Capital Project Request Form

_ Never	Manitowoc Wisconsin
Request Type:	Unbudgeted
Department: Title of Request:	DPI Date: 03/16/2016 replace water heater - Safety Building
Department Priority Linked to another project?	Critical Yes No
Project Request is:	New Estimated Useful Life: 12ReplacementModification
This is a limited field, plea	se attach documents for more detail.
Description:	water heater was leaking and failed a pressure test
Basis of Cost:	Quote Total Cost \$6,497.00○ Bid● Estimate
Revenue (if any)	Net Cost \$6,497.00
Will there be additi	onal costs in future years to complete this project?
select one:	Yes If yes, amount?No
Finance: Account	
Send to Department	Date:

Plumb	ing, Inc.

925 S. 29th Street Manitowoc, WI 54220

PROPOSAL

920.682.3950	Page No of Pages
Plumbing, Inc. 920.682.0058 fax heinplumbing@lakefield.net	JOB NAME / NO.
	REPLACE WIR MEATER
Complete Plumbing Services	LOCATION
O: CITY OF MANITOWOC	SAFETY BUILDING
0. 2277 07 2472.027 000 0	
	PHONE DATE
	3-15-16
We hereby submit specifications and estimates for:	
The horsely dubling appearance and desimilated for	
0110-1	
QUOTE TO REP	CACE AN AOSMITH
BTH 199 MIRTER	HEATER WITH AN
HO SMITH BTH	199 WATER HEATER.
WORK DWRTNG AL	ORMAL HOURS, ELECTRICAL
BY OWNER, PERM	MIT NOT QUOTED-\$3500
	40
\$ 649	7 ~
77	
15855	RICERD
1 (2000)	/(d C = 5).
	1
	- SU 2/1/11
	3/15/16
``	
WE PROPOSE hereby to furnish material and labor – complete in ac	cordance with these specifications, for the sum of:
The rest of the re	obtained with these specimentons, for the sum of.
Payable as follows:	dollars (\$).
rayable as ipilows.	u
	d
All material is guaranteed to be as specified. All work is to be completed in a workmanlike manner according to standard practices. Any alterations or deviation from above specifications	Authorized All All All
intainter according to standard practices. Any alterations of deviation from above specifications involving extra cost 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	Signature Charles Charles Commen
beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workmen's Compensation Insurance.	NOTE: This proposal ma∳ be withdrawn by us if not accepted within days.

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.

Authorized Signature

LUISIER PLUMBING

4623 Goodwin Road P.O. Box 155 Manitowoc, WI 54221-0155

"FULL SERVICE PLUMBING"

Phone: (920) 682-3666 Fax: (920) 682-3754 www.luisierplumbing.com

March 14, 2016

City of Manitowoc 900 Quay St Manitowoc, WI 54220

Work at: 910 Jay St.

RE: Replace leaking water heater

We propose to replace the existing leaking water heater, this include;

- Removal and disposal of the existing water heater
- Install one Bradford White EF100 natural gas water heater
- Upgrade the intake and vent piping for the water heater
- Adjust the water and gas lines for the new water heater
- Misc. material
- Labor
- Cleanup

This is an ESTIMATE only - GOOD FOR 30 DAYS!!

If any change in design, fixtures, or product by customer request, the project will be billed time and material. Please sign and date below and return upon acceptance of the estimate!!

ACCEPTANCE OF ESTIMATE - The above te	rms and conditions are satisfactory and are hereby accepted
You are authorized to do the work as specified	
Date of acceptance:	<u>-</u>
Signature:	_Printed name:

A COPY OF THIS SIGNED ESTIMATE MUST BE RETURNED TO US BEFORE WE WILL PROCEED WITH THE WORK.