COST ESTIMATE FOR CONSTRUCTION SECURITY FOR PUBLIC INFRASTRUCTURE (S-3)

Instructions: Complete all items; only one road per form; exact name for Developer entering into PWA required.

Project Name: ___________________________________________ Date: __________________________________

Project Location: ___________________________________________ Tax ID No: _____________________________

Proposed Road Name: ________________________________________ R/W Width (feet): ______________________

Stationing: _________________________________________ Linear Feet: __________ No. of Lanes: ______________

1. ROADS
   a. Survey Stake Out Clearing = _______________
   b. Clearing = _______________
   c. Grading = _______________
   d. Curb & Gutter = _______________
   e. Paving = _______________
   f. Sod, Seeding & Mulching = _______________
   g. Guardrails & Barricades = _______________
   h. Signs, Road Markings & Traffic Control Devices = _______________
   i. Sidewalks & Walkways = _______________
   j. Erosion & Sediment Controls = _______________

       Subtotal = _______________

2. STORM DRAINAGE
   a. Survey Stake Out = _______________
   b. Pipes & Underdrains = _______________
   c. Endwalls & Inlets = _______________
   d. Channels & Ditches = _______________
   e. Sod, Seeding & Mulching = _______________

       Subtotal = _______________
       Subtotal Security Cost Estimate = _______________
       15% Administrative Fee = _______________
       Total Security Cost Estimate = _______________

Estimate Preparer’s Name: ___________________________________ Company Name: _____________________________

Address: _________________________________________________ City, State: ___________________ Zip: __________

Preparer’s Signature: _______________________________________

County Plan Tracking Number: ___________________________________________________________________________

Developer / Entity Entering into PWA: ___________________________________________________________________

Name and Title of Authorized Person Signing PWA: __________________________________________________________

Contact Name (if other than authorized signer): ______________________________________________________________

Contact’s Mailing Address: ___________________________________________ Phone Number: ______________________

Engineering Plan Approval Date: ____________________________________________________________

Cost Estimate Approved By: ___________________________________ Date: ________________________________

9/24/18