereby to furnish material - complete in accordance with above specifications for the sum of :

Nine Thousand Eight Hundred Eighty Dollars and No Cents

\$9,880.00

\$9,880.00

**Payment is due immediately upon completion of the above specified work.

All material is guaranteed to be as specified. All work to be completed in a professional manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado, and other necessary insurance. Our workers are fully covered by Worker's Compensation Insurance.

Authorized Signature:

Accepted by: Date:

CHERRY CREEK ELECTRIC, INC

P.O. BOX 2986 COOKEVILLE TENNESSEE 38502 (931) 432-6643

PROPOSA

Page No 1

OB NAME/NO **OSHA VIOLATIONS** OCATION TO: VEOLIA SAME 468 SPARTA HWY REVISION DATE CROSSVILLE, TN 38572 6/3/2019 ATTN: DARIAN DYKES We hereby submit specifications and estimates for CHERRY CREEK ELECTRIC, INC PROPOSES TO DO THE FOLLOWING SCOPE OF WORK: TRACE OUT AND LABEL CIRCUIT BREAKER PANELS IN CONTROL BUILDING, DEWATERING BUILDING. BLOWER ROOM, AND INFLUENT PUMP BUILDING. NINE THOUSAND NINE HUNDRED DOLLARS 9,900.00 NET 30 DAYS All material is guaranteed to be as specified. All work to be completed Authorized in a workmanlike manner according to standard practices. Any altera-CORTES PHILLIPS Signature tion or deviation form above specifications involving extra costs will be cphillips@cherrycreekelec.com executed only upon written orders, and will become an extra charge Note: This proposal may be withdrawn over and above the estimate. All agreements contingent upon strikes, by us if not accepted within days. accidents or delays beyond our control. Owner to carry fire, tornado. and other necessary insurance. Our workers are fully covered by TENNESSEE DRUG-FREE WORKFORCE Worker's Compensation Insurance ACCEPTANCE OF PROPOSAL The prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above. Signature Date Date ____ Signature