

LABOR QUOTE

SALESPERSON: BILL PEABODY	DATE OF ORDER 02-15-05	REF.#: 129964 / 129966
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CUSTOMER INFORMATION		
COMPANY NAME: TUFTS UNIVERSITY ATHLETICS DEPT.	HOME PHONE:	P.O.#:
CUSTOMER NAME (LAST, FIRST): CALDWELL, GARY	BUSINESS PHONE: (857) 257-3728	HOW DID YOU FIND OUT ABOUT US:
STREET ADDRESS: COLLEGE AVENUE	FAX #: (617) 627-3614	WHAT ARE YOU COVERING:
CITY: MEDFORD	STATE: MA	ZIP: 02155
		DIMENSIONS OF WHAT IS BEING COVERED:

STYLE	WIDTH	X	LENGTH	X	HEIGHT
TRUSS	46'		80'		18'

THE FOLLOWING LABOR WILL BE SUPPLIED BY:

SHELTERWORKS

INSTALL DATE

APPROXIMATE ARRIVAL TO JOB SITE

- 1) SITE PREP
- 2) LAYOUT DETAIL (SEE FOOTINGS)
- 3) SET LOWER TUBE, REBAR
- 4) POUR CONCRETE _____ PSI
- 5) ERECT STEEL
- 6) HOOK ANCHORS,
- 7) AUGER ANCHORS
- 8) MASON ANCHORS
- 9) COVER ENDS
- 10) INSTALL DOORS
 CURTAIN ROLL-UP PANEL ROLL-UP ZIPPER
- 11) COVER ROOF
- 12) ROLL UP SIDES
- 13) ENGINEERED
- 14) NON-ENGINEERED
- 15) SUPERVISOR @ _____ per 8 hrs. to include drive time
 to and from job, 1/2 hr. lunch, two 15 min. breaks plus all expenses

- EXTRAS
- MOVE EXISTING BUILDING APPROXIMATELY 150' FROM CURRENT LOCATION; TO BE ANCHORED TO CONCRETE PIERS**
- 6500.00 to include replacement hardware**
- MATERIALS TO BE DELIVERED BY INSTALLER

CUSTOMER WILL SUPPLY

- 1) CLEAR AND LEVEL AREA FOR STRUCTURE
- 2) SECURE AREA FOR STRUCTURE
- 3) ANY PERMITS IF NEEDED; TOWN, STATE, ETC.
- 4) ANY AND ALL TAX FORMS MUST BE SUPPLIED
- 5) 110 VOLT ELECTRIC FOR FOR TOOLS
- 6) ELECTRICAL HOOK-UP FOR FAULT SHUTTER, INFLATOR, ETC.
- 7) F.O.B. MATERIALS AS PER QUOTE
- 8) PIPING OF FURNACE

...CONTINUED ON NEXT PAGE

CUSTOMER WILL SUPPLY CONT.

9) CRATING OF FURNACE

10) TRAVEL EXPENSES

- a. TOLLS
- b. FERRY
- c. MILEAGE
- b. LODGING
- b. _____ PER DAY PER MAN

14) PAYMENT DUE UPON COMPLETION.

15) CASH OR CERTIFIED CHECK

16) CERTIFIED PIERS OR SLAB WITH APPROVED ANCHOR BOLTS BY OWNER

17) CUSTOMER IS RESPONSIBLE FOR HAVING ALL UTILITIES MARKED OUT, BY CALLING LOCAL "CALL BEFORE YOU DIG" COMPLETE WITH CONFIRMATION NUMBER

11) EQUIPMENT CAPACITY HEIGHT

- a. SCISSOR LIFT _____
 - b. BOOM _____
 - c. CRANE _____
- LIFT CAPACITY _____
 _____ DIA X _____ DEPTH OF AUGER

COMMENTS

12) _____ YARDS OF CONCRETE PSI

- 13) a. LINEAR FEET OF REBAR # _____
- b. _____
- c. _____

TERMS

- _____ PAYMENT DUE IN FULL
- 1/2 DOWN
- 1/4 DUE UPON COMPLETION OF BOLTING RAFTERS TOGETHER
- 1/4 DUE UPON COMPLETION OF ERECTING STEEL
- 1/4 DUE UPON COMPLETION OF ANCHORING
- 1/4 DUE UPON COMPLETION OF PULLING COVERS
- _____ DUE UPON COMPLETION OF INSTALLATION OF DOORS, FRAMES, SHUTTERS

PAYMENTS MUST BE MADE UPON COMPLETION OF EACH TASK IN ORDER FOR WORK TO CONTINUE, AND SIGNATURE OF WORK DONE IS APPROVED.

A CERTIFICATE OF COMPLETION WILL BE ISSUED UPON COMPLETION OF WORK, AND RECEIPT OF PAYMENT IN FULL.

Takedown \$ 6400.00
 Erect LABOR \$ 11200.00
 CHEMICAL ANCHORS _____ 576.00

Total cost of labor:	\$	18,176.00
Tax	\$	-
Total	\$	18,176.00

I have received and understand all of the above details and have completed all necessary forms. I understand that any missing material, design problems or any situations that hinder progress beyond the control of the contractor but result in time, travel, materials or other expenses will be charged as extras. Soil conditions include augering clay or tume. Does not include rock drilling, boring, dewatering, or other conditions that would require extraordinary means of auguring etc.

Customer Signature _____

Contractor Signature PS

ShelterWorkz

FAX TRANSMISSION

To: Gary Caldwell From: Bill Peabody @ ext 551

Fax: (617) 627-3614 Date: 02-15-05

Phone: _____ Pages: 2

Re: _____ cc: return fax is 203 937-9313

Urgent For Review Please Comment Please Reply Please Recycle

• Comments: sample piece - you would only need 2' in diameter.

Bill







