

STATE OF TEXAS §
 §
COUNTY OF HIDALGO §

**TO AIA B101-2007
STANDARD FORM OF AGREEMENT BETWEEN ARCHITECT AND OWNER
C-11-097A-02-28**

This **AMENDMENT** to the Agreement (as defined below) between **DANNENBAUM ENGINEERING COMPANY** (the “Architect”) and **HIDALGO COUNTY, TEXAS** (“Owner”), is effective the 7th day of **May, 2013**, and is made between the Architect and the Owner (the “Amendment”), as follows:

WHEREAS, on or about February 28, 2012, Architect and Owner executed that certain **AIA B101-2007 Standard Form of Agreement Between Architect and Owner (C-11-097A-02-28)**, between Architect and the Owner made as of the 11th day of October, 2011, in which the Architect agreed to provide professional services for “**Building Repairs/Renovations, Additions and/or Alterations to the Hidalgo County Restitution Center located at 1124 "M" Road, Edinburg, Texas within Hidalgo County Precinct No. 4**” (the “Agreement”);

WHEREAS, due to a change in circumstances, at the request of the Owner, the Architect and Owner have agreed to modify the original scope of services to be provided by the Architect for the Owner under the Agreement with respect to the remodel of the **Hidalgo County Restitution Center located at 1124 "M" Road, Edinburg, Texas, within Hidalgo County Precinct No. 4** so that, instead of the originally planned renovations, the renovations to the location will be to modify it to house **Hidalgo County Precinct No. 4 (Field Staff which includes Drainage and Road & Bridge)**;

WHEREAS, the proposed modification of the **Hidalgo County Restitution Center** to house **Hidalgo County Precinct No. 4 (Field Staff which includes Drainage and Road & Bridge)** has increased the fee to the Architect in the amount of **(\$ 13,094.00)**; and

WHEREAS, the parties desire to amend the Agreement as hereinafter provided to address the modification;

NOW THEREFORE, for and in consideration of the terms and provisions set forth herein, and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Owner and Architect hereby agree to the amend the Agreement as follow:

- I. The remainder of Section 11.1 of the Agreement after the words “as follows” shall be deleted and the following shall be inserted in lieu thereof:

“The aggregate amount of One Hundred Ten Thousand Dollars Five Hundred Sixty Six and Zero Cents **(\$110,566.00)**, which is the aggregate of the original amount of \$97,472 from the Architect’s December 16, 2011, Best and Final Offer, and the subsequent amount of \$13,094 from the Architect’s February 28, 2013, Best and Final Offer (relating to modification in the services), both of which are included herewith as part of Exhibit “D” to this Agreement.”

2. The Architect acknowledges receipt of Seventy Seven Thousand, Eight Hundred Thirty Four and 10/100 Dollars (\$77,834.10) prior to the date hereof, which amount is the entire amount due under the Agreement, as amended hereby, through the date hereof, with Thirty Two Thousand, Seven Hundred Thirty One and 90/100 Dollars (\$32,731.90) remaining of the amount designated in Section 11.1 of the Agreement, as amended hereby, which amount is not yet due in accordance with the terms of the Agreement.
3. Exhibit "C" to the Agreement is amended by adding thereto the updated insurance certificate attached hereto as "Exhibit "C-1".
4. Exhibit "D" to the Agreement is amended by adding thereto the documents attached hereto as "Exhibit "D-1".
5. Except as modified herein, all terms and conditions of the Agreement, as amended by this Amendment, remain in full force and effect and Architect and Owner ratify and confirm the terms and provisions of the Agreement, as amended by this Amendment.

EXECUTED IN DUPLICATE ORIGINALS and effective as of the day and year first written above.

DANNENBAUM ENGINEERING COMPANY

By: _____
Louis H. Jones, P.E.

HIDALGO COUNTY

By: _____
Ramon Garcia, County Judge

ATTEST:

By: _____
Arturo Guajardo Jr., County Clerk

**APPROVED AS TO FORM:
ATLAS, HALL & RODRIGUEZ, L.L.P.**

By: _____
Stephen L. Crain

Exhibit C-1

Current Insurance Certificate (added to Exhibit C of the Agreement)

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
5/24/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Barmore Insurance Agency 8511 Sam Houston Parkway E Houston TX 77075		CONTACT NAME: PHONE (A/C, No, Ext): 713-209-2800 FAX (A/C, No): 713-209-2899 E-MAIL ADDRESS:																						
INSURED DANNE-1 Dannenbaum Engineering Corp., ETAL P O Box 22292 Houston TX 77027		<table border="1"> <thead> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A :</td> <td>Continental Casualty</td> <td>20443</td> </tr> <tr> <td>INSURER B :</td> <td>Valley Forge Insurance Co</td> <td>20508</td> </tr> <tr> <td>INSURER C :</td> <td>Continental Insurance Co.</td> <td>35289</td> </tr> <tr> <td>INSURER D :</td> <td>Transportation Insurance</td> <td>20494</td> </tr> <tr> <td>INSURER E :</td> <td>Catlin Specialty Insurance</td> <td>15989</td> </tr> <tr> <td>INSURER F :</td> <td></td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A :	Continental Casualty	20443	INSURER B :	Valley Forge Insurance Co	20508	INSURER C :	Continental Insurance Co.	35289	INSURER D :	Transportation Insurance	20494	INSURER E :	Catlin Specialty Insurance	15989	INSURER F :		
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INSURER E :	Catlin Specialty Insurance	15989																						
INSURER F :																								


COVERAGES **CERTIFICATE NUMBER: 35042944** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
C	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> Cont. Liab.Inclcd GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			2053853648	6/1/2012	6/1/2013	EACH OCCURRENCE	\$1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$700,000
							MED EXP (Any one person)	\$5,000
							PERSONAL & ADV INJURY	\$1,000,000
							GENERAL AGGREGATE	\$2,000,000
							PRODUCTS - COMP/OP AGG	\$2,000,000
								\$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			1015348305	6/1/2012	6/1/2013	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			2053853049	6/1/2012	6/1/2013	EACH OCCURRENCE	\$10,000,000
							AGGREGATE	\$10,000,000
								\$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N N	1022022126	6/1/2012	6/1/2013	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER	
							E.L. EACH ACCIDENT	\$1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$1,000,000
							E.L. DISEASE - POLICY LIMIT	\$1,000,000
E	Professional Liability Claims Made RET Date 4/1/03			AEH254055021	4/1/2012	4/1/2013	Per Claim	200000
							Aggregate	4000000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

See Attached...

CERTIFICATE HOLDER		CANCELLATION	
Hidalgo County 100 E. Cano, 2nd. Fl Edinburg TX 78539		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	
		AUTHORIZED REPRESENTATIVE 	



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/25/2013

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INSURED Dannenbaum Engineering Corp., ETAL P O Box 22292 Houston TX 77027		INSURER(S) AFFORDING COVERAGE	
		INSURER A: Continental Casualty	NAIC # 20443
		INSURER B: Valley Forge Insurance Co	20508
		INSURER C: Continental Insurance Co.	35289
		INSURER D: Transportation Insurance	20494
		INSURER E: Callin Specialty Insurance	15989
		INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** 1343128063 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR I,TR	TYPE OF INSURANCE	ADDL(SUBR) INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
C	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR Cont. Liab. Includ _____ GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC		2053853648	5/1/2012	5/1/2013	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$700,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COM/OP AGG \$2,000,000 \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		1015348305	5/1/2012	5/1/2013	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED _____ RETENTION \$ _____		2053853049	5/1/2012	5/1/2013	EACH OCCURRENCE \$10,000,000 AGGREGATE \$10,000,000 \$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A	1022022126	5/1/2012	5/1/2013	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
E	Professional Liability Claims Made RET Date 4/1/03		AEH254055021	4/1/2013	4/1/2014	Per Claim 5,000,000 Aggregate 5,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

See Attached...

CERTIFICATE HOLDER COUNTY OF HIDALGO, PRECINCT 3 P O BOX 607 ATTN: COMMISSIONER JOE FLORES MISSION TX 78573	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <i>JM Barmore</i>
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Exhibit D-I

Additional Documents that are Part of Exhibit D of the Agreement

February 28, 2013

Joseph Palacios
Precinct No. 4 Commissioner
Hidalgo County Precinct No. 4
1051 North Doolittle Road
Edinburg, Texas 78539

RE: ***Building Repairs and/or Additions, Renovations and Alterations to the Hidalgo County Restitution Center Located at 1124 "M" Road, Edinburg, Texas, within Hidalgo County Precinct No. 4***

Subject: ***Best and Final Offer (BFO) Supplemental for Additional Services***

Dear Mr. Palacios,

It has been requested that Dannenbaum present best and final fees for additional services for "***Building Repairs and/or Additions, Renovations and Alterations to the Hidalgo County Restitution Center***" as referenced above. We are pleased to offer the following fees as our Best and Final Offer:

EXHIBIT D- FEE BUDGET ESTIMATE PREVIOUSLY PROPOSED BY DANNENBAUM ENGINEERING CO.		BEST and FINAL OFFER (BAFO) FOR PROPOSED COST ESTIMATE BY DANNENBAUM ENGINEERING CO.	
Design Phase Services	\$ 11,645.25	Design Phase Services	\$ 9,820.50
Construction Phase Services	\$ 3,881.75	Construction Phase Services	\$ 3,273.50
<u>Subtotal</u> (Arch./Eng Fees)	\$ 15,527.00	<u>Subtotal</u> (Arch./Eng Fees)	\$ 13,094.00
<u>Additional Services/Direct Costs</u> TAS Review, Filing, and Inspection	Included Previous	<u>Additional Services/Direct Costs</u> TAS Review, Filing, and Inspection	Included Previous
<u>Subtotal</u> (Additional Services Fees)	\$ 0.00	<u>Subtotal</u> (Additional Services Fees)	\$ 0.00
<u>GRAND TOTAL</u>	\$ 15,527.00	<u>GRAND TOTAL</u>	\$ 13,094.00

We look forward to working with you to complete the Restitution Center renovation and respectfully wish to thank Hidalgo County for the opportunity to be of service.

Sincerely,



Louis H. Jones Jr., P.E.
President

cc: Richard D. Seitz, P.E.

DEC TASK CODE	DESCRIPTION OF WORK TASK	BASIS OF MANHOURLY ESTIMATE		MANHOURS PER TASK BY CLASSIFICATION							TOTAL MH'S PER TASK	TOTAL FEE PER TASK	
				PRINCIPAL (VIII)	CHIEF ARCHITECT	PROJECT MANAGER	ARCHITECT (VII)	CADD OPER (I) (II)	SECTY	CONST MANANGER			CONST REP
				QNTY	UNIT	\$369.99	\$286.78	\$224.87	\$183.18	\$88.37			\$79.62
PRELIMINARY DESIGN													
4200	PROJECT MEETINGS AND COORDINATION												
	INITIAL PROJECT MEETINGS AND COORDINATION						2					2	
	SUBTOTAL			0	0	0	2	0	0	0	0	2	
		\$0.00	\$0.00	\$0.00	\$366.36	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$366.36	
4210	DATA GATHERING / DESIGN CRITERIA											\$0.00	
	COLLECT AND REVIEW DATA/ SITE AND BUILDING CONDITIONS										0	#VALUE!	
	VISIT SITE WITH CLIENT REPRESENTATIVES										0	#VALUE!	
	MEET WITH CITY REPRESENTATIVES										0	#VALUE!	
	SUBTOTAL			0	0	0	0	0	0	0	0	#VALUE!	
		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			
4220	PRELIMINARY DESIGN												
	DETERMINE PRELIM DESIGN										0	#VALUE!	
	SUBCONSULTANT COORDINATION						3				3	#VALUE!	
	PRELIM QUANTITY TAKEOFF AND OPINION OF COST					1			1		3	\$487.67	
	SUBTOTAL			0	0	1	4	0	1	0	6	#VALUE!	
		\$0.00	\$0.00	\$369.99	\$732.72	\$0.00	\$79.62	\$0.00	\$0.00	\$0.00			
	TOTAL HOURS - PRELIM DESIGN			0	0	1	6	0	1	0	8		
	TOTAL COST - PRELIM DESIGN			\$0.00	\$0.00	\$224.87	\$1,099.08	\$0.00	\$79.62	\$0.00		\$1,403.57	
	TOTAL COST - PRELIMINARY DESIGN											\$1,403.57	
	% OF TOTAL HOURS PER CLASSIFICATION			0.00%	0.00%	12.50%	75.00%	0.00%	12.50%	0.00%	100.00%		
FINAL DESIGN													
5020	90% PLANS												
	BASE PLAN						2	12			14	\$1,426.80	
	FLOOR PLAN						2	12			14	\$1,426.80	
	REFLECTED CEILING PLAN						2	16			18	\$1,780.28	
	ENLARGED PLANS AND DETAILS						2	16			18	\$1,780.28	
	DOOR SCHEDULE, NOTES AND SECTIONS						2	16			18	\$1,780.28	
	SPECIFICATIONS						12		4		16	#VALUE!	
	QA/QC				2						2	\$573.56	
	SUBCONSULTANT COORDINATION						4		2		6	\$891.96	
	SUBTOTAL			0	2	0	26	72	6	0	106	#VALUE!	
		\$0.00	\$739.98	\$0.00	\$4,762.88	\$6,362.64	\$477.72	\$0.00	\$0.00	\$0.00			
5030	FINAL PLANS												
	FINAL PLAN SHEETS						1	6			7	\$713.40	
	SPECIFICATIONS						4		1		5	\$812.34	
	QA/QC				1						2	\$469.96	
	SUBCONSULTANT COORDINATION					2			4		6	\$768.22	
	SUBTOTAL			0	1	2	6	6	5	0	20	\$2,763.92	
		\$0.00	\$369.99	\$739.98	\$1,099.08	\$530.22	\$398.10	\$0.00	\$0.00	\$0.00			
	TOTAL HOURS - FINAL DESIGN			0	3	2	32	78	11	0	126		
	TOTAL COST - FINAL DESIGN			\$0.00	\$860.34	\$449.74	\$5,861.76	\$6,892.86	\$875.82	\$0.00		\$14,940.52	
	TOTAL COST - FINAL DESIGN											\$14,940.52	
	% OF TOTAL HOURS PER CLASSIFICATION			0.00%	2.38%	1.59%	25.40%	61.90%	8.73%	0.00%	100.00%		
CONSTRUCTION PHASE													
5050	CONSTRUCTION PHASE												
	NOTICE TO PROCEED						2		1		3	\$445.98	
	PRECONSTRUCTION CONFERENCE						3		1		4	#VALUE!	
	SHOP DRAWING REVIEW						12		4		16	\$2,516.64	
	SITE VISITS						12		4		16	\$2,516.64	
	INTERPRETATIONS AND CLARIFICATIONS						2				2	\$366.36	
	MONTHLY CONTRACTOR'S ESTIMATE						4		2		6	\$891.96	
	CHANGE ORDERS										0	\$0.00	
	SUBTOTAL			0	0	0	35	0	12	0	47	#VALUE!	
		\$0.00	\$0.00	\$0.00	\$6,411.30	\$0.00	\$955.44	\$0.00	\$0.00	\$0.00			
5060	CLOSEOUT PHASE												
	FINAL INSPECTION						3		1		4	\$629.16	
	CONTRACTOR'S FINAL PAY ESTIMATE						2		1		3	\$445.98	
	CERTIFICATE OF COMPLETION						2		1		3	\$445.98	
	SUBTOTAL			0	0	0	7	0	3	0	10	\$1,521.12	
		\$0.00	\$0.00	\$0.00	\$1,282.26	\$0.00	\$238.86	\$0.00	\$0.00	\$0.00			
	TOTAL HOURS - CONSTRUCTION PHASE			0	0	0	42	0	15	0	57		
	TOTAL COST - CONSTRUCTION PHASE			\$0.00	\$0.00	\$0.00	\$7,693.56	\$0.00	\$1,194.30	\$0.00		\$8,887.86	
	TOTAL COST - CONSTRUCTION PHASE											\$8,887.86	
	% OF TOTAL HOURS PER CLASSIFICATION			0.00%	0.00%	0.00%	73.68%	0.00%	26.32%	0.00%	100.00%		
	TOTAL HOURS - PRELIM ENG / FINAL DESIGN			0	3	3	80	78	27	0	191		
	TOTAL COST - PRELIM ENG / FINAL DESIGN			\$0.00	\$860.34	\$674.61	\$14,654.40	\$6,892.86	\$2,149.74	\$0.00		\$25,231.95	
	% OF TOTAL HOURS PER CLASSIFICATION			0.00%	1.57%	1.57%	41.88%	40.84%	14.14%	0.00%	100.00%		

DIRECT EXPENSES	NO.	UNIT	QUANTITY/UNIT	AMOUNT
PLOTTING - 11 X 17 PAPER PLOTS		SETS	PLOTS/SET	\$ -
PLOTTING - 22 X 34 PAPER PLOTS		SETS	PLOTS/SET	\$ -
PLOTTING - COLOR PLOTS		SETS	PLOTS/SET	\$ -
MYLAR PLOTS - 11 X 17		SETS	PLOTS/SET	\$ -
REPRODUCTION - 8.5 X 11 PAPER COPIES		SETS	COPIES/SET	\$ -
REPRODUCTION - 11 X 17 PAPER COPIES		SETS	COPIES/SET	\$ -
OVERNIGHT CARRIER COST		PKGS	EACH	\$ -
AUTO EXPENSE (Mileage)		TRIPS	MI /TRIP	\$ -
TOTAL DIRECT EXPENSES				\$ -

* Travel costs include airfare, hotel, car rental and per diem.

PRELIMINARY DESIGN	\$1,403.57
FINAL DESIGN	\$14,940.52
CONSTRUCTION PHASE SVS	\$8,887.86
OTHER DIRECT EXPENSES	\$ -
SUBTOTAL	\$25,231.95
SUBCONSULTANTS	
STRUCTURAL ENGINEERING	\$ 500.00
MECHANICAL, ELECTRICAL, AND PLUMBING ENGINEERING	\$ 7,000.00
SUBTOTAL	\$ 7,500.00
GRAND TOTAL	\$ 32,731.95