

17. Exhibits

17.1. ADOT&PF Training Program Request (Form 25A-310)



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES

DOT&PF TRAINING PROGRAM REQUEST
Federal-Aid Contracts

Project Name and Number

Section 645, entitled "Training Program" in the Special Provisions, specifies the number of minorities and/or women to be trained and the number of hours of training to be provided under the terms of this contract. Contractors desiring to use DOT&PF approved training programs (instead of those approved by USDOL/BAT) shall complete items 1 through 5; use additional sheets, if necessary, and reference appropriately. Training shall be in the skilled construction trades, where possible. One form shall be completed for each job classification selected. Contractors are encouraged to contact the DOT&PF Civil Rights Office* for assistance with developing approvable training programs prior to bid opening; training programs must be approved prior to award of the contract. Training programs which are less than 500 hours will not be approved.

1. **Job Classification:** _____
2. **Minimum qualifications** for trainee(s) shall be as follows: (minimum starting age, prerequisite education and/or experience):

3. **Training Schedule.** This schedule must contain not less than 500 hours of training. Allocation of time to be spent in each unit of training (3A, 3B, 3C, and 3D) shall be specific and consistent with industry practice.

A. ORIENTATION AND OBSERVATION (introductory unit to include construction basics, traffic flow, basic skills, crafts involved on project, etc.)

(1) Safety Procedures (detail routine activities, safety meetings, etc.): _____ HOURS

(2) Observation of Basic Skills (list specific skills): _____ HOURS

(3) Manipulation of Tools or Equipment (list tools, equipment, and activities): _____ HOURS

SUBTOTAL A: _____ HOURS

* DOT&PF Civil Rights Office: (907) 269-0851 or toll free: 1-800-770-6236

B. CARE AND MAINTENANCE OR SPECIAL PREPARATIONS (list of basic skills and activities which prepare the trainee(s) for maintenance and care of tools/equipment required in this job classification)

(1) Safety (required; specify hazards and checks): _____ HOURS

(2) Maintenance schedule and care of tools/equipment (list responsibilities of trainee): _____ HOURS

(3) Basic skills involved: _____ HOURS

SUBTOTAL B: _____ HOURS

C. APPLIED TECHNIQUES AND/OR METHODS (include manipulation of tools/equipment, patterns or processes involved, coordination with other equipment and/or crafts, etc.)

(1) Safety (required; specific activities, meetings, quality control, etc): _____ HOURS

(2) Identify equipment/tools involved in each process: _____ HOURS

(3) Particular methods or patterns involved: _____ HOURS

SUBTOTAL C: _____ HOURS

D. ACTUAL APPLICATION OR OPERATION (specify the activities and the general order in which they will be taught/practiced where the trainee applies the knowledge learned in Items 3A, 3B, and 3C)

(1) Safety (required; list specific and routine activities): _____ HOURS

(2) Identify general workday routine and operational activities: _____ HOURS

(3) Special activities and/or coordination efforts: _____ HOURS

SUBTOTAL D: _____ HOURS

E. **RELATED OFF-SITE INSTRUCTION.** (Optional) In order to receive credit for off-site instruction, the trainee must be concurrently employed on the project and the Contractor must either provide the instruction, pay for the instruction, or pay the trainee's wages while attending the off-site instruction.

Describe offsite instruction in detail:

SUBTOTAL E: _____ HOURS

Name and Address of Provider

4. **Total Hours.** Total of training hours provided in Items 3A-E: **TOTAL: _____ HOURS**

5. **Wages.** Trainees shall be paid prevailing Davis-Bacon fringes, plus the following during their training: (see Section 645 wage requirements)

1st half: \$ _____ = _____ % of journey scale

3rd quarter: \$ _____ = _____ % of journey scale

4th quarter: \$ _____ = _____ % of journey scale

6. **Evaluation.** Evaluation or grading of each trainee's performance on the job will be documented using the following procedures:

A. Each trainee will be reviewed upon completion of each unit (3A, 3B, 3C, 3D) of training; the review shall be in writing and indicate the number of hours of training received; the trainee shall participate in the review, sign it, and receive a copy.

B. The evaluation need only indicate pass/fail status. If fail status is indicated, the Contractor will provide written documentation as part of the review which documents the grounds for failure.

This training program has been developed for, and approval is hereby requested for use on, the above referenced project.

Signature of Authorized Company Representative _____ Title _____

Company Name _____ Company Address (Street or PO Box, City, State, Zip) _____

()

Date _____ Phone Number _____

Approved []	Disapproved []
Remarks: _____	Training Program No. Assigned _____

DOT&PF Statewide Training Representative _____	Date _____

17.3. Alaska Products Preference Worksheet Instructions

INSTRUCTIONS FOR ALASKA PRODUCTS PREFERENCE WORKSHEET

Special Notice: All procurements, except those funded from Federal sources, shall contain Contract provisions for the preference of Alaska products. The products listed by the Bidder on this worksheet have been selected for the referenced project from the "Alaska Products Preference List" which was in force 30 days prior to the advertisement date of this contract. Bidders may obtain a copy of the appropriate listing "Alaska Preference List" by contacting their local DCED office or writing: Dept. of Commerce & Economic Development, Alaska Products Preference Listing, P.O. Box 110800, Juneau, Alaska 99811-0800.

BIDDERS INSTRUCTIONS:

A. General. The contracting Agency may request documentation to support entries made on this form. False presentations may be subject to AS 36.30.687. All Bidder's entries must conform to the requirements covering bid preparations in general. Discrepancies in price extensions shall be resolved by multiplying the declared total value times the preference percentage and adjusting any resulting computation(s) accordingly.

B. Form Completion - BASIC BIDS.

- (1) Enter project number and name, the words "Basic Bid" and the CONTRACTOR's name in the heading of each page as provided.
- (2) The Bidder shall compare those candidate products appearing on the preference listing (see Special Notice comments above) against the requirements of the technical specifications appearing in the contract documents. If the Bidder determines that a candidate product can suitably meet the contract requirements, then that product may be included in the worksheet as follows.
- (3) For each suitable product submitted under the "Basic Bid" enter:
 - the product name, generic description and its corresponding technical specification section number under the heading "PRODUCT",
 - the company name of the Alaska producer under the heading "MANUFACTURER", and
 - the product class (I, II, or III) and preference percentage (3.5, 5, or 7% respectively) under the "CLASS,%" heading.
- (4) For each product appearing on the list and to be utilized by the CONTRACTOR enter: under the heading "TOTAL DECLARED VALUE" the manufacturer's quoted price of the product. (caution: this value is to be the manufacturer's quoted price at the place of origin and shall not include costs for freight, handling or miscellaneous charges of incorporating the product into the Work), and the resulting preference - i.e. the preference percentage times the total declared value amount - under the heading "REDUCTION AMOUNT".
- (5) Continue for all "suitable" basic bid products. If the listing exceeds one page enter the words "Page # ___SUB" in front of the word "TOTAL" and on the first entry line of the following pages enter "SUBTOTAL OF REDUCTION AMOUNT FROM PREVIOUS PAGE".
- (6) On the final page of the listing enter "BASIC BID PREFERENCE GRAND" immediately before the word "TOTAL".
- (7) Total the entries in the "REDUCTION AMOUNT" column for each page by commencing at the first entry for that page. If a continuation page exists, ensure that the subtotal from the previous page is computed into the running total. Number pages as appropriate.
- (8) Compute a Grand Total for the Basic Bid Preference. Enter this amount on the final page of the worksheet. (Note: When solicitations require written bids, this amount should also be entered on line "C" of the Basic Bid Schedule.) Submit worksheet(s) with the Bid Schedule.

C. Form Completion - ALTERNATE BIDS.

- (1) Enter project number and name, the words "ALTERNATE BID # ___", and CONTRACTOR's name in the heading of each page as provided.
- (2) On the first entry line enter "ADDITIONAL ALASKA PRODUCTS FOR ALTERNATE BID # ___", and repeat procedures 2 through 5 under part B these Bidder's instructions except that references to "Basic Bid" shall be replaced with the words "Alternate Bid # ___".
- (3) Following the listing of all additional Alaska products enter the words "ADDITIONAL PRODUCTS PREFERENCE FOR ALTERNATE BID # ___ - SUBTOTAL" and enter a subtotal amount for all additional products as listed. Subtotal amount to be determined by adding all additional product entries in the "REDUCTION AMOUNT" column.
- (4) Skip three lines and enter "TESTEROLLOWING:NONAPPLICABLEALASKAPRODUCTS:"
- (5) Beginning on the next line, enter the product name and manufacturer of each Alaska Product appearing on the "Basic Bid" listing which would be deleted or reduced from the Project should the "Alternate Bid" be selected. Details of entry need only be sufficient to clearly reference the subject product. (i.e. "Prehung doors by Alaska Door Co.", in lieu of "Prehung Solid Core Wood Door, model "Super Door", Section 08210, by Alaska Door Co., Anchorage.") Products being reduced shall specify the amount of the reduction. Should no products require deletion enter "None". When a product is listed as a "NON-APPLICABLE ALASKA PRODUCT" for this alternate bid and if under the basic bid the Bidder received a preference on his basic bid as a result of that product, then the applicable entries under the headings "TOTAL DECLARED VALUE" and "REDUCTION AMOUNT" (for each product and from the basic bid listing) shall also be entered into the corresponding headings of this form. Where only a portion of the products has been deleted, the entry (which will differ from those on the basic bid listing) may be "pro-rated" or as otherwise substantiated.
- (6) Following the listing of all non-applicable Alaska products enter the words "NON-APPLICABLE PRODUCTS PREFERENCE FROM BASIC BID _ SUBTOTAL" and enter a subtotal amount for all non-applicable products as listed. Subtotal amount to be determined by adding all non-applicable entries in the "REDUCTION AMOUNT" column.
- (7) At the bottom of the final page enter the words "ALTERNATE BID # ___ PREFERENCE GRAND" immediately before the word "TOTAL".
- (8) Compute a Grand Total for the Alternate Bid Preference (for Alternate # ___) by subtracting the non-applicable product preference subtotal from the additional product preference subtotal. Enter on the final page. (Note: When solicitations require written bids this amount should also be entered on line "C" of the Alternate Bid Schedule.) Submit separate worksheet(s) with each Alternate Bid.

17.4. **Apprentice/Trainee Employment Report (25A-312)**



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES
APPRENTICE/TRAINEE EMPLOYMENT REPORT

The contractor/approved subcontractor must submit this report to the Engineer for approval each construction season on or before the date that each apprentice or trainee is hired or rehired. Section 645 Training is intended for minorities and women. If a contractor wishes to train a non-minority male for credit under Item 645, the contractor must submit documentation of good faith efforts (specified in 645-2.01) to the Engineer. There will be no payment for training hours prior to the approval of this completed report and verification of applicable good faith efforts.

Project No. (Federal/State)		Project Name	
Contractor		Employee Name	Apprentice ¹ <input type="checkbox"/> Trainee ² <input type="checkbox"/>
Employee Social Security No.	Date of Birth	Employee Start Date (this project)	
Employee's Mailing Address			
Job Classification		Wage Scale ³ _____ Percentage of Journey Scale _____%	
Employee Status	New Hire <input type="checkbox"/>	Re-hire <input type="checkbox"/>	Upgrade <input type="checkbox"/> Transfer <input type="checkbox"/>
Gender: Female <input type="checkbox"/> Male <input type="checkbox"/>	Ethnicity: Alaska Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/>	American Indian <input type="checkbox"/> Caucasian <input type="checkbox"/>	African American <input type="checkbox"/> Hispanic <input type="checkbox"/>
Has the contractor provided training to this individual before, either on this project or on some other project? Yes <input type="checkbox"/> No <input type="checkbox"/>			
If yes, is the training to be given this individual a continuation of training on this project from last season? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Signature of Authorized Company Representative		Date	
Point of Contact		Phone	
Address			
For the Engineer: Did the apprentice/trainee start training within two (2) weeks of the start date indicated on Form 25A311 Yes <input type="checkbox"/> No <input type="checkbox"/> If no, a change order may be required (check with the Regional Compliance Officer).			
Signature of Engineer		Date Approved for Credit	
¹ An apprentice is a person enrolled in a USDOL/BAT training program (union or non-union). ² A trainee is a person enrolled in an ADOT&PF approved training program. ³ A copy of a union dispatch list must accompany this form for each union apprentice hire.			

Distribution after approval by Engineer to:

Project Files
Regional Contract Compliance Office
Civil Rights Office, P. O. Box 196900, Anchorage, Alaska 99519-6900
Contractor

25A-312
(REV. 1/2003)

17.6. Assignee's Release (Form 25D-118)

25D-118
(5/83)

STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION
AND PUBLIC FACILITIES

ASSIGNEE'S RELEASE

RE: Project No(s) _____

Project Name _____

Pursuant to the terms of the written contract dated _____, 19____,
for the construction of _____
and in consideration of the total final sum of _____
Project Number(s)

Dollars (\$ _____) which has been or is to be paid under said contract by the STATE OF ALASKA
(hereinafter called the STATE) to the Contractor or his assignees, the _____
Assignee's Name and Address

- (1) a corporation organized and existing under the laws of the State of _____;
- (2) a partnership consisting of _____;
- (3) an individual trading as _____;

(hereinafter called the Assignee), upon receipt of that part of the said sum due under his assignment does remise, release and discharge the STATE, its officers, agents and employees, of and from all liabilities, obligations, claims and demands whatsoever under or arising from the said contract, whether known or unknown and whether or not ascertainable at the time of the execution of this instrument, except claims asserted in accordance with the provisions of the above-named Contract.

The Assignee agrees, in connection with claims which are not released as set forth above, that final payment under the said contract does not modify the requirements and limitations imposed by the Contract, including without limitation those provisions relating to notification to the Contracting Officer and relating to the prosecution of claims.

IN WITNESS WHEREOF, this release has been executed this _____ day of _____, 19____.

(Assignee) _____
WITNESS _____
BY _____
TITLE _____

(NOTE: In the case of a corporation, witnesses are not required, but certificate below must be complete.)

CERTIFICATE

I, _____, certify that I am the _____
(official title) of the corporation named as Assignee in the foregoing release; that _____
who signed said release on behalf of the Assignee was then _____ (official title)
of said corporation; that said release was duly signed for and in behalf of said corporation by authority of its governing body and is within the scope of its corporate powers.

Name: _____ (Signature)

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year written above.

My Commission Expires: _____
Notary Public

List of supplies and materials that the U.S. Government has determined are not produced in the United States in sufficient and reasonably available quantities and of sufficient quality. (Jan 1991)

Acetylene, black
 Agar, bulk
 Anise
 Antimony, as metal or oxide
 Asbestos, amosite, chrysolite, and Crocidolite
 Bananas
 Bauxite
 Beef, corned, canned
 Beef extract
 Bephenium Hydroxynapthoate
 Bismuth
 Books, trade, text, technical, or scientific; newspapers; pamphlets; magazines; periodicals; printed briefs and films; not printed in the United States and for which domestic editions are not available.
 Brazil nuts, unroasted
 Cadmium, ores and flue dust
 Calcium cyanamide
 Capers
 Cashew nuts
 Castor beans and castor oil
 Chalk, English
 Chestnuts
 Chicle
 Chrome ore or chromite
 Cinchona bark
 Cobalt, in cathodes, rondelles, or other primary ore and metal forms.
 Cocoa beans
 Coconut and coconut meat, unsweetened, in shredded, desiccated or similarly prepared form.
 Coffee, raw or green bean
 Colchicine alkaloid, raw
 Copra
 Cork, wood or bark and waste
 Cover glass, microscope slide
 Cryolite, natural
 Dammar gum
 Diamonds, industrial, stones and abrasives
 Emetine, bulk
 Ergot, crude
 Erthrityl tetranitrate
 Fair linen, altar
 Fibers of the following types: abaca, abace, agave, coir, flax, jute, jute burlaps, palmyra and sisal.
 Goat and kidskins
 Graphite, natural, crystalline, crucible grade
 Handsewing needles
 Hemp yarn
 Hogbristles for brushes
 Hyoscine, bulk
 Ipecac, root
 Iodine, crude
 Kaurigum
 Lac
 Leather, sheepskin, hair type
 Lavender oil

 Manganese
 Menthol, natural bulk

Mica
 Microprocessor chips (brought onto a construction site as separate units for incorporation into building systems during construction or repair and alteration of real property.)
 Nickel, primary, in ingots, pigs, shots, cathodes, or similar forms; nickel oxide and nickel salts.
 Nitroguanidine (also known as picrite)
 Nux vomica, crude
 Oiticica oil
 Olive oil Olives (green), pitted or unpitted, or stuffed, in bulk.
 Opium, crude
 Oranges, mandarin, canned
 Petroleum, crude oil, unfinished oils, and finished products (see definitions at the end)
 Pine needle oil
 Platinum and related group metals, refined as sponge, powder, ingots, or cast bars.
 Pyrethrum flowers
 Quartz crystals
 Quebrancho
 Quinidine
 Quinine
 Rabbit fur felt
 Radium salts, source and special nuclear materials
 Rosettes
 Rubber, crude and latex
 Rutile
 Santonin, crude
 Secretin
 Shellac
 Silk, raw and unmanufactured
 Spare and replacement parts for equipment of foreign manufacture, and for which domestic parts are not available.
 Spices and herbs, in bulk
 Sugars, raw
 Swords and scabbards
 Talc, block, steatite
 Tantalum
 Tapioca flour and cassava
 Tartar, crude; tartaric acid and cream of tartar in bulk.
 Tea in bulk
 Thread, metallic (gold)
 Thyme oil
 Tin in bars, blocks, and pigs
 Triprolidine hydrochloride
 Tungsten
 Vanilla beans
 Venom, cobra
 Wax, canauba
 Woods; logs, veneer, and lumber of the following species: Alaskan yellow cedar, angelique, balsa, ekki greenhart, lignum vitae, mahogany, and teak.
 Yarn, 50 Denier rayon

**List of Supplies/Materials that the U.S. Government Has Determined Are Not Produced In the United States In Sufficient and Reasonably Available Quantities And of Sufficient Quality (Jan 1991)
(CONTINUED)**

Petroleum terms are used as follows:

"Crude oil" means crude petroleum, as it is produced at the wellhead, and liquids (under atmospheric conditions) that have been recovered from mixtures of hydrocarbons that existed in a vaporous phase in a reservoir and that are not natural gas products.

"Finished products" means any one or more of the following petroleum oils, or a mixture or combination of these oils, to be used without further processing except blending by mechanical means:

- (A) "Asphalt" - a solid or semi-solid cementitious material that (1) gradually liquefies when heated, (2) has bitumens as its predominating constituents, and (3) is obtained in refining crude oil.
- (B) "Fuel oil" - a liquid or liquefiable petroleum product burned for lighting or for the generation of heat or power and derived directly or indirectly from crude oil, such as kerosene, range oil, distillate fuel oils, gas oil, diesel fuel, topped crude oil, or residues.
- (C) "Gasoline" - a refined petroleum distillate that, by its consumption, is suitable for use as a carburant in internal combustion engines.
- (D) "Jet fuel" - a refined petroleum distillate used to fuel jet propulsion engines.
- (E) "Liquefied gases" - hydrocarbon gases recovered from natural gas or produced from petroleum refining and kept under pressure to maintain a liquid state at ambient temperatures.
- (F) "Lubricating oil" - a refined petroleum distillate or specially treated petroleum residue used to lessen friction between surfaces.
- (G) "Naphtha" - a refined petroleum distillate falling within a distillation range overlapping the higher gasoline and the lower kerosenes.
- (H) "Natural gas products" - liquids (under atmospheric conditions) including natural gasoline, that -
 - (1) are recovered by a process of absorption, adsorption, compression, refrigeration, cycling, or a combination of these processes, from mixtures of hydrocarbons that existed in a vaporous phase in a reservoir, and
 - (2) when recovered and without processing in a refinery, definitions of products contained in subdivision (B), (C), and (G) above.
- (I) "Residual fuel oil" - a topped crude oil or viscous residuum that, as obtained in refining or after blending with other fuel oil, meets or is the equivalent of MILSPEC Mil-F-859 for Navy Special Fuel Oil and any more viscous fuel oil, such as No. 5 or Bunker C.

"Unfinished oils" means one or more of the petroleum oils listed under "Finished products" above, or a mixture or combination of these oils, that are to be further processed other than by blending by mechanical means.

17.9. Certification of Final Estimate (Form 25D-116)



**STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION
AND PUBLIC FACILITIES**

CERTIFICATION OF FINAL ESTIMATE

Project No(s): _____ Total Amount of Project: _____
Project Name: _____

DEPARTMENT CERTIFICATION

The undersigned certifies that (s)he was in charge of the construction engineering for the State of Alaska for this project and that the foregoing final estimate was prepared under her/his direction and supervision, that to the best of her/his knowledge and belief the work set forth in said estimate has been performed in accordance with the plans and specifications and that the quantities and amounts set forth are correct.

_____, Project Engineer Date _____

The undersigned certifies that (s)he has reviewed the foregoing final estimate and that payment for the quantities shown therein conforms with the contract and is true and correct to the best of her/his knowledge and belief.

_____, Review Engineer Date _____

The undersigned certifies that the construction engineering for this project was under the supervision of authorized representatives of her/his office, that the foregoing final estimate has been prepared and reviewed by such authorized representatives, that (s)he has reviewed the work and the estimate, that the work has been performed in substantial conformance with the specifications and that the quantities and amounts shown in the estimate are true and correct to the best of her/his knowledge and belief.

_____, Construction Engineer Date _____

CONTRACTOR CERTIFICATION

The undersigned certifies that (s)he was the contractor on the above named project; that the work and materials for which payment is being included in this final estimate have been performed or furnished; that payment is just and due, and has not been made in full; and that her/his signature hereon authorizes final payment therefor.

The undersigned further certifies that all commitments or obligations made to property owners and others covering materials, royalties, access rights, waste areas, and other such rights of any nature, have been fully paid and satisfied; that all Federal, State and Local taxes incurred by the contractor, subcontractor, or other person or persons, in the performance of this contract have been fully paid and discharged; and that the contractor has not extended any loan, gratuity, or gift of money in any form whatsoever to any employee of the Department, nor has (s)he rented or purchased any equipment or materials from any such employee.

Contractor: _____

By: _____, Authorized Agent Date _____

25D-116
(R 1/98)

17.10. Change Order (Form 25D-068)



**STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION
AND PUBLIC FACILITIES
CENTRAL REGION**

CHANGE ORDER

Project No.: _____ Change Order No. _____

Project Name: _____

Contractor: _____ Address: _____ _____ _____	<p align="center">Change Order Summary:</p> Calendar Days (+ / -): _____ or New Completion Date: _____ Amount of this Change Order: _____
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Recommended By: _____ Date: _____
 Title: _____

Approved By: _____ Date: _____
 Title: _____ Seal of an Alaskan Professional Engineer if required.

Acknowledged by indicates receipt of the change order to perform the described work, but not the mutual agreement of the basis of payment and/or time allowance. If the matter cannot be resolved by agreement within 7 days from the date of your signature, you shall, within the next 14 days, submit an Intent to Claim in writing to the Engineer, pursuant to Section 105-1.17 of the specifications.

Acknowledged By: _____ Date: _____
 Contractor's Representative

This change order constitutes agreement to terms, conditions and prices stated below.

Accepted By: _____ Date: _____
 Contractor's Representative

Permission for previously approved subcontractor(s) to perform all or portions of the work described herein is as checked: Yes No N/A

The following change(s) in the above Contract are hereby made in accordance with the terms of the Contract and under the terms and conditions stated below. Price adjustments resulting from inaccurate cost and pricing data are subject to the provisions of AS 36.30.400(c). This document shall become an amendment to the Contract and all provisions of the Contract will be applicable.

DESCRIPTION OF CHANGE (Use Continuation Sheet 25D-065 as Required)

17.11. CUF Monitoring Report (Form 25A-298)



**STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES
COMMERCIALLY USEFUL FUNCTION (CUF) MONITORING REPORT**

Project Name: [REDACTED]
 Project No.: [REDACTED]
 DBE Company Name: [REDACTED]
 Date Contract/Subcontract approved: [REDACTED] (check project records for this date)
 First date DBE was on-site: [REDACTED]
 Name/Title of DBE on-site representative: [REDACTED]
 On-site representative reports to: [REDACTED]

On-site representative's description of work to be performed:
 [REDACTED]

According to on-site representative, DBE is performing as a:
 Prime Contractor Subcontractor Joint Venture Broker

Is the on-site representative on file with DBE office as a key employee normally employed with DBE to perform field supervision? Yes No
 If you have not checked yet, do so immediately through your regional contract compliance officer.

Does the Prime issue two-party checks to this DBE? Yes No
 If so, are they issued routinely only occasionally

Does the DBE employ any individual that has worked for the Prime in the last year? Yes No
 If yes, does this person have any supervisory authority? Yes No

Who prepares the DBE's certified payroll (name and location)?
 [REDACTED]

If not a subcontract situation, is there a DBE purchase order or service agreement involved? Yes No

If yes, is a copy in the project file? Yes No If no, get one.

Does the DBE rent or lease any equipment on this project? Yes No
 If yes, fill out a DBE Equipment Lease/Rental Report on page 2 of this form and notify your regional contract compliance officer.

Title: [REDACTED]

Date: [REDACTED]

DBE EQUIPMENT LEASE/RENTAL REPORT
(Be specific)

Project No. [REDACTED]


DBE: [REDACTED]

Project Name: [REDACTED]

Does the DBE rent or lease equipment for this project? If so, list the equipment

Equipment	Rent	Lease	From Whom
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]

17.12. Contact Report (Form 25A-321A)



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES

CONTACT REPORT
Federal-Aid Contracts

Project Name and Number

Specific Work or Materials (by pay item): _____

DBE Firm Contacted:

Name	Address	() _____ Phone Number
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A. INITIAL CONTACT: (See important contact information on instruction sheet)

Method:

1. Date _____ [] Phone [] Mail [] FAX [] Other

2. Person Contacted _____

Name	Title
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3. DBE's Response: Date: _____ Method: [] Phone [] Mail [] FAX [] Other

[] Submitted an acceptable sub-bid. (If sub-bid accepted, skip to Section D)

[] Not interested: Indicate Reason(s) _____

[] Needs more information: Date Prime provided requested information _____

[] Will provide quote by: Date _____

[] Received unacceptable sub-bid (complete Section C)

B. FOLLOW-UP CONTACT

Method:

1. Date _____ [] Phone [] Mail [] FAX [] Other

2. Person Contacted _____

Name	Title
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3. DBE's Response: Date: _____ Method: [] Phone [] Mail [] FAX [] Other

[] Submitted an acceptable sub-bid. (If sub-bid accepted, skip to Section D)

[] Received unacceptable sub-bid (complete Section C)

[] Other result: _____

C. EXPLANATION OF FAILURE TO ACHIEVE AN ACCEPTABLE SUB-BID:

1. Were the following required efforts made?

a. [] Yes [] No Identified specific items of work, products, materials, etc. when asking for quote(s).

b. [] Yes [] No Offered assistance in acquiring necessary bonding & insurance.

c. [] Yes [] No Provided all appropriate information concerning the specific work items or materials.

2. Was the DBE's quote non-competitive (i.e., more than 10% higher than the accepted quote)? [] Yes [] No

3. Was the DBE unable to perform in some capacity? [] Yes [] No If "Yes", explain: _____

D. CERTIFICATION: I certify that the information provided above is accurate and that efforts to solicit sub-bids were made in good faith.

Signature of Company Representative	Title	Date
Name of DOT&PF Reviewer	Title	Date

Form 25A-321A (1/02)

Page 1 of 2

INSTRUCTIONS

Project Name and Number: Enter project name and number as they appear on bid documents.

Work or Materials: Identify the specific work item or material that you requested this firm to furnish.

Firm Contacted: Enter name of firm as it appears in the current DOT&PF DBE directory.

Address: Enter address of firm contacted. **Phone Number:** Enter phone number of firm contacted.

A. INITIAL CONTACT (Must be made at least seven calendar days prior to bid opening.)

1. **Date and Method of Initial Contact:** Indicate the method and date that actual contact was made or the date correspondence was postmarked. Leaving a "please call me" message does not constitute a contact. Attach a copy of dated letter or fax.
2. **Name and Title of Person Contacted.** Enter name and title of company representative with whom you corresponded or discussed submitting a sub-bid.
3. **DBE's Response:** Indicate one or more of the responses listed. If a firm bid was received and accepted, skip to section D.

B. FOLLOW-UP CONTACT

If no response or an inconclusive response was received from the initial contact, a follow-up contact is required to determine for a certainty that the firm does not intend to submit a sub-bid or to conclude discussions with a sub-bid submittal.

1. **Date and Method of Follow-up Contact:** Indicate the method and date that actual contact was made or the date correspondence was postmarked. Leaving a "please call me" message does not constitute a contact. Attach a copy of dated letter or fax.
2. **Name and Title of Person Contacted.** Enter name and title of company representative with whom you corresponded or discussed submitting a sub-bid.
3. **DBE's Response:** Indicate one or more of the responses listed. If a firm bid was received and accepted, skip to section D.

C. EXPLANATION OF FAILURE TO ACHIEVE AN ACCEPTABLE SUB-BID

1. A NO response to items 1a., b., or c. will result in rejection of this contact. Be specific on results of discussions.
2. A YES answer to item 2. is grounds for rejecting a DBE sub-bid.
3. A YES answer to item 3. is grounds for rejecting a DBE sub-bid, only if the inability to perform is in an area of work specifically identified as a sub-item under the applicable bid item.

D. CERTIFICATION

This certification of accuracy and good faith by the Contractor will be verified by contact with the listed firm. Falsification of information on the DBE Contact Report is grounds for debarment action under AS 36.30.640(4).

17.13. Continuation Sheet (Form 25D-065)

**STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION
AND PUBLIC FACILITIES**

Sheet _____ of _____

CONTINUATION SHEET _____

Project No.: _____

25D-065
(01/98)

2. What percent of the total value of this contract do you intend to subcontract? _____

3. Do you propose to purchase any equipment for use on this project: Yes No

If yes, describe type, quantity, and approximate cost: _____

4. Do you propose to rent any equipment for this work? Yes No

If yes, describe type, quantity, and approximate cost: _____

5. Is your proposal based on firm offers for all materials for this project? Yes No

If no, please explain: _____

C. EXPERIENCE

1. Have you had previous construction contracts or subcontracts with the State of Alaska?

Yes No

Describe the most recent or current contract, its completion date, and scope of work:

2. List, as an attachment to this questionnaire, other construction projects you have completed; the dates of completion, scope of work, and total contract amount for each project completed in the past 12 months.

I hereby certify that the above statements are true and complete.

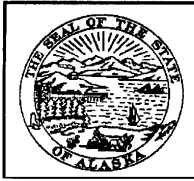
Name of Contractor

Signature

Date

Name and Title of Person Signing

17.15. Contractor's Release (Form 25D-117)



STATE OF ALASKA
 Department of:
Transportation and Public Facilities

Issue Date: _____
Project No.: _____
Contract No.: _____

Contractor's Release

Project Name: _____ _____ _____ Located at; _____ _____ _____	Contract Compensation Summary	
	Final Amount: _____ Less Liquidated Damages: _____ Total Final Sum: _____ Less previous payments OR Estimate(s), 1 through _____ Totaling: _____ Final Payment Due: _____	

Pursuant to the terms of the written contract dated _____, _____, for the construction of _____, Project Number(s) _____, and in consideration of the total final sum of _____ Dollars (_____) which has been or is to be paid under the said contract to (Contractor's Name)

located at _____ (hereinafter called the Contractor) or its assignees, if any, the Contractor, upon payment of the said sum by the STATE OF ALASKA, does remise, release and discharge the STATE OF ALASKA, its officers, agents and employees, of and from all liabilities, obligations, claims, and demands whatsoever under or arising from said contract, whether known or unknown and whether or not ascertainable at the time of the execution of this instrument except specified claims in stated amounts or in estimated amounts where the amounts are not susceptible of exact statement by the Contractor, as follows:

The Contractor agrees, in connection with the claims which are not released as set forth above, that (s)he will comply with all of the provisions of the said contract, including without limitation those provisions relating to notification of the Contracting Officer and relating to the prosecution of claims.

IN WITNESS WHEREOF, this release has been executed this _____ day of _____, _____.

_____ Witness	_____ Contractor:
_____ Witness	By: _____
	Title: _____

(NOTE: In the case of a corporation, witnesses are not required, but certificate on reverse side must be completed by a corporate officer other than the one who signs above.)

CERTIFICATE

I, _____, certify that I am the _____
Name Official Title
of the corporation named as Contractor in the foregoing release; that _____
Name
who signed said release on behalf of the Contractor was then _____
Official Title
of said corporation; that said release was duly signed for and in behalf of said corporation by authority of
its governing body and is within the scope of its corporate powers.

Signature

Print Name

IN WITNESS WHEREOF,
I have set my hand and affixed my official seal this ____ day of _____, _____.

My Commission Expires: _____
Notary Public

17.16. Daily Concrete Placement Report (Form 25D-207)

**DEPARTMENT OF TRANSPORTATION
AND PUBLIC FACILITIES**

ITEM NO _____

DAILY CONCRETE PLACEMENT REPORT

PROJECT NO. _____ PROJECT NAME _____ DATE PLACED _____
 TYPE STRUCTURE OR BRIDGE NO. _____ POUR NO. _____
 PART STRUCTURE _____ DISTRICT _____
 COMPLETED PAY VOLUME _____ WEATHER _____
 AIR TEMPERATURE _____ WATER TEMPERATURE _____
 POUR TIME: START: _____ FINISH: _____ COMPLETED FINISHING _____
 DESIGN LAB. NO. _____ CLASS _____ CONCRETE AT _____ SACKS PER CUBIC YARD _____
 AGGREGATE QUALITY LAB NO.(S) _____ MAXIMUM SIZE AGGREGATE _____ TYPE/BRAND CEMENT _____
 MIX RATIO _____ AGGREGATE SOURCE _____

FIELD DATA AND CONTROL FOR A 1 YARD BATCH

	1	2	3	4	5	6	
DESIGN CEMENT WEIGHT							
DESIGN GRAVEL WEIGHT							
GRAVEL WEIGHT ADJUSTED							
DESIGN SAND WEIGHT							
SAND WEIGHT ADJUSTED							
WATER WEIGHT ADJUSTED							
TOTAL BATCH WEIGHT							
AMOUNT AEA							
BRAND AEA							
% SAND							SPECS
% AIR ENTRAINED							
SLUMP							
UNIT WEIGHT (FT ³)							NA
YIELD							NA
CEMENT FACTOR							
WATER/CEMENT GAL/SK							
TEST CYLINDER NOISE							NA
TEMPERATURE CONCRETE							

CONCRETE WASTED _____ CU.YD. EXPLAIN _____
 CONCRETE REJECTED _____ CU.YD. EXPLAIN _____
 CEMENT REJECTED _____ SACKS EXPLAIN _____
 REMARKS: _____

SIGNATURE _____ PROJECT ENGINEER

25D-207

17.18. Daily Report for Time & Materials Work (Form 25D-195)



STATE OF ALASKA
 Department of:
Transportation and Public Facilities
**Daily Report – Labor, Equipment, and
 Materials for Time and Materials Work**

Change Order No.: _____
 Project No.: _____

 Contract No.: _____

Project Name: _____ Date of Work: _____
 Location and Description of Work: _____

LABOR				
Employee Name	Job Classification	Actual Work Performed	Hours	
			Regular	Overtime

EQUIPMENT			MATERIALS		
Description: Make, Model, Year Capacity/Size, Required Attachments	Hours			Description	Quantity
	Reg.	O.T.	Stdby		

NARRATIVE OF OPERATIONS:

Notes: 1. Invoices must accompany original report. 2. Indicate work done by subcontractors.
 The undersigned hereby agree that the above is a true and correct statement of labor, equipment, and materials used this date in executing the work described.

_____ Date _____ Date _____
 25D-195 Daily Report T & M Work; Page ____ of ____ Revised 4/97

17.20. DBE Utilization Report (Form 25A-325C)



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES

**DISADVANTAGED BUSINESS ENTERPRISE
UTILIZATION REPORT**
Federal-Aid Contracts

Project Name and Number

The undersigned hereby certifies on behalf of the bidder that:

- A. It is is not a DOT&PF certified DBE or DBE joint venture.
- B. It has has not met the DBE Goal for the project. If it has not met the goal, the required documentation of sufficient good faith efforts is is not attached hereto.
- C. Listed below are the **certified** DBEs to be used in meeting the DBE goal. Included are the firm name, telephone number, bid items or portions of work to be performed indicated by item number, type of DBE credit claimed [prime contractor (P), joint venture (JV), subcontractor (sub), regular dealer (rd), broker (b), or manufacturer (m)], and the creditable dollar amount to be counted toward the goal.

FIRM NAME	PHONE #	BID ITEM, WORK, OR PRODUCT ²	TYPE OF CREDIT ¹	CREDITABLE DOLLAR AMOUNT ¹
				\$
				\$
				\$
				\$
				\$
				\$

Total creditable DBE Utilization Amount \$ _____
 Basic Bid Amount \$ _____
 DBE Utilization as % of Basic Bid Amount _____ %
 Original DBE Project Goal _____ %

Signature of Authorized Company Representative _____ Title _____

Company Name _____ Company Address (Street or PO Box, City, State, Zip) _____

Date _____ () _____
 Phone Number _____

1. See DBE Specification (Section 120) for determining type and amount of credit claimed for contract award.
 2. Identify specific pay item, product, or component of work to be performed by DBE.

17.21. Delegation of Authority Letter

MEMORANDUM

State of Alaska

Department of Transportation & Public Facilities

TO: N.T. Merrill
Project Engineer
Northern Region

DATE: May 21, 1991

FILE NO:
TELEPHONE NO: 451-2268

FAX NUMBER:
TEXT TELEPHONE:

FROM: David L. McCaleb, P.E.
Chief Construction Engineer
Northern Region

SUBJECT: RS-0644(15)/65342
Farmers Loop
Reconstruction – Summit
Drive to Steese Expressway

**DELEGATION OF
AUTHORITY**

This is notification of your assignment as Project Engineer on the subject project. You are delegated the authority and given full responsibility for the administration of the contract, together with all construction engineering, in accordance with the Plans, Specifications and the Special Provisions. Please note that this authority is delegated through James R. Weed, Construction Group Chief.

/pjs

cc: Construction Group Chief
Project Control
Personnel File

17.22. Delegation of Authority to Assistant

MEMORANDUM

State of Alaska

Department of Transportation & Public Facilities

TO: Dawn Marie Evans
Engineer I
Northern Region

DATE: May 24, 1991

FILE NO:
TELEPHONE NO: 451-5325
FAX NUMBER:
TEXT TELEPHONE:

FROM: N.T. Merrill
Project Engineer
Northern Region

SUBJECT: RS-0644(15)/65342
Farmers Loop
Reconstruction – Summit
Drive to Steese Expressway

**DELEGATION OF
AUTHORITY**

This notification of your assignment as Assistant Project Engineer on the subject project. In my absence you are delegated the authority and given full responsibility for the administration of the contract, together with all construction engineering, in accordance with the Plans, Specifications and the Special Provisions.

\pjs

cc: Construction Group Chief
Project Control
Personnel File

17.23. Directive (Form 25D-069)



STATE OF ALASKA
 Department of:
Transportation and Public Facilities

Directive No.:	_____
Project No.:	_____
Contract No.:	_____

Directive

Project Name: _____ _____ Located at: _____ Contractor: _____ Address: _____ _____ _____	Scope of this Directive	
	<input type="checkbox"/>	Commencement of Work
	<input type="checkbox"/>	Suspension of Work
	<input type="checkbox"/>	Contract Non-Conformance
	<input type="checkbox"/>	Contract Clarification

Directive issued By: _____	Date: _____
Title:	
Receipt Acknowledged By: _____	Date: _____
Title:	

This Directive complements, and is used in accordance with the terms and provisions of the above referenced Contract, and shall not serve to authorize a change in Contractual responsibility. If the CONTRACTOR believes that any condition in this document may affect Contract Time, Price, or Requirement the CONTRACTOR shall immediately notify the DEPARTMENT of such condition. Contract Performance is required as follows:

DESCRIPTION (Use Continuation Sheet 25D-065 as Required)

25D-069

Directive # ____ Page ____ of ____

Revised 6/00


17.24. Earthwork & Mass Quantity Computation Sheets (Form 25D-40A)

Calculated by:		Date		STATE OF ALASKA DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES EARTHWORK AND MASS QUANTITY COMPUTATION SHEET <small>(Use reverse side for any remarks, referring to appropriate line number)</small>										Job	
Checked by:		Date												Sheet _____ of _____ Sheets	
STATION	END AREA	SUM	LGT.	CUBIC YARDS	+	%	CUT	-	%	END AREA	SUM	LGT.	CUBIC YARDS	ALGEBRAIC DIFFERENCE	ORDINATE
1.															
2.															
3.															
4.															
5.															
6.															
7.															
8.															
9.															
10.															
11.															
12.															
13.															
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15.															
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22.															
23.															
24.															
25.															
26.															
27.															
28.															
29.															
30.															
Computed				TOTALS						TOTALS					
Checked															

25D-40-A Rev. 12/78 (formerly DH-40-A)

MOORE BUSINESS FORMS, INC. L.A.

17.25. EEO-1 Certification (Form 25A-304)

	<p>STATE OF ALASKA DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES</p> <p>EEO-1 CERTIFICATION Federal-Aid Contracts</p>
<p>Project Name and Number</p>	
<p>This certification is required by the Equal Employment Opportunity Regulations of the Secretary of Labor [41 CFR 60-1.7 (b) (1)] and must be completed by the successful Bidder and each proposed Subcontractor participating in this contract.</p>	
<p>PLEASE CHECK APPROPRIATE BOXES</p>	
<p>The <input type="checkbox"/> Bidder <input type="checkbox"/> Proposed Subcontractor hereby CERTIFIES:</p>	
<p>PART A. Bidders and proposed Subcontractors with 50 or more year-round employees and a federal contract amounting to \$50,000 or more are required to submit one federal Standard Report Form 100 during each year that the two conditions exist (50 employees and a \$50,000 federal contract).</p>	
<p>The company named below (Part C) is exempt from the requirements of submitting the Standard Report Form 100 this year.</p>	
<p><input type="checkbox"/> NO (go to PART B) <input type="checkbox"/> YES (go to PART C)</p>	
<p>Instructions and blank Standard Report Form 100's may be obtained from a local U.S. Department of Labor office, or by writing to:</p>	
<p>The Joint Reporting Committee P.O. Box 779 Norfolk, Virginia 23501</p>	
<p>Telephone number: (757) 461-1213</p>	
<p>PART B. The company named below has submitted the Standard Report Form 100 this year.</p>	
<p><input type="checkbox"/> NO <input type="checkbox"/> YES</p>	
<p>Note: Bidders and proposed Subcontractors who have not filed the required Standard Report Form 100 and are not exempt from filing requirements will not be awarded this contract or subcontract until Form 100 has been filed for the current year ending June 30.</p>	
<p>PART C.</p>	
<p>Signature of Authorized Company Representative</p>	<p>Title</p>
<p>Company Name</p>	<p>Company Address (Street or PO Box, City, State, Zip)</p>
<p>Date</p>	<p>() Phone Number</p>
<p>Form 25A-304 (8/01) Page 1 of 1</p>	

17.26. Encumbrance Memo



**STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES**

ENCUMBRANCE MEMO

TO: FINANCE

DATE:

FROM:

RE: PROJECT NAME:

PROJECT/AGREEMENT NO.:

CONTRACTOR/CONSULTANT:

CHANGE ORDER/AMEND. NO.:

DATED:

Encumber the attached:

- | | | |
|---|--|--|
| <input type="checkbox"/> Contract | <input type="checkbox"/> Agreement | <input type="checkbox"/> Letter of Authority |
| <input type="checkbox"/> Change Order | <input type="checkbox"/> Amendment | <input type="checkbox"/> Final Payment |
| <input type="checkbox"/> Extra Work Order | <input type="checkbox"/> Quantity Adjustment | |

Comments:

ENCUMBRANCE TRANSACTIONS REQUIRED				
Amount	Collocode	Program	Ledger Code	Account
TOTAL (Must agree with amount of document attached.)				

Approved by: _____ Date: _____

IV. SWPPP Information

Has the SWPPP been prepared in advance of filing this NOI? Yes No

Location of SWPPP for viewing: Address in Section II Address in Section III Other

If Other:

SWPPP Street: _____

City: _____

State: _____ Zip Code: _____ - _____

SWPPP Contact Information (if different than that in Section II):

Name: _____

Phone: _____ - _____ - _____ Fax (optional): _____ - _____ - _____

E-mail (optional): _____

V. Discharge Information

Identify the name(s) of waterbodies to which you discharge. _____

Is this discharge consistent with the assumptions and requirements of applicable EPA approved or established TMDL(s)?

Yes No

VI. Endangered Species Information

Under which criterion of the permit have you satisfied your ESA eligibility obligations?

A B C D E F

• If you select criterion F, provide permit tracking number of operator under which you are certifying eligibility:

VII. Certification Information

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Print Name: _____

Print Title: _____

Signature: _____

Date: _____

17.28. EPA Notice of Intent (NOI) Instructions

Instructions for Completing EPA Form 3510-9

Notice of Intent (NOI) for Storm Water Discharges Associated with Construction Activity Under an NPDES General Permit

NPDES Form

This Form Replaces Form 3510-9 (8/98)

Form Approved OMB Nos. 2040-0188 and 2040-0211

Who Must File an NOI Form

Under the provisions of the Clean Water Act, as amended (33 U.S.C. 1251 et seq.; the Act), federal law prohibits storm water discharges from certain construction activities to waters of the U.S. unless that discharge is covered under a National Pollutant Discharge Elimination System (NPDES) Permit. Operator(s) of construction sites where one or more acres are disturbed, smaller sites that are part of a larger common plan of development or sale where there is a cumulative disturbance of at least one acre, or any other site specifically designated by the Director, must submit an NOI to obtain coverage under an NPDES general permit. Each person, firm, public organization, or any other entity that meets either of the following criteria must file this form: (1) they have operational control over construction plans and specifications, including the ability to make modifications to those plans and specifications; or (2) they have day-to-day operational control of those activities at the project necessary to ensure compliance with SWPPP requirements or other permit conditions. If you have questions about whether you need an NPDES storm water permit, or if you need information to determine whether EPA or your state agency is the permitting authority, refer to www.epa.gov/npdes/stormwater/cgp or telephone the Storm Water Notice Processing Center at (866) 352-7755.

Where to File NOI Form

See the applicable CGP for information on where to send your completed NOI form.

Completing the Form

Obtain and read a copy of the appropriate EPA Storm Water Construction General Permit for your area. To complete this form, type or print, using uppercase letters, in the appropriate areas only. Please place each character between the marks (abbreviate if necessary to stay within the number of characters allowed for each item). Use one space for breaks between words, but not for punctuation marks unless they are needed to clarify your response. If you have any questions on this form, refer to www.epa.gov/npdes/stormwater/cgp or telephone the Storm Water Notice Processing Center at (866) 352-7755. Please submit original document with signature in ink - do not send a photocopied signature.

Section I. Permit Number

Provide the number of the permit under which you are applying for coverage (see Appendix B of the general permit for the list of eligible permit numbers).

Section II. Operator Information

Provide the legal name of the person, firm, public organization, or any other entity that operates the project described in this

application. An operator of a project is a legal entity that controls at least a portion of site operations and is not necessarily the site manager. Provide the employer identification number (EIN from the Internal Revenue Service; IRS), also commonly referred to as your taxpayer ID. If the applicant does not have an EIN enter "NA" in the space provided. Also provide the operator's mailing address, telephone number, fax number (optional) and e-mail address (if you would like to be notified via e-mail of NOI approval when available). Correspondence for the NOI will be sent to this address.

Section III. Project/Site Information

Enter the official or legal name and complete street address, including city, state, zip code, and county or similar government subdivision of the project or site. If the project or site lacks a street address, indicate the general location of the site (e.g., Intersection of State Highways 61 and 34). Complete site information must be provided for permit coverage to be granted.

The applicant must also provide the latitude and longitude of the facility either in degrees, minutes, seconds; degrees, minutes, decimal; or decimal format. The latitude and longitude of your facility can be determined in several different ways, including through the use of global positioning system (GPS) receivers, U.S. Geological Survey (U.S.G.S.) topographic or quadrangle maps, and EPA's web-based siting tools, among others. Refer to www.epa.gov/npdes/stormwater/cgp for further guidance on the use of these methodologies. For consistency, EPA requests that measurements be taken from the approximate center of the construction site. Applicants must specify which method they used to determine latitude and longitude. If a U.S.G.S. topographic map is used, applicants are required to specify the scale of the map used.

Indicate whether the project is in Indian country, and if so, provide the name of the Reservation. If the project is in Indian Country Lands that are not part of a Reservation, indicate "not applicable" in the space provided.

Enter the estimated construction start and completion dates using four digits for the year (i.e., 05/27/1998). Enter the estimated area to be disturbed including but not limited to: grubbing, excavation, grading, and utilities and infrastructure installation. Indicate to the nearest quarter acre. Note: 1 acre = 43,560 sq. ft.

Section IV. SWPPP Information

Indicate whether or not the SWPPP was prepared in advance of filing the NOI form. Check the appropriate box for the location where the SWPPP may be viewed. Provide the name,

Instructions for Completing EPA Form 3510-9

**Notice of Intent (NOI) for Storm Water Discharges Associated with
Construction Activity Under an NPDES General Permit**

NPDES Form

This Form Replaces Form 3510-9 (8/98)

Form Approved OMB Nos. 2040-0188 and 2040-0211

fax number (optional), and e-mail address (optional) of the contact person if different than that listed in Section II of the NOI form.

Section V. Discharge Information

Enter the name(s) of receiving waterbodies to which the project's storm water will discharge. These should be the first bodies of water that the discharge will reach. (Note: If you discharge to more than one waterbody, please indicate all such waters in the space provided and attach a separate sheet if necessary.) For example, if the discharge leaves your site and travels through a roadside swale or a storm sewer and then enters a stream that flows to a river, the stream would be the receiving waterbody. Waters of the U.S. include lakes, streams, creeks, rivers, wetlands, impoundments, estuaries, bays, oceans, and other surface bodies of water within the confines of the U.S. and U.S. coastal waters. Waters of the U.S. do not include man-made structures created solely for the purpose of wastewater treatment. U.S. Geological Survey topographical maps may be used to make this determination. If the map does not provide a name, use a format such as "unnamed tributary to Cross Creek". If you discharge into a municipal separate storm sewer system (MS4), you must identify the waterbody into which that portion of the storm sewer discharges. That information should be readily available from the operator of the MS4.

Indicate whether your storm water discharges from construction activities will be consistent with the assumptions and requirements of applicable EPA approved or established TMDL(s). To answer this question, refer to www.epa.gov/npdes/stormwater/cgp for state- and regional-specific TMDL information related to the construction general permit. You may also have to contact your EPA regional office or state agency. If there are no applicable TMDLs or no related requirements, please check the "yes" box in the NOI form.

Section VI. Endangered Species Information

Indicate for which criterion (i.e., A, B, C, D, E, or F) of the permit the applicant is eligible with regard to protection of federally listed endangered and threatened species, and designated critical habitat. See Part 1.3.C.6 and Appendix C of the permit. If you select criterion F, provide the permit tracking number of the operator under which you are certifying eligibility. The permit tracking number is the number assigned to the operator by the Storm Water Notice Processing Center after EPA acceptance of a complete NOI.

Section VII. Certification Information

All applications, including NOIs, must be signed as follows:
For a corporation: By a responsible corporate officer. For the purpose of this Section, a responsible corporate officer means:

(i) a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation, or (ii) the manager of one or more manufacturing, production, or operating facilities, provided, the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long-term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.

For a partnership or sole proprietorship: By a general partner or the proprietor, respectively; or


For a municipality, state, federal, or other public agency: By either a principal executive officer or ranking elected official. For purposes of this Part, a principal executive officer of a federal agency includes (i) the chief executive officer of the agency, or (ii) a senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrator of EPA).

Include the name and title of the person signing the form and the date of signing. An unsigned or undated NOI form will not be considered eligible for permit coverage.

Paperwork Reduction Act Notice

Public reporting burden for this application is estimated to average 3.7 hours. This estimate includes time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding the burden estimate, any other aspect of the collection of information, or suggestions for improving this form, including any suggestions which may increase or reduce this burden to: Chief, Information Policy Branch 2136, U.S. Environmental Protection Agency, 1200 Pennsylvania Avenue, NW, Washington, D.C. 20460. Include the OMB control number on any correspondence. Do not send the completed form to this address.

17.29. **EPA Notice of Termination (NOT)**

This Form Replaces Form 3517-7 (8-98) Refer to the Following Page for Instructions		Form Approved OMB Nos. 2040-0086 and 2040-0211	
NPDES Form		United States Environmental Protection Agency Washington, DC 20460 Notice of Termination (NOT) of Coverage Under an NPDES General Permit for Storm Water Discharges Associated with Construction Activity	
Submission of this Notice of Termination constitutes notice that the party identified in Section II of this form is no longer authorized to discharge storm water associated with construction activity under the NPDES program from the site identified in Section III of this form. All necessary information must be included on this form. Refer to the instructions at the end of this form.			
I. Permit Information			
NPDES Storm Water General Permit Tracking Number: <input style="width: 100px;" type="text"/>			
Reason for Termination (Check only one):			
<input type="checkbox"/> Final stabilization has been achieved on all portions of the site for which you are responsible.			
<input type="checkbox"/> Another operator has assumed control, according to Appendix G, Section 11.C of the CGP, over all areas of the site that have not been finally stabilized.			
<input type="checkbox"/> Coverage under an alternative NPDES permit has been obtained.			
<input type="checkbox"/> For residential construction only, temporary stabilization has been completed and the residence has been transferred to the homeowner.			
II. Operator Information			
Name: <input style="width: 100%;" type="text"/>			
IRS Employer Identification Number (EIN): <input style="width: 20px;" type="text"/> - <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>			
Mailing Address:			
Street: <input style="width: 100%;" type="text"/>			
City: <input style="width: 40%;" type="text"/> State: <input style="width: 10%;" type="text"/> Zip Code: <input style="width: 15%;" type="text"/> - <input style="width: 10%;" type="text"/>			
Phone: <input style="width: 10%;" type="text"/> - <input style="width: 10%;" type="text"/> - <input style="width: 10%;" type="text"/> Fax (optional): <input style="width: 10%;" type="text"/> - <input style="width: 10%;" type="text"/> - <input style="width: 10%;" type="text"/>			
E-mail (optional): <input style="width: 100%;" type="text"/>			
III. Project/Site Information			
Project/Site Name: <input style="width: 100%;" type="text"/>			
Project Street/Location: <input style="width: 100%;" type="text"/>			
City: <input style="width: 40%;" type="text"/> State: <input style="width: 10%;" type="text"/> Zip Code: <input style="width: 15%;" type="text"/> - <input style="width: 10%;" type="text"/>			
County or similar government subdivision: <input style="width: 100%;" type="text"/>			
IV. Certification Information			
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.			
Print Name: _____			
Print Title: _____			
Signature: _____			
Date: _____			

EPA Form 3510-13 (Rev. 6/03)

17.30. EPA Notice of Termination (NOT) Instructions

Instructions for Completing EPA Form 3510-13 Notice of Termination (NOT) of Coverage Under an NPDES General Permit for Storm Water Discharges Associated with Construction Activity

NPDES Form This Form Replaces Form 3517-7 (8-98)

Form Approved OMB Nos. 2040-0086 and 2040-0211

Who May File an NOT Form

Permittees who are presently covered under the EPA-issued National Pollutant Discharge Elimination System (NPDES) General Permit for Storm Water Discharges Associated with Construction Activity may submit an NOT form when final stabilization has been achieved on all portions of the site for which you are responsible; another operator has assumed control in accordance with Appendix G, Section 11.C of the General Permit over all areas of the site that have not been finally stabilized; coverage under an alternative NPDES permit has been obtained; or for residential construction only, temporary stabilization has been completed and the residence has been transferred to the homeowner.

"Final stabilization" means that all soil disturbing activities at the site have been completed and that a uniform perennial vegetative cover with a density of at least 70% of the native background vegetative cover for the area has been established on all unpaved areas and areas not covered by permanent structures, or equivalent permanent stabilization measures (such as the use of riprap, gabions, or geotextiles) have been employed. See "final stabilization" definition in Appendix A of the Construction General Permit for further guidance where background native vegetation covers less than 100 percent of the ground, in arid or semi-arid areas, for individual lots in residential construction, and for construction projects on land used for agricultural purposes.

Completing the Form

Type or print, using uppercase letters, in the appropriate areas only. Please place each character between the marks. Abbreviate if necessary to stay within the number of characters allowed for each item. Use only one space for breaks between words, but not for punctuation marks unless they are needed to clarify your response. If you have any questions about this form, refer to www.epa.gov/npdes/stormwater/cgp or telephone the Storm Water Notice Processing Center at (866) 352-7755. Please submit original document with signature in ink - do not send a photocopied signature.

Section I. Permit Number

Enter the existing NPDES Storm Water General Permit Tracking Number assigned to the project by EPA's Storm Water Notice Processing Center. If you do not know the permit tracking number, refer to www.epa.gov/npdes/stormwater/cgp or contact the Storm Water Notice Processing Center at (866) 352-7755.

Indicate your reason for submitting this Notice of Termination by checking the appropriate box. Check only one:

Final stabilization has been achieved on all portions of the site for which you are responsible.

Another operator has assumed control according to Appendix G, Section 11.C over all areas of the site that have not been finally stabilized.

Coverage under an alternative NPDES permit has been obtained.

For residential construction only, if temporary stabilization has been completed and the residence has been transferred to the homeowner.

Section II. Operator Information

Provide the legal name of the person, firm, public organization, or any other entity that operates the project described in this application and is covered by the permit tracking number identified in Section I. The

operator of the project is the legal entity that controls the site operation, rather than the site manager. Provide the employer identification number (EIN from the Internal Revenue Service; IRS). If the applicant does not have an EIN enter "NA" in the space provided. Enter the complete mailing address and telephone number of the operator. *Optional:* enter the fax number and e-mail address of the operator.

Section III. Project/Site Information

Enter the official or legal name and complete street address, including city, state, zip code, and county or similar government subdivision of the project or site. If the project or site lacks a street address, indicate the general location of the site (e.g., Intersection of State Highways 61 and 34). Complete site information must be provided for termination of permit coverage to be valid.

Section IV. Certification Information

All applications, including NOIs, must be signed as follows:

For a corporation: By a responsible corporate officer. For the purpose of this Part, a responsible corporate officer means: (i) a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation, or (ii) the manager of one or more manufacturing, production, or operating facilities, provided, the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long-term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.

For a partnership or sole proprietorship: By a general partner or the proprietor, respectively; or

For a municipality, state, federal, or other public agency: By either a principal executive officer or ranking elected official. For purposes of this Part, a principal executive officer of a federal agency includes (i) the chief executive officer of the agency, or (ii) a senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrator of EPA).

Include the name and title of the person signing the form and the date of signing. An unsigned or undated NOT form will not be considered valid termination of permit coverage.

Paperwork Reduction Act Notice

Public reporting burden for this application is estimated to average 0.5 hours per notice, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding the burden estimate, any other aspect of the collection of information, or suggestions for improving this form including any suggestions which may increase or reduce this burden to: Chief, Information Policy Branch, 2136, U.S. Environmental Protection Agency, 1200 Pennsylvania Avenue, NW, Washington, DC 20460. Include the OMB number on any correspondence. Do not send the completed form to this address.

17.32. “Estimate.xls” Instructions

INSTRUCTIONS FOR USING “ESTIMATE.XLS”

1. Estimate.xls is an Excel spreadsheet for reporting the bi-monthly estimate. It consists of four sheets in an Excel workbook: “Original” which is the list of original bid items of your project; “New Items” which is the list of new items you add by Change Order, etc.; “Stockpile” which is the list of any stockpiled items you have and “Recap” which is the Recapitulation sheet.
 - a) There is room for about 70 bid items, including engineering items in “Original”. If your project has fewer than 70 original bid items, delete the unnecessary rows. If more than 70, you will have to insert rows and copy down the cells that contain zeros (there are formulas in some of these cells).
 - i) Note that the Engineering items are already in place at the end of the Original sheet. This allows automatic calculation of Engineering costs for the recap sheet. These items will be out of numeric order if you have electrical items or striping or any bid item with a number greater than 644. However, I checked with QA and there is no problem with this.
 - b) “New Items” and “Stockpile” sheets are essentially identical in form to “Original”. Delete unnecessary rows as appropriate.
 - c) “Recap” sheet calculates automatically.
 - d) Small projects usually can fit on 4 pages. Larger projects require more pages, depending on number of bid items, number of new items, etc.
2. If you have a large project, e.g., one that takes 6 or more pages, you will probably need a printer with 3 or more megs of memory. Small projects that fit on 4 pages will print out on printers with only 1 meg of memory..
3. Primarily for ease of setting up the spreadsheet, there are no page totals for Original bid items, New Items, and Stockpiled items. Amounts are totaled at the end of each of these sections.
4. When you retrieve Estimate, you will see grey shaded areas and blue shaded areas in the Original, New Items and Stockpile sheets. There are also grey shaded areas in the Recap sheet.
 - a) Customize Estimate for your project by filling in the grey shaded areas. Obviously, at the start of the project, you won't have any

New Items or Stockpiled items, so the grey shaded area on those sheets can't be filled out.

- b) At this time, you will need to format the "quantity" cells for each bid item using the appropriate decimal precision required by the Construction Manual. All "amount" cells are formatted for 2 decimal places.
5. Once you have customized your Estimate, save it in another directory.
 6. When you wish to generate a bi-monthly estimate, retrieve the customized Estimate.
 - a) Begin with the Original sheet. You will notice two buttons at the top left corner on Original. Select the Enter button. This activates a macro which copies the values from the Total columns to the Previous columns and clears out the current column (This Estimate).
 - b) **You must use the "Enter" button before entering data in all three sheets; Original, New Items, and Stockpile. Also, use the "Enter" button only once for each sheet for each time you generate an estimate.**
 - c) Next, enter the estimate number and "from and to" dates in the blue shaded cells. Go down to row 9 and begin entering only the quantities for the current estimate period in the blue shaded cells. *Hint:* you might want to freeze panes from the Windows menu selection. If you place the cursor in cell E9, the bid items, units and unit prices will always be visible.
 - d) Go through the same procedure, as appropriate, for the New Items and Stockpiled items sheets..
 7. Once you have entered all the current quantities, you are ready to print the report. All calculations are automatic and you shouldn't have to do anything else. For your peace of mind, you can click on the recap sheet to view the totals.
 8. Select the "Print" button located in the upper left corner of the Original sheet. This activates a macro that prints out all pages of the estimate using pagination in the form of "Page 1 of x", etc. The print macro will print out all four sheets regardless if there is anything in them or not. If you want to print out individual sections, you will have to do so manually, highlighting the print range for each sheet. By doing this, you will probably destroy the pagination continuity. If this becomes a problem, go to the

Page Setup selection and under the Header/Footer menu, select the type of pagination (or none) you desire.

9. In many respects, Excel treats each sheet as a separate file. That is, just because you do something to one sheet, doesn't mean it will translate to the other sheets.
10. After you print the Estimate, save the updated file. You can either save it as Estimate.xls, using the same file and continually update it throughout the life of the project, or you can save it, for example, as Est1.xls; Est2.xls, etc. and have a series of files, one for each estimate.

17.33. Explanation of Overruns, Underruns, and Change Documents

**Juneau-Glacier Hwy Overlay & Egan Drive Accel/Decel Lane Resurfacing
Project No. NH-0005(314), AKSAS No. 67819, 67827**

EXPLANATION OF OVERRUNS, UNDERRUNS AND CHANGE DOCUMENTS

Project No. 67819

Item 202(2) Pavement Removal Square Yard

Plan: 7600 \$30,400.00 **Final:** 133.5 \$534.00 **Underrun:** 98.2% -\$29,866.00

Scope of the project changed half way through completion so that the emphasis was placed on repairing failed areas on Egan Drive. When this change occurred, the contractor had just begun his work on the accel/decel lanes, so there wasn't much pavement removed (pavement was to be removed only on outside edge of shoulders).

Item 301(1) Aggregate Base Course Ton

Plan: 100 \$2500.00 **Final:** 0.00 \$0.00 **Underrun:** 100% -\$2,500

This item was to be used for replacement of D-1 under the pavement removal areas. The contractor did not need to replace the existing D-1

Item 401(1A) Asphalt Concrete Pavement, Type II Class A Ton

Plan: 4500 \$220,500.00 **Final:** 3324.26 \$162,888.74 **Underrun:** 26.1% -\$57,611.26

When the scope of the project changed, the contractor requested and received new unit prices for this item. Therefore we underran this original bid item.

Item 401(1B) Asphalt Concrete Pavement, Type III, Class A Ton

Plan: 625 \$30,625.00 **Final:** 0.0 \$0.00 **Underrun:** 100% -\$30,625.00

This item was for pre-leveling the overlay of Glacier Hwy. The pre-level was eliminated by grinding the asphalt.

Item 401(9) Pavement Patching Square Yard

Plan: 300 \$7,500.00 **Final:** 138.46 \$3,461.50 **Underrun:** 53.6% -\$4,038.50

Needed less patching than design had estimated.

Explanation of Overruns, Underruns and Change Documents

Item 402(1) CSS-1 Asphalt for Tack Coat Ton

Plan: 17.00 \$8,500.00 Final: 10.35 \$5,175.00 Underrun: 39.1% -\$3,325.00

There was less paving done under this contract after the scope of the project changed, hence less tack was needed.

Item 408(1) Pavement Cold Planing Square Yard

Plan: 19000 \$76,000.00 Final: 10068.45 \$40,273.80 Underrun: 47% -\$35,726.20

The change in the scope of the project meant fewer accel/decel lanes were cold planed and repaved.

Item 408(2) Pavement Grinding Square Yard

Plan: 250 \$2,500.00 Final: 0.00 \$0.00 Underrun: 100% -\$2,500.00

This item was for grinding existing driveways and approaches for matching with the overlays. The contractor did not have to utilize this item because the overlays matched in well without additional grinding.

Item 639(2) Commercial Driveway Each

Plan: 15 \$7,500.00 Final: 2 \$1,000.00 Underrun: 86.7% -\$6,500.00

Only two driveways needed reconstructing.

Item 643(4) Construction Signs Per Day

Plan: 1,000 \$4,000 Final: 613 \$2,452.00 Underrun: 38.7% -\$1,548.00

Design staff could only estimate a quantity for this item. The contractor ended up using fewer signs than estimated.

Item 643(5) Type II Barricades Each/Day

Plan: 250 \$500.00 Final: 0 \$0.00 Underrun: 100% -\$500.00

Contractor did not use Type II barricades.

Item 643(6) Type III Barricades Each/Day

Plan: 500 \$1,000.00 Final: 12 \$36.00 Underrun: 97.6% -\$964.00

Contractor used fewer Type III barricades than Design estimated.

Explanation of Overruns, Underruns and Change Documents

Item 643(7) Cones Each/Day

Plan: 4000 \$2,000.00 **Final:** 2648 \$1,324.00 **Underrun:** 33.8% -\$676.00

Contractor used fewer cones than Design estimated.

Item 643(9) Drum Each/Day

Plan: 500 \$1,000.00 **Final:** 126 \$252.00 **Underrun:** 74.8% -\$748.00

Contractor used fewer drums than Design estimated.

Item 643(10) Sequential Arrow Board Day

Plan: 60 \$6,000.00 **Final:** 13 \$1,300.00 **Underrun:** 78.3% -\$4,700.00

Contractor did not need an arrow board as often as Design had estimated.

Item 643(15) Flagging Hour

Plan: 500 \$20,000.00 **Final:** 247 \$9,880.00 **Underrun:** 50.6% -\$10,120.00

Contractor need less flagging than Design estimated.

Item 670(8) Recessed Pavement Markers Each

Plan: 200 \$7,000.00 **Final:** 96 \$3,360.00 **Underrun:** 52% -\$3,640.00

The majority of the Recessed Markers were installed under the Egan Drive Paving project.

Project #67827

Item 203(6) Borrow, Type A Ton

Plan: 450 \$4,500.00 **Final:** 294 \$2,940.00 **Underrun:** 34.7% -\$1,560.00

Less Borrow was needed than was estimated by Design.

Item 309(1) Recycled Pavement Square Yard

Plan: 708 \$3,540.00 **Final:** 1901.5 \$9,507.50 **Overrun:** 168.6% +\$5,967.50

Design quantity in error.

Explanation of Overruns, Underruns and Change Documents

Item 643(4) Construction Sign Each/Day

Plan: 150 \$600.00 **Final:** 42 \$168.00 **Underrun:** 72% -\$432.00

Contractor used fewer signs than Design estimated.

Item 643(5) Type II Barricades Each/Day

Plan: 150 \$300.00 **Final:** 0 \$0.00 **Underrun:** 100% -\$300.00

Contractor did not use Type II barricades.

Item 643(6) Type III Barricades Each/Day

Plan: 200 \$600.00 **Final:** 14 \$42.00 **Underrun:** 93% -\$558.00

Contractor used fewer Type III barricades than Design estimated.

Item 643(7) Traffic Cone Each/Day

Plan: 1000 \$500.00 **Final:** 49 \$24.50 **Underrun:** 95.1% -\$475.50

Contractor used fewer cones than Design estimated.

Item 543(15) Flagging Hour

Plan: 75 \$3,000.00 **Final:** 0 \$0.00 **Underrun:** 100% -\$3,000.00

Contractor did not need flagging for this project.

Explanation of OVERRUNS, UNDERRUNS and CHANGE DOCUMENTS

Juneau-Glacier Hwy Overlay & Egan Drive Accel/Decel Lane Resurfacing

Project No. NH-0005(314), AKSAS No. 67819, 67827

EXPLANATION OF CHANGE DOCUMENTS

Document Date Description/Purpose

Directives

A	8/11/99	This directive was issued to initiate the installation of new driveway culverts.
B	5/10/00	This directive was issued to initiate the repair of failed asphalt areas on Egan Dr.
C	5/16/00	This directive was issued to direct the contractor to furnish "Double Traffic Fines" signs.

Change Orders	Date	Description/Purpose	Time Days	Change Amount
1	11/15/99	This change order established new items 603(21) 18" Corrugated Polyethylene Pipe, and 408(1A) Pavement Cold Planing. It also deleted Asphalt Concrete Pavement Type III.	0	+\$7,717.63
2	3/28/01	This change order established new items 401(c) Asphalt Concrete Pavement Type II, 401(2A) Pavement Removal, 401(9A) Pavement Patching, and 643(2A) Traffic Maintenance.	286	+\$63,294.65
Total of all changes:			286	\$71,012.28

17.34. FAA Construction Project Closeout Checklist

FAA Construction Project Closeout Checklist			
All Projects	Construction	Design	Project Control
a) Final Pay Request SF-271, except for letter of credit grants (original + one copy)			X
b) Final Pay Summary Worksheet	X		X
c) Summary of DBE Utilization	X		
d) Grant Special Conditions, list and discuss compliance with each.	X		
e) Amendment letter, if applicable			X
f) Final Construction Project Report	X	X	X
g) Sponsor's Certification for Construction Project Final Acceptance	X		
Final Construction Project Report			
a) Project history	X		
b) Administration			X
c) Construction Management	X		
1) Consultant Services Summary	X		
2) Force Account Services Summary	X		
d) Construction	X		
1) Summary of change orders	X		
2) Summary of final quantities	X		
3) Final Inspection Report	X		
4) Contractor's Release	X		
5) As-constructed plans	X	X	
6) Summary of test results	X		
7) Date when force account construction approved by FAA	X		
8) Summary of force account construction	X		
e) Revised Exhibit "A" Property Map, if applicable	X	X	
f) Date of FAA approval of revised ALP	X	X	
g) Date of Airport Master Record update	X	X	
h) Date of Sign Plan update, if applicable (for Part 139 airports)	X	X	
<p>Note: Check (✓) to indicate item included in Project Closeout Report, N/A if not applicable, include date if previously submitted, or include date if requested. The above breakout shows responsibility for each item of work. If, more than one column is Xed, than that item is jointly held by that section.</p>			

17.35. FAA Notice of Landing Area Proposal (Form 7480-1)

Form approved OMB No. 2120-0036

U.S. Department of Transportation Federal Aviation Administration		NOTICE OF LANDING AREA PROPOSAL					
Name of Proponent, Individual, or Organization			Address of Proponent, Individual, or Organization <i>(No., Street, City, State, Zip Code)</i>				
<input type="checkbox"/> Check if the property owner's name and address are different than above, and list property owner's name and address on the reverse.							
<input type="checkbox"/> Establishment or Activation <input type="checkbox"/> Alteration		<input type="checkbox"/> Deactivation or Abandonment <input type="checkbox"/> Change of Status		} OF		<input type="checkbox"/> Airport <input type="checkbox"/> Heliport	
				<input type="checkbox"/> Ultraflight Flightpark <input type="checkbox"/> Seaplane Base		<input type="checkbox"/> Vertiport <input type="checkbox"/> Other (Specify)	
A. Location of Landing Area							
1. Associated City/State		2. County/State <i>(Physical Location of Airport)</i>			3. Distance and Direction From Associated City or Town		
4. Name of Landing Area		5. Latitude ° ' "	6. Longitude ° ' "		7. Elevation	Miles Direction	
B. Purpose							
Type Use <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Private Use of Public Land/Waters		If Change of Status or Alteration, Describe Change			<input type="checkbox"/> Establishment or change to traffic pattern (Describe on reverse)	Construction Dates To Begin/Began Est. Completion	
C. Other Landing Areas							
		<i>Ref. A5 above</i>					
		Direction From Landing Area	Distance From Landing Area	D. Landing Area Data		Existing (if any)	
				1. Airport, Seaplane Base, or Flightpark		Rwy #1	Rwy #2
				Magnetic Bearing of Runway (s) or Sealane		Rwy #3	Rwy
				Length of Runway (s) or Sealane (s) in Feet			
				Width of Runway (s) or Sealane (s) in Feet			
				Type of Runway Surface <i>(Concrete, Asphalt, Turf, Etc.)</i>			
				2. Heliport			
				Dimensions of Final Approach and Take off Area (FATO) in Feet			
				Dimensions of Touchdown and Lift-Off Area (TLOF) in Feet			
				Magnetic Direction of Ingress/Egress			
				Routes			
				Type of Surface <i>(Turf, concrete, rooftop, etc.)</i>			
E. Obstructions							
Type		Height Above Landing Area	Direction From Landing Area	Distance From Landing Area	3. All Landing Areas		Description of Lighting <i>(if any)</i>
							Direction of Prevailing Wind
F. Operational Data							
1. Estimated or Actual Number Based Aircraft							
Airport, Flightpark, Seaplane base		Present <i>(If est. indicate by letter "E")</i>	Anticipated 5 Years Hence	Heliport		Present <i>(If est. indicate by letter "E")</i>	Anticipated 5 Years Hence
Multi-engine				Under 3500 lbs. MGW			
Single-engine				Over 3500 lbs. MGW			
Glider							
G. Other Considerations							
Identification		Direction From Landing Area	Distance From Landing Area	2. Average Number Monthly Landings		Present <i>(If est. indicate by letter "E")</i>	Anticipated 5 Years Hence
						Present <i>(If est. indicate by letter "E")</i>	Anticipated 5 Years Hence
				Jet		Helicopter	
				Turboprop		Ultraflight	
				Prop		Glider	
3. Are IFR Procedures For The Airport Anticipated <input type="checkbox"/> No <input type="checkbox"/> Yes Within _____ Years Type Navaid:							
H. Application for Airport Licensing							
<input type="checkbox"/> Has Been Made		<input type="checkbox"/> Not Required		<input type="checkbox"/> County			
<input type="checkbox"/> Will Be Made		<input type="checkbox"/> State		<input type="checkbox"/> Municipal Authority			
I. CERTIFICATION: I hereby certify that all of the above statements made by me are true and complete to the best of my knowledge.							
Name, title <i>(and address if different than above)</i> of person filing this notice – type or print			Signature <i>(in ink)</i>				
			Date of Signature		Telephone No. (Precede with area code)		
FAA Form 7480-1 (1-93) Supersedes Previous Edition							

17.36. FAA Project Closeout Requirements

1. Summary of Project Closeout Requirements

The following is a summary of the general requirements for construction or equipment AIP project closeout packages, a checklist can be found in Section 17.34:

- a) Final payment request SF-271, except for letter of credit grants.
- b) Final payment summary worksheet for all projects. Summarize administration, planning, engineering, force account, construction, force account construction, land, and equipment costs, as applicable (see Appendix 5-C of the FAA Alaskan Region Airports Division's Airport Sponsors Guide)
- c) Summary of DBE utilization including names of DBE firms used, contract amounts, and percent attained.
- d) List of all Grant Special Conditions and actions taken to comply with each special condition.
- e) Amendment letter justifying a request for grant increase if allowable costs exceed the grant amount. (planning grants may not be amended).
- f) Final project report for planning, construction, land, or equipment (see items 2., 3., 4., and 5. below).
- g) Required Sponsor Certifications, unless previously submitted (see Appendix 2-A of the Alaska Airport Sponsor Guide).
- h) Although not submitted as part of the Project Closeout Report an annual audit is required under the Single Audit Act. Accounts and records must be kept in accordance with an accounting system that will facilitate an effective audit in accordance with the Single Audit Act. See Grant Assurances 13 and 25 for record keeping and audit requirements.

2. Final Construction Report

The following documentation, in addition to the applicable items in Section 1 above, must be submitted to closeout an AIP grant including construction.

- a) Project History, including:
 - 1) Work items constructed.
 - 2) Work bid, but not constructed with reasons for deletion.
 - 3) Table showing as a minimum the following dates: contract award, notice to proceed, scheduled and actual completion for each contract, final inspection and final acceptance. Approved time extensions should also be listed and explained if applicable.
 - 4) A brief narrative on construction activities, problem areas, unusual conditions, unique features, and actions taken to address any environmental mitigation measures.
 - 5) List of prime contractor and all subcontractors.
 - 6) Explanation of any labor problems if applicable.
 - 7) Explanation of any liquidated damages assessed.
 - 8) Copy of bid tabulation including engineering estimate, unless previously submitted.
- b) Administrative. See AC 150/5100-10B for definition of administrative items.
- c) Engineering Design and Construction Management
 - 1) Contract date, amount, and FAA approval date for consultant engineering design and construction management contracts and any amendments.

- 2) Approved amount and FAA approval date for the use of force account design and construction management force account services.
- d) Construction
- 1) Summary of all change orders and supplemental agreements. Include costs, change order dates, and FAA approval dates (if applicable).
 - 2) Summary of final quantities. Include design quantities and justification if final quantities significantly vary from design.
 - 3) Final inspection report. Include a list of any punch list items and schedule of corrective actions giving method, responsible party, and date of correction.
 - 4) Copy of contractor's statement that no further payment is due and that all subcontractors and material suppliers have been paid in full.
 - 5) One copy of the as-constructed plans on CD-ROM.
 - 6) Summary of test results. The sponsor is not required to include all testing or inspection results in this report, only those shown in the summary tables for acceptance and control or required specifically by the FAA. All testing and inspection is required to be completed and the files maintained for future reference by FAA or audit.(See section 5.4. and section 16.11.for Materials Inspection Summary and Project Materials Certification and exception report)
 - 7) FAA approval date for the use of construction force account construction (if applicable for equipment and operators).
 - 8) Summary of the force account construction work performed, if applicable. Include the type of work, and hours and costs for labor and equipment.
- e) One signed copy of the revised Exhibit "A" Property Map, if applicable.
- f) FAA approval date for revised ALP resulting from the as constructed project.
- g) Date that the Airport Master Record (FAA form 5010) and sketch were updated.
- h) FAA approval date for the updated Sign Plan (for Part 139 certificated airports) resulting from the as-constructed project, if applicable.

3. Final Equipment Closeout Report

The following documentation, in addition to the applicable items in paragraph I. above, must be submitted to closeout an AIP grant including equipment:

- a) Summary of amounts and FAA approval date for all contracts and change orders.
- b) Table showing as a minimum the following dates: contract award, notice to proceed, scheduled and actual delivery, final inspection and final acceptance.
- c) Summary of the acceptance test results.
- d) Inventory of Non-Expendable Personal Property (see Appendix 5-F of the FAA Alaskan Region Airports Division's Airport Sponsors Guide).

17.37. FAA Sponsor Certification for Construction Project Final Acceptance

Attachment 1: Sponsor Certification for Construction Project Final Acceptance

Sponsor's Name _____

Airport _____

Project Number _____

Project Description _____

Section 47105(d) of the Federal Aviation Reauthorization Act of 1996, as amended (herein called the Act), authorizes the Secretary to require certification from sponsors that they will comply with statutory and administrative requirements. The following list of certified items includes major requirements for this aspect of project implementation. However, the list is not comprehensive, nor does it relieve sponsors from fully complying with all applicable statutory and administrative standards. Every certified item must be marked. Each certified item with a "no" response must be fully explained in an attachment to this certification. If the item is not applicable to this project, mark the item "N/A". General requirements for final acceptance and close-out of Federally funded construction projects are in 49 CFR 18.50. The sponsor shall determine that project costs are accurate and proper in accordance with specific requirements of the Grant Agreement and contract documents.

1. The personnel engaged in project administration, engineering supervision, and construction inspection and testing (were/will be) determined to be qualified and competent to perform the work. Yes
 No
 N/A
2. Daily construction records (were/will be) kept by the resident engineer/construction inspector. These records document work in progress, quality and quantity of materials delivered, test locations and results, instructions provided the contractor, weather, equipment use, labor requirements, safety problems, and changes required. Yes
 No
 N/A
3. Weekly payroll records and statements of compliance (were/will be) submitted by the prime contractor and reviewed by the sponsor for Federal Labor And Civil Rights Requirements (Advisory Circulars 150/5100-6 and 150/5100-15). Yes
 No
 N/A
4. Complaints regarding the mandated Federal provisions set forth in the contract documents (have been/will be) submitted to FAA. Yes
 No
 N/A
5. All tests specified in the plans and specifications (were/will be) performed and the test results documented. A summary of test results (has been/will be) available to FAA. Yes
 No
 N/A
6. For any test results outside allowable tolerances, appropriate corrective actions (were/will be) taken. Yes
 No
 N/A

7. Payments to the contractor (were/will be) made in compliance with contract provisions and verified by the sponsor's internal audit of contract records kept by the resident engineer. If appropriate, pay reduction factors required by the specifications (were/will be) applied in computing final payments and a summary of pay reductions (has been/will be) available to FAA. Yes
 No
 N/A
8. The project (was/will be) accomplished without significant deviations, changes, or modifications from the approved plans and specifications, except where approval (was/will be) obtained from FAA. Yes
 No
 N/A
9. A final project inspection (was/will be) conducted with representatives of the sponsor and the contractor. Project files (contain/will contain) documentation of the final inspection. Yes
 No
 N/A
10. Work in the Grant Agreement (was/will be) physically completed, and corrective actions required as a result of the final inspection (were/will be) completed to the satisfaction of the sponsor. Yes
 No
 N/A
11. The as-built plans and an equipment inventory, if applicable, (have been/will be) submitted to FAA. If requested, a revised airport layout plan (was/will be) made available to FAA. Yes
 No
 N/A
12. Applicable close-out financial reports (have been/will be) submitted to FAA. Yes
 No
 N/A

I certify that, for the project identified herein, the responses to the foregoing items are correct as marked, and that the attachments, if any, are correct and complete.

Signed: _____ Dated: _____
Sponsor's Authorized Representative

Typed Name and Title of Sponsor's Representative

17.38. FAA Sponsor Certification for Equipment/Construction Contracts

Attachment 2: Sponsor Certification for Equipment/ Construction Contracts

Sponsor's Name

Airport

Project Number

Project Description

Section 47105 (d) of the Federal Aviation Reauthorization Act of 1996, as amended (herein called the Act), authorizes the Secretary to require certification from sponsors that they will comply with statutory and administrative requirements. The following list of certified items includes major requirements for this aspect of project implementation. However, the list is not comprehensive, nor does it relieve sponsors from fully complying with all applicable statutory and administrative standards. Every certified item must be marked. Each certified item with a "no" response must be fully explained in an attachment to this certification. If the item is not applicable to this project, mark the item "N/A". Standards for advertising and awarding equipment and construction contracts within Federal grant programs are described in 49 CFR 18.36. Sponsors may use their procurement procedures reflecting State and local laws or regulations provided procurements conform to specific standards in 49 CFR 18 and Advisory Circulars 150/5100-6, 150/5100-15, and 150/5100-16.

1. A code or standard of conduct (is/will be) in effect governing the performance of the sponsor's officers, employees, or agents in soliciting and awarding procurement contracts. Yes
 No
 N/A
2. Qualified personnel (are/will be) engaged to perform contract administration, engineering supervision, and construction inspection and testing. Yes
 No
 N/A
3. The procurement (was/will be) publicly advertised using the competitive sealed bid method of procurement. Yes
 No
 N/A
4. The request for bids clearly and accurately (describes/will describe) all administrative and other requirements of the equipment and/or services to be provided. Yes
 No
 N/A
5. Concurrence (was/will be) obtained from FAA prior to contract award under any of the following circumstances:
 - Only one qualified person/firm submits a responsive bid Yes
 - The contract is to be awarded to other than the lowest responsive and responsible bidder No
 - Life cycle costing is a factor in selecting the lowest responsive bidder, and N/A
 - Proposed contract prices are more than 10% over the sponsor's cost estimate.

6. All contracts exceeding \$100,000 (require/will require) a bid guarantee of 5%, a performance bond of 100%, and a payment bond of 100%. Yes
 No
 N/A
- Explanation: Performance and payment bonds, at 50% each, are required for all DOT&PF construction contracts exceeding \$100,000. This bonding meets or exceeds the requirements of AS 36.30.010 and was approved for use by FAA letter dated March 6, 1991, as adequately protecting the government's interest.*
7. Contracts exceeding \$100,000 (contain/will contain) provisions or conditions specifying administrative, contractual, and legal remedies, including contract termination, for those instances in which contractors violate or breach contract terms. They also (contain/will contain) provisions requiring compliance with applicable standards and requirements issued under Section 306 of the Clean Air Act (42 USC 1857 (h)), Section 508 of the Clean Water Act (33 USC 1368), Executive Order 11738, and environmental protection regulations (40 CFR Part 15). Yes
 No
 N/A
8. All construction contracts involving labor (contain/will contain) provisions insuring that in the employment of labor, honorably discharged Vietnam era veterans and disabled veterans will be given preference. Yes
 No
 N/A
9. All construction contracts exceeding \$2,000 (contain/will contain) provisions requiring compliance with the Davis-Bacon Act, and bid solicitations (contain/will contain) a copy of the current Federal wage rate determination. Provisions requiring compliance with Sections 103 and 107 of the Contract Work Hours and Safety Standards Act (40 USC 327-330) and the Copeland "Anti-Kick Back" Act (are/will be) included. Yes
 No
 N/A
10. All construction contracts exceeding \$10,000 (contain/will contain) appropriate clauses from 41 CFR Part 60 for compliance with Equal Employment Opportunity Executive Order 11246. Yes
 No
 N/A
11. All contracts and subcontracts (contain/will contain) clauses required from Title VI Civil Rights Assurances and 49 CFR 26 for Disadvantaged Business Enterprises. Yes
 No
 N/A
12. Appropriate checks (have been/will be) made to assure that contracts or subcontracts are not awarded to those individuals or firms suspended, debarred, or voluntarily excluded from doing business with any DOT element and appearing on the DOT Unified List. Yes
 No
 N/A

I certify that, for the project identified herein, the responses to the foregoing items are correct as marked, and that the attachments, if any, are correct and complete.

Signed: _____ Dated: _____
 Sponsor's Authorized Representative

 Typed Name and Title of Sponsor's Representative


17.39. FHWA Form 1446C-AKDO, Final Inspection

U.S. DEPARTMENT OF TRANSPORTATION FEDERAL HIGHWAY ADMINISTRATION		
FINAL INSPECTION OF FEDERAL-AID PROJECT CONSTRUCTED UNDER 23 U.S.C. 117		
1. PROJECT NAME AND NUMBER	2. BOROUGH/CITY	3. STATE Alaska
4. DESCRIPTION OF IMPROVEMENT AS PROGRAMMED		
5. CONTRACTOR'S NAME	6. CONTRACT AMOUNT	
7. NOTICE OF COMPLETION: The above listed project has been completed. A final inspection by ADOT&PF has found this project to be in reasonable conformance with the PS&E.		
SIGNATURE (SHA OFFICIAL) _____ TITLE _____		
8. ADOT&PF INSPECTION MADE BY	9. DATE OF INSPECTION	
10. IN COMPANY WITH		
cc: ADOT&PF Regional Construction Engineer ADOT&PF Headquarters Director, Statewide Design & Engineering Services Division ADOT&PF Headquarters Director, Administrative Services Division FHWA Engineer		

Form FHWA-1446C-AKDO (5/99ge)

17.40. FHWA Form 47 (English)

OMB NO. 2125-0033

		STATEMENT OF MATERIALS AND LABOR USED BY CONTRACTORS ON HIGHWAY CONSTRUCTION INVOLVING FEDERAL FUNDS					
PART A <i>To be completed by FHWA or State Highway Personnel (See instructions on reverse)</i>							
STATE*		COUNTY		FEDERAL PROJECT NO.*		URBAN () RURAL ()*	
ITEM	DESCRIPTION	ROADWAY		BRIDGE (Over 20 ft)		DATE STARTED*	
CONSTRUCTION TYPE CODES							
1	LENGTH OF PROJECT	MILES				DATE COMPLETED*	
2	FINAL* CONSTRUCTION COST	DOL				TOTAL NO. BRIDGES	
PART B <i>To be completed by contractor - see instructions on reverse (REMARKS Attach a plain sheet of paper)</i>							
3	LABOR* TOTAL PROJECT	TOTAL LABOR-HOURS		GROSS EARNINGS		28 CLAY PIPE	
						SIZE (In.) LGTH (Lin ft)	
ITEM	DESCRIPTION	UNIT	PROJECT QUANTITY	CULVERT ITEMS			
				SIZE (In.)	LGTH (Lin ft)		
4	TOTAL COST OF ALL MATERIALS AND SUPPLIES*	DOL.		26 CORR. STEEL CULVERT			
5	PETROLEUM PRODUCTS*	GAL.					
6		BBL.					
7	CEMENT	LB.					
8		TON.					
9	AGGREGATES PURCHASED	TON.				29 CORR. ALUMINUM CULVERT	
10		CU. YD.					
11	BITUMINOUS MATERIAL	GAL.					
12	LUMBER	THSD. BD. FT.					
13	REINFORCING STEEL	LB.					
14	STRUCTURAL STEEL	LB.		27 CONCRETE PIPE			
15	READY-MIXED CONCRETE	CU. YD.					
16	PREMIXED BITUMINOUS PAVING MATERIALS	TON.					
17	AGGREGATES PRODUCED	TON				30 PLASTIC PIPE	
18		CU. YD.					
19	MISCELLANEOUS STEEL	LB.					
20	NOISE BARRIERS	LIN. FT.					
21	GUARDRAIL	LIN. FT.					
22	BRIDGE RAIL	LIN. FT.					
23	FINAL CONTRACT AMOUNT FOR SIGNS	DOL.					
24	FINAL CONTRACT AMT. FOR LIGHTING	DOL.					
25	FINAL CONTRACT AMT. FOR TRAFFIC SIGNALS	DOL.					
*MUST BE REPORTED ON ALL REPORTS			REVIEWED BY	DATE			

FORM FHWA-47 (Rev. 7-98) (INF4.2, 7/29/98)

PREVIOUS EDITIONS ARE OBSOLETE

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17.41. FHWA Form 47 (English) Instructions

INSTRUCTIONS FOR PREPARING AND TRANSMITTING FORM FHWA-47

GENERAL REQUIREMENTS

Form FHWA-47 should be transmitted for each Federal-aid project involving construction performed under contract awarded by competitive bidding that is located on the National Highway System (NHS), except projects for which the total final construction cost of the roadway and bridge is less than \$1,000,000 or projects consisting primarily of (1) the installation of protective devices at railroad grade crossings, or (2) highway beautification.

Form FHWA-47 should be transmitted with or, if data is already available, in advance of the Final Report required by Federal-aid Policy Guide Chapter 6 G 6011.11

A separate form should be transmitted for each contract except that data for two or more contracts on the same project may be combined when such contracts are completed at approximately the same time. In case of a combination, the earliest starting date and the latest completion date should be reported. Where a single contract covers more than one project, one form may be prepared for each project or for the entire contract, provided none of the data are duplicated. A Form FHWA-47 should not be prepared for a contract covering only the purchase of material but the quantity of material should be reported when subsequently included in a construction project. In all cases, only the original of Form FHWA-47, typed or clearly lettered, and no carbon or photocopies, should be transmitted to the Washington Office.

If nonparticipating work is included in the contract, all data should be combined with the Federal-aid data in preparing the form. Data for any subcontract must be combined by the State or the division office with the prime contract if not so combined by the prime contractor. It will be the State's responsibility to see that all prime contract and subcontract costs, material, and labor-hours have been reported for each contract, and no duplication of data are involved. Quantities of State-furnished materials should be included with contract quantities, and costs of STATE-furnished materials should be added to Item 2 "Final Construction Cost" and also to Item 4 "Total Cost of All Materials and Supplies." All quantities should be reported to the nearest whole unit and only in the units specified. All costs should be reported to the nearest dollar.

Check urban or rural to indicate whether the major cost is for work within an urban area or in a rural location.

All figures should be verified for reasonableness by State highway department and Federal Highway Administration division office engineers. The total material cost and the total labor-hours and gross earnings should bear reasonable relationships to the final construction cost. Also the quantity of each material reported should be reasonable with respect to the quantities of other materials. For example, if a large quantity of reinforcing steel is reported with no cement or ready-mixed concrete, an error of omission in reporting would be indicated.

Generally, the total cost of materials, supplies, and labor should be substantially less than the final construction cost, as the latter also includes costs of equipment ownership, overhead, and profit which are not required to be reported. If the final construction cost is less or only a few percent more than the total cost of materials, supplies and labor, the indication is that the contractor suffered a loss on the project or that there is an error in reporting. In such case, if it is determined that the figures reported are correct, a statement should be made on a plain sheet of paper marked "Remarks" to the effect that the contractor actually did suffer a loss, (verify with contractor).

Part A - INFORMATION TO BE SUPPLIED BY FEDERAL HIGHWAY ADMINISTRATION OR STATE HIGHWAY PERSONNEL (FEDERAL-AID POLICY GUIDE CH. 6 G 6011.11)

Item 1 - "Length of Project." - Report official roadway mileage and official bridge mileage.

Item 2 - "Final Construction Cost" - Show best estimate of Federal and State costs incurred to date for contract items, extra work performed by contractor, and State-furnished materials.

*Quantities of steel, concrete and lumber used in connection with Items 20, 21, 22, 23, 24, and 25 should not be reported unless difficulties are encountered in segregating such quantities from total quantities.

FORM FHWA-47 (Rev. 7-98)

PART B - INFORMATION TO BE SUPPLIED BY CONTRACTOR IMMEDIATELY UPON COMPLETION OF CONTRACT OR PROJECT

Specific Instructions for the Following Numbered Items:

Item 3 - Report total labor-hours worked and earnings of all contractor's employees on the project, including those on operation and maintenance of equipment.

Item 4 - This should be the total cost, at the jobsite of all construction materials and supplies purchased for and used on the project, including the cost of materials for signing and lighting and the cost of any materials and supplies not specifically listed hereon. Costs of equipment or equipment rental and the cost of operating the equipment, except the costs of fuel and lubricants, should not be included in this item. Small items of equipment such as jackhammers, handtools, repair parts, tires, etc., are not considered to be supplies. Costs of such items and also overhead costs should not be included. The amount included here for aggregates produced should be only the cost paid by the contractor for the aggregates and should not include the costs of excavating, processing, loading and hauling. Wages and labor-hours for aggregates produced should, of course, be included with Item 3.

Item 5 - Report total number of gallons of all gasoline, diesel oil, lubricating oil, and grease for equipment and trucks. For conversion purposes use factor of 8 pounds of grease per gallon.

Items 6, 7, and 8 - Report quantity of cement used on project. Do not report here the cement included in Item 15.

Items 9 and 10 - Report quantity of aggregates purchased from commercial producers, such as sand, gravel, crushed stone, etc. Do not report here aggregates included in Items 15 and 16. Aggregates produced by the contractor shall be reported as Items 17 and 18.

Item 11 - Report number of gallons of bitumens such as asphalt and tar. Do not report here bituminous materials included in Item 16.

Item 12 - Report all lumber products purchased for and use on the project, including plywood and pressed wood, but excluding timber piling, lumber in fencing, guardrail, and signs, and lumber purchased for or used on previous projects and previously reported. The quantity of lumber should be reported as the number of thousand board feet and not as the number of board feet.

Item 13 - Report total number of pounds of reinforcement (plain or coated) for both structures and pavement. Include estimated quantities of reinforcing and prestressing steel in purchased precast units, except concrete pipe reinforcement.

Item 14 - Report total number of pounds of structural steel, steel H-piling, and sheet piling.

Item 15 - Report total number of cubic yards of ready-mixed concrete plus estimated quantity of concrete in purchased precast units, excluding Item 26.

Item 16 - Report total number of tons of bituminous paving mixtures that are purchased in a prepared condition ready for placement as they reach the job.

Items 17 and 18 - Report total quantity of aggregates such as sand, gravel, crushed stone, etc., produced by the contractor.

Item 19 - Report estimated total weight of steel products not appropriate for Items 13, 14 and 26, such as joint devices, tubular piling, etc.

Items 20, 21, and 22 - Report total lengths, in linear feet, of all types of noise barriers, guardrail and bridge rail.*

Item 23 - Report final contract amount for all types of signs including foundations, posts, structural supports, etc. Do not include traffic signals.*

Item 24 - Report final contract amount for highway and bridge lighting including foundations, conduits, standards, wiring, switches, luminaires, etc. Do not include traffic signals.*

Item 25 - Report final contract amount for traffic signals.*

Item 26 - Report, by size, regardless of class, type, gauge or coating, total number of linear feet of corrugated steel pipe, structural plate pipe, pipe-arches and arches.

Item 27 - Report, by size, regardless of class, type, gauge or coating, total number of linear feet of plain and reinforced concrete drain and culvert pipe.


Item 28 - Report, by size, total number of linear feet of clay pipe.

Item 29 - Report, by size, total number of linear feet of corrugated aluminum culvert.

Item 30 - Report, by size, total number of linear feet of plastic pipe.

17.42. FHWA Form 47M (Metric)

OMB NO. 2125-0033

		STATEMENT OF MATERIALS AND LABOR USED BY CONTRACTORS ON HIGHWAY CONSTRUCTION INVOLVING FEDERAL FUNDS					
PART A <i>To be completed by FHWA or State Highway Personnel (See instructions on reverse)</i>							
STATE*		COUNTY		FEDERAL PROJECT NO.*		URBAN () RURAL ()*	
ITEM	DESCRIPTION	ROADWAY		BRIDGE (<i>Over 6 meters</i>)		DATE STARTED*	
CONSTRUCTION TYPE CODES							
1	LENGTH OF PROJECT	KILO-METERS				DATE COMPLETED*	
2	FINAL* CONSTRUCTION COST	DOL				TOTAL NO. BRIDGES	
PART B <i>To be completed by; contractor - see instructions on reverse (REMARKS Attach a plain sheet of paper)</i>							
3	LABOR* TOTAL PROJECT	TOTAL LABOR-HOURS		GROSS EARNINGS		28 CLAY PIPE	
ITEM	DESCRIPTION	UNIT	PROJECT QUANTITY	CULVERT ITEMS		SIZE (cm.) LGTH (Lin M.)	
4	TOTAL COST OF ALL MATERIALS AND SUPPLIES*	DOL.		26	SIZE (cm.) LGTH (Lin M.) CORR. STEEL CULVERT		
5	PETROLEUM PRODUCTS*	LIT.					
6		t.					
7	CEMENT	KG.					
8		t.					
9	AGGREGATES PURCHASED	t.				29 CORR. ALUMINUM CULVERT	
10		M ³					
11	BITUMINOUS MATERIAL	LIT.					
12	LUMBER	THSD. BD. M.					
13	REINFORCING STEEL	KG.					
14	STRUCTURAL STEEL	KG.		27	CONCRETE PIPE		
15	READY-MIXED CONCRETE	M ³					
16	PREMIXED BITUMINOUS PAVING MATERIALS	t.					
17		t.					
18	AGGREGATES PRODUCED	M ³				30 PLASTIC PIPE	
19	MISCELLANEOUS STEEL	KG.					
20	NOISE BARRIERS	LIN. M.					
21	GUARDRAIL	LIN. M.					
22	BRIDGE RAIL	LIN. M.					
23	FINAL CONTRACT AMOUNT FOR SIGNS	DOL.					
24	FINAL CONTRACT AMT. FOR LIGHTING	DOL.					
25	FINAL CONTRACT AMT. FOR TRAFFIC SIGNALS	DOL.					
			REVIEWED BY	DATE			
*MUST BE REPORTED ON ALL REPORTS							

FORM FHWA-47M (Rev. 7-98) (INF4.2, 7/29/98)

PREVIOUS EDITIONS ARE OBSOLETE

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17.43. FHWA Form 47M (Metric) Instructions

INSTRUCTIONS FOR PREPARING AND TRANSMITTING FORM FHWA-47M

GENERAL REQUIREMENTS

Form FHWA-47 should be transmitted for each Federal-aid project involving construction performed under contract awarded by competitive bidding that is located on the National Highway System (NHS), except projects for which the total final construction cost of the roadway and bridge is less than \$1,000,000 or projects consisting primarily of (1) the installation of protective devices at railroad grade crossings, or (2) highway beautification.

Form FHWA-47 should be transmitted with or, if data is already available, in advance of the Final Report required by Federal-aid Policy Guide Chapter 6 G 6011.11

A separate form should be transmitted for each contract except that data for two or more contracts on the same project may be combined when such contracts are completed at approximately the same time. In case of a combination, the earliest starting date and the latest completion date should be reported. Where a single contract covers more than one project, one form may be prepared for each project or for the entire contract, provided none of the data are duplicated. A Form FHWA-47 should not be prepared for a contract covering only the purchase of material but the quantity of material should be reported when subsequently included in a construction project. In all cases, only the original of Form FHWA-47, typed or clearly lettered, and no carbon or photocopies, should be transmitted to the Washington Office.

If nonparticipating work is included in the contract, all data should be combined with the Federal-aid data in preparing the form. Data for any subcontract must be combined by the State or the division office with the prime contract if not so combined by the prime contractor. It will be the State's responsibility to see that all prime contract and subcontract costs, material, and labor-hours have been reported for each contract, and no duplication of data are involved. Quantities of State-furnished materials should be included with contract quantities, and costs of STATE-furnished materials should be added to Item 2 "Final Construction Cost" and also to Item 4 "Total Cost of All Materials and Supplies." All quantities should be reported to the nearest whole unit and only in the units specified. All costs should be reported to the nearest dollar.

Check urban or rural to indicate whether the major cost is for work within an urban area or in a rural location.

All figures should be verified for reasonableness by State highway department and Federal Highway Administration division office engineers. The total material cost and the total labor-hours and gross earnings should bear reasonable relationships to the final construction cost. Also the quantity of each material reported should be reasonable with respect to the quantities of other materials. For example, if a large quantity of reinforcing steel is reported with no cement or ready-mixed concrete, an error of omission in reporting would be indicated.

Generally, the total cost of materials, supplies, and labor should be substantially less than the final construction cost, as the latter also includes costs of equipment ownership, overhead, and profit which are not required to be reported. If the final construction cost is less or only a few percent more than the total cost of materials, supplies and labor, the indication is that the contractor suffered a loss on the project or that there is an error in reporting. In such case, if it is determined that the figures reported are correct, a statement should be made on a plain sheet of paper marked "Remarks" to the effect that the contractor actually did suffer a loss, (verify with contractor).

Part A - INFORMATION TO BE SUPPLIED BY FEDERAL HIGHWAY ADMINISTRATION OR STATE HIGHWAY PERSONNEL (FEDERAL-AID POLICY GUIDE CH. 6 G 6011.11)

Item 1 - "Length of Project." - Report official roadway mileage and official bridge mileage.

Item 2 - "Final Construction Cost" - Show best estimate of Federal and State costs incurred to date for contract items, extra work performed by contractor, and State-furnished materials.

*Quantities of steel, concrete and lumber used in connection with Items 20, 21, 22, 23, 24, and 25 should not be reported unless difficulties are encountered in segregating such quantities from total quantities.

FORM FHWA-47M (Rev. 7-98)

PART B - INFORMATION TO BE SUPPLIED BY CONTRACTOR IMMEDIATELY UPON COMPLETION OF CONTRACT OR PROJECT

Specific Instructions for the Following Numbered Items:

Item 3 - Report total labor-hours worked and earnings of all contractor's employees on the project, including those on operation and maintenance of equipment.

Item 4 - This should be the total cost, at the jobsite of all construction materials and supplies purchased for and used on the project, including the cost of materials for signing and lighting and the cost of any materials and supplies not specifically listed hereon. Costs of equipment or equipment rental and the cost of operating the equipment, except the costs of fuel and lubricants, should not be included in this item. Small items of equipment such as jackhammers, handtools, repair parts, tires, etc., are not considered to be supplies. Costs of such items and also overhead costs should not be included. The amount included here for aggregates produced should be only the cost paid by the contractor for the aggregates and should not include the costs of excavating, processing, loading and hauling. Wages and labor-hours for aggregates produced should, of course, be included with Item 3.

Item 5 - Report total number of liters of all gasoline, diesel oil, lubricating oil, and grease for equipment and trucks. For conversion purposes use factor of 3.6 kilograms of grease per 3.8 liters.

Items 6, 7, and 8 - Report quantity of cement used on project. Do not report here the cement included in Item 15.

Items 9 and 10 - Report quantity of aggregates purchased from commercial producers, such as sand, gravel, crushed stone, etc. Do not report here aggregates included in Items 15 and 16. Aggregates produced by the contractor shall be reported as Items 17 and 18.

Item 11 - Report number of liters of bitumens such as asphalt and tar. Do not report here bituminous materials included in Item 16.

Item 12 - Report all lumber products purchased for and use on the project, including plywood and pressed wood, but excluding timber piling, lumber in fencing, guardrail, and signs, and lumber purchased for or used on previous projects and previously reported. The quantity of lumber should be reported as the number of thousand board meters and not as the number of board meters.

Item 13 - Report total number of kilograms of reinforcement (plain or coated) for both structures and pavement. Include estimated quantities of reinforcing and prestressing steel in purchased precast units, except concrete pipe reinforcement.

Item 14 - Report total number of kilograms of structural steel, steel H-piling, and sheet piling.

Item 15 - Report total number of meters³ of ready-mixed concrete plus estimated quantity of concrete in purchased precast units, excluding Item 27.

Item 16 - Report total number of metric tons of bituminous paving mixtures that are purchased in a prepared condition ready for placement as they reach the job.

Items 17 and 18 - Report total quantity of aggregates such as sand, gravel, crushed stone, etc., produced by the contractor.

Item 19 - Report estimated total weight of steel products not appropriate for Items 13, 14 and 26, such as joint devices, tubular piling, etc.

Items 20, 21, and 22 - Report total lengths, in linear meters, of all types of noise barriers, guardrail and bridge rail.*

Item 23 - Report final contract amount for all types of signs including foundations, posts, structural supports, etc. Do not include traffic signals.*

Item 24 - Report final contract amount for highway and bridge lighting including foundations, conduits, standards, wiring, switches, luminaires, etc. Do not include traffic signals.*

Item 25 - Report, by size, regardless of class, type, gauge or coating, total number of linear meters of corrugated steel pipe, structural plate pipe, pipe-arches and arches.


Item 27 - Report, by size, regardless of class, type, gauge or coating, total number of linear meters of plain and reinforced concrete drain and culvert pipe.

Item 28 - Report, by size, total number of linear meters of clay pipe.

Item 29 - Report, by size, total number of linear meters of corrugated aluminum culvert.

Item 30 - Report, by size, total number of linear meters of plastic pipe.

17.44. FHWA Form PR-1391, Annual EEO Report



**FEDERAL-AID HIGHWAY CONSTRUCTION CONTRACTORS
ANNUAL EEO REPORT**

OMB NO. _____
Report For
JULY _____ 19____

1. CHECK APPROPRIATE BLOCK
 Contractor
 Subcontractor

2. NAME AND ADDRESS OF FIRM

3. FEDERAL-AID PROJECT NUMBER

4. TYPE OF CONSTRUCTION

5. COUNTY AND STATE

6. PERCENT COMPLETE

7. BEGINNING CONSTR. DATE

8. DOLLAR AMOUNT OF CONTRACT

9. ESTIMATED PEAK EMPLOYMENT
(a) Month and Year

(b) Number of Employees

10. EMPLOYMENT DATA

JOB CATEGORIES	Table A				Table B														
	TOTAL EMPLOYEES		TOTAL MINORITIES		BLACK Not of Hispanic Origin		HISPANIC		AMERICAN INDIAN OR ALASKAN NATIVE		ASIAN OR PACIFIC ISLANDER		WHITE Not of Hispanic Origin		APPRENTICES		ON THE JOB TRAINEES		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
OFFICIALS (Managers)																			
SUPERVISORS																			
FOREMEN/WOMEN																			
CLERICAL																			
EQUIPMENT OPERATORS																			
MECHANICS																			
TRUCK DRIVERS																			
IRONWORKERS																			
CARPENTERS																			
CEMENT MASONS																			
ELECTRICIANS																			
PIPEFITTERS, PLUMBERS																			
PAINTERS																			
LABORERS, SEMI-SKILLED																			
LABORERS, UNSKILLED																			
TOTAL																			
APPRENTICES ON THE JOB TRAINEES																			
11. PREPARED BY: (Signature and Title of Contractors Representative)																		DATE	
12. REVIEWED BY: (Signature and Title of State Highway Official)																		DATE	

Table C

This report is required by law and regulation (25 U.S.C. 140a and 23 CFR part 230). Failure to report will result in noncompliance with this regulation.

Form PR-1391 (Rev. 3/98) PREVIOUS EDITIONS ARE OBSOLETE

17.46. Final Construction Report Summary Sheet



**STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION
AND
PUBLIC FACILITIES**

Final Construction Report Summary Sheet

PROJECT NO.:
PROJECT NAME:
PROJECT DESCRIPTION:
PROJECT ENGINEER(s):
CONTRACTOR:
NOTICE TO PROCEED DATE:
START OF WORK DATE:
CONTRACT COMPLETION DATE:
TIME EXTENSION BY CHANGE DOCUMENTS:
PROJECT ACCEPTANCE DATE:
OVERRUN TIME:
ENGINEER'S ESTIMATE:
ORIGINAL CONTRACT:
 \$ ADDED BY CHANGE DOCUMENTS:
 TOTAL AUTHORIZED AMOUNT:
 TOTAL CONTRACT AMOUNT:
 LESS LIQUIDATED DAMAGES:
 FINAL CONTRACT AMOUNT:

17.47. Final Estimate Review Report, (Form 25D-031)



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION
AND PUBLIC FACILITIES
FINAL ESTIMATE REVIEW REPORT

CENTRAL REGION

Project Numbers _____ Contractor _____

Project Name: _____

Description of Work _____

Required Project Completion Date _____ / _____ Calendar Days

Actual Project Completion Date _____ / _____ Calendar Days

Project Manager _____ Project Engineer _____

Final Acceptance Date _____

Days Overrun _____ Liquidated Damages Assessed _____

Final Amount _____ Bid Amount _____

Materials Certification Date _____ Federal Document Date _____

Dept. of Labor Title 36 Clearance Date _____ Right of Way Clearance Date _____

Dept. of Labor Tax Clearance Date _____ Dept. of Revenue Clearance Date _____

CLASSIFICATION OF COSTS --FINAL PROJECT AMOUNTS

- Participating
- Non-Participating
- Liquidated Damages
- Reimbursable

Total

Remarks _____

I certify that my review of this project, in accordance with State policy, indicates that all work has been completed within the terms of the contract and authorized change documents; and it also indicates that State and Federal Aid funds have been properly classified unless other wise noted above.

Signature of Reviewer

Date Submitted

25D-031 (Rev. 1/03)

17.50. Interim Work Authorization (Form 25D-070)



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION
AND PUBLIC FACILITIES
CENTRAL REGION

Interim Work Authorization

Project No.: _____ IWA No. _____

Project Name: _____

Contractor: _____ Estimated dollar amount of the

Address: _____ IWA is: _____

Issued By: _____ Date: _____

Project Engineer

Acknowledged By: _____ Date: _____

Contractor's Representative

Permission for previously approved subcontractor(s) to perform all or portions of the work described herein is as checked: Yes No N/A.

The following change(s) in the above Contract are hereby made in accordance with the terms of the Contract and under the terms and conditions stated below. Price adjustments resulting from inaccurate cost and pricing data are subject to the provisions of AS 36.30.400(c). This document shall become an interim amendment to the Contract and all provisions of the Contract will be applicable. Items not mentioned shall not be affected by this document. This document shall be superseded by a subsequent Change Order, which will address any adjustments to contract time.

Basis of Payment (Check One)

Payment for the following work will be paid per Section 109-1.05 of the Standard Specifications.

Payment for the following work will be paid per the following unit prices and method of measurement stated herein.

DESCRIPTION OF CHANGE (Use Continuation Sheet 25D-065 as Required)

17.52. Letter for ESD Tax Clearance

MEMORANDUM

State of Alaska

Department of Transportation & Public Facilities

TO: Marty Messick, Sr. Field Auditor Juneau Field Tax Office Division of Employment Security Department of Labor	DATE: September 2, 1992
	FILE NO:
	TELEPHONE NO: (907) 465-2707
	FAX NUMBER:
	TEXT TELEPHONE:
FROM: John R. Edwards Construction Chief Marine Engineering AMHS	SUBJECT: Project No. 75221/MT-671 Auke Bay F.T. East Bridge Recoat, Phase I Clearance

Please advise whether or not clearance is granted for the below listed contractor.

Dunkin and Bush, Inc.
P.O. Box 807
Redmond, Washington 98073

Time Worked: July 15, 1992 to August 15, 1992

Chapter 85, SLA 1982 requires that the State now pay interest on contractor's final pay requests if payment is not made within 30 days.

If within 14 calendar days, we do not receive written notice from your office of an outstanding deficiency or failure to file required reports, we will process this contractor's final pay estimate for payment.

- () Clearance granted for final payment.
- () Clearance not granted for final payment.

Remarks: _____

Signature

Title

Date

17.53. Letter of CENG Budget Requests

MEMORANDUM

State of Alaska

Department of Transportation and Public Facilities

TO: Distribution

DATE:

FILE NO:

TELEPHONE NO:

FAX NUMBER:

FROM: (Name)
Project Engineer

SUBJECT: (Project No.)
(Project Name)

In order for Construction to arrive at a workable budget for the referenced project, we request the following information from your section. Please fill in the blank and return to the above address.

Total amount required by this Section to monitor the above project:

\$ _____.

Give a short summarization below of how your total budget was arrived at:

Signed: _____ Date: _____

It is suggested that as the project progresses, you closely monitor your charges. If for any reason you feel you cannot meet your budget, a request for additional funds will be necessary. Any such request needs to address the status of your work, the reason your initial estimate is not sufficient, and an estimate of the additional funds required to complete your involvement with the project.

(Initials)/

DISTRIBUTION:

Construction Group Chief (General Admin.)
Contracts
Design
EEO Officer
Highway Data Group
Anchorage
Internal Review Auditor, HQ

Project Control
Quality Assurance Engineer
Regional Environmental Coordinator
State Materials Engineer
Statewide Civil Rights Office,

17.54. Letter of Department of Revenue Tax Clearance

MEMORANDUM

State of Alaska

Department of Transportation & Public Facilities

TO: Joan Roomsburg
Tax Examiner
Compliance Unit
Department of Revenue

DATE: September 2, 1992

FILE NO:
TELEPHONE NO: (907) 465-2707
FAX NUMBER:
TEXT TELEPHONE:

FROM: John R. Edwards
Construction Chief
Marine Engineering
AMHS

SUBJECT: Project No. 75221/MT-671
Auke Bay F.T. East Bridge
Recoat, Phase I Clearance

Please advise whether or not clearance is granted for the below listed contractor.

Dunkin and Bush, Inc
P.O. Box 807
Redmond, Washington 98073

Time Worked: July 15, 1992 to August 15, 1992

Chapter 85, SLA 1982 requires that the State now pay interest on contractor's final pay requests if payment is not made within 30 days.

If within 14 calendar days, we do not receive written notice from your office of an outstanding deficiency or failure to file required reports, we will process this contractor's final pay estimate for payment.

- Clearance granted for final payment.
 Clearance not granted for final payment.

Remarks: _____

Signature

Title

Date

Joan Roomsburg
Tax Examiner

9/9/92

17.55. Letter of Final Acceptance

December 6, 1992

RE: Turner Regional Airport
Runway Reconstruction
AIP No. 8-40-1746-01/48702

Final Acceptance GCP 50-16

Mr. Bruce Temple
Hadden Contractors
7465 Modock Road
Eagle River, Alaska 99577

Dear Mr. Temple:

All work on the above named project has been inspected and found to be in substantial conformance with the contract. With this final acceptance you are released from further obligations under the contract, with the exception of any warranties or guaranties that you provided under individual pay items.

Warm regards,

Contracting Officer

cc: Contracts
Department of Labor
D&ES Division
FAA/FHWA
Federal Aid/Statewide Aviation
Group Chief/PM
Project Control
Quality Assurance/Review
Regional Finance
Statewide Civil Rights Office

17.56. Letter of Final Inspection

STATE OF ALASKA

DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES

FRANK H. MURKOWSKI, GOVERNOR

2301 PEGER ROAD
FAIRBANKS, ALASKA 99709-5399

PHONE: (907) 451-5466
FAX: (907) 451-5411

Northern Region Construction

March 15, 2003
Re: Southcentral Leveling, Phase III
Tok Cutoff MP 55-100
Project No. IM-OOOS(252)/67385

Project Completion 105-1.15

Mr. Quinn Vaterlaus
Wilder Construction Company
11301 Lang Street
Fairbanks, Alaska 99515-3006

Dear Mr. Vaterlaus:

A final inspection was held on March 4, 2003 with the following people in attendance:

Quinn Vaterlaus, Wilder Construction Representative
Billy Collins, Project Engineer, Alaska DOT/PF
Anne Jones, Design and Environmental Services, Alaska DOT/PF
Sam Lewis, Assistant Project Engineer, Alaska DOT/PF

All work was found to have been completed in substantial conformance with the contract and is accepted by the Department as of 2:00 p.m., March 4, 2003. Contract time stopped as of that date.

This acceptance does not relieve you of your remaining obligations under the contract.

Sincerely,

Billy Collins, P.E.
Project Engineer

/v/jz

25A-T34LH

17.57. Letter of Partial Acceptance

December 6, 1992

RE: Becker Highway
111 South Rehabilitation
F-670(1)/48701

Partial Acceptance 105-1.14
Winter Maintenance 643-3.07

Mr. Stephen Waterman
Velcro Contractors
1574 Haslemere Loop
Eagle River, Alaska 99577

Dear Mr. Waterman:

An inspection was held on August 21, 1992 and all items of the contract, with the exception of those listed below, were found to have been constructed in accordance with the contract. In accordance with Section 105-1.14 of the Specifications, the Department will take partial acceptance and resume maintenance on all items of work on the contract except for the following:

1. Final grading and compaction of the Subbase Grading "C" from approximately STA. 3025+00 to the end of the project;
2. Repair of damaged culverts;
3. Correction of workmanship deficiencies on culvert thaw pipes.

This partial acceptance and resumption of maintenance was effective as of 5:00 p.m. Friday, August 21, 1992.

In accordance with Section 643-3.07 of the Specifications, those portions of the project listed above which remain uncompleted are accepted for winter maintenance. The contract completion date remains June 27, 1993 and contract time will continue to be charged until Project Completion.

This partial acceptance does not relieve you of any other obligations remaining under the contract.

Warm regards,

Group Chief/PM

cc: Maintenance and Operations

17.58. Letter of Project Completion

December 6, 1992

RE: Becker Highway
111 South Rehabilitation
F-670(1)/48701

Project Completion 105-1.15

Mr. Stephen Waterman
Velcro Contractors
1574 Haslemere Loop
Eagle River, Alaska 99577

Dear Mr. Waterman:

A final inspection was held on August 21, 1992 with the following people in attendance:

All work was found to have been completed in substantial conformance with the contract and is accepted by the Department as of 1:00 p.m. August 21, 1992. Contract time was stopped as of that date.

This acceptance does not relieve you of your remaining obligations under the contract.

Warm regards,

Group Chief/PM

cc: FAA/FHWA
Maintenance & Operations
Planning
Statewide Civil Rights Office

17.59. Letter of Wage and Hour Compliance Tax Clearance

MEMORANDUM

State of Alaska

Department of Transportation & Public Facilities

TO: Patricia Woodward
Wage and Hour Technician
Department of Labor
MS 0700

DATE: September 2, 1992

FILE NO:
TELEPHONE NO: (907) 465-2707
FAX NUMBER:
TEXT TELEPHONE:

FROM: John R. Edwards
Construction Chief
Marine Engineering
AMHS

SUBJECT: Project No. 75221/MT-671
Auke Bay F.T. East Bridge
Recoat, Phase I
Clearance

Please advise whether or not clearance is granted for the below listed contractor.

Dunkin and Bush, Inc.
P.O. Box 807
Redmond, Washington 98073

no certified payrolls received as of today

Time Worked: July 15, 1992 to August 15, 1992

Chapter 85, SLA 1982 requires that the State now pay interest on contractor's final pay requests if payment is not made within 30 days.

If within 14 calendar days, we do not receive written notice from your office of an outstanding deficiency or failure to file required reports, we will process this contractor's final pay estimate for payment.

() Clearance granted for final payment.

(X) Clearance not granted for final payment.

Remarks:

RECEIVED
SEP 08 1992
Wage and Hour
Juneau

Patricia Woodward
Signature
Wage & Hour Technician
Title
9-21-92
Date

17.61. Master Materials Certification List (MCL) sample

MASTER MATERIALS CERTIFICATION LIST
(05/07/2001)

Specifications	Construction			Design		Statewide		Manufacturer/ Remarks
	Approved Products List	Project Engineer	QA/Materials Engineer	Design Engineer	Bridge Engineer	Traffic Engineer	State Materials Engineer	

Project Name _____
 Project Number _____
 Project Engineer Signature _____

202 REMOVAL OF STRUCTURES AND OBSTRUCTIONS

Timber								
Pressure Treating								
Steel Pipe								
Steel Fasteners								
Reflectors, Yellow Acrylic								
Reflectors, Reflective Sheeting								
Galvanize, Ferrous Metals								
Mailboxes								

306 ASPHALT TREATED BASE COURSE

Mtx Design								
------------	--	--	--	--	--	--	--	--

307 EMULSIFIED ASPHALT TREATED BASE

Mtx Design								
Portland Cement								

401 ASPHALT CONCRETE PAVEMENT

Mtx Design								
------------	--	--	--	--	--	--	--	--

17.62. Materials Inspection Summary (Form 25D-205)



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES

MATERIALS INSPECTION SUMMARY

PROJECT NO.:

CONTRACTOR:

SHEET OF

PROJECT NAME:

DATE:

CONTRACT ITEM	MATERIALS ITEM	QUANTITY USED	SOURCE	NUMBER OF TESTS REQUIRED	NUMBER OF TESTS RUN	TEST REPORT NUMBERS
<p style="text-align: left; margin-left: 5px;">Form 25D-205 (6/98)</p>						

17.63. Maximum GVW Worksheet (xls)

**DEPARTMENT of TRANSPORTATION & PUBLIC FACILITIES
MAXIMUM GROSS VEHICLE WEIGHT (GVW) WORKSHEET**

Project No.: _____ Truck ID: _____
 Project Name: _____ Truck Description: _____
 _____ Truck License: _____
 _____ Trailer License: _____

Allowable Bridge Formula (BF) Weight Calculation:

Steering Axle	Drive Axle Group	Booster Axle	First Trailer Axle Group	Belly Axle	Second Trailer Axle Group	Third Trailer Axle Group
○	○○	○	○○○	○	○○	○○○

Overall Wheelbase Length: "L" = _____ - Feet (Measured between extreme axles in feet to next highest foot, ie: 60'-2" = 61 - Feet)

Total Number of Axles: "N" = _____

$$(A) \text{ MAXIMUM BF GVW} = 500 \left[\frac{(N)(L) + (12)(N) + 36}{(N-1)} \right] + 3000$$

= 21000 Lbs

(Rounded to next highest 500 pounds, ie: a 5-Axle, with Length "L" = 61-feet is 89,125 which rounds to 89,500 pounds)

Allowable Tread Width / Axle Group Weight Calculation:

Steering Axle Tire Tread Width: "T" = _____ - inches (Tread width data is found on tire sidewall, ie: 11.00 x 24 tire = 11-inch width)

- 1) Allowable Steering Axle Weight* = ("T") (2) (600) = _____ 0 Lbs
- 2) Allowable Drive Axle Group Weight** = _____ No. of Axles = _____ 0 Lbs
- 3) Allowable Booster Axle Weight*** = _____ Total of All Tire Widths = _____ 0 Lbs
- 4) Allowable First Trailer Axle Group Weight** = _____ No. of Axles = _____ 0 Lbs
- 5) Allowable Belly Axle Weight*** = _____ Total of All Tire Widths = _____ 0 Lbs
- 6) Allowable Second Trailer Axle Group Weight** = _____ No. of Axles = _____ 0 Lbs
- 7) Allowable Third Trailer Axle Group Weight** = _____ No. of Axles = _____ 0 Lbs
- B) TOTAL TIRE / AXLE GVW (Lines 1 Thru 7 Above) = 0 Lbs

(Rounded to next highest 500 Lbs, so a 5-Axle truck with 11" tires is 13,200 + 38,000 + 38,000 = 89,200 Lbs, which rounds to 89,500 Lbs)

NOTES: * 10" tires = 12,000 Lbs, 11" tires = 13,200 Lbs, 12" tires = 14,400 Lbs; Maximum axle weight = 20,000 Lbs

** Single Axle = 20,000 Lbs, 2-Axle Tandem = 38,000 Lbs, 3-Axle Tridem = 42,000 Lbs, 4-Axle = 50,000 Lbs

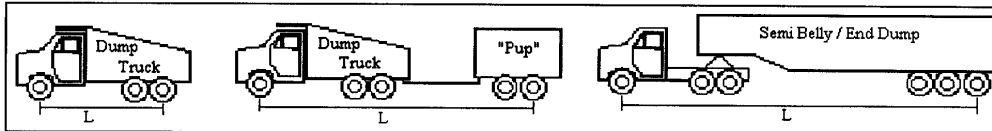
*** Measure tire tread width of all tires on the axle and multiply by 550 Lbs; Maximum single axle = 20,000 Lbs. Any axle spaced less than 10-feet from any other axle is considered part of the nearest axle group.

Allowable Vehicle Legal Weight

0 Lbs

[The Least Amount of Either (A) or (B) Above]

NOTE: AN ALLOWABLE VEHICLE LEGAL WEIGHT SHALL BE CALCULATED FOR EVERY HAULING VEHICLE ON THE PROJECT WHETHER FOR WEIGHT PAYMENT OR NOT; AND A NEW CALCULATION SHALL BE MADE WHENEVER A CHANGE IN A VEHICLE COMBINATION IS MADE BY THE CONTRACTOR.



COMPUTED BY: _____ DATE: _____ CHECKED BY: _____ DATE: _____

17.64. **Monthly Employment Utilization Report (25A-303)**

Monthly Employment Utilization Report

STATE OF ALASKA DEPARTMENT OF TRANSPORTATION & PUBLIC FACILITIES
CIVIL RIGHTS OFFICE



ADOT&PF

Name and Location of Contractor		State/Federal #		Reporting Period																
		Project Name																		
Construction Trade	Classification	Total Work Hours of Employment												Total Number of Employees		Total Number of Minority Employees				
		All M	All F	CM	CF	EM	BF	HM	HF	AM	AF	IM	IF	% Minority	% Female	M	F	M	F	
	Journey Worker																			
	Apprentice																			
	Trainee																			
	Sub-Total																			
	Journey Worker																			
	Apprentice																			
	Trainee																			
	Sub-Total																			
	Journey Worker																			
	Apprentice																			
	Trainee																			
	Sub-Total																			
	Journey Worker																			
	Apprentice																			
	Trainee																			
	Sub-Total																			
	Journey Worker																			
	Apprentice																			
	Trainee																			
	Sub-Total																			
	Journey Worker																			
	Apprentice																			
	Trainee																			
	Sub-Total																			
	Journey Worker																			
	Apprentice																			
	Trainee																			
	Sub-Total																			
	Total hours worked																			
	Total %																			
Company Official's Signature and Title		Date														Legend:				
		M				A				H				I						
		F				B				C				American Indian / Alaskan Native						

Form 25A-303 (08-2001)

Page 1

17.65. Monthly Summary of DBE Participation (Form 25A-336)



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES

**MONTHLY SUMMARY OF DISADVANTAGED
BUSINESS ENTERPRISE PARTICIPATION**
Federal-Aid Contracts

Project Name and Number: _____

Contractor: _____

Report for: _____ Month _____ Year

Prime is a DBE? ___ Yes ___ No

SUBCONTRACTORS

Firm Name	Work Performed	Amount Paid This Month	Total Payment to Date	Final Payment	
				Yes	No
		\$			

Subtotal: \$ _____

MANUFACTURERS

Firm Name	Product Manufactured	Amount Paid This Month	Total Payment to Date	Final Payment	
				Yes	No
		\$			

Subtotal: \$ _____

BROKERS

Firm Name	Product/Service Brokered	Amount Paid This Month	Total Payment to Date	Final Payment	
				Yes	No
		\$			

Subtotal: \$ _____

5% of Subtotal: \$ _____

REGULAR DEALERS

Firm Name	Materials Supplied	Amount Paid This Month	Total Payment to Date	Final Payment	
				Yes	No
		\$			

Subtotal: \$ _____

60% of Subtotal: \$ _____

The undersigned swears that the information they are providing to the Alaska Department of Transportation and Public Facilities, Civil Rights Office is accurate and complete to the best of their knowledge.

Further, the undersigned authorizes the Alaska Department of Transportation and Public Facilities, Civil Rights Office to verify the accuracy of the information provided.

Please note that the Alaska Department of Transportation and Public Facilities, Civil Rights Office, is required to report to the Department of Transportation any false, fraudulent, or dishonest conduct in connection with the program, so that DOT can take the steps (e.g., referral to the Department of Justice for criminal prosecution, referral to the DOT Inspector General, action under suspension and debarment or Program Fraud and Civil Penalties rules) provided in §26.109. The Alaska Department of Transportation and Public Facilities, Civil Rights Office, will consider similar action under our own legal authorities, including responsibility determinations in future contracts.

Signature & Title of Company Representative

Date

17.66. Monthly Training Report (Form 25A-313)



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES

MONTHLY TRAINING REPORT

The Contractor must fill in the project (Section 645) training hours each month using the table below. The Contractor should retain the original, updating it monthly while the apprentice/trainee remains on the project. The Contractor is required to submit copies of each months updated report by the 15th of the following month to: 1) The Project Engineer, and 2) The Civil Rights Office OJT Coordinator at PO Box 196900, Anchorage, AK 99519-6900 or by fax to 907-269-0847.

Project No. (Federal/State)		Project Name													
Contractor				Point of Contact				Phone							
Employee Name				Social Security Number				Job Classification							
Gender: Female <input type="checkbox"/>		Male <input type="checkbox"/>		Ethnicity: Alaska Native <input type="checkbox"/>		Asian/Pacific Islander <input type="checkbox"/>		American Indian <input type="checkbox"/>		Caucasian <input type="checkbox"/>		African American <input type="checkbox"/>		Hispanic <input type="checkbox"/>	
Anticipated Start Date For Training (From Form 25A-311): _____												Date Employee Started On This Project: _____			
Date Apprentice/Employee Employment Report Approved by the Engineer (From Form 25A-312): _____															
1ST YEAR - _____															
JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEP	OCT	NOV	DEC				
2ND YEAR - _____															
JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEP	OCT	NOV	DEC				
3RD YEAR - _____															
JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEP	OCT	NOV	DEC				
When the apprentice/trainee separates from this project, an explanation must be given: <input type="checkbox"/> end of work <input type="checkbox"/> seasonal shutdown <input type="checkbox"/> terminated for cause <input type="checkbox"/> quit															
What was the last date worked by the apprentice/trainee on this project?															
IF YOU ARE USING AN ADOT&PF 500 hour training program (provided on form 25A310) to meet the training requirements the following two questions must be answered:															
1) Did the trainee complete the required 500 hour training curriculum?										<input type="checkbox"/> YES		<input type="checkbox"/> NO			
2) If no, will this trainee continue the training program next season on this project? If no, explain why not.										<input type="checkbox"/> YES		<input type="checkbox"/> NO			
I certify that this form has been examined by me, and to the best of my knowledge and belief, is true, correct and complete.															
_____ Signature of Contractor										_____ Date					

25A-313
(REV. 1/03)

17.67. Notice to Airmen

State of Alaska
Department of Transportation & Public Facilities
Airport Manager's Office

_____ Airport

NOTICE TO AIRMEN

From: _____, Airport Manager Date: _____

To: FAA Flight Service Station Local Time: _____ AM
 Tower PM

Address: _____

CONTENT: _____

DISTRIBUTION

Original - FSS or Tower
Yellow - Regional Files
Pink - Airport Files

Tower or FAA Operator's Signature
(Not Required if no FAA Facility Available)

Airport Manager's Signature

NOTAM CANCELLATION

Date Canceled: _____ Local Time _____ AM
 PM

Airport Manager's Initials

17.68. Oil and Hazardous Substances Spill Notification



ALASKA DEPARTMENT OF ENVIRONMENTAL CONSERVATION OIL & HAZARDOUS SUBSTANCES SPILL NOTIFICATION

PERSON REPORTING		PHONE NUMBER	REPORTED HOW? (e.g., phone)
DATE/ TIME OF SPILL	DATE/TIME DISCOVERED		DATE/TIME REPORTED
LOCATION			SUBSTANCE SPILLED
QUANTITY SPILLED <input type="checkbox"/> gallons <input type="checkbox"/> pounds	QUANTITY CONTAINED <input type="checkbox"/> gallons <input type="checkbox"/> pounds	QUANTITY RECOVERED <input type="checkbox"/> gallons <input type="checkbox"/> pounds	QUANTITY DISPOSED <input type="checkbox"/> gallons <input type="checkbox"/> pounds
POTENTIAL RESPONSIBLE PARTY C-Plan Holder? YES <input type="checkbox"/> NO <input type="checkbox"/>		OTHER POTENTIAL RESPONSIBLE PARTIES, IF ANY	
SOURCE OF SPILL			
CAUSE OF SPILL			
CLEANUP ACTIONS			
DISPOSAL METHODS AND LOCATION			
ENVIRONMENTAL DAMAGE (check one) YES <input type="checkbox"/> NO <input type="checkbox"/>		SURFACE AREA AFFECTED (square feet)	SURFACE TYPE (describe area affected)
COMMENTS			

DEC USE ONLY

SPILL #	FILE #	LC	C-PLAN MGR NOTIFIED YES <input type="checkbox"/> NO <input type="checkbox"/>
SPILL NAME, IF ANY		NAMES OF DEC STAFF RESPONDING	
DEC RESPONSE <input type="checkbox"/> phone follow-up <input type="checkbox"/> field visit <input type="checkbox"/> took report	CASELOAD CODE <input type="checkbox"/> First and Final <input type="checkbox"/> Open/No LC <input type="checkbox"/> LC assigned	CLEANUP CLOSURE ACTION <input type="checkbox"/> NFA <input type="checkbox"/> Monitoring <input type="checkbox"/> Transferred to CS or STP	
COMMENTS			
REPORT PREPARED BY			DATE REPORT PREPARED

G:\SPAR\SPAR-Prevention and Emergency Response\Web\PERP\docs\spillfrm2.doc

revised April 20, 2000

17.69. Outline for Force Account Proposal

The Force Account Proposal shall include:

- Project Title,
- Airport Improvement Number,
- Location
- Estimated work days for inspection services
- Identify Consultant Use
- Scope of Services
- Cost Estimate

Scope of Services

The scope of services includes: project management, on-site inspection, materials testing, support sections, concurrent review and project closeout. Use the following lists as a menu of services. Eliminate those items that are not applicable for a given project.

Project management

1. Receive and respond to pre-bid questions.
2. Conduct Pre-Bid Conference, if applicable.
3. Evaluate bid results.
4. Establish project budget, including contract administration costs.
5. Review and approve DBE Utilization Report.
6. Make recommendation of award.
7. Assign project staff.
8. Conduct Pre-Construction Conference.
9. Prepare a Construction Management Plan, if necessary.
10. Supervise project staff, and oversee their work.
11. Provide clerical support.
12. Make periodic site visits to inspect the work.
13. Coordinate with other affected parties, including funding agency and local agencies.
14. Administer consultant contracts, if applicable.
15. Approve contractor payments.
16. Approve procurements.
17. Review and approve Change Orders and Supplemental Agreements.

18. Prepare Waiver Requests for Alternate Procurement Methods, when necessary.
19. Monitor project budget and submit Funding Requests as necessary to adjust funding.
20. Review and approve subcontracts.
21. Monitor external affirmative action compliance (EEO, DBE, and OJT programs).
22. Review, research, and respond to contractor claims.
23. Issue final acceptance to the contractor.
24. Sign FAA Sponsor Certifications, as required.
25. Update the Airport Master Record (FAA 5010), if necessary.

On-site inspections

1. Familiarization with contract documents and project site.
2. Establish a project office.
3. Set up all project files, books, and records.
4. Document all construction activities through use of project journals, inspectors daily reports, and photographs.
5. Review contractor submittals (schedule, shop drawings, TCP, SWPPP, HMCP) and forward to support sections for comment and/or approval.
6. Inspect all work for compliance with contract requirements.
7. Interpret intent of Plans and Specifications when questions arise.
8. Make adjustments to the design to better fit field conditions.
9. Document acceptance of all completed work.
10. Conduct periodic (sometimes-weekly) coordination meetings on complex projects.
11. Measure and document all pay quantities.
12. Prepare and submit Bi-Weekly Construction Reports.
13. Prepare progress estimates of contractor payments.
14. Coordinate design clarifications and changes with support sections.
15. Forward materials submittals and shop drawings to the appropriate support section.
16. Conduct monthly safety meetings.
17. Monitor effectiveness of contractor's traffic control.
18. Forward work zone accident reports to the Regional Traffic Engineer.
19. Monitor effectiveness of contractor's storm water control measures.
20. Monitor contractor's adherence to environmental permits.

21. Monitor contractor's adherence to legal loads.
22. Monitor project budget and anticipate cost overruns.
23. Issue Directives and Interim Work Authorizations.
24. Prepare Change Orders and Supplemental Agreements.
25. Author Engineer's Decision in response to contractor claims.
26. Resolve issues with facility users and adjacent property owners and businesses.
27. Coordinate and document a Final Inspection.
28. Prepare project As-Builts.
29. Update Exhibit "A" Property Map, ALP and Sign Plan to reflect as constructed conditions and forward to FAA.
30. Prepare the Final Assembly, including the Final Estimate.

Materials testing

1. Establish an itemized, project specific Materials Testing Frequency Guide.
2. Gather, inspect, and maintain all required testing equipment.
3. Set up on-site materials testing lab trailer, if needed.
4. Set up materials testing files.
5. Coordinate off-site inspections of fabricated items.
6. Coordinate reviews and approvals of submittals of all manufactured items, including Manufacturer's Certificates of Compliance for all materials incorporated into manufactured items.
7. Perform and document all quality tests in accordance with the Frequency Guide and contract specified test methods.
8. Perform and document all acceptance tests in accordance with project specifications.
9. Perform and document any retests required as a result of failing acceptance tests.
10. Perform and document all independent assurance tests in accordance with project specifications.
11. Monitor compliance with "Buy America" and "Buy American" requirements.
12. Evaluate and document asphalt test results under the Asphalt Price Adjustment specification, if applicable.
13. Assemble a Project Materials Testing Summary at the completion of the project.
14. Issue a signed Project Materials Certification.

Support sections

- 1.Design and drafting support during construction.
- 2.Evaluation and approval of mix designs for concrete and hot mix asphalt.
- 3.Periodic environmental reviews, as needed.
- 4.Environmental permit modifications, as needed.
- 5.Geotechnical support during construction, as needed.
- 6.Right-of-way support during construction, as needed.
- 7.Uilities support during construction, as needed.
- 8.Traffic support during construction, as needed.
- 9.Plans room support during construction, as needed.
10. Maintenance support during construction, as needed.
11. Airport Manager or Airport Safety Officer support, as needed.

Concurrent review and project closeout

- 1.Periodic concurrent records reviews, as needed (except on small projects).
- 2.Review contractor payments.
- 3.Review Change Orders and Supplemental Agreements.
- 4.Comprehensive records review at project completion.
- 5.Request labor and tax clearances.
- 6.Assemble final closeout package, including final estimate and contractor's release.
- 7.Prepare FAA Sponsor Certifications, as required.
- 8.Assemble FAA Grant closeout package and submit to Project Control.
- 9.Archive project records.

<i>Cost Estimate for Scope of Services</i>					
Item	Reg Rate	OT Rate	Reg Hrs	OT Hrs	Total Cost/Item
Project Management					
Position 1					
Position 2					
Position 3					
Position 4					
On site inspections					
Position 1					
Position 2					
Position 3					
Position 4					
Materials testing					
Position 1					
Position 2					
Position 3					
Position 4					
Support sections					
Position 1					
Position 2					
Position 3					
Position 4					
Concurrent review & project closeout					
Position 1					
Position 2					
Position 3					
Position 4					
Direct Costs					
Travel					
Per diem					

Supplies	
Subtotal	
ICAP rate	
Project Total Cost	

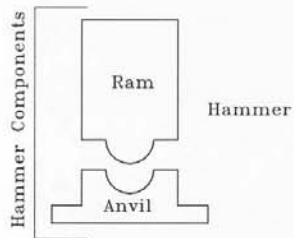
17.70. Pile Driving Equipment Data (Form 25D-098)



**State of Alaska
Department of Transportation and Public Facilities**

Pile Driving Equipment Data

Project: _____ Structure name: _____
 Project No.: _____ Structure no.: _____



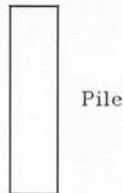
Manufacturer: _____ Model: _____
 Type: _____ Serial No.: _____
 Ram weight: _____
 Maximum Rated energy: _____ at _____ length of stroke
 Modifications: _____



Material: _____
 Thickness: _____ Area: _____
 Modulus of Elasticity: _____ (P.S.I.)
 Coefficient of restitution: _____



Weight: _____



Pile type: _____
 Length (in leads): _____
 Wall thickness: _____
 Description of splice: _____

 Tip treatment description: _____

Submitted by: _____
 Date: _____

17.73. Pre Construction Conference Agenda

AGENDA
PRE CONSTRUCTION CONFERENCE
International Airport Way Widening
F-671(9)/48703
June 25, 1993
Regional Office Courtyard, 1:30 PM

- I. **Introduction of Attendees**
- II. **Opening Remarks** – Group Chief/PM or Project Engineer. Structure of Department and limits of authority; Project Engineer as Single point of contact with Department; description of project and funding sources.
- III. **Payroll and Labor Requirements** – Regional Contract Compliance Officer & Department of Labor Representative. Review of certified payroll preparation and submittal requirements; federal and/or state minimum wage rates, fringe benefits; CC 257 form, jobsite posting requirements.
- IV. **EEO Requirements** – Regional Contract Compliance Officer. DBE goals program and subcontracting requirements; subcontract submittal and approval procedures; Training Program requirements.
- V. **General Contract Language** – Group Chief/PM or Project Engineer. Review Section 100/General Contract Provisions, change document procedures, and notice requirements, claims and disputes, liquidated damages.
- VI. **Construction Specifications** – Project Engineer. Review principal construction specifications, material permit stipulations, and airport safety and security requirements.
- VII. **Material Submittals** – Project Engineer. Timing of submittals and the process of review.
- VIII. **Contractor Submittals** – Contractor. Construction Progress Schedule, Traffic Control Plan, Storm Water Pollution Prevention Plan.
- IX. **Coordination and Scheduling, Technical Review** – General Discussion. Discuss coordination of construction with maintenance and operations, airport operations and security. Review permits: environmental, materials, noise, endangered species.

This is only a sample conference format. The conference topics can be formatted in another order and/or divided into more than one meeting if desired.

17.74. Progress Estimate

Northern		STATE OF ALASKA DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES COWLES STREET at Airport Way Southbound Lane ADDITION AND PUBLIC FACILITIES PROGRESS ESTIMATE				Contractor: Paving Products, Inc.				
HRC-0641(1)/66144		Estimate #:				Address: P.O. Box 80430 Fairbanks Alaska, 99708				
		For Period:								
Description	Unit	Unit Price	Plan		Previous		This Estimate		Totals to Date	
			Quantity	Amount	Quantity	Amount	Quantity	Amount	Quantity	Amount
DBE Adjustment	C.S.	\$5,000.00	C.S.	\$5,000.00	0	\$0.00		\$0.00	0	\$0.00
Removal of Structures and	L.S.	\$8,400.00	All Req'd	\$8,400.00	0.0%	\$0.00		\$0.00	0	\$0.00
Obstructions	0	\$0.00	0	\$0.00	0	\$0.00		\$0.00	0	\$0.00
Unclassified Excavation	L.S.	\$14,700.00	All Req'd	\$14,700.00	0.0%	\$0.00		\$0.00	0	\$0.00
Borrow, Select Material Type A	L.S.	\$18,500.00	All Req'd	\$18,500.00	0.0%	\$0.00		\$0.00	0	\$0.00
Crushed Aggregate Base	L.S.	\$19,200.00	All Req'd	\$19,200.00	0.0%	\$0.00		\$0.00	0	\$0.00
Course Grading D-1	0	\$0.00	0	\$0.00	0	\$0.00		\$0.00	0	\$0.00
Asphalt Concrete, Type II	L.S.	\$35,000.00	All Req'd	\$35,000.00	0.0%	\$0.00		\$0.00	0	\$0.00
Class B	0	\$0.00	0	\$0.00	0	\$0.00		\$0.00	0	\$0.00
CSS-1 Emulsified Asphalt for	L.S.	\$1,250.00	All Req'd	\$1,250.00	0.0%	\$0.00		\$0.00	0	\$0.00
Prime Coat	0	\$0.00	0	\$0.00	0	\$0.00		\$0.00	0	\$0.00
12 Inch Corrugated Steel Pipe	L.S.	\$2,200.00	All Req'd	\$2,200.00	0.0%	\$0.00		\$0.00	0	\$0.00
Drop Inlet Type A	Each	\$1,500.00	1	\$1,500.00	0	\$0.00		\$0.00	0	\$0.00
Relocate Inlet	Each	\$750.00	1	\$750.00	0	\$0.00		\$0.00	0	\$0.00
Concrete Sidewalk	L.S.	\$33,000.00	All Req'd	\$33,000.00	0.0%	\$0.00		\$0.00	0	\$0.00
Sidewalk Ramp	Each	\$350.00	6	\$2,100.00	0.0%	\$0.00		\$0.00	0	\$0.00
Curb & Gutter	L.S.	\$46,300.00	All Req'd	\$46,300.00	0.0%	\$0.00		\$0.00	0	\$0.00
Standard Signs	S.F.	\$44.00	125.75	\$5,533.00	0	\$0.00		\$0.00	0	\$0.00
Seeding	L.S.	\$3,000.00	All Req'd	\$3,000.00	0.0%	\$0.00		\$0.00	0	\$0.00
Topsoil	L.S.	\$7,700.00	All Req'd	\$7,700.00	0.0%	\$0.00		\$0.00	0	\$0.00
Fire Hydrant Installation	Each	\$7,300.00	1	\$7,300.00	0	\$0.00		\$0.00	0	\$0.00
Adjustment of Valve Box	Each	\$75.00	6	\$450.00	0	\$0.00		\$0.00	0	\$0.00
Lawn Sprinkler Sys. Relocate	L.S.	\$6,000.00	All Req'd	\$6,000.00	0.0%	\$0.00		\$0.00	0	\$0.00
Water System Relocate	L.S.	\$18,300.00	All Req'd	\$18,300.00	0.0%	\$0.00		\$0.00	0	\$0.00
Mobilization & Demobilization	L.S.	\$8,000.00	All Req'd	\$8,000.00	0.0%	\$0.00		\$0.00	0	\$0.00
Temporary Erosion and	L.S.	\$5,000.00	All Req'd	\$5,000.00	0.0%	\$0.00		\$0.00	0	\$0.00
Pollution Control	0	\$0.00	0	\$0.00	0	\$0.00		\$0.00	0	\$0.00

Northern
STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION
AND PUBLIC FACILITIES
PROGRESS ESTIMATE
Southbound Lane
Estimate #:

Cowles Street at Airport Way
HRO-0641(1)/66144

Contractor: Paving Products, Inc.

Address: P.O. Box 80430

Fairbanks Alaska, 99708

For Period:

Description	Unit	Unit Price	Plan		Previous		This Estimate		Totals to Date	
			Quantity	Amount	Quantity	Amount	Quantity	Amount	Quantity	Amount
Construction Surveying	L.S.	\$8,125.00	All Req'd	\$8,125.00	0.0%	\$0.00	\$0.00	\$0.00	0	\$0.00
Traffic Maintenance	L.S.	\$14,300.00	All Req'd	\$14,300.00	0.0%	\$0.00	\$0.00	\$0.00	0	\$0.00
Permanent Construction Signs	L.S.	\$1,540.00	All Req'd	\$1,540.00	0.0%	\$0.00	\$0.00	\$0.00	0	\$0.00
Construction Signs	Day	\$2.75	2,000	\$5,500.00	0	\$0.00	\$0.00	\$0.00	0	\$0.00
Type II Barricades	Day	\$1.65	1,000	\$1,650.00	0	\$0.00	\$0.00	\$0.00	0	\$0.00
Type III Barricades	Day	\$4.40	100	\$440.00	0	\$0.00	\$0.00	\$0.00	0	\$0.00
Traffic Cone	Day	\$0.85	1,500	\$1,275.00	0	\$0.00	\$0.00	\$0.00	0	\$0.00
Drum	Day	\$2.20	2,000	\$4,400.00	0	\$0.00	\$0.00	\$0.00	0	\$0.00
Book Drop Relocation	L.S.	\$750.00	1	\$750.00	0.0%	\$0.00	\$0.00	\$0.00	0	\$0.00
	Each	\$715.00	2	\$1,430.00	0	\$0.00	\$0.00	\$0.00	0	\$0.00
	L.S.	\$77,200.00	All Req'd	\$77,200.00	0.0%	\$0.00	\$0.00	\$0.00	0	\$0.00
	Each	\$484.00	12	\$5,808.00	0	\$0.00	\$0.00	\$0.00	0	\$0.00
	L.S.	\$18,600.00	All Req'd	\$18,600.00	0.0%	\$0.00	\$0.00	\$0.00	0	\$0.00
Totals				\$390,201.00			\$0.00	\$0.00		\$0.00

17.75. Project Completion Form (PCF)

PROJECT COMPLETION FORM (PCF)

AKSAS Project Number _____ Federal # _____ Ledger _____ Date _____

Project Name _____

Movement of each phase of the following project to completed status will be initiated once the phase manager signs certifying that all physical activity relating to their respective phase is complete. Ledger codes will then be inactivated in each completed phase and no further charges will process.

Before closing a phase to further charges, the phase manager must insure that the following steps have been completed:

1. All necessary audits have been completed on all contracts for services over \$1,000 with engineering and right-of-way consultants, utility companies, etc.; list each contract below with final dollar amount followed by audit status.
2. Update the latest cost estimate for your phase and attach to this form.
3. Liquidate all outstanding encumbrances.

If your phase is not yet complete, please indicate the work that remains and an estimated completion date.

Please, complete this form and forward to the next phase manager or return to Project Control, Attn: PCIS, within three days of receipt.

<u>Routing</u>	<u>Phase Complete</u>	<u>Remarks/Contract Audit Status/Resubmittal Date/Signature</u>
<input type="checkbox"/> PH 2 DESIGN ENGR	Yes/No	_____ _____ _____ Signature/Date
<input type="checkbox"/> PH 3 ROW	Yes/No	_____ _____ _____ Signature/Date
<input type="checkbox"/> PH 4 CONSTRUCTION	Yes/No	_____ _____ _____ Signature/Date
<input type="checkbox"/> PH 7 UTILITIES	Yes/No	_____ _____ _____ Signature/Date
<input type="checkbox"/> PH 8 PLAN. & RESEARCH	Yes/No	_____ _____ _____ Signature/Date

17.77. Project Development Authorization

ALASKA DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES
PROJECT DEVELOPMENT AUTHORIZATION

AKSAS #: 70134		PROJECT NAME: JUNIATHANE ROAD RECONSTRUCTION		CONTACT: P. MCCALLION	
LEDDER CODE: 306532		DIVISION: D&C		HOUSE: 67012	
FEDERAL #: STP-F-M-0963(1)		MODE: HWY 79632		STRUCTURE BATCH: N/A	
FMS #: N/A		REGION: SOUTHEAST		FINANCIAL BATCH: N/A	
PROJECT SCOPE: PE AND RECONSTRUCTION OF THANE ROAD FROM THE FERRY TERMINAL TO MT. ROBERTS ROAD. WORK TO INCLUDE 8.5 METER WIDE ROADWAY, 1.8 & 2.4 METER WIDE SIDEWALKS, CURBING, AND DRAINAGE.					
ACTION REQUEST: INCREASE PHASE 4 FUNDING FOR CONTRACT ITEM FUNDING ADJUSTMENTS, FOR REVISIONS TO FIVE EXISTING CHANGE ORDERS, FOR A PENDING CHANGE ORDER, AND FOR INCREASED C.E. COSTS ASSOCIATED WITH CONTRACT ADMINISTRATION AND DESIGN SUPPORT FOR DESIGN OF THE HISTORICAL MITIGATION CONTRACT WORK. GF MATCH IS FROM FY98 ALLOCATION.					
A MODIFIED AGREEMENT FOR PHASE 4 IS REQUESTED					
AUTHORITY TO PROCEED SUMMARY (FHWA)					
PRELIMINARY ENGINEERING		RIGHT OF WAY/UTILITIES		CONSTRUCTION	
Reconnaissance Study: PE up to Location: PE thru Final PS&E: Final PS&E thru Award (S):		Titles & Plans: Appraisals & Acquisitions: Utility Relocation Work (S):		ATP with Construction:	
1/19/90 1/5/93 5/15/96 2/17/97		3/27/90 8/12/96 9/11/96		2/11/97	
PHASE 2 SUMMARY		PHASE 3 SUMMARY		PHASE 4 SUMMARY	
Start Date: 1/19/90		Start Date: 3/27/90		Start Date: 2/11/97	
Cutoff Date: 3/24/97		Cutoff Date: 12/31/00		Cutoff Date: 12/31/98	
Federal Ratio: 88.68%		Federal Ratio: 88.68%		Federal Ratio: 90.97%	
Collocation Code: 24430355		Collocation Code: 24430387		Collocation Code: 24431812	
Ledger Code: 306532-21.22		Ledger Code: 306532-31.32		Ledger Code: 3065322-41.42	
PARTICIPATING		PARTICIPATING		PARTICIPATING	
NON-PAR		NON-PAR		NON-PAR	
PRIOR TOTAL: \$1,420,680.00		\$2,579,210.00		\$3,251,180.00	
CHANGE: \$0.00		\$0.00		\$184,692.00	
TOTAL: \$1,420,680.00		\$2,579,210.00		\$3,435,872.00	
PHASE 2 TOTAL: \$1,433,250.00		PHASE 3 TOTAL: \$2,589,210.00		PHASE 4 TOTAL: \$3,441,692.00	
FEDERAL		GF/IAHF		NOT REQUIRED	
TOTAL AUTH: \$1,047,551.58		\$0.00		DIRECTOR, DESIGN & ENGINEERING SERVICES	
PROJECT CONTROL		DATE		DATE	
SOUTHEAST REGIONAL DIRECTOR		DATE		DATE	
DATE		DATE		DATE	
DATE		DATE		DATE	

17.78. Project Funding Request

PROJECT FUNDING REQUEST

To: Martha Wysor, CIP Analyst, Project Control Date: _____

From: _____

Project Name: _____

AKSAS Project Number: _____ Federal Project Number: _____

APPROVALS OF REQUEST

Latest Estimates for all project phases were reviewed and updated prior to submission of this funding request and all phases in need of a funding adjustment that can be addressed at this time are included in this request. Support groups please indicate concurrence with this request:

PreConstruction
 Right of Way
 Utilities
 Construction

Post-Environmental Document Approval Funding Requests: I certify that the attached request is consistent with the approved environmental document: William F. Ballard, Regional Environmental Coordinator

REQUEST TYPE AND DOLLAR AMOUNT (Dollar amount of CHANGE, including non-participating funds):

Phase 2 Requests: \$ _____ Design PDA \$ _____ ROW P.E. PDA \$ _____ Utilities P.E. PDA

Phase 3 Requests: \$ _____ ROW PDA \$ _____ Utility Relocation PDA

Phase 4 Requests: \$ _____ Construction PDA

FHWA AUTHORITIES TO PROCEED (ATPs) REQUESTED:

Increase within an existing ATP ROW Appraisals & Acquisitions
 PE-Reconnaissance Study Utility Relocation
 PE through Environmental Document Approval Construction
 PE through Final PS&E

CONSULTANT INFORMATION (required for FHWA and FAA projects):

<u>Consultant Names</u>	<u>Services to be provided</u>	<u>Estimated Contract \$ Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

PHASE CUTOFF DATES (required for FHWA and FAA projects):

Phase 2: _____ Phase 3: _____ Phase 4: _____

ADDITIONAL INFORMATION OR SPECIAL REQUESTS (non-participating funds, etc.):

Rev. 3/98

17.79. Project Materials Report (Form 25D-058)



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES

PROJECT MATERIALS REPORT

Project No.: _____ Date: _____

Project Name: _____

Bid Item No.: _____

THE FOLLOWING ITEM HAS BEEN DELIVERED TO THE PROJECT:

Description: _____

Supplier: _____

Quantity: _____

Check One:

- Certification and/or inspection reports have been approved by the State or Regional Materials Engineer and are on file at the Project Office or Regional Materials Engineer's Office.
- Item described above is listed on the Approved Products List.
- Item described above is a standard shelf or local purchase item as per specification requirements.
- Other – include explanation for acceptance under remarks.

Remarks: _____

**ALL MATERIALS HAVE BEEN INSPECTED AND INVENTORIED AT THE PROJECT AND
FOUND TO BE ACCEPTABLE FOR INCORPORATION INTO THE WORK**

Project Engineer

Date

Distribution:
Original – Regional Materials Engineer
Copy- Project File

25D-058 Rev. 1/98

17.80. Proof of Construction for ROW (Form 25D-173)



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION
AND PUBLIC FACILITIES

PROOF OF CONSTRUCTION
FOR RIGHT OF WAY

_____ states that he is the Project Engineer for the State of Alaska, Department of Transportation and Public Facilities; that Project No(s) _____ has/have been constructed under his supervision; that construction commenced on the _____, and was completed on the _____; that the constructed project(s), as foresaid, conform(s) to the R/W limits as shown on the Project Right-of-Way Plans or the plat(s) which received the approval of the (agency) _____ on the following date: BLM/ADL # _____, on _____.

Signature of Project Engineer

Date

(THIS SECTION TO BE COMPLETED FOR BLM GRANTS ONLY, AS NEEDED, AFTER RECEIVED IN RIGHT-OF-WAY.)

I, _____, certify that I am the _____ of the Alaska Department of Transportation and Public Facilities; that Project No(s) _____ was/were actually constructed as set forth in the accompanying statement of _____, the _____ Engineer, and project(s) was/were constructed in compliance with the conditions of the grant.

Construction Engineer
State of Alaska
Department of Transportation
and Public Facilities

Attest: _____

25D-173 (1-03)

17.81. Proof of Use for Material Sources (25D-174)



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION
AND PUBLIC FACILITIES

**PROOF OF USE FOR MATERIAL SOURCES, MAINTENANCE &
STOCKPILE SITES, ROADSIDE & LANDSCAPE DEVELOPMENT AREAS**

_____ states that he is the Project Engineer for the State of
Alaska, Department of Transportation and Public Facilities; that _____
has been utilized under his supervision; as _____ on Project No(s)
_____; that the _____
as aforesaid, conforms to the plat which received the approval of the (agency) _____
_____ on the following date:
BLM/ADL # _____, on _____.

Signature of Project Engineer

Date

(THIS SECTION TO BE COMPLETED FOR BLM GRANTS ONLY, AS NEEDED, AFTER
RECEIVED IN RIGHT-OF-WAY.)

I, _____, certify that I am the _____ of the
Alaska Department of Transportation and Public Facilities; that _____
was actually utilized as set forth in the accompanying statement of _____,
the _____ Engineer, and Project was constructed in compliance with the
conditions of the grant.

Regional Director
State of Alaska
Department of Transportation
and Public Facilities

Attest: _____

25D-174 (1-03)

17.82. Public Interest Finding (PIF)

**PUBLIC INTEREST FINDING
Deadhorse Airport Parallel T/W
D10732/AIP 3-02-0339-01
30169842
Supplemental Agreement #1**

Supplemental Agreement #1 provides for the construction of a general aviation apron, lighted T/W and access road; plus security fencing on the main parking apron. The fencing has been mandated by the FAA and was not included in the contract earlier because of some layout complications that couldn't be resolved during the initial design phase.

As the oilfield development continues to grow on the North Slope so does the demand on the Deadhorse Airport as it is the only public, paved and lighted, all weather facility serving the area. The airport development has almost always been behind in keeping up with that demand. The last major capital improvement was the lighting and paving work in 1978. During the interim time the air carrier traffic has increased from one carrier to four and possibly five major carriers that make up to 11 scheduled flights per day. Also on this parking apron we have three helicopter operations that have had over 25 helicopters operating at one time; two fixed base operators with numerous daily flights and weekly oil company charter flights from the lower 48.

Add to this now the ever increasing transient and based small private aircraft traffic and you have a major congestion problem. The Airport Manager has to park planes in the designated taxiway on the south side of the parking apron, which is against FAA safety regulations. All of the above is compounded when the weather is poor since all traffic to the other area airports is diverted to the Deadhorse Airport with its Instrument Landing System.

The FAA axiom that air carrier operations and general aviation activity don't mix is definitely borne out at Deadhorse. Small aircraft owners are very reluctant to park on the main parking apron because (1) there are not any tie-downs and more importantly (2) the ever increasing damage potential because of the increasing jet traffic. Some owners have refused to park on the apron and on their own, without permission, parked on private property. This has created problems with and for the airport leaseholders. Also in light of increased terrorist activity the FAA is becoming particularly sensitive to maintaining separation of air carrier and general aviation activity for security reasons. Clearly there is a need for a general aviation facility at Deadhorse Airport.

The Department has an opportunity to satisfy this demand under the present contract at a very substantial savings to the State.

The design staff has outlined the construction costs, (mob-demob, field office and lab etc.), contract engineering and review and advertising costs, that we would incur if we advertise and administer this work under a new contract. These costs would be in addition to the costs to do the actual work under this proposal. (See Dan Urbach's memo June 26, 1985.) The estimate is \$230,000, and this is felt to be on the conservative side. This represents a 33% increase over our present proposal cost. Even if we started the review and advertising process today, the contract could not be advertised and awarded in time for construction this season. (See Dan Urbach's memo of June 17, 1985.) This approach is moot anyway if we add the above additional costs to the Engineer's estimate – there wouldn't be sufficient funds available to do the work.

In summary the present parking apron is no longer adequate to accommodate the heavy air carrier traffic and the general aviation mix. We have an opportunity to get a much needed facility for a very reasonable cost that will be available for public use this year, which otherwise would not be available under normal contract procedures. It is clearly in the State's best interest to take advantage of this opportunity to improve the safety, security and convenience of the flying public.

17.83. Report of Occupational Injury or Illness (Form 02-921)

STATE OF ALASKA REPORT OF OCCUPATIONAL INJURY OR ILLNESS					AWCB Case Number	DO NOT WRITE IN THIS COLUMN
EMPLOYEE'S NOTICE TO EMPLOYER					PLEASE ANSWER ALL QUESTIONS	
1. Name (Last, First, Middle Initial)		2. Telephone	3. Date of Birth	4. Sex <input type="checkbox"/> M <input type="checkbox"/> F	5. Social Security Number	FPS Code
6. Street and Number (Permanent Address)			7. Street and Number (Current Mailing Address if Different)			Occupation
City	State	ZIP Code	City	State	ZIP Code	Nature of Injury
8. Place of Injury or Exposure (City, Town, Village)			9. Date and Hour of Injury or Exposure to Disease Date: _____ Hour: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM		10. On Employer's Premises?	Part of Body
11. Full Name and Address of Attending Physician			12. Hospitalized as In-Patient? <input type="checkbox"/> Yes <input type="checkbox"/> No		13. Name and Address of Hospital	
						Source
						Type
14. Nature of Injury or Diagnosis and Part of Body Affected <input type="checkbox"/> Left <input type="checkbox"/> Right			15. Describe How the Injury or Illness Occurred (What Happened?)			Length of Service
						Weekly Wage
						Extent
				16. Employee's Signature (If not Available, Explain)		17. Date Signed
EMPLOYER'S NOTICE OF INJURY					PLEASE ANSWER ALL QUESTIONS	
19. Department		Division		19. Mailing Address (Street and Number)		
20. Region		Location	Code	City	State	ZIP Code Telephone
21. Name of Insurer SELF INSURED			22. Full Name and Address of Adjusting Company			
23. Date Employer First Knew Injury was work related		24. Time Employee Left Work Date: _____ Hour: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM		Mailing Address (Street and Number)		
25. Will Injury Result in Lost Time Beyond Date of Accident? <input type="checkbox"/> Yes <input type="checkbox"/> No		26. Date Returned to Work		27. Fatality (Death) <input type="checkbox"/> No <input type="checkbox"/> Yes Date: _____		City State ZIP Code Telephone
28. Place Where Injury or Exposure Occurred if Different from Employer's Mailing Address				29. Employee's Occupation		
30. Date Hired with Present Employer		31. Wage (Incl. Board, Room, Gratuities) \$ _____ Hr. <input type="checkbox"/> Day <input type="checkbox"/> Wk. <input type="checkbox"/> Mo.		32. Days Employee Works Per Week <input type="checkbox"/> 3 or less <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7		33. Name Scheduled Days Off
34. Workday Began <input type="checkbox"/> AM <input type="checkbox"/> PM		35. Was Employee Paid for Day of Injury? <input type="checkbox"/> Yes <input type="checkbox"/> No				
36. Alaska Unemployment Insurance Account Number (U.I. Acct. No.)			37. How Did the Accident Occur? (Give Details)			
38. What was the Employee Doing When the Injury or Illness Occurred? (Be Specific)						
39. Was Accident Caused by Failure of a Machine or Product? <input type="checkbox"/> Yes <input type="checkbox"/> No		40. Were Mechanical Guards or Other Safeguards Provided? <input type="checkbox"/> Yes <input type="checkbox"/> No		41. Name Machine, Substance or Object Which Directly Injured Employee		42. If Mechanical, Specifically What Part?
43. Names and Addresses of Witnesses				44. If the Accident was Caused by Anyone Besides Employee, Give Name and Address		
45. Dependents (Name and Address in Case of Death)						
46. If you Doubt Validity of Claim, State Reason						
47. Signature of Authorized Employer Representative				48. Title		49. Date Signed
EMPLOYER: Answer all questions in full, and immediately send report. Further instructions on back.			EMPLOYEE: Carefully read and follow instructions on front and back of green copy. VERY IMPORTANT.			
02-921 (8/90)			WORKERS COMPENSATION			19/11/workcomp.pm3/1

17.84. Report of Occupational Injury or Illness Instructions (Form 02-921)

To the Employee:

Obtain first aid or medical treatment immediately. Ask your doctor to file a "Physician's Report" (Form No. 07-6102).

Notify your employer and complete the "Employee's Notice to Employer" section of this form (No. 02-921), "Report of Occupational Injury or Illness."

If your injury causes disability longer than three calendar days, read and follow the instructions on the front of the green copy of this form. The insurer uses this information to compute your weekly compensation rate.

If you, your employer, and your doctor have promptly filed reports, there should be no delay in payment of compensation to you. The first installment of compensation becomes due on the 14th day after the employer has knowledge of the injury, death, illness or disease. After the first payment you should continue to receive a check every two weeks during the time you are totally disabled. If you have not received payment within 21 days from the date you were injured, contact the Workers' Compensation Division of the Alaska Department of Labor nearest you. You will not be paid for the first three days unless your disability lasts for more than 28 days.

Alaska Workers' Compensation Division Offices:

ANCHORAGE: 3301 Eagle Street, Suite 304
(Location)
P.O. Box 107019 (Mailing)
Anchorage, Alaska 99510-7019
PHONE: (907) 264-2424

FAIRBANKS: 675 Seventh Avenue, Station k
Fairbanks, Alaska 99701-4593
PHONE: (907) 451-2889

JUNEAU: 1111 West 8th Street, Suite 305
(Location)
P.O. Box 25512 (Mailing)
Juneau, Alaska 99802-5512
PHONE: (907) 465-2790

Division of Labor Standards and Safety Offices:

ANCHORAGE: 3301 Eagle Street, Suite 303
(Location)
P.O. Box 107022 (Mailing)
Anchorage, Alaska 99510-7022
PHONE: (907) 264-2452

JUNEAU: 1111 West 8th Street
(Location)
P.O. Box 21149 (Mailing)
Juneau, Alaska 99802-1149
PHONE: (907) 465-4856

To the Employer:

This form (02-921) must be completed and mailed immediately and in no case later than ten days after you have knowledge that one of your employees has been, or claims to have been, injured while in your employ plus interest.

"Injury" means accidental injury or death arising out of and in the course of employment, and an occupational disease, illness or infection which arises naturally out of the employment or which naturally or unavoidably results from an accidental injury.

Failure to file an Employer's Report within the required time may subject you and/or your insurer to the payment of a penalty equal to 20% of the amount of compensation payable to the injured employee.

Reports should be mailed to:

Blue Copy	Alaska Workers' Compensation Board P.O. Box 25512, Juneau, Alaska 99802-5512
White Copy	Division of Risk Management P.O. Box C, Juneau, Alaska 99811-0218
Pink Copy	Adjustor
Goldenrod Copy	Department Administrative Division or Office
Yellow and Green Copies	Employee

OSHA Form 101:

Reporting Industrial Fatalities and Accidents to the Division of Labor Standards and Safety:

Alaska Statute Section 18.60.058 requires employers to report to the Division of Labor Standards and Safety an employment accident which is fatal to one or more employees or which results in the overnight hospitalization of one or more employees. The report, which must be made immediately but no later than 24 hours after receipt by the employer of information that the accident has occurred, must relate the circumstances of the accident, the number of fatalities, and the extent of any injuries.

02-921 (Back) (8/90)

17.86. Request for Proposal (Form 25D-067)



STATE OF ALASKA
 Department of:
Transportation and Public Facilities
 Request for Proposal

R.F.P. No.:	_____
Project No.:	_____
Contract No.:	_____

<p>Project Name: _____</p> <p>Located at: _____</p> <p>Contractor: _____</p> <p>Address: _____</p> <p>_____</p> <p>_____</p>	<table border="1"> <tr> <th align="center">Summary of Significant Dates</th> </tr> <tr> <td>Request for Proposal, Issuance Date by the DEPARTMENT: _____</td> </tr> <tr> <td>Date of receipt of Proposal from the CONTRACTOR: _____</td> </tr> <tr> <td>Authorization to Proceed, Issuance Date by the DEPARTMENT: _____</td> </tr> </table>	Summary of Significant Dates	Request for Proposal, Issuance Date by the DEPARTMENT: _____	Date of receipt of Proposal from the CONTRACTOR: _____	Authorization to Proceed, Issuance Date by the DEPARTMENT: _____
Summary of Significant Dates					
Request for Proposal, Issuance Date by the DEPARTMENT: _____					
Date of receipt of Proposal from the CONTRACTOR: _____					
Authorization to Proceed, Issuance Date by the DEPARTMENT: _____					
<p>Recommended By: _____ Date: _____ <small>DEPARTMENT Construction Representative</small></p> <p>Reviewed By: _____ Date: _____ <small>Authorized DEPARTMENT Representative</small></p>					
<p>Description of Work (attach additional sheet(s) if necessary):</p> <p>_____</p> <p align="right">Signed: _____ <small>Project Engineer or Inspector</small></p>					
<p>Justification (attach additional sheet(s) if necessary):</p> <p>_____</p> <p align="right">Signed: _____ <small>Sponsor Agency Representative</small></p>					
<p align="center"><u>NOTE: This form shall not serve to authorize commencement of any Work.</u></p> <p>Change in Contract Price and Time (CONTRACTOR's breakdown required, attach additional sheet(s) if necessary):</p> <p>_____</p>					
<p>Per AS 36.30.400, I hereby certify that to the best of my Knowledge and Belief, the data submitted are accurate, complete and current and are the actual costs to the contractor of performing the additional work and/or supplying the additional Materials.</p> <p>Authorization to Proceed required by _____ to avoid additional costs.</p>	<p align="right">Signed: _____ <small>CONTRACTOR's Authorized Representative</small></p>				

25D-067

Request for Proposal, Page ___ of ___

Revised 1/03

17.91. Summary of Good Faith Effort Documentation. (Form 25A-332A)



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES

SUMMARY OF GOOD FAITH EFFORT DOCUMENTATION
Federal-Aid Contracts

Project Name and Number _____

Contractor: _____

List all items considered for DBE utilization. GFE requires at a minimum that the Contractor consider all items identified on Form 25A-324.

a. MATERIAL OR SPECIFIC ITEM OF WORK (SPECIFY PAY ITEM)	b. ACCEPTABLE DBE QUOTE RECEIVED ¹	c. # OF DBEs CONTACTED IN DBE DIRECTORY	d. # OF DBES THAT RESPONDED ²	e. # OF DBE QUOTES RECEIVED
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

- 1. Check if acceptable DBE quote was received (if so, skip c, d, and e)
- 2. Attach completed Contact Reports, Form 25A-321A

LIST ADDITIONAL ITEMS ON REVERSE SIDE

a. MATERIAL OR SPECIFIC ITEM OF WORK (SPECIFY PAY ITEM)	b. ACCEPTABLE DBE QUOTE RECEIVED	c. # OF DBEs CONTACTED IN DBE DIRECTORY	d. # OF DBEs THAT RESPONDED	e. # OF DBE QUOTES RECEIVED
9.				
10.				
11.				
12.				
13.				
14.				
15.				
<p>1. Check if acceptable DBE quote was received (if so, skip c, d, and e) 2. Attach completed Contact Reports, Form 25A-321A</p> <p>Comments:</p>				

17.92. Supervisor's Accident Investigation Report (Form 02-932)

STATE OF ALASKA

SUPERVISOR'S ACCIDENT INVESTIGATION REPORT

Name of Injured / Equipment / Property: _____

Job or Activity at Time of Accident _____ Date of Accident: _____

Exact Location: _____ Time: _____

<p>1. WHAT HAPPENED? _____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Tell what the employee was doing, how the accident occurred, and what thing directly injured the employee.</p>															
<p>2. WHY DID IT HAPPEN? _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Get all the facts by studying the job and situation involved. Use the following factors to help you identify the condition responsible:</p> <p>OPERATING FACTORS TO BE CONSIDERED:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Proper Equipment</td> <td style="width: 33%;">Proper Material</td> <td style="width: 33%;">People</td> </tr> <tr> <td>Selection</td> <td>Selection</td> <td>Selection</td> </tr> <tr> <td>Arrangement</td> <td>Placement</td> <td>Placement</td> </tr> <tr> <td>Use</td> <td>Handling</td> <td>Training</td> </tr> <tr> <td>Maintenance</td> <td>Use</td> <td>Supervision</td> </tr> </table>	Proper Equipment	Proper Material	People	Selection	Selection	Selection	Arrangement	Placement	Placement	Use	Handling	Training	Maintenance	Use	Supervision
Proper Equipment	Proper Material	People														
Selection	Selection	Selection														
Arrangement	Placement	Placement														
Use	Handling	Training														
Maintenance	Use	Supervision														
<p>3. WHAT SHOULD BE DONE? _____</p> <p>_____</p> <p>_____</p>	<p>What action(s) will prevent similar accidents in the future?</p>															
<p>4. WHAT HAVE YOU DONE THUS FAR? _____</p> <p>_____</p> <p>_____</p>	<p>Take or recommend action, depending on your authority.</p>															
<p>5. HOW WILL THIS IMPROVE OPERATIONS? _____</p> <p>_____</p> <p>_____</p>	<p>How will it help us meet our objective: ACCIDENT PREVENTION?</p>															
<p>6. WHAT IS YOUR ROUGH ESTIMATED COST OF THIS ACCIDENT?</p> <p>Cost of lost wages and medical expenses? _____</p> <p>Damage to State property or equipment? _____</p> <p>Damage to third parties, property and people? _____</p> <p style="text-align: right;">TOTAL _____</p>																

Investigated By: _____ Date: _____

Unit / Division / Department: _____

COMPLETE INSTRUCTIONS ARE ON THE BACK

02-932 (10/93)

SUPERVISOR'S INVESTIGATION REPORT

INSTRUCTIONS

A. Investigate each accident immediately after it occurs.

B. Distribution: (To be completed within 72 hours.)

BLUE	—	Your Division Director	
PINK	—	Your Copy	
GREEN	—	Division of Administration Services	
YELLOW	—	Division of Risk Management*	(Division of Risk Management) Department of Administration P.O. Box 110218 Juneau, AK 99811-0218

* on worker compensation injuries attach to yellow copy of form No. 02-921

1. WHAT HAPPENED?

GET ALL THE FACTS by studying the job and conditions where the accident occurred.

TELL WHAT THE EMPLOYEE WAS DOING when injured. (BE SPECIFIC. If employee was using tools or equipment or handling material, name them and tell what employee was doing with them.)

TELL HOW THE ACCIDENT OCCURRED. (Describe fully the events which resulted in injury. Tell what happened and how it happened. Name any objects or substances involved and tell how they were involved. Give full details on all factors which led or contributed to the accident.)

TELL WHAT THING DIRECTLY INJURED THE EMPLOYEE. (Name object struck against or struck by. If strain or hemia, name the object lifted, pulled, etc. If injury resulted solely from bodily motion, state the stretching, twisting, etc. which caused the injury.)

2. WHY DID IT HAPPEN?

Describe in detail the CONDITION RESPONSIBLE for the accident. It will always involve one or more of 12 OPERATION FACTORS listed. Be specific in identifying the equipment, material, and people involved and how they contributed to the accident.

3. WHAT SHOULD BE DONE?

Determine what CORRECTIVE ACTION is needed to prevent a similar accident in the future. The OPERATION FACTORS used in No. 2 should help you determine what should be done.

4. WHAT HAVE YOU DONE THUS FAR?

State what CORRECTIVE ACTION you have taken or recommended to your supervisor, depending on your authority.

5. HOW WILL THIS IMPROVE OPERATIONS?

State how the CORRECTIVE ACTION you have taken or recommended will help to prevent future accidents.

6. WHAT IS YOUR ROUGH ESTIMATED COST OF THIS ACCIDENT?

In most cases, actual accident costs are not available for some period of time. Please use your BEST JUDGEMENT IN MAKING A DETERMINATION of lost wages, medical expenses, damage to State property and/or equipment.

17.93. Supervisor's Safety Meeting Report (Form 25M-063)



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES

SUPERVISOR'S SAFETY MEETING REPORT

TOTAL EMPLOYEES _____ REGION CENTRAL
EMPLOYEES PRESENT _____ DIVISION _____
DATE _____ SECTION _____
LOCATION _____

SUBJECT DISCUSSED:

SAFETY SUGGESTIONS AND RECOMMENDATIONS:

SUGGESTIONS FOR FUTURE SAFETY MEETINGS:

All personnel in attendance shall sign back of original.

Safety Meeting Supervisor

Title

25M-063(4/98)

17.95. Support Information/Backup Sheet (Form 25D-064)

State of Alaska Department of Transportation and Public Facilities Support Information/Backup Sheet (Form 25D-064)							
Backup for: _____						Region Review	
Project Number: _____							
Project Name: _____						FHWA/ FAA (If required)	
Contract Amount: _____						FHWA/FAA Verbal Approval Date (If required) _____	
Comparison of Cost Due to Change							
Item No.	FA Code	Type Code	Item	Unit	Price	Quantity (+ or -)	Amount (+ or -)
Prepared By: _____ Project Engineer						Net Change This Order	
Prior Change Documents:						Total Previous Changes	
						Accumulative Change	
						% of Accumulative Change	
Type Code Summary							
DM:		UC:		E:		O:	
Description and Reason for Change							

Use Form 25D-065 for continuation, if required

25D-064 (2/04ge)

17.96. SWPPP Construction Inspection Report Form (Form 25D-100)

**National Pollutant Discharge Elimination System
Construction Activity
SWPPP Inspection Report Form 25D-100**

Date:

Project No.

Project Name:

Inspectors:

Contractor:

Type of Inspection (check one): Weekly: 0.5 inches or greater rainfall: Monthly:

Site Status (check one): Active Inactive Completed

Site Conditions: In Compliance with approved plan? Yes No
Approved plan is adequate for the site? Yes No

If no, explain deficiencies and list corrective actions on a continuation sheet (Form 25D-065)

1. Are erosion control measures identified in the SWPPP such as silt fence, straw bale dikes, diversion channels, etc., functioning properly? Yes No If no, explain deficiencies and list corrective actions on a continuation sheet (Form 25D-065).
2. Are any vehicles tracking sediment offsite? Yes No If yes, explain deficiencies and list corrective actions on a continuation sheet (Form 25D-065).
3. Are any significant signs of erosion or sediment entering receiving waters adjacent to the project that are associated with the construction activity? Yes No If yes, explain deficiencies and list corrective actions on a continuation sheet (Form 25D-065).
4. Is there any potential for pollutants to enter adjacent receiving waters from material storage areas or disposal sites? Yes No If yes, explain deficiencies and list corrective actions on a continuation sheet (Form 25D-065).

Note: Corrective actions listed may require an amendment to the SWPPP.

Actions to be taken:

No Action necessary. Continue routine inspections

Correct noted site deficiencies by (Date)

Submit SWPPP modifications as noted in written comments by (Date)

Final Inspection, project completed (Date)

I certify under penalty of law that this document and all of the attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

DOT & PF Project Engineer:

Contractor's Designated Representative:

Signature: _____

Signature: _____

17.99. Training Program Eligibility (Form 25A-314)

STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES
TRAINING PROGRAM ELIGIBILITY

The Alaska Department of Transportation and Public facilities (DOT&PF) approves training programs for use on DOT&PF highway construction projects intended to train minorities and women in the construction classifications in accordance with federal regulations. Trainee applicants are asked to voluntarily complete this form in order to determine eligibility.

1. Training Program Classification(s): _____

2. Do you have any prior construction experience: YES NO? If yes, in what classifications and how much experience (be specific)?

3. Have you ever worked in this training classification before? YES NO. If yes, for which contractor(s)? _____

Approximately how many hours/months/years of training and /or experience do you have in this training classifications(s)? _____ On which project(s) did you perform this type of work? Indicate year of project.

Did you receive journey scale while working in this training classification(s)?
 YES NO NOT SURE

4. Do you consider yourself a journey worker in this classification? YES NO If not, what type of specific instruction do you feel you need to be proficient in this type of work?

How many hours, days, or weeks of training do you think it would take to teach you to do this work without supervision or assistance from other co-workers? _____

5. Are you willing to enter a training program of a minimum of 500 hours in this classification at sub-journey scale for that length of training, if at the end of training the company will employ you as a journey worker in this type of work on this project? YES NO

6. Are you willing to keep track of your hours of training and participate in evaluations of your progress?
YES NO

7. If you satisfactorily complete the training program, are you willing to work for this Company as a journey worker for the remainder of the project, if needed?
 YES NO

Gender: M F

Ethnicity: Alaska Native American Indian Black
 Asian/Pacific Islander Caucasian Hispanic

Applicant Signature _____

Date _____

25A-314
(12/91)

17.100. Training Utilization Report (Federal) (Form 25A-311)



**STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES**

TRAINING UTILIZATION REPORT
Federal-Aid Highway Contracts

Project Name and Number

Training Program Special Provision, Section 645 specifies the number of minorities and/or women to be trained and the number of hours of training to be provided under this Contract. The Contractor may train non-minority males in compliance with Section 645, but only if documentation of good faith efforts has been submitted to, and approved by, the Engineer, prior to the employment of such non-minority male(s). Good faith efforts, at a minimum, must be as extensive as the recruitment efforts listed in the EEO Bid Conditions, 7b, 7c, 7d, 7e, 7i, 7j, and 7l (25A301).

The number of individuals to be trained under this Contract is _____.
The number of hours of training to be provided is _____.

This Training Special Provision implements 23 CFR 230, Subpart A, Appendix B. Contractors can use either training programs approved by the U.S. Department of Labor, Bureau of Apprenticeship & Training (USDOL/BAT) or training programs approved by ADOT&PF. The Contractor must complete this form indicating the type of training to be provided, the number of individuals to be trained in each trade or job classification, the number of hours of training to be provided³, and the anticipated training start date.

1. To be completed by Contractors using USDOL/BAT Training Programs: Indicate below the number of apprentices, total number of hours, and anticipated start dates for each craft selected:

APPROVED CRAFTS, CERTIFICATION NUMBERS AND JURISDICTIONAL AREAS							
STATEWIDE JURISDICTION				SOUTH OF THE 63° PARALLEL			
Craft/Cert Number	Number of Apprentices	Number of Hours	Start Date	Craft/Cert Number	Number of Apprentices	Number of Hours	Start Date
Asbestos Worker #90032				Carpenter #74032			
Bricklayer #85040				Painter #72820			
Cement Mason & Plasterer #78533				Pipefitter #72586			
Electrician #81299				Plumber #83534 ¹			
Ironworker #76779				Sheetmetal Worker #74072			
Op. Engineer #X90349				Other # _____			
Roofer #X90317				NORTH OF THE 63° PARALLEL			
Piledriver ² (3/30/75)				Carpenter #47990			
Camp Culinary ² (4/25/74)				Painter #77750			
Laborer #XAK92T017				Fitter/Plumber #75055			
Other # _____				Sheetmetal #76781			
Other # _____				Other # _____			
				Other # _____			

¹ Juneau Jurisdictional area is #83534 and Anchorage area is #72586.
² U.S. DOL does not assign Certification numbers to these training programs. Only approval dates.
³ The total number of hours of training should equal the hours of training required under Section 645.

2. To be completed by Contractors using ADOT&PF training programs: Indicate below the type of training, number of trainees, number of hours of training (500 hours per trainee), and anticipated start dates.

Job Classification	Number of Trainees	Total Hours	Anticipated Start Date(s)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. To be completed by all Contractors as part of the Contractor's EEO affirmative action program, the Contractor certifies that all training will be provided by the Contractor as stated in items 1 OR 2 above, in accordance with Training Program Special Provision, Section 645.

_____	_____
Company Name	Company Address
_____	_____
Point of Contact	Phone Number
_____	_____
Signature of Authorized Company Representative	Date

To be completed by the ADOT&PF OJT Coordinator prior to contract award:

Training Program(s) approved for this Project and Date Approved:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Signature of ADOT&PF OJT Coordinator	Date

Monthly Employment Utilization Report

U.S. Department of Labor
 Employment Standards Administration
 Office of Federal Contract Compliance Programs



This report is required by Executive Order 11246, Sec. 203. Failure to report can result in contracts being cancelled, terminated or suspended in whole or in part and the contractor may be declared ineligible for further Government contracts or federally assisted construction contracts.

INSTRUCTIONS ON REVERSE SIDE

OMB No. 1215-0163
 Expires: 12-31-97

2. Current Goals

3. Reporting Period

4. Name and Location of Company Reporting

Minority From To
 Female From To

5. **6. TOTAL FEDERAL & NON-FEDERAL CONSTRUCTION WORK HOURS**

CONSTRUCTION TRADE (Including Laborers)	Classifications	6a. Total All Hours By Trade		6b. Black (Not of Hispanic Origin) (Hours)		6c. Hispanic (Hours)		6d. Asian or Pacific Islander (Hours)		6e. American Indian or Alaskan Native (Hours)		7. Minority Percentage of Total Hours	8. Female Percentage of Total Hours	9. Total Number of Employees		10. Total Number of Minority Employees	
		M	F	M	F	M	F	M	F	M	F			M	F	M	F
Journey Worker	Journey Worker																
	Apprentice																
Trainee	Trainee																
	Total New Hire																
Journey Worker	Journey Worker																
	Apprentice																
Trainee	Trainee																
	Total New Hire																
Journey Worker	Journey Worker																
	Apprentice																
Trainee	Trainee																
	Total New Hire																
Journey Worker	Journey Worker																
	Apprentice																
Trainee	Trainee																
	Total New Hire																

The above information represents all the hours worked by this company's construction employees at government and non-government construction work sites in the MA or EA indicated above for this reporting period.

NOTICE: ONE REPORT PER MA/EA If work is performed in more than one MA/EA, a separate report is submitted for each.

Photo-copy and computer generated reports are acceptable.

11. Company Official's Signature and Title

12. Telephone Number (Include area code)

13. Date Signed

Page

17.102. USDOL Form CC-257 Instructions

INSTRUCTIONS FOR FILING MONTHLY EMPLOYMENT UTILIZATION REPORT (CC-257)

The Monthly Utilization Report is to be completed by each subject contractor (both prime and sub) and signed by a responsible official of the company. The reports are to be filed by the 10th day of each month during the term of the contract, and they shall include the total work-hours for each employee classification in each trade in the covered area for the monthly reporting period. All reports shall be submitted to the OFCCP office in your area. (Additional copies of this form may be obtained from the U.S. Department of Labor, Employment Standards Administration, OFCCP's office for your area.)

THE PRIME CONTRACTOR SUBMITS A REPORT FOR ITS TOTAL CONSTRUCTION WORK FORCE TO OFCCP. EACH SUBCONTRACTOR SEPARATELY SUBMITS A REPORT FOR ITS TOTAL CONSTRUCTION WORK FORCE TO OFCCP.

Company Reporting	Any company which has a construction contract with the U.S. Government or a contract funded in whole or in part with Federal funds. Includes subcontractors on such contracts.
Minority	Includes Blacks, Hispanics, American Indians, Alaskan Natives, and Asian and Pacific Islanders—both men and women.
1. Name of MA or EA The MA may be a Metropolitan Statistical Area (MSA) or a Primary MSA (PMSA).	The name of the Metropolitan Area or Economic Area for which this report reflects hours of work. If necessary contact local OFCCP office for correct name.
2. Current Goals (Minority & Female)	See contract Notification, or contact local OFCCP office.
3. Reporting Period	Monthly, or as directed by OFCCP, beginning with the effective date of the contract.
4. Name and Location of Company Reporting	This is the company whose work hours are being reported on this form.
5. Construction Trade	Only those construction crafts which contractor employs in the MA or EA including laborers.
6a. - 6e. Work-Hours of Employment	6a. The total number of male HOURS and the total number of female HOURS worked by employees in each classification. 6b.-e. The total number of male HOURS and the total number of female HOURS worked by each specified group of minority employees in each classification.
M = Male F = Female	
Classification	The level of accomplishment or status of the worker in the trade (Journey Worker, Apprentice, Trainee). Combine all new hire hours.
7. Minority Percentage of Total Hours	The percentage of total minority work-hours of all work-hours (the sum of columns 6b, 6c, 6d, and 6e divided by column 6a; just one figure for each construction trade).
8. Female Percentage of Total Hours	For each trade the number reported in 6a. F divided by the sum of the numbers reported in 6a. M and F.
9. Total Number of Employees	Total NUMBER of male and total NUMBER of female employees working in each classification of each trade in the contractor's aggregate work force during reporting period.
10. Total Number of Minority Employees	Total NUMBER of male minority employees and total NUMBER of female minority employees working in each classification in each trade in the contractor's aggregate work force during reporting period.

Public Burden Statement

We estimate that it will take an average of 60 minutes per response to complete this collection of information, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Office of IRM Policy, (1215-0163) U.S. Department of Labor, Room N1301, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

DO NOT SEND THE COMPLETED SURVEY TO THE OFFICE SHOWN ABOVE.

17.103. Waiver Request for Alternate Procurement Methods (Form 25D-026)

**State of Alaska
Department of Transportation & Public Facilities**

**WAIVER REQUEST
FOR ALTERNATE PROCUREMENT METHODS**

Send waiver requests over \$100,000 to: DOT&PF Chief Contracts Officer; 3132 Channel Drive (Mail Stop 2500); Juneau, Alaska 99801-7898
Fax to: 1 (907) 586-8365; For Information: 1 (907) 465-6990

Requesting Department/Division:		Date:	Bid Waiver Number (FOR HQ USE ONLY)
Project Number(s) AKSAS/Federal:	Estimated Price:	Signature of Requesting Procurement Officer:	
Project Name:		Person to Contact (Project Manager & Telephone Number):	
Part 1 - Type of Procurement Method: <input type="checkbox"/> Competitive Sealed Bid <input type="checkbox"/> Competitive Sealed Proposal <input type="checkbox"/> * Limited Competition <input type="checkbox"/> * Emergency <input type="checkbox"/> * Single Source <input type="checkbox"/> Small Procurement * Regardless of the contract amount, any purchase using Emergency, Single Source or Limited Competition procurement must be assigned a Bid Waiver Number and PART 6 of this form must be completed for each resulting contract.			
Part 2 - Specific description of procurement requirements to be waived: For example time of advertisement, public notice, selection process, record keeping, etc.			
Part 3 - Project Description: Provide the following information: 1) The contract requirements with attached schematics, planning documents, or narratives as appropriate. 2) A cost estimate that is linked to the contract requirements. Identify funding source: (General Fund, Bond, Federal, etc.) and if Federally funded attach copy of Federal approval. 3) A time line depicting the project schedule from inception to completion. 4) List all agency officials with oversight or supervisory responsibility for the project. Attach separate page(s) if necessary.			
Part 4 - Justification: Provide the following information: 1) Need for construction or services. 2) Reason(s) for agency's inability to conform with standard procurement methods. 3) Statutory or Regulatory authorization (if other than budgetary process) for construction or services. 4) Impact on project if waiver is not approved -- explain in detail. 5) Any other documentation/ justification the agency feels would be helpful in evaluating the request. Attach separate page(s) if necessary.			

PART 5 - Department of Transportation and Public Facilities' comments and recommendations:

Recommended: Approval Disapproval Other Return for other/further action as noted above.

Reviewed by:	Signature:	Date:
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<input type="checkbox"/>	Approved	by: _____	Date:
<input type="checkbox"/>	Approved with conditions		
<input type="checkbox"/>	Disapproved	Title if executed by other than the Commissioner of Department of Transportation and Public Facilities	

Part 6 - Record of procurement: submit a completed copy of this entire form to the Chief Contracts Officer within 15 days of executing the contract. When multiple contracts are awarded under an emergency procurement, information pertaining to all contracts must be reported. Under such circumstances, attach additional information in the format below - for each contract.

Complete all of the following:

- (1) Name of Supplier or Contractor: _____ (2) Their Zip Code: _____
- (3) Contract Amount: \$ _____ (4) Contract Identification Number: _____ (5) Commodity Code: _____
- (6) Type (i.e. Professional Service, Construction, Supplies, etc.): _____
- (7) Listing of services, products, construction (etc.) obtained: _____
- (8) If other vendors, suppliers or contractors submitted bids or proposals, list the number of these that were:

Alaskan Bidders # _____	"Out-of-State" Bidders # _____
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This PART 6 prepared by: _____ Date: _____

17.104. Work Zone Accident Report (Form 25D-123)



















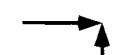



Work Zone Accident Report (Form 25D-123)

Use the Tab key to navigate (or click in a shaded area), and fill in the requested information.
In boxes with Yes or No choices, press the spacebar or click in a square to fill it in.

1. Project name:	■		
2. Project number:	■		

3. Investigated by (DOT&PF employee):	■	11. Drivers' names:	■
4. Date & time of arrival at accident site:	■	12. Were contractor's vehicles or equipment involved?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Roadway name:	■	13. Were state vehicles or equipment involved?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Milepost:	■	14. Did the accident happen within project limits?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Date of accident:	■	15. Did the accident happen within the active work zone?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Time of accident:	■	16. Was the accident related to construction activity?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Number of vehicles involved:	■	17. Were the police on-site? (If Yes, attach their report)	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Roadway conditions:	■	18. Weather conditions:	■

19. Severity of injuries:	■		
20. Accident Narrative:	■		

Types of Collisions		LEGEND			
		Symbols			
	Head-on		Moving Vehicle		Channelizing Device
	Left turn		Backing Vehicle		Type II Barricade
	Rear End		Non-involved Vehicle		Type II Barricade
	Sideswipe - Opposite Direction		Pedestrian		Arrow Panel
	Sideswipe - Same Direction		Parked Vehicle		Sign Support
	Out of Control		Overturned Vehicle		Flagger
	Right Angle		Fixed Object		Work Area
	Fixed Object				

21. Accident Diagram. You may paste an electronic sketch here or attach a hard copy sketch. Use symbols as shown in the Legend above, and include all traffic control devices, vehicles, and equipment involved or near the accident. Indicate North.

