

# Work Write-Up

## Antigone Montgomery

\* EXHIBIT 1 \*

Dated: 12/16/2009

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Printed: Tuesday, March 23, 2010 03:54 PM

Arranged By: Section (All Sections)

Priorities: All Priorities

Cost: No    Text: Yes    Subtotals: No    Summary: No    Notes: Yes    OP Method: At End

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### **CUSTOMER INFORMATION**

Antigone Montgomery

Project Address

8372 Summerdale Ln

Tallahassee, FL 32310

Customer Address

8372 Summerdale Ln

Tallahassee, FL 32311

Home Phone: 933-1357

Work Phone:

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### **PREPARED BY**

Lon Twyman

HOUSING & HUMAN SERVICES, LEON COUNTY

918 Railroad Avenue

Tallahassee, Florida

850-606-1900

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\* NOTE \*

THE CUSTOMER AND CONTRACTOR MUST SIGN THE BOTTOM OF EACH PAGE ONLY IF

- 1) THIS WORK WRITE-UP BECOMES PART OF A CONSTRUCTION CONTRACT
- 2) THE UNDERSIGNED CUSTOMER AND CONTRACTOR HAVE REVIEWED, APPROVED, AND AGREED TO THE WORK AND PRICES DESCRIBED IN THIS WORK WRITE-UP

Customer: \_\_\_\_\_ Contractor: \_\_\_\_\_

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 WWU: Antigone Montgomery  
 Site: 8372 Summerdale Ln

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Location / Work Description	Quantity	UOM	Cost
<b>GENERAL REQUIREMENTS</b>			
01.0001 P1 RELOCATION NOT REQUIRED Owner and furnishing will remain in the structure during the rehabilitation process. Contractor shall comply with Section 01.0325 of these Housing Rehabilitation Specifications. >>> GENERAL REQUIREMENTS <<<	1	EA	
01.0025 P1 PERMITS AND LICENSES Contractor shall obtain, pay for and post on site all permits and licenses necessary to complete this project. Contractor and subcontractors must have current licenses require by the State, County and City. >>> GENERAL REQUIREMENTS <<<	1		
01.0050 P1 CODE COMPLIANCE All materials and methods of construction related to work performed on this project must comply with locally adopted code requirements and must meet with the approval of local code enforcement officials. >>> GENERAL REQUIREMENTS <<<	1		
01.0075 P1 INSURANCE REQUIREMENTS The Contractor shall maintain such insurance as will protect him from claims for damages for personal injury, including death, which may arise from work performed on this project, whether such work be by himself or by any subcontractor or anyone directly or indirectly employed by either of them. Contractor shall present Program Administrator with certificate of insurance evidencing comprehensive public liability insurance coverage of not less than \$100,000/\$300,000 in the event of bodily injury including death, and \$50,000/\$100,000 in the event of property damage arising out to the work performed by the Contractor. Contractor shall also carry Worker's Compensation insurance if required by State law, Program Administrator or homeowner. >>> GENERAL REQUIREMENTS <<<	1		
01.0100 P1 JOB SITE WORK WRITE-UP A Job Site Work Write-Up shall be posted near the front door. This Work Write-Up shall be used by all code enforcement officials and other interested parties to review scope of work and work being performed on project. >>> GENERAL REQUIREMENTS <<<	1		
01.0125 P1 PLACE A JOB SIGN IN FRONT YARD Contractor must securely position a project sign in the front yard and within view of the street. It is the Contractor's responsibility to pick a sign up from, and return it to, the Program Administrator. Signs to be returned in good condition. >>> GENERAL REQUIREMENTS <<<	1		
01.0150 P1 CONTRACTOR TO VERIFY MEASUREMENTS, SIZES & QUANTITIES			

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<p>All measurements, sizes and quantities in this Work Write-Up are APPROXIMATE. The Contractor is responsible for verifying exact measurements, sizes and quantities prior to submitting a quote.            &gt;&gt;&gt; GENERAL REQUIREMENTS &lt;&lt;&lt;</p>			
<p>01.0175 P1 COST ALLOWANCES            When specifications in this Work Write-Up refer to a cost "allowance", the Contractor is to permit the Homeowner to select the product to be installed, providing the pre-tax cost of the product does not exceed the allowance. The product selected must meet the quality standards specified in this Work Write-Up.            &gt;&gt;&gt; GENERAL REQUIREMENTS &lt;&lt;&lt;</p>	1		
<p>01.0200 P1 WORKMANSHIP &amp; MATERIAL STANDARDS            Contractor to perform work specified in Work Write- Up in a high-quality good-workmanlike manner using specified materials or approved equals. Materials must also 1) be high quality, 2) be installed in accordance with manufacturer's specs and 3) meet current building code requirements.            &gt;&gt;&gt; GENERAL REQUIREMENTS &lt;&lt;&lt;</p>	1		
<p>01.0225 P1 GENERAL WARRANTY            Materials installed and work performed shall have a one year Contractor warranty from the date of final acceptance of the work by the Homeowner and Program Administrator. Refer to project Contract for specific requirements concerning warranty.            &gt;&gt;&gt; GENERAL REQUIREMENTS &lt;&lt;&lt;</p>	1		
<p>01.0250 P1 SCHEDULING WORK            Contractor to schedule work between 8:00am and 6:00pm Monday through Friday. Requests to work before or after these hours and on weekends must be approved by the Homeowner. Work requiring a Compliance Inspection by the Program Administrator can ONLY be performed between 8:00am and 5:00pm Monday through Friday. The Contractor is responsible for scheduling and coordinating subcontractor work.            &gt;&gt;&gt; GENERAL REQUIREMENTS &lt;&lt;&lt;</p>	1		
<p>01.0275 P1 COMPLIANCE INSPECTIONS            Contractor to call Program Administrator for inspection of all work that will be concealed from view following completion of work on that item. For example, these inspections frequently include, but are not limited to, 1) inspection of footings, 2) inspection of roof sheathing prior to installation of new felt and shingles and 3) inspection of repaired floors prior to installation of new sub- floor, underlayment and floor coverings. Check each spec to see if a Compliance Inspection is required. Work that has been concealed without a Compliance Inspection may result in payment delays or denials!            &gt;&gt;&gt; GENERAL REQUIREMENTS &lt;&lt;&lt;</p>	1		

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01.0300 P1 PROGRESS AND FINAL PAYMENT INSPECTIONS Contractor must submit to Program Administrator a payment request signed by the Homeowner approving payment. This request must be submitted in person to Program Administrator at least one day ahead of desired inspection date. Inspections will not be scheduled by phone. Payment inspections will be scheduled on a first-requested first-scheduled basis. >>> GENERAL REQUIREMENTS <<<	1		
01.0325 P1 PROTECT HOUSE CONTENTS FROM DAMAGE DURING WORK Contractor shall take steps to protect house and contents from damage during project. Contractor is advised to use drop cloths to protect furniture, appliances, entertainment systems and other house contents and components. Contractor shall move furniture and appliances out of and back into work areas once work is complete. Contractor not to leave furniture, appliances, clothing or other house contents unprotected outside house during job. >>> GENERAL REQUIREMENTS <<<	1		
01.0350 P1 REPAIR DAMAGE CAUSED TO PROPERTY DURING WORK Contractor responsible for professionally repairing or replacing building and site components damaged as a result of construction activity. >>> GENERAL REQUIREMENTS <<<	1		
01.0375 P1 PRIME BARE WOOD The exposed face of all newly installed wood and all wood scraped down to bare wood must be primed with appropriate primer. >>> GENERAL REQUIREMENTS <<<	1		
01.0400 P1 CAULKING WOOD Caulking, if any, must occur only after primer has been applied to the area being caulked and prior to the installation of any paint. >>> GENERAL REQUIREMENTS <<<	1		
01.0425 P1 CONCEAL ANY NEW WIRING & PLUMBING LINES FROM VIEW All new electrical wiring and plumbing lines are to be installed concealed from view inside stud walls, under floors, and in attics. Unless otherwise approved by Homeowner and Program Administrator, surface mounted wire and wire ways are not permitted. Kitchen sink waste disposers, dishwashers, water heaters, and other permantly fixed appliances and equipmt will be wired according to current codes. >>> GENERAL REQUIREMENTS <<<	1		
01.0450 P1 INSULATE EXPOSED WALL CAVITIES All exposed exterior wall cavities that are to be enclosed by a new wall surface material, are to have R-13 insulation installed in the cavity before the new wall surface material is installed.			

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>>> GENERAL REQUIREMENTS <<<	1		
01.0475 P1 REDUCE AIRBORNE DUST DURING CONSTRUCTION Contractor to take steps necessary to reduce and contain airborne dust created during construction, demolition and removal of defective paint. Wet scrape if removing defective paint. Do NOT use electric sanders or torches if removing paint. Contractor and workers encouraged to wear protective clothing and respirators and to follow hygiene procedures approved by OSHA. >>> GENERAL REQUIREMENTS <<<	1		
01.0500 P1 GENERAL CLEAN-UP Contractor to provide clear and safe passage ways in and around structure during project. Contractor to remove debris and building materials from in and around structure being repaired to legal dump site regularly and at the end of the project. In progress and final clean-up to include--but is not limited to--damp wiping, sweeping, mopping and vacuuming. >>> GENERAL REQUIREMENTS <<<	1		
<b>HOMEOWNER WORK</b>			
05.0025 P1 CUSTOMER AGREES TO APPLY FOR PARTICIPATION IN WEATHERIZATION PROGRAM The Customer has agreed to apply for participation in the local weatherization program. >>> GENERAL REQUIREMENTS <<<	1		
05.0050 P1 CUSTOMER TO BOX-UP BREAKABLES The Customer is responsible for boxing-up and protecting any breakable items. >>> GENERAL REQUIREMENTS <<<	1		
<b>PORCHES &amp; ENTRANCES</b>			
40.0175 P1 BUILD NEW PRESSURE TREATED WOOD WHEELCHAIR RAMP WITH GUARD RAIL Construct a wheel chair ramp using pressure treated lumber, built to code and having a slope that does not exceed 1/20 (5%) slope. Ramp surface to be 5/4" pressure treated deck boards. Support posts to be at least 4" x 4" members spaced no more than 6' apart and supported on poured footings. Balusters to be 2" x 2" no more than 5" on center. Width of ramp and landings to be at least 4'. Pour a 4' x 4' x 4" concrete landing at bottom of ramp. >>> FRONT PORCH/ENTRANCE <<< >>> REAR PORCH/ENTRANCE <<<	36	LF	
	30	LF	

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<b>DOORS</b>			
45.0375 P2 INSTALL A NEW PREHUNG 6-PANEL INSULATED METAL DOOR WITH LOCKS  Install a new prehung 1-3/4" thick 6-panel insulated metal door unit including jamb, casing, hinges, striker plate, handicap threshold and weatherstripping. Install a new lever-handled entry and single cylinder deadbolt lockset keyed alike and manufactured by Kwikset, Yale, Weiser or approved equal. Allow \$22 for entry lock and \$17 for deadbolt lock. Caulk, prime and apply two coats of high quality semi-gloss acrylic latex paint on door, jamb and casing. Owner to select lockset finish and paint color. >>> FRONT PORCH/ENTRANCE <<< >>> REAR PORCH/ENTRANCE <<<	1	EA	
45.0700 P1 INSTALL A NEW 6-PANEL INTERIOR DOOR WITH A NEW LOCKSET IN MODIFIED OPENING  Remove existing downstairs bath doors and re-frame openings to accept 36" pre-hung door units. Relocate light switches as necessary. Install new 1-3/8" thick, 36" wide 6-panel interior colonist style doors with new lever-handled locksets. Locksets to have privacy locking function. Locksets to be manufactured by Kwikset, Yale, Weiser or approved equal using a \$17 allowance. Repair and fill holes in door jamb and casing. Caulk, prime and apply two coats of high quality acrylic latex semi-gloss paint on door, jamb and casing. Owner to select lockset finish and paint color. >>> BATHROOM <<<	2	EA	
<b>WALLS</b>			
60.1525 P1 INSTALL HANDICAP GRAB BAR  Securely install, per manufacturer's instructions, handicap grab bars around downstairs toilet and in shower area. Provide necessary framing and repair wall surface if damaged during installation of grab bars. Owner to specify height and locations. >>> BATHROOM <<<	4	EA	
<b>CABINETS</b>			
70.0000 P1 GENERAL CABINET WORK  Remove existing base cabinets and pantry cabinet and replace with base cabinets with toe space to accommodate wheelchair. Color and style to match existing as closely as possible. Re-install existing dishwasher in same location. New sink to be in same location as existing. Cabinet color, layout, and style to be approved by homeowner. Remove existing wall cabinets specified by homeowner and re-install at lower height			

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specified by homeowner to facilitate wheelchair access. Existing cabinet above vent hood to remain unchanged. >>> KITCHEN <<<<	17	LF	
<b>70.0075 P1 INSTALL A NEW PLASTIC LAMINATED COUNTER TOP ON EXISTING CABINETS</b> Install a post formed plastic laminated counter top with back and end splashes securely fastened to base cabinets. Install end caps where end of counter tops exposed. Apply a bead of mildew resistant color-coordinated caulk between top of splashes and wall surface. Owner to select counter top using a \$15.00 per lineal foot allowance. >>> KITCHEN <<<<	17	LF	
<b>PLUMBING SYSTEM</b>			
<b>75.0125 P1 INSTALL A NEW 2-BOWL KITCHEN SINK AND FAUCET</b> Install a new 8" deep double bowl stainless steel self rimming kitchen sink with two basket strainers. Install a new single control washerless kitchen sink faucet with spray. Faucet to have a maximum flow rate of 2.5 gallons per minute. Install new stop valves and supply lines from stop valves to faucet. Faucet to have at least a 2 year warranty. Use Delta Model #400 or approved equal. Owner to select faucet using a \$70 allowance. >>> KITCHEN <<<<	1		
<b>75.0175 P1 INSTALL A NEW BATH SINK</b> Remove existing downstairs vanity cabinet, sink, faucet, and associated plumbing lines. Install a new vitreous china pedestal or wall hung sink at owner's option. Connect water lines, drain lines and vents necessary for sink to work properly and meet plumbing code requirements. Hold plumbing lines as far rearward as possible to facilitate wheelchair access. Wrap and otherwise protect waste and supply lines from physical contact and wheelchair impact. Repair any damaged work areas with appropriate materials. Owner to select sink using a \$160 allowance. >>> BATHROOM <<<<	1	EA	
<b>75.0300 P1 INSTALL A NEW BATHROOM SINK FAUCET FOR USE BY A PERSON WITH A DISABILITY</b> Install a new bathroom sink faucet that is designed for use by a person who has disability like the occupant. Faucet to have a maximum flow rate of 2.5 gallons per minute. Install new stop valves and supply lines from stop valves to faucet. Faucet to have at least a 2 year warranty. Owner to select faucet using a \$82.50 allowance. >>> BATHROOM <<<<	1		
<b>75.0400 P1 INSTALL A NEW BATHTUB AND SHOWER UNIT DESIGNED FOR USE BY A PERSON WITH A DISABILITY</b> Remove existing shower unit. Install per manufacturer's specifications a new			

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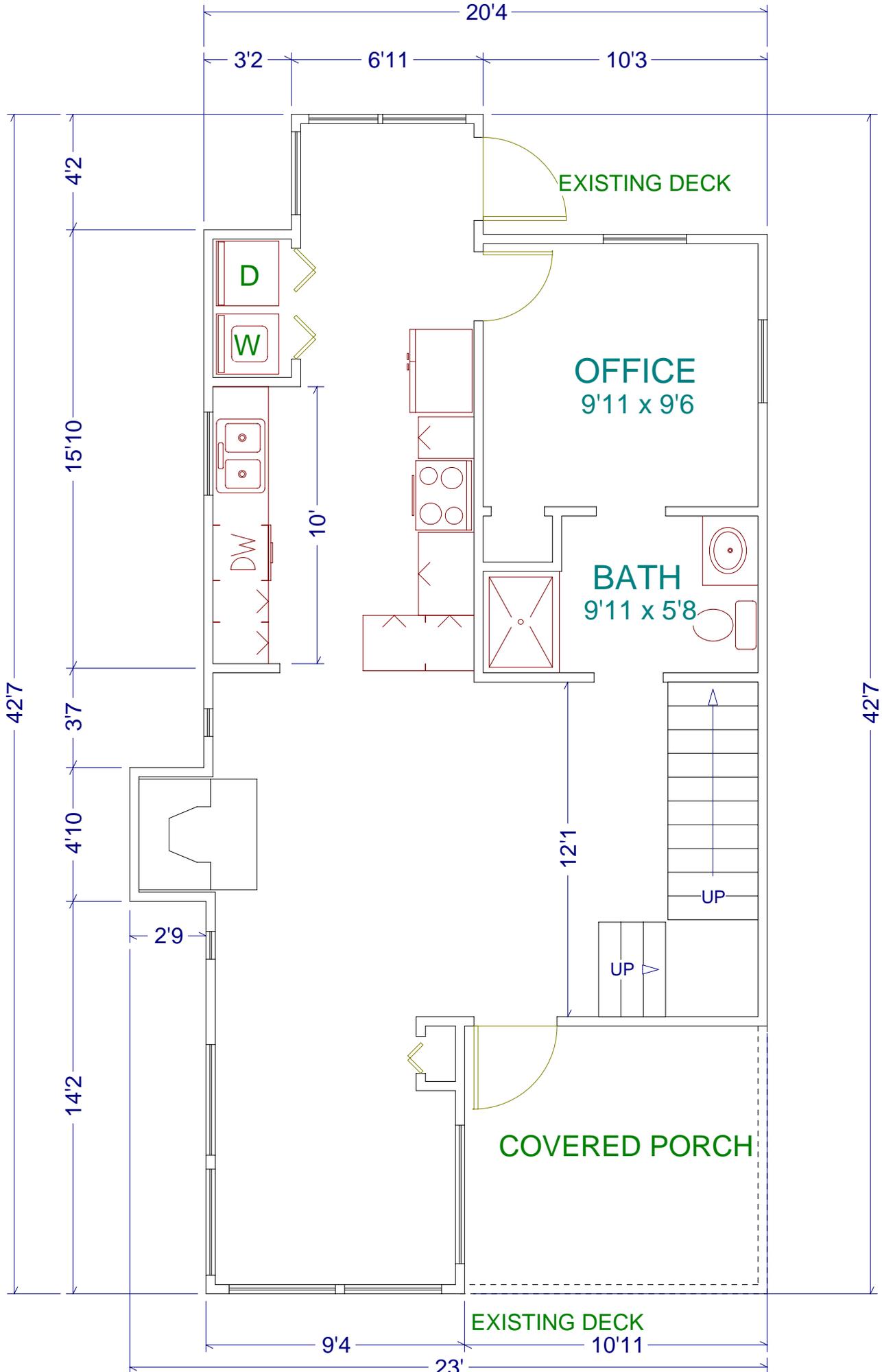
Location / Work Description	Quantity	UOM	Cost
<p>tub/shower unit that has been designed for use by a person who has a disability like the disabled person's living in the house. Re-frame adjacent office closet if necessary. Unit to come with tub/shower faucets and adjustable shower arm. Install any necessary water lines, drain lines, vents, framing, blocking, shims and nailers to ensure proper and code approved installation of tub/shower unit. Repair or replace room surfaces damaged during installation. Apply a bead of mildew resistant caulk 1) between bottom of tub and floor covering, 2) at all tub/shower wall joints and 3) where shower walls intersect wall surface. Also install a shower curtain rod. Owner to select unit using a \$1,500 allowance.</p> <p>&gt;&gt;&gt; BATHROOM &lt;&lt;&lt;</p>	1		
<p>75.0650 P1 INSTALL A NEW TOILET FOR A PERSON WITH A DISABILITY            Install a new 2 piece closed coupled, vitreous china, water saving commode with maximum 1.6 gallons per flush manufactured by American Standard, Kohler or approved equal. Toilet to be designed for use by a person who has a disability like the occupant. Commode to include all new components including a shut off valve, supply line, flange, and wax seal. Top of toilet tank to be no more than 1" from back wall. Owner to select commode using an \$300 fixture allowance.</p> <p>&gt;&gt;&gt; BATHROOM &lt;&lt;&lt;</p>	1		

## Cost Summary

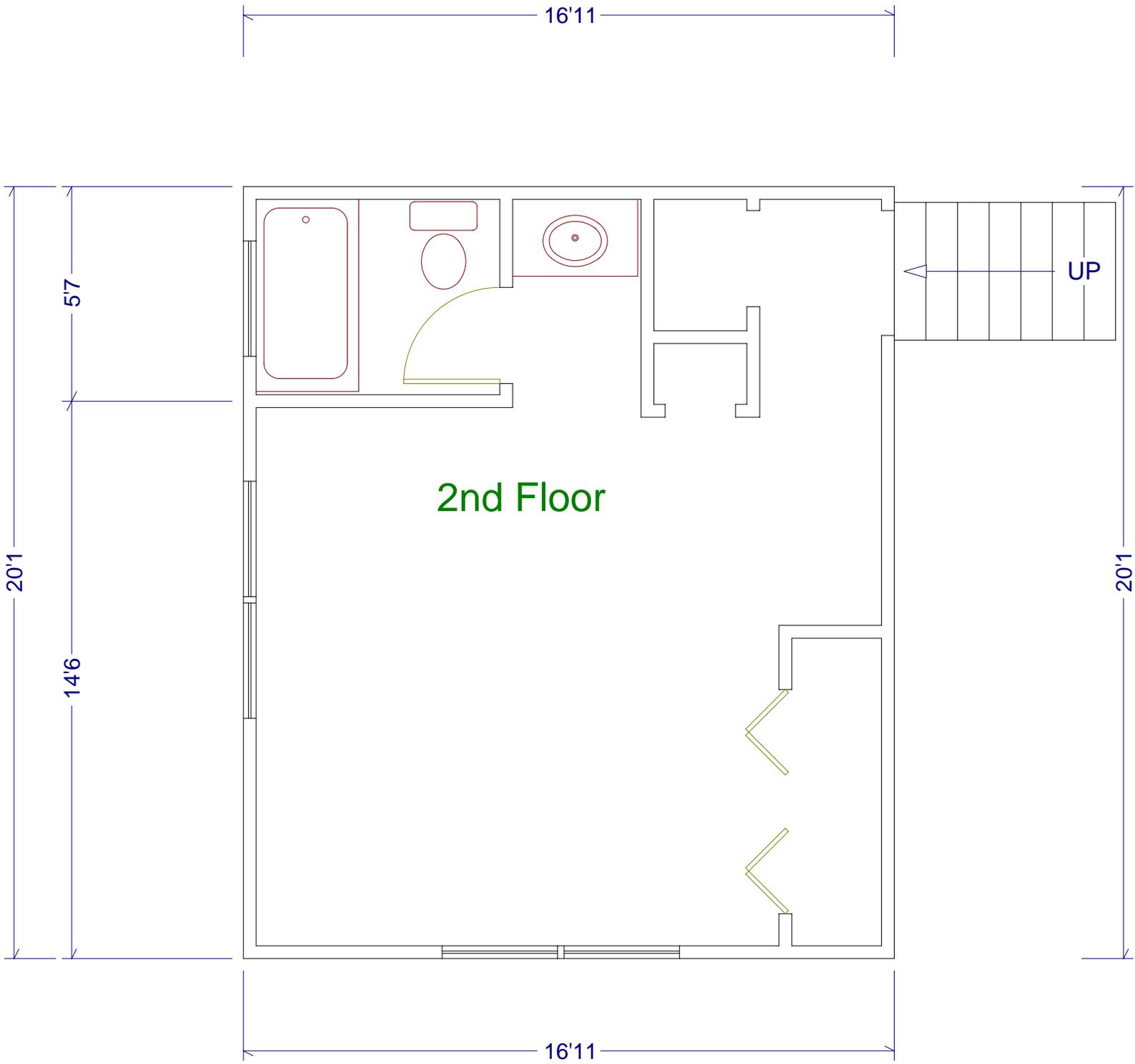
Total Cost

Customer: \_\_\_\_\_ Contractor: \_\_\_\_\_

HOUSING & HUMAN SERVICES, LEON COUNTY



**Antigone Montgomery**  
 8372 Summerdale Ln. 32311



16'11

20'1

5'7

14'6

2nd Floor

UP

20'1

16'11

## MINORITY AND WOMEN BUSINESS ENTERPRISE (MWBE) PARTICIPATION PLAN FORM

**Respondent:** \_\_\_\_\_

All respondents, including Minority Business Enterprises (MBEs) and Women Business Enterprises (WBEs), shall complete and submit this M/WBE Participation Plan with their proposal. Through submission of its bid/proposal, Respondent certifies, acknowledges and agrees that the Participation Level and the Good Faith Efforts herein designated are accurate and true; and, that the individual whose manual signature is on this submission is duly authorized on behalf of the respondent to make such certification.

For the purposes of MWBE participation on Leon County projects, the following definition applies:

“Certified Minority Business Enterprise (MBE) and Women Business Enterprise (WBE)” are firms certified by Leon County or the City of Tallahassee. Firms with MBE or WBE certification by the State of Florida or other governmental organizations are not accepted by Leon County. “

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**DIRECTIONS: Each respondent must designate in Section 1 its level of MWBE participation. If the aspirational targets are not met or exceeded, Section 2 must be completed. All Respondents are to list subcontractor as appropriate in Sections 3 and 4.**

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**Section 1 - Aspirational Target for M/WBE Participation** The aspirational target for this project is:

### Aspirational Target for Construction

M/WBE Classification	Aspirational Target(s)
Certified Minority Business Enterprises (MBE)	17% of the total anticipated contract value
Certified Women Business Enterprises (WBE)	9% of the total anticipated contract value

### **Section 2 - Good Faith Effort**

The following list of the good faith efforts criteria complies with Leon County's Purchasing and Minority, Women, and Small Business Enterprise Policy 96-1 which is used in the determination of whether a contractor has performed and documented good faith efforts.

Please check the appropriate box to designate those actions you have done as “Good Faith” in order to secure MWBE participation for this solicitation “Good Faith Effort” statement that applies to your firm and attach documentation of such:

- Advertised for participation by M/WBEs in non-minority and minority publications within the Market area, including a copy of the advertisement and proof of the date(s) it appeared – or by sending correspondence, no less than ten (10) days prior to the submission deadline, to all M/WBEs referred to the respondent by the MWSBE Division for the goods and services to be Subcontracted and/or Supplied
- Documented that the bidding Prime Contractor provided ample time for potential MBE and/or WBE subcontractors to respond to bid opportunities, including a chart outlining the schedule/time frame used to obtain bids from MBE and WBE Vendors as applicable to the aspirational Target.
- Contacted the MWSBE Division for a listing of available M/WBEs who provide the services needed for the bid or proposal.
- Contacted MBEs and/or WBEs who provide the services needed for the bid or proposal.
- Documented follow-up telephone calls with potential M/WBE subcontractors seeking participation.
- Allowed potential M/WBE Subcontractors to review bid specifications, blueprints and all other Bid/RFP related items at no charge to the M/WBEs.
- Contacted the MWSBE Division, no less than five (5) business days prior to the Bid/RFP deadline, regarding problems the with respondent is having in achieving and/or reaching the aspirational targets

- Other documentation indicating their Good Faith Efforts to meet the aspirational targets. Please provide details below.

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- Respondent is unable to provide a Good Faith Effort due to the structure of the firm. Please identify the reason below. (For Example: A Non-For- Profit Organization)

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Leon County reserves the right to request supporting documentation as evidence of good faith efforts indicated above at any time. Failure to provide supporting documentation when requested shall deem your bid/proposal as non-responsive.

**Section 3 - Respondent’s Proposed MBE Participation.** Respondent shall complete the following Table identifying each certified MBE firm they intend to use on this project. Attach additional sheets as necessary.

**MBE and WBE Intended Utilization**

<b>Firm’s Name</b> (Requires Leon County or City of Tallahassee MWBE certification) <sup>1</sup>	<b>Firm’s Location Address</b> (Must be in Leon, Gadsden, Jefferson or Wakulla Counties, FL to be certified)	<b>Firm’s Telephone Number</b>	<b>Ethnic Group<sup>2</sup></b> (B, A, H, N, F)	<b>Total Dollar Amount of MBE Participation</b>	<b>Type of Service to Provide</b>
<b>Minority and Women Business Enterprise(s)</b>					
a.					
b.					
c.					
d.					
e.					
f.					

<sup>1</sup> Certification – Attach and submit a copy of each MBE and WBE certification with the proposal.  
<sup>2</sup> Ethnic Group – Use of the following abbreviations: (a) MBE’s include: African American (B), Asian American (A), Hispanic American (H) and Native American (N) owned firms; (b) WBEs include Non-Minority Female (F) owned firms.

**Section 4 - Non-MWBE Subcontractors.** Respondent shall complete the following Table identifying non-MBE's or WBE's subcontractors it anticipates utilizing on the project.

<b>Non-MBE and WBE Intended Utilization</b>				
<b>Firm's Name</b>	<b>Firm's Address</b>	<b>Firm's Phone #</b>	<b>Total Dollar Amount</b>	<b>Type of Service to Provide</b>
a.				
b.				
c.				
d.				
e.				