

SRF Disbursement Request Form

Participant Information									
Name:	City of West Lafayette	SRF Loan Number:	WW141079 07						
DUNS Number:	04 455 2636	CCR Number:	6NKJ2			Request	36		
Mailing	711 West Navajo Street								
City:	West Lafayette	State:	IN			ZIP	47906		
Contact Person:	Judith C. Rhodes, Clerk-Treasurer			Contact Phone Number:	765-775-5150				
Authorized Representative:	Mayor John R Dennis, or Cl-Tr J. Rhodes			Authorized Representative Phone Number:	765-775-5100				
If requesting reimbursement to the Participant by wire transfer please provide the following information:									
Bank Name:				Bank Routing Number:					
Account Name:				Account Number:					
Loan Information									
Description of work for which claim is being made (services, fees, type of work, etc.):	Sheraton and Fairway Knolls Lift Station Improvements								
Is any part of this claim funded by an alternate funding source?								<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
If yes, please identify the source and amount of the claim funded by the alternate source (OCRA, SAP, Local Funds):							\$		
Is any part of this claim funded by the Indiana Brownfields Program?								<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Has the Participant paid the request and is now seeking reimbursement?								<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Is any part of this claim a result of a change order? If yes, please attach the SRF change order approval letter.								<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Are there Green Project Reserve components involved in this request?								<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
If yes, please describe:									
Loan Financial Information									
Original Loan Amount:								\$	2,610,000.00
Total Amount of Previous Disbursements:								\$	2,411,763.00
Balance Available After this Disbursement:								\$	190,294.00
Amount to Contractor for this Request:								\$	7,943.00
Is any part of this request a partial or final release of retainage to the contractor?								<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Contractor Name:	Greeley and Hansen			DUNS Number:	04 569 9949				
Mailing address:	Lockbox 619776, PO Box 6197								
City:	Chicago	State:	IL			ZIP Code:	60680-6197		
Wiring Information:									
Bank Name:				Bank Routing Number:					
Account Name:				Account Number:					
Retainage Amount for this Request:								\$	
Participant requests that the retainage amount be held by SRF:									<input type="checkbox"/>
Participant requests that the retainage amount be sent to the Participant via check to the mailing address listed above:									<input type="checkbox"/>
Participant requests that the retainage amount be sent to the following bank:									<input type="checkbox"/>
Bank Name:				Bank Routing Number:					
Account Name:				Account Number:					
Total Amount of this Request:								\$	7,943.00
The undersigned hereby certifies this request for disbursement is, to the best of my knowledge and belief, true and accurate and made in accordance with the conditions of the project agreement, that the certified payrolls received in connection with any enclosed construction invoices are in compliance with the Davis Bacon Act/ US Department of Labor requirements of 29 CFR 5.5(a)(1).									
Authorized Representative							Date:	DEC 01 2015	
For Internal Use Only:									
Approved By:				Date:			GPR	\$	



GREELEY AND HANSEN

100 S. Wacker Drive, Suite 1400
Chicago, Illinois 60606
p 312 558 9000
f 312 558 1006
www.greeley-hansen.com

RECEIVED

NOV 23 2015

UTILITY DIRECTOR

November 16, 2015

Mr. David Henderson
Utility Director
City of West Lafayette
Wastewater Treatment Utility
500 South River Road
West Lafayette, IN 47906

Subject: Sheraton & Fairways Knolls Lift Station Improvements
Invoice No. 0000450656

Dear David:

The enclosed invoice is for services related to the Sheraton & Fairways Knolls Lift Station Improvements in accordance with the agreement dated July 2, 2013.

Invoice No. 0000450656 covers services provided through November 6, 2015.

- Participated in October 28th on site progress meeting
- Reviewed pay application number 7
- Coordination with City and RPR related to transducer and data logger at Sheraton LS
- Reviewed electrical test results
- Coordination with SRF to clarify payment request

Please call me if you have any questions.

Thank you.

Sincerely,

Greeley and Hansen

Joseph M. Teusch

Jmt/img

INVOICE



GREELEY AND HANSEN

For customer service, call 312 578 2375.

P.O. Box 6197
Chicago, Illinois 60680-6197
p 312 558 9000
www.greeley-hansen.com

Billing Number: 20
Invoice Number: INV-0000450656

Invoice Date: 11/16/2015

Description: AUTHORIZATION: FOR ENGINEERING SERVICES FOR THE SHERATON & FAIRWAY KNOLLS LIFT STATION IMPROVEMENTS IN ACCORDANCE WITH THE AGREEMENT DATED JULY 2, 2013

Bill To:
CITY OF WEST LAFAYETTE
ATTN: MR. DAVID HENDERSON
UTILITY DIRECTOR
500 SOUTH RIVER ROAD
WEST LAFAYETTE, IN 47906

Remit To:
GREELEY AND HANSEN
LBX 619776
P.O. Box 6197
CHICAGO, IL 60680-6197

Customer Number: 0791

Contract Value
Cost: \$308,000.00
Fee: \$0.00
Total: \$308,000.00

Project Number: 07911.01
Project Name: SHERATON & FAIRWAY LS IMP
Terms: NET 30
Due Date: 12/16/2015

Cumulative Amount Billed: \$274,899.08

Billing Period From: 10/10/2015
To: 11/06/2015

D/L w/Multiplier 3.2
Total Labor

Sub-Consultants
Travel
Printing
Total ODC's

Mark-up on ODC's
Mark-up Subtotal

Invoice Subtotal
Invoice Total

	Current Amount	Cumulative Amount
	\$7,721.15	\$238,231.64
	\$7,721.15	\$238,231.64
	\$0.00	\$32,797.50
	221.38	890.19
	0.00	-300.00
	\$221.38	\$33,387.69
	\$0.00	\$3,279.75
	\$0.00	\$3,279.75
	\$7,942.53	\$274,899.08
	\$7,942.53	\$274,899.08

Current Incurred Hours: 61.00

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Sum of Entered Hours

CLEMENS HEALY TEUSCH Grand Total

10/12/2015		1.50		1.5
10/13/2015		1.00		1
10/14/2015		1.50		1.5
10/15/2015		2.50		2.5
10/16/2015		1.00		1
10/19/2015	1.50	1.00	1.00	3.5
10/20/2015	2.00	2.00		4

INVOICE



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Billing Number:	20	Project Number:	07911.01	Invoice Date:	11/16/2015
Invoice Number:	INV-0000450656	Project Name:	SHERATON & FAIRWAY LS IMP		

Non-Labor Supporting Schedule

Group Description: Total ODC's

Description	Transaction	JE No./ Vchr No.	Current FY/Pd	Vendor	Invoice ID	Current Amount
<u>Line Description:</u>	<u>Travel</u>					
Travel Local	Travel Local	248556	2015/11	GRANT CLEMENS	EXP 10/6-8/15	\$221.38
Total: Travel						<u>\$221.38</u>
Total ODC's						<u>\$221.38</u>

