

# CERTIFIED COPY OF ORDER

STATE OF MISSOURI

} ea.

March Session of the January Adjourned

Term. 20 11

County of Boone

In the County Commission of said county, on the

17<sup>th</sup>

day of

March

20 11

the following, among other proceedings, were had, viz:

Now on this day the County Commission of the County of Boone does hereby approve the grant application by Boone County, Missouri for Federal Assistance SF-424 USDA-RD Grant for Manchester Heights Sanitary Sewer NID. It is further ordered the District I Commissioner Karen M. Miller is hereby authorized to sign said application.

Done this 17<sup>th</sup> day of March, 2011.

ATTEST:

Wendy S. Noren

Wendy S. Noren  
Clerk of the County Commission

Edward H. Robb

Edward H. Robb  
Presiding Commissioner

Karen M. Miller

Karen M. Miller  
District I Commissioner

Absent

Skip Elkin  
District II Commissioner

**Application for Federal Assistance SF-424**

Version 02

<b>*1. Type of Submission:</b> <input type="checkbox"/> Preapplication <input checked="" type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application	<b>*2. Type of Application</b> * If Revision, select appropriate letter(s) <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision	<b>*Other (Specify)</b> _____
--	---	----------------------------------

<b>3. Date Received:</b> _____	<b>4. Applicant Identifier:</b> _____
--------------------------------	---------------------------------------

<b>5a. Federal Entity Identifier:</b> _____	<b>*5b. Federal Award Identifier:</b> _____
---	---

**State Use Only:**

<b>6. Date Received by State:</b> _____	<b>7. State Application Identifier:</b> _____
---	---

**8. APPLICANT INFORMATION:**

**\*a. Legal Name:** Boone County, Missouri (Boone County Commission)

<b>*b. Employer/Taxpayer Identification Number (EIN/TIN):</b> 43-6000349	<b>*c. Organizational DUNS:</b> 07-375-5977
---	--

**d. Address:**

**\*Street 1:** 801 East Walnut  
**Street 2:** \_\_\_\_\_  
**\*City:** Columbia  
**County:** Boone  
**\*State:** Missouri  
**Province:** \_\_\_\_\_  
**\*Country:** USA  
**\*Zip / Postal Code** 65201

**e. Organizational Unit:**

<b>Department Name:</b> Boone County Commission	<b>Division Name:</b> Karen M. Miller
--	--

**f. Name and contact information of person to be contacted on matters involving this application:**

**Prefix:** Mister      **\*First Name:** Thomas  
**Middle Name:** Theodore  
**\*Last Name:** Ratermann  
**Suffix:** \_\_\_\_\_

**Title:** General Manager

**Organizational Affiliation:**  
Boone County Regional Sewer District

**\*Telephone Number:** 573.443.2774      **Fax Number:** 573.499.0489

**\*Email:** tratermann@bcrsd.com

**Application for Federal Assistance SF-424**

Version 02

**\*9. Type of Applicant 1: Select Applicant Type:**

B. County Government

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

\*Other (Specify)

**\*10 Name of Federal Agency:**

**United States Department of Agriculture - Rural Development**

**11. Catalog of Federal Domestic Assistance Number:**

10-780 \_\_\_\_\_

CFDA Title:

Wastewater Disposal \_\_\_\_\_

**\*12 Funding Opportunity Number:**

\_\_\_\_\_

\*Title:

\_\_\_\_\_

**13. Competition Identification Number:**

\_\_\_\_\_

Title:

\_\_\_\_\_

**14. Areas Affected by Project (Cities, Counties, States, etc.):**

**Boone County, Missouri**

**\*15. Descriptive Title of Applicant's Project:**

Manchester Heights Sanitary Sewer Neighborhood Improvement District (see enclosed map)

**Application for Federal Assistance SF-424**

Version 02

**16. Congressional Districts Of:**

\*a. Applicant: MO-009

\*b. Program/Project: MO-009

**17. Proposed Project:**

\*a. Start Date: March 1, 2012

\*b. End Date: November 1, 2012

**18. Estimated Funding (\$):**

*a. Federal	_____	\$446,211
*b. Applicant	_____	0
*c. State	_____	0
*d. Local	_____	\$40,014
*e. Other	_____	0
*f. Program Income	_____	0
*g. TOTAL	_____	\$486,225

**\*19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

- a. This application was made available to the State under the Executive Order 12372 Process for review on \_\_\_\_\_
- b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- c. Program is not covered by E. O. 12372

**\*20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)**

Yes       No

21. \*By signing this application, I certify (1) to the statements contained in the list of certifications\*\* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances\*\* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U. S. Code, Title 218, Section 1001)

\*\* I AGREE

\*\* The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions

**Authorized Representative:**

Prefix: Ms.      \*First Name: Karen

Middle Name: M.

\*Last Name: Miller

Suffix: \_\_\_\_\_

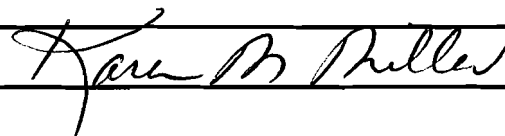
\*Title: District I Commissioner

\*Telephone Number: 573.886.4305

Fax Number: 573.886.4311

\* Email: kmiller@boonecountymmo.org

\*Signature of Authorized Representative:



\*Date Signed: 3/17/11

**Application for Federal Assistance SF-424**

Version 02

**\*Applicant Federal Debt Delinquency Explanation**

The following should contain an explanation if the Applicant organization is delinquent of any Federal Debt.

**INSTRUCTIONS FOR THE SF-424**

Public reporting burden for this collection of information is estimated to average 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

**PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.**

This is a standard form (including the continuation sheet) required for use as a cover sheet for submission of preapplications and applications and related information under discretionary programs. Some of the items are required and some are optional at the discretion of the applicant or the Federal agency (agency). Required items are identified with an asterisk on the form and are specified in the instructions below. In addition to the instructions provided below, applicants must consult agency instructions to determine specific requirements.

Item	Entry:	Item	Entry:
1.	<b>Type of Submission:</b> (Required) Select one type of submission in accordance with agency instructions. <ul style="list-style-type: none"> <li>• Preapplication</li> <li>• Application</li> <li>• Changed/Corrected Application – If requested by the agency, check if this submission is to change or correct a previously submitted application. Unless requested by the agency, applicants may not use this to submit changes after the closing date.</li> </ul>	10.	<b>Name Of Federal Agency:</b> (Required) Enter the name of the Federal agency from which assistance is being requested with this application.
		11.	<b>Catalog Of Federal Domestic Assistance Number/Title:</b> Enter the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested, as found in the program announcement, if applicable.
2.	<b>Type of Application:</b> (Required) Select one type of application in accordance with agency instructions. <ul style="list-style-type: none"> <li>• New – An application that is being submitted to an agency for the first time.</li> <li>• Continuation - An extension for an additional funding/budget period for a project with a projected completion date. This can include renewals.</li> <li>• Revision - Any change in the Federal Government's financial obligation or contingent liability from an existing obligation. If a revision, enter the appropriate letter(s). More than one may be selected. If "Other" is selected, please specify in text box provided.                             <ul style="list-style-type: none"> <li>A. Increase Award      B. Decrease Award</li> <li>C. Increase Duration    D. Decrease Duration</li> <li>E. Other (specify)</li> </ul> </li> </ul>	12.	<b>Funding Opportunity Number/Title:</b> (Required) Enter the Funding Opportunity Number and title of the opportunity under which assistance is requested, as found in the program announcement.
		13.	<b>Competition Identification Number/Title:</b> Enter the Competition Identification Number and title of the competition under which assistance is requested, if applicable.
		14.	<b>Areas Affected By Project:</b> List the areas or entities using the categories (e.g., cities, counties, states, etc.) specified in agency instructions. Use the continuation sheet to enter additional areas, if needed.
3.	<b>Date Received:</b> Leave this field blank. This date will be assigned by the Federal agency.	15.	<b>Descriptive Title of Applicant's Project:</b> (Required) Enter a brief descriptive title of the project. If appropriate, attach a map showing project location (e.g., construction or real property projects). For preapplications, attach a summary description of the project.
4.	<b>Applicant Identifier:</b> Enter the entity identifier assigned by the Federal agency, if any, or applicant's control number, if applicable.	16.	<b>Congressional Districts Of:</b> (Required) 16a. Enter the applicant's Congressional District, and 16b. Enter all District(s) affected by the program or project. Enter in the format: 2 characters State Abbreviation – 3 characters District Number, e.g., CA-005 for California 5 <sup>th</sup> district, CA-012 for California 12 <sup>th</sup> district, NC-103 for North Carolina's 103 <sup>rd</sup> district. <ul style="list-style-type: none"> <li>• If all congressional districts in a state are affected, enter "all" for the district number, e.g., MD-all for all congressional districts in Maryland.</li> <li>• If nationwide, i.e. all districts within all states are affected, enter US-all.</li> <li>• If the program/project is outside the US, enter 00-000.</li> </ul>
5a.	<b>Federal Entity Identifier:</b> Enter the number assigned to your organization by the Federal Agency, if any.		
5b.	<b>Federal Award Identifier:</b> For new applications leave blank. For a continuation or revision to an existing award, enter the previously assigned Federal award identifier number. If a changed/corrected application, enter the Federal Identifier in accordance with agency instructions.		
6.	<b>Date Received by State:</b> Leave this field blank. This date will be assigned by the State, if applicable.		
7.	<b>State Application Identifier:</b> Leave this field blank. This identifier will be assigned by the State, if applicable.		
8.	<b>Applicant Information:</b> Enter the following in accordance with agency instructions:	17.	<b>Proposed Project Start and End Dates:</b> (Required) Enter the proposed start date and end date of the project.
a.	<b>Legal Name:</b> (Required) Enter the legal name of applicant that will undertake the assistance activity. This is the name that the organization has registered with the Central Contractor Registry. Information on registering with CCR may be obtained by visiting the Grants.gov website.		
b.	<b>Employer/Taxpayer Number (EIN/TIN):</b> (Required) Enter the Employer or Taxpayer Identification Number (EIN or TIN) as assigned by the Internal Revenue Service. If your organization is not in the US, enter 44-4444444.		
c.	<b>Organizational DUNS:</b> (Required) Enter the organization's DUNS or DUNS+4 number received from Dun and Bradstreet. Information on obtaining a DUNS number may be obtained by visiting the Grants.gov website.		
d.	<b>Address:</b> Enter the complete address as follows: Street address (Line 1 required), City (Required), County, State (Required, if country is US), Province, Country (Required), Zip/Postal Code (Required, if country is US).		
e.	<b>Organizational Unit:</b> Enter the name of the primary organizational unit (and department or division, if applicable) that will undertake the	18.	<b>Estimated Funding:</b> (Required) Enter the amount requested or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines, as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the change. For decreases, enclose the amounts in parentheses.
		19.	<b>Is Application Subject to Review by State Under Executive Order 12372 Process?</b> Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the

	<p>assistance activity, if applicable.</p> <p><b>f. Name and contact information of person to be contacted on matters involving this application:</b> Enter the name (First and last name required), organizational affiliation (if affiliated with an organization other than the applicant organization), telephone number (Required), fax number, and email address (Required) of the person to contact on matters related to this application.</p>	<p>State intergovernmental review process. Select the appropriate box. If "a." is selected, enter the date the application was submitted to the State</p>		
		<p>20. <b>Is the Applicant Delinquent on any Federal Debt?</b> (Required) Select the appropriate box. This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes.</p> <p>if yes, include an explanation on the continuation sheet.</p>		
<p>9.</p>	<p>Type of Applicant: (Required)  Select up to three applicant type(s) in accordance with agency instructions.</p> <table border="0"> <tr> <td data-bbox="178 640 511 1020"> <p>A. State Government</p> <p>B. County Government</p> <p>C. City or Township Government</p> <p>D. Special District Government</p> <p>E. Regional Organization</p> <p>F. U.S. Territory or Possession</p> <p>G. Independent School District</p> <p>H. Public/State Controlled Institution of Higher Education</p> <p>I. Indian/Native American Tribal Government (Federally Recognized)</p> <p>J. Indian/Native American Tribal Government (Other than Federally Recognized)</p> <p>K. Indian/Native American Tribally Designated Organization</p> <p>L. Public/Indian Housing Authority</p> </td> <td data-bbox="511 640 852 1020"> <p>M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>O. Private Institution of Higher Education</p> <p>P. Individual</p> <p>Q. For-Profit Organization (Other than Small Business)</p> <p>R. Small Business</p> <p>S. Hispanic-serving Institution</p> <p>T. Historically Black Colleges and Universities (HBCUs)</p> <p>U. Tribally Controlled Colleges and Universities (TCCUs)</p> <p>V. Alaska Native and Native Hawaiian Serving Institutions</p> <p>W. Non-domestic (non-US) Entity</p> <p>X. Other (specify)</p> </td> </tr> </table>	<p>A. State Government</p> <p>B. County Government</p> <p>C. City or Township Government</p> <p>D. Special District Government</p> <p>E. Regional Organization</p> <p>F. U.S. Territory or Possession</p> <p>G. Independent School District</p> <p>H. Public/State Controlled Institution of Higher Education</p> <p>I. Indian/Native American Tribal Government (Federally Recognized)</p> <p>J. Indian/Native American Tribal Government (Other than Federally Recognized)</p> <p>K. Indian/Native American Tribally Designated Organization</p> <p>L. Public/Indian Housing Authority</p>	<p>M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>O. Private Institution of Higher Education</p> <p>P. Individual</p> <p>Q. For-Profit Organization (Other than Small Business)</p> <p>R. Small Business</p> <p>S. Hispanic-serving Institution</p> <p>T. Historically Black Colleges and Universities (HBCUs)</p> <p>U. Tribally Controlled Colleges and Universities (TCCUs)</p> <p>V. Alaska Native and Native Hawaiian Serving Institutions</p> <p>W. Non-domestic (non-US) Entity</p> <p>X. Other (specify)</p>	<p>21. <b>Authorized Representative:</b> (Required) To be signed and dated by the authorized representative of the applicant organization. Enter the name (First and last name required) title (Required), telephone number (Required), fax number, and email address (Required) of the person authorized to sign for the applicant.</p> <p>A copy of the governing body's authorization for you to sign this application as the official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.)</p>
<p>A. State Government</p> <p>B. County Government</p> <p>C. City or Township Government</p> <p>D. Special District Government</p> <p>E. Regional Organization</p> <p>F. U.S. Territory or Possession</p> <p>G. Independent School District</p> <p>H. Public/State Controlled Institution of Higher Education</p> <p>I. Indian/Native American Tribal Government (Federally Recognized)</p> <p>J. Indian/Native American Tribal Government (Other than Federally Recognized)</p> <p>K. Indian/Native American Tribally Designated Organization</p> <p>L. Public/Indian Housing Authority</p>	<p>M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>O. Private Institution of Higher Education</p> <p>P. Individual</p> <p>Q. For-Profit Organization (Other than Small Business)</p> <p>R. Small Business</p> <p>S. Hispanic-serving Institution</p> <p>T. Historically Black Colleges and Universities (HBCUs)</p> <p>U. Tribally Controlled Colleges and Universities (TCCUs)</p> <p>V. Alaska Native and Native Hawaiian Serving Institutions</p> <p>W. Non-domestic (non-US) Entity</p> <p>X. Other (specify)</p>			

### Budget Information—Construction Programs

Note: Certain Federal assistance programs require additional computations to arrive at the Federal share of project costs eligible for participation. If such is the case you will be notified.

Cost Classification	a. Total Cost		b. Costs Not Allowable for Participation		c. Total Allowable Costs (Column a-b)	
	\$		\$		\$	
1. Administrative and legal expenses	\$	4,500.00	\$	0.00	\$	4,500.00
2. Land, structures, rights-of-way, appraisals, etc.	\$	6,000.00	\$	0.00	\$	6,000.00
3. Relocation expenses and payments	\$	0.00	\$	0.00	\$	0.00
4. Architectural and engineering fees	\$	16,543.00	\$	0.00	\$	16,543.00
5. Other architectural and engineering fees	\$	9,592.00	\$	0.00	\$	9,592.00
6. Project inspection fees	\$	2,311.00	\$	0.00	\$	2,311.00
7. Site work	\$	0.00	\$	0.00	\$	0.00
8. Demolition and removal	\$	0.00	\$	0.00	\$	0.00
9. Construction	\$	310,020.00	\$	0.00	\$	310,020.00
10. Equipment	\$	0.00	\$	0.00	\$	0.00
11. Miscellaneous	\$	40,014.00	\$	0.00	\$	40,014.00
12. Subtotal	\$	388,980.00	\$	0.00	\$	388,980.00
13. Contingencies (sum of lines 1-11)	\$	97,245.00	\$	0.00	\$	97,245.00
14. Subtotal	\$	486,225.00	\$	0.00	\$	486,225.00
15. Project (program) income	\$	0.00	\$	0.00	\$	0.00
16. Total Project Costs (subtract #15 from #14)	\$	486,225.00	\$	0.00	\$	486,225.00

#### Federal Funding

17. Federal assistance requested, calculate as follows: Enter eligible costs from line 16c 486,225 Multiply x 100 %  
 (Consult Federal agency for Federal percentage share).  
 Enter the resulting Federal share. \$ 486,225.00



---

## Instructions for HUD-424C

---

Public reporting burden for this collection of information is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the Office of Management and Budget, Paperwork Reduction Project (0348-0041), Washington, D.C. 20503. Please do not return your completed form to the Office of Management and Budget; send it to the address provided by the sponsoring agency.

---

This sheet is to be used for the following types of applications: (1) "New" (means a new [previously unfunded] assistance award); (2) "Continuation" (means funding in a succeeding budget period which stemmed from a prior agreement to fund); and (3) "Revised" (means any changes in the Federal government's financial obligations or contingent liability from an existing obligation). If there is no change in the award amount there is no need to complete this form. Certain Federal agencies may require only an explanatory letter to effect minor (no cost) changes. If you have questions please contact the Federal agency.

---

**Column a.**—If this is an application for a "New" project, enter the total estimated cost of each of the items listed on lines 1 through 16 (as applicable) under "Cost Classifications."

If this application entails a change to an existing award, enter the eligible amounts approved under the previous award for the items under "Cost Classification."

**Column b.**—If this is an application for a "New" project, enter that portion of the cost of each item in Column a. which is not allowable for Federal assistance. Contact the Federal agency for assistance in determining the allowability of specific costs.

If this application entails a change to an existing award, enter the adjustment [+ or (-)] to the previously approved costs (from column a.) reflected in this application.

**Column c.**—This is the net of lines 1 through 16 in columns "a." and "b."

**Line 1**—Enter estimated amounts needed to cover administrative expenses. Do not include costs which are related to the normal functions of government. Allowable legal costs are generally only those associated with the purchase of land which is allowable for Federal participation and certain services in support of construction of the project.

**Line 2**—Enter estimated site and right(s)-of-way acquisition costs (this includes purchase, lease, and/or easements).

**Line 3**—Enter estimated costs related to relocation advisory assistance, replacement housing, relocation payments to displaced persons and businesses, etc.

**Line 4**—Enter estimated basic engineering fees related to construction (this includes start-up services and preparation of project performance work plan).

**Line 5**—Enter estimated engineering costs, such as surveys, tests, soil borings, etc.

**Line 6**—Enter estimated engineering inspection costs.

**Line 7**—Enter estimated costs of site preparation and restoration which are not included in the basic construction contract.

**Line 9**—Enter estimated cost of the construction contract.

**Line 10**—Enter estimated cost of office, shop, laboratory, safety equipment, etc. to be used at the facility, if such costs are not included in the construction contract.

**Line 11**—Enter estimated miscellaneous costs.

**Line 12**—Total of items 1 through 11.

**Line 13**—Enter estimated contingency costs. (Consult the Federal agency for the percentage of the estimated construction cost to use.)

**Line 14**—Enter the total of lines 12 and 13.

**Line 15**—Enter estimated program income to be earned during the grant period, e.g., salvaged materials, etc.

**Line 16**—Subtract line 15 from line 14.

**Item 17**—This block is for the computation of the Federal share. Multiply the total allowable project costs from line 16, column "c." by the Federal percentage share (this may be up to 100 percent; consult Federal agency for Federal percentage share) and enter the product on line 17.

# CERTIFIED COPY OF ORDER

STATE OF MISSOURI }  
County of Boone } ea.

March Session of the January Adjourned

Term. 20 11

In the County Commission of said county, on the 17<sup>th</sup> day of March 20 11

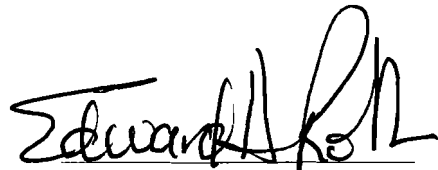
the following, among other proceedings, were had, viz:

Now on this day the County Commission of the County of Boone does hereby approve the Construction Services Agreement between the Boone County Regional Sewer District and Boone County, Missouri. The terms of this agreement are stipulated in the attached contract. It is further ordered the Presiding Commissioner is hereby authorized to sign said contract.

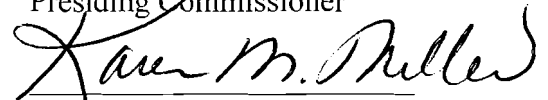
Done this 17<sup>th</sup> day of March, 2011.

ATTEST:

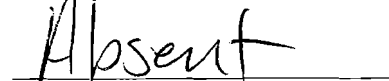
Wendy S. Noren  
Wendy S. Noren  
Clerk of the County Commission



Edward H. Robb  
Presiding Commissioner



Karen M. Miller  
District I Commissioner



Skip Elkin  
District II Commissioner

## CONSTRUCTION SERVICES AGREEMENT

This agreement dated the 17 day of March, 2011 is made by and between Boone County Regional Sewer District, a common sewer district organized and operated under the provisions of Chapter 204 RSMo (herein "District") and the County of Boone, a political subdivision of the State of Missouri, (herein "County").

Whereas, County has and will let contracts for the construction of sanitary sewer neighborhood improvement districts (herein NIDs) mentioned below in this agreement and is in need of qualified construction inspection services in conjunction with those projects, and

Whereas, District is willing to provide qualified personnel to provide construction inspection services for those NIDs subject to reimbursements for the expenses of those services, and

Whereas, District and County desire to reduce their agreements to writing and for that purpose are entering into this agreement.

Now therefore, in consideration of the foregoing and performance by each party of its agreements hereunder, the parties agree to as follows:

1. District agrees to provide qualified personnel, under the direct supervision of a registered professional engineer licensed in the State of Missouri, to perform construction inspection services for the:
  - 1) Brown Station NID
  - 2) Country Squire NID

Services shall include periodic inspection and monitoring of construction work as called for by the construction contract documents or as deemed necessary by District inspection personnel in the absence of specification in the contract documents to assure construction is in compliance with the construction contract documents for each project.

2. District agrees to provide construction inspection services for each project as necessary to allow for completion of construction within the time permitted by the construction contract documents.

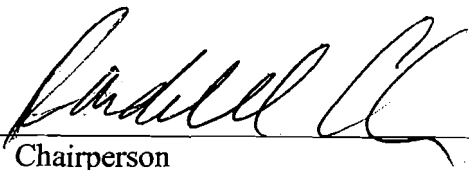
3. County agrees to pay District the actual expense of personnel time including employer contributions and employee benefits plus mileage incurred by District, provided those expenses are paid for by the subject NID's financing proceeds, not to exceed the following amount for each NID unless a greater amount is agreed upon by the parties pursuant to written amendment to this agreement:

1)	Brown Station NID	\$1,875
2)	Country Squire NID	\$2,880

4. This agreement is for the sole benefit of the District and the County. Nothing in this agreement is intended to confer any rights or remedies on any third party.

In witness whereof, the parties have executed this agreement effective on the date specified above.

**Boone County Regional Sewer District**

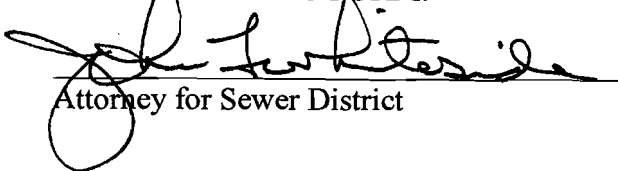
By:   
Chairperson

Date: \_\_\_\_\_

ATTEST:

  
Secretary

APPROVED AS TO FORM:


  
Attorney for Sewer District

**Boone County, Missouri  
By Boone County Commission**

  
Presiding Commissioner

Date: 3.17.11

ATTEST:

  
County Clerk

APPROVED AS TO FORM:

  
County Counselor

# CERTIFIED COPY OF ORDER

STATE OF MISSOURI }  
County of Boone } ea.

March Session of the January Adjourned

Term. 20 11

In the County Commission of said county, on the 17<sup>th</sup> day of March 20 11

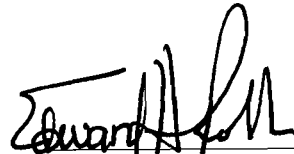
the following, among other proceedings, were had, viz:

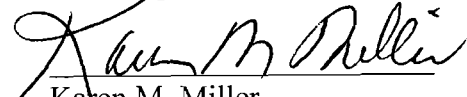
Now on this day the County Commission of the County of Boone does hereby approve the request by Facilities Maintenance to extend a temporary hire for an additional 3 months with the understanding that all of the 3 months may not be required and that when the permanent employee returns the temporary employment of Kyellan Larson ends.

Done this 17<sup>th</sup> day of March, 2011.

ATTEST:

  
Wendy S. Noren  
Clerk of the County Commission

  
Edward H. Robb  
Presiding Commissioner

  
Katen M. Miller  
District I Commissioner

  
Skip Elkin  
District II Commissioner

# CERTIFIED COPY OF ORDER

STATE OF MISSOURI }  
County of Boone } ea.

March Session of the January Adjourned

Term. 20 11

In the County Commission of said county, on the 17<sup>th</sup> day of March 20 11

the following, among other proceedings, were had, viz:

Now on this day the County Commission of the County of Boone does hereby authorize Commissioner Skip Elkin to sign Change Order #011-BCGC in the amount of \$9,022.70 for the Boone County Government Center Remodel project.

Done this 17<sup>th</sup> day of March, 2011.

ATTEST:

Wendy S. Noren  
Wendy S. Noren  
Clerk of the County Commission

Edward H. Robb  
Edward H. Robb  
Presiding Commissioner

Karen M. Miller  
Karen M. Miller  
District I Commissioner

Absent  
Skip Elkin  
District II Commissioner

# AIA® Document G701™ - 2001

## Change Order

<b>PROJECT</b> <i>(Name and address):</i> 0832 - Boone County Government Center and Old Johnston Paint Remodel Columbia, MO	<b>CHANGE ORDER NUMBER:</b> 011 <b>DATE:</b> March 11, 2011	<b>OWNER:</b> <input checked="" type="checkbox"/> <b>ARCHITECT:</b> <input checked="" type="checkbox"/> <b>CONTRACTOR:</b> <input checked="" type="checkbox"/> <b>FIELD:</b> <input type="checkbox"/> <b>OTHER:</b> <input type="checkbox"/>
<b>TO CONTRACTOR</b> <i>(Name and address):</i> GBH Builders PO Box 945 Jefferson City, MO 65102	<b>ARCHITECT'S PROJECT NUMBER:</b> 0832 <b>CONTRACT DATE:</b> June 29, 2010 <b>CONTRACT FOR:</b> General Construction	

### THE CONTRACT IS CHANGED AS FOLLOWS:

*(Include, where applicable, any undisputed amount attributable to previously executed Construction Change Directives)*

This change order #11 is the acceptance of GBH Proposal 25 (SOA PR15), which contains cost for the material and labor to install the Collector's transaction window system ( level 1 ballistic fiberglass) and all its associated hardware. This Proposal reflects the deduction of the base bid for a window system of bullet-proof glass and hollow metal frame, and includes the addition of the accepted alternate for the Total Security Solutions system as described in the attached documentation. Please refer to the attached itemized breakdown and the accepted GBH Proposal 25 for reference of the accepted change and the associate cost as submitted by the Contractor and approved by the Owner.

The original Contract Sum was	\$ 1,977,972.00 ✓
The net change by previously authorized Change Orders	\$ 35,131.37 ✓
The Contract Sum prior to this Change Order was	\$ 2,013,103.37 ✓
The Contract Sum will be increased by this Change Order in the amount of	\$ 9,022.70 ✓
The new Contract Sum including this Change Order will be	\$ 2,022,126.07 ✓

The Contract Time will be increased by Zero (0) days.  
The date of Substantial Completion as of the date of this Change Order therefore is

*Holland*  
3-14-11

**NOTE:** This Change Order does not include changes in the Contract Sum, Contract Time or Guaranteed Maximum Price which have been authorized by Construction Change Directive until the cost and time have been agreed upon by both the Owner and Contractor, in which case a Change Order is executed to supersede the Construction Change Directive.

### NOT VALID UNTIL SIGNED BY THE ARCHITECT, CONTRACTOR AND OWNER.

<u>SOA, Inc.</u> <b>ARCHITECT</b> <i>(Firm name)</i>	<u>GBH Builders</u> <b>CONTRACTOR</b> <i>(Firm name)</i>	<u>Boone County</u> <b>OWNER</b> <i>(Firm name)</i>
700 Cherry Street, Suite A, Columbia, MO 65201	PO Box 945, Jefferson City, MO 65102	
<u>ADDRESS</u> <i>(Signature)</i>	<u>ADDRESS</u> <i>(Signature)</i>	<u>ADDRESS</u>
<u>Brad Stegemann</u> <i>(Typed name)</i>	<u>Jake Hunget</u> <i>(Typed name)</i>	<u>Skip Elkin</u> <i>(Typed name)</i>
<u>March 11, 2011</u> <b>DATE</b>	<u>3-11-11</u> <b>DATE</b>	<u>DATE</u>



**Project Name:** Boone County Government Center & Old Johnston Paint Remodel

**Project Number:** 00832.00

**Date:** 3/11/2011

Change Order No. 11 - Itemized Break-down

	Approved Changes	Total Approved Changes	Amounts Not Approved	Remarks
<b>GBH Proposal 25 (SOA PR 15)</b>				
15.1 Central Missouri Glass (delete bullet resistant glass)	\$ (6,218.80)			
H&G Sales (delete hollow metal frame 118BL)	\$ (579.00)			
GBH labor to install frame 8 hrs. carpenter @ \$58.00	\$ (464.00)			
GBH project manager - proposal prep. .25 hr. @ \$75	\$ 18.75			
GBH office manager - paperwork .25 hr. @ \$35.00	\$ 8.75			
<b>SUBTOTAL</b>		\$ (7,234.30)		
15.2 Central Missouri Glass - Window System	\$ 16,237.00			
GBH project manager - proposal prep. 2 hrs. @ \$75	\$ 150.00			
GBH office manager - paperwork .25 hr. @ \$35.00	\$ 8.75			
<b>SUBTOTAL</b>		\$16,395.75		
15.3 Central Missouri Glass - Alternate to add buttresses	\$ 825.00			
GBH project manager - proposal prep. .25 hr. @ \$75	\$ 18.75			
GBH office manager - paperwork .25 hr. @ \$35.00	\$ 8.75			
<b>SUBTOTAL</b>		\$ 852.50		
15.4 GBH - delete 1/4" steel plate material	\$ (1,000.00)			
GBH office manager - paperwork .25 hr. @ \$35.00	\$ 8.75			
<b>SUBTOTAL</b>		\$ (991.25)		
<b>TOTAL for Change Order No. 11</b>		\$ 9,022.70		



February 15, 2011

Simon Oswald Architecture  
700 Cherry Street  
Columbia, MO 65201  
Attn: Amanda Partyka Norris  
Project: Boone County Government Center  
801 East Walnut  
Columbia, MO 65201  
BID NO: 22 - 20MAY10

Re: Proposal 25 - Complete changes per Proposal Request Number 015

We propose to provide the following changes to the Collector's window per your request.

PR 15.1	
Central Missouri Glass (Delete bullet resistant glazing)	(\$6,218.80)
H&G Sales (Delete HM frame 118BL)	(\$579.00)
GBH labor to install frame - 8 hrs carpenter labor @ \$58.00/hr	(\$464.00)
GBH project manager - Discuss/confirm work and prepare proposal - .25 hr @ \$75.00	\$18.75
GBH office manager - prepare change order paperwork - .25 hr @ \$35.00	\$8.75
Total	(\$7,234.30)

PR 15.2	
Central Missouri Glass	\$16,237.00
GBH project manager - Discuss/confirm work and prepare proposal - 2 hr @ \$75.00	\$150.00
GBH office manager - prepare change order paperwork - .25 hr @ \$35.00	\$8.75
Total	\$16,395.75

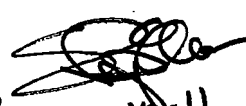
*Voluntary alternate to provide buttress support panel behind each joint where panels meet	
Central Missouri Glass	\$825.00
GBH project manager - Discuss/confirm work and prepare proposal - .25 hr @ \$75.00	\$18.75
GBH office manager - prepare change order paperwork - .25 hr @ \$35.00	\$8.75
Total	\$852.50

*Voluntary alternate to delete steel plate under counter with Level 1 Ballistic Fiberglass	
Delete 1/4" steel plate materials	(\$1,000.00)
GBH office manager - prepare change order paperwork - .25 hr @ \$35.00	\$8.75
Net add	(\$991.25)

Total cost for changes (add)	\$9,022.70 ✓
------------------------------	--------------

Jake Hunget  
President

PO BOX 945  
JEFFERSON CITY, MO 65102  
PH: 573-893-3633 FAX: 573-893-5847

*Hobard*  
3-10-11  
  
3-10-11

# TOTAL SECURITY SOLUTIONS

Total Safety DEMANDS Total Security

www.tssbulletproof.com

170 National Park Dr  
 Fowlerville, MI 48836  
 Phone: (866) 930-7807 X204  
 Fax: (517) 223-0805

ralph@demands.com

Proposal #	5575-R
Date	2-04-2011

## Proposal

Customer Information: Central Missouri Glass 18261 Highway 87 Boonville, MO 65233 Attn: Mr. Bob Hadsell Ph. 660-882-7171 Fx. 660-882-8515 Cl. 5730529-1526	Ship To: Same
---	------------------

PO Number	Project Name	Rep.	Date Required	Payment Terms
	Boone County Government Ctr.	Ralph Gillespie X 204		To Be Determined

QTY.	Item	Description	Price	Total
(1)	Each	Level I bullet resistant counter top Baffle Design Barrier, 36'-6-1/4"w. A. Transparency is UL tested and rated Level I bullet resistant acrylic 1-1/4". B. Baffle design for voice transmission at (5) each stations, one of which is ADA. C. (5) each stainless steel currency trays. D. All channel, including for top attachment) spacers, assembly hardware and such components as required for a complete system. E. TSS is to provide a shop drawing for approval and complete installation instructions. Note: The above mentioned Barrier provided with either Arched Windows or Rectangular Windows is the same cost.	\$11,439.00/lot	\$11,439.00
(1)	Each	Alternate: Provide a buttress support panel behind each joint where panel meet, total of (8) each. Add: \$720.00/Lot		
(1)	Each	Alternate: Provide Level I ballistic fiberglass cut to size to provide full coverage for the counter under the barrier. Add: \$1,818.00 Freight Paid		
1	Tax	Sales Tax (if applicable).		N/A
1	Box and Crate	All items are packaged and crated.		\$150.00
1	Freight	All items are shipped with a common carrier.		\$508.00

The above prices, specifications and conditions are satisfactory and hereby accepted. Total Security Solutions, Inc. is authorized to proceed with the work as specified. Options will be initiated as approved or crossed out as declined. Payment will be made as agreed above. This quote shall remain in effect for 90 days from the above date. Customer is responsible for payment of state sales tax.

**Total Amount**

**\$12,097.00 Freight Paid**

Upon signing I agree to the total amount and payment terms as listed above

Date of Acceptance

Signature



5. For purposes of this Proposal, the entity accepting this Proposal shall be referred to as the "Owner/Contractor".
6. H & G Sales, Inc. is not responsible for providing any related or unrelated products that may or may not be made of similar materials to those being bid unless specifically indicated, but is only responsible for providing of the specific items listed in this Proposal at the quoted prices. Further, in the event the terms of the final construction documents for the above project differ from the specifications, plans and addenda submitted to H & G Sales, Inc. prior to the preparation of this Proposal, H & G Sales, Inc. is only required to perform under the terms of this Proposal and not the terms of final construction documents. The parties to this Proposal agree that the terms of this Proposal shall be incorporated into the final construction contract as if fully set forth therein.
7. Prices for additional materials requested by Owner/Contractor not included in this proposal may vary from the prices quoted in this Proposal due to changes in market conditions.
8. H & G Sales, Inc. is not responsible for any product listed only on Mechanical or Electrical drawings and not listed on architectural plans.
9. The information contained in this Proposal and the rights of each party under this Proposal are personal to that party and may not be assigned, transferred, or used by any other person, firm, corporation, or other party without the prior, express, and written consent of the other party.
10. The failure of either party to this Proposal to insist upon the performance of any of the terms and conditions of this Proposal, or the waiver of any breach of any of the terms and conditions of this Proposal, shall not be construed as thereafter waiving any such terms and conditions, but the same shall continue and remain in full force and effect as if no such forbearance or waiver had occurred.
11. H & G Sales, Inc. shall not be responsible for claims arising out of improperly drawn blueprints, plans, specifications, architectural drawings or the acts or failure to act of the Owner/Contractor, other contractors, subcontractors, engineers, architects, material suppliers or other agents or employees of the Owner/Contractor; nor shall H & G Sales, Inc. be responsible for damages to persons or property occasioned by the Owner/Contractor or other contractors, subcontractors, engineers, architects, material suppliers or other agents or employees of the Owner/Contractor, third parties, fire, explosion, accidents, flood, strikes, shortages, acts of God or other happenings beyond its control. The Owner/Contractor shall hold and save H & G Sales, Inc. completely harmless from, and shall indemnify H & G Sales, Inc. against all claims, demands, actions, causes of action, costs, damages, losses, and expenses, including, but not limited to, claims arising from delay of the project, claims arising out of the injury or death of any person, claims arising out of lost profits or income, claims arising out of property damage, claims arising from causes enumerated in this paragraph, including judgments and reasonable attorney's fees.
12. In the event that any action is filed in relation to this Proposal, the unsuccessful party in the action shall pay to the successful party, a reasonable sum for the successful party's attorney's fees.
13. In the event any of the materials supplied by H & G Sales, Inc. are incorrect or defective, the liability of H & G Sales, Inc. for the incorrect or defective material is limited to the replacement or repair of the defective material and not for any incidental or consequential damages suffered by Owner/Contractor or a third party. H & G Sales, Inc. must be notified of any product defects or incorrect materials prior to installation and shall be given the option to repair or replace any

**See attached Terms and Conditions numbered 1- 17.**

11635 Lackland Road. St. Louis, Missouri 63146  
Phone: 314-432-8188 Fax: 314-432-0649

# AIA Document G709™ - 2001

## Work Changes Proposal Request

**PROJECT (Name and address):**  
0832 - Boone County Government  
Center and Old Johnston Paint  
Remodel  
Columbia, MO

**PROPOSAL REQUEST NUMBER:** 015

**DATE OF ISSUANCE:** December 29, 2010

**OWNER (Name and address):**  
Boone County  
801 East Walnut  
Columbia, MO 65201

**CONTRACT FOR:** General Construction

**CONTRACT DATE:** June 29, 2010

**FROM ARCHITECT (Name and address):**  
SOA, Inc.  
4814 Washington Blvd. Suite 140  
St. Louis, MO 63108

**ARCHITECT'S PROJECT NUMBER:** 0832

**TO CONTRACTOR (Name and address):**  
GSH Builders  
PO Box 945  
Jefferson City, MO 65102

**OWNER:**   
**ARCHITECT:**   
**CONSULTANT:**   
**CONTRACTOR:**   
**FIELD:**   
**OTHER:**

Please submit an itemized proposal for changes in the Contract Sum and Contract Time for proposed modifications to the Contract Documents described herein. Within Fourteen (14) days, the Contractor must submit this proposal or notify the Architect, in writing, of the date on which proposal submission is anticipated.

**THIS IS NOT A CHANGE ORDER, A CONSTRUCTION CHANGE DIRECTIVE OR A DIRECTION TO PROCEED WITH THE WORK DESCRIBED IN THE PROPOSED MODIFICATIONS.**

### DESCRIPTION (Insert a written description of the Work):

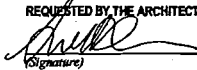
PR 15.1 - Provide deduct pricing for removal of bullet resistant glazing in hollow metal frame as currently included in Contract Documents for Collector Window at Collector 118.

PR 15.2 - Provide pricing for Total Security Solutions Arch Window System, continuous counter type, bullet resistant level 1, clear anodized finish (refer to attached product and cut sheets) and installation to be used at Collector Window in lieu of current bullet resistant glazing in HM frame. Total Security Solutions to provide shop drawings for review upon acceptance of proposal and execution of change order that correspond to the same design intent for opening size and spacing of transaction areas in current design.

### ATTACHMENTS (List attached documents that support description):

Total Security Solutions Arch Window System Product Data and Cut Sheets

### REQUESTED BY THE ARCHITECT:

  
(Signature)

Amanda Partyka Norris, Architect / Associate  
(Printed name and title)

#### **HANDLING INFORMATION**

**Handling:** Care should be exercised during shipping and handling to maintain window appearance.

**Storage:** Store upright in a dry, well ventilated building or shelter at a constant temperature. Do not store in damp areas or freshly plastered buildings. Place unit on wood blocks at least 2" high to prevent moisture damage.

**Application:** Remove from protective container just prior to installation. Care should be exercised when installing the Arch Window system to insure that installation is level, plumb, square and secure.

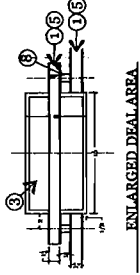
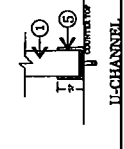
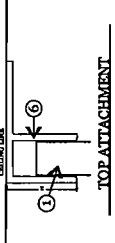
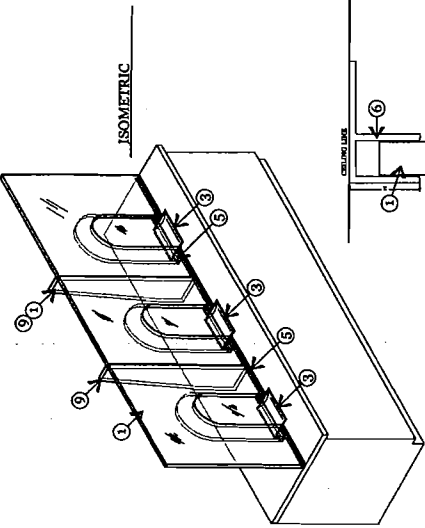
**Cleaning:** You must clean the glazing unit during and after the construction period to maintain optimum performance and aesthetic properties. To clean, use a soft, clean cloth and a mild soap, detergent, or slightly acidic cleaning solution (such as vinegar). Wipe with a clean, lint-free cloth.

#### **TECHNICAL SUPPORT**

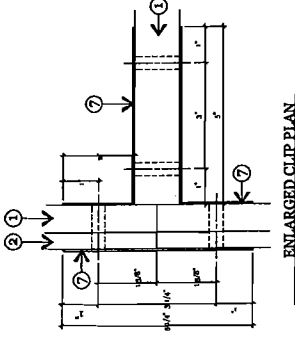
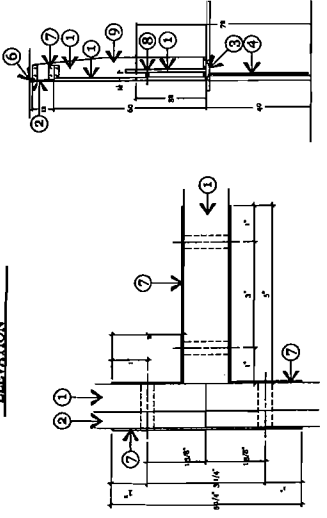
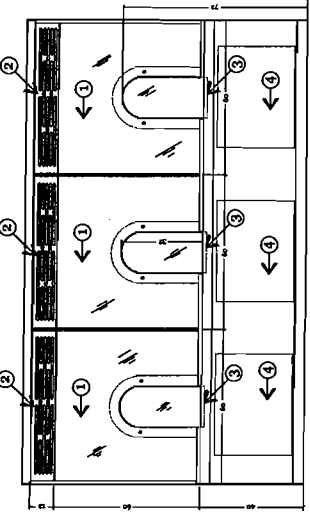
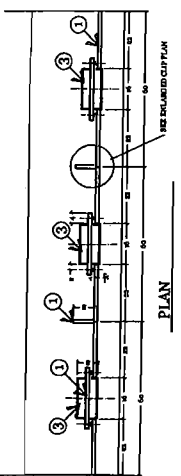
TSS maintains a full staff of professional and experienced sales representatives, project estimators, engineers, draftsmen, craftsmen and installers ready to assist in all phases of the bullet resistant project from initial design through installation. Consult our sales department or your local representative for assistance with all your bullet-resistant needs at 1.517.223.7807.

#### **LIMITED WARRANTY**

TSS offers a twelve month limited warranty. This warranty does not cover damage caused by neglect, abuse, vandalism, improper maintenance, accident or any other cause beyond the suppliers control not arising out of defects in material or workmanship. The warranties stated replace and exclude all other warranties. The warranty is limited to replacing products that fail to meet specification, or are defective in quality or workmanship at the time of delivery. TSS will not be responsible for (re)installation expenses or any direct or indirect loss(es) which may result from a defective product. TSS reserves the right to field inspect any product alleged to be defective. The buyer is responsible for any consequences resulting from product use..



- DRAWING NOTES:**
1. BULLET RESISTANT ACRYLIC OR ACRYLIC/POLYCARBONATE COMPOSITE. AVAILABLE IN PROTECTION LEVELS 1,2,3.
  2. ACRYLIC SLOT LOUVERS.
  3. 18 GAUGE BRUSHED STAINLESS STEEL DEAL TRAIL. AVAILABLE SURFACE FINISHES: POLISHED, BRUSHED, AND ANODIZED.
  4. UL RATED BALLISTIC FIBERGLASS FOR UNDERCOUNTER PROTECTION.
  5. AVAILABLE IN PROTECTION LEVELS 1,2,3.
  6. EXTRUDED ALUMINUM CHANNEL. SIZED TO MATCH THE LEVEL OF ACRYLIC PROTECTION. FINISHES: POLISHED, BRUSHED, AND CLEAR ANODIZED ALUMINUM. CUSTOM COLORS ARE AVAILABLE.
  7. ALUMINUM ANGLE OR CHANNEL ATTACHMENT FOR HEAD CONNECTION. AVAILABLE IN CLEAR POLYCARBONATE OR STAINLESS STEEL.
  8. UNFITTING CLIP SYSTEM FOR RIGID STRUCTURAL CONNECTION. AVAILABLE IN CLEAR POLYCARBONATE OR STAINLESS STEEL.
  9. VERTICAL SUPPORT BUTTRESS. SIZED PER SYSTEM HEIGHT. COMPOSED OF BULLET RESISTANT GLAZING TO MATCH THE REST OF SYSTEM.



# CERTIFIED COPY OF ORDER

STATE OF MISSOURI }  
County of Boone } ea.

March Session of the January Adjourned

Term. 20 11

In the County Commission of said county, on the 17<sup>th</sup> day of March 20 11  
the following, among other proceedings, were had, viz:

Now on this day the County Commission of the County of Boone does hereby approve the request by GBH Builders Inc. to add a total of four working days to the project for weather delays.

Done this 17<sup>th</sup> day of March, 2011.

ATTEST:

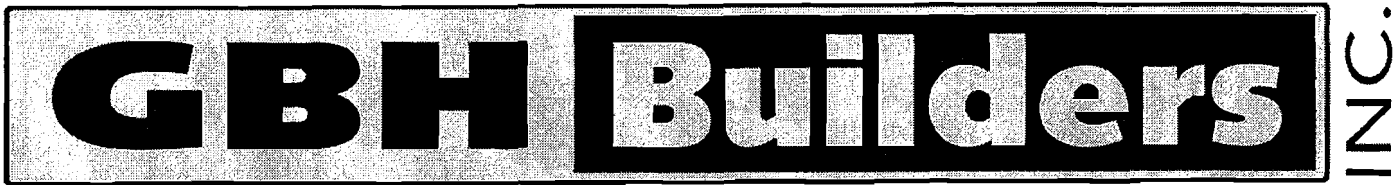
Wendy S. Noreh  
Wendy S. Noreh  
Clerk of the County Commission

Edward H. Robb  
Edward H. Robb  
Presiding Commissioner

Karen M. Miller  
Karen M. Miller  
District I Commissioner

Absent  
Skip Elkin  
District II Commissioner





March 9, 2011

Simon Oswald Architecture  
700 Cherry Street  
Columbia, MO 65201

Attn: Amanda Partyka Norris  
Project: Boone County Government Center  
801 East Walnut  
Columbia, MO 65201  
BID NO: 22 – 20MAY10

Re: Request for weather days

Please consider this our request to add a total of four (4) working days to the project for weather delays. There was one (1) day in January and three (3) days in February that we were unable to make it to the jobsite.

Jake Hunget  
President

PO BOX 945  
JEFFERSON CITY, MO 65102  
PH: 573-893-3633 FAX: 573-893-5847

# CERTIFIED COPY OF ORDER

STATE OF MISSOURI }  
County of Boone } ea.

March Session of the January Adjourned

Term. 20 11

In the County Commission of said county, on the 17<sup>th</sup> day of March 20 11

the following, among other proceedings, were had, viz:

Now on this day the County Commission of the County of Boone does hereby authorize a closed meeting on Thursday, March 24, 2011, at 2:30 p.m. The meeting will be held in Room 338 of the Roger B. Wilson Boone County Government Center at 801 E. Walnut, Columbia, Missouri, as authorized by 610.021 (1) RSMo. to discuss legal actions, causes of action or litigation involving a public governmental body and any confidential or privileged communications between a public governmental body or its representatives and its attorneys.

Done this 17<sup>th</sup> day of March, 2011.

ATTEST:

*Wendy S. Noren*  
Wendy S. Noren  
Clerk of the County Commission

*Edward H. Robb*  
Edward H. Robb  
Presiding Commissioner

*Karen M. Miller*  
Karen M. Miller  
District I Commissioner

*Absent*  
Skip Elkin  
District II Commissioner