Alpha Paving Industries

15 Roundville Ln #100 Round Rock, TX 78664 (512) 677-9001

Prepared By: Robert Salinas robert@alphapaving.com



Prepared For:

Ryan Companies 100 Congress Ave. ##100 Austin, TX 78701

Attention:

Joe Delong

Project Address:

Whole Foods Southwest Distribution Center 10111 Hill Ln Manor, TX 78653

Dear Joe Delong, thank you for the opportunity to provide you with this proposal. We look forward to answering any questions you may have and working with you on this project.

TAX STATUS: COMMERCIAL NEW CONSTRUCTION

\$0.00

This is a new construction lump sum project. No sales tax will be charged to you. To perform the scope of work described above, ALPHA PAVING WILL PAY ALL SALES TAX FOR MATERIAL, EQUIPMENT, AND SERVICES NEEDED.

TRAFFIC CONTROL \$5,800.00

Lane Closure with Flaggers

ASPHALT MILL & OVERLAY \$406,600.00

Mill and Overlay 7,369 Square Yards, to a depth of 6 inches.

- We will Roto-Mill existing asphalt, clean and haul off site.
- Asphalt will be inspected and a tack coat will be installed to create a bond.
- TXDOT Type D Asphalt will be placed by a self-propelled paving machine at the above depth and rolled and compacted to a uniform consistency.
- Owner is responsible to ensure all vehicles are removed (towing if required) from the affected areas no later than 7:00 a.m.

PROPOSAL TOTAL: \$412,400.00

TERMS AND CONDITIONS: Alpha Paving Industries LLC will supply all labor, equipment, and materials for the proposed work unless specified above otherwise. This quote is inclusive and based on Alpha Paving performing all items above. Any deviation from the work described above may require a revised bid. Change orders will only be executed upon written orders. We reserve the right to progress bill for work partially completed. Alpha Paving will carry General Liability and Workman's Compensation Insurance. It is the customer's responsibility to notify Alpha Paving of any utilities buried less than 12 inches deep including private utilities and irrigation. Alpha Paving will not be held liable for any damage to such utilities if not notified prior to start of work. Payment made after specified payment terms could result in late fees, accrued interest, and attorney's fees. Retainage is not to be held unless specified by separate contract. This proposal is valid for 30 days.

PROPOSAL ACCEPTANCE: The above prices, specifications, terms, and conditions are accepted. Payment will be made in full NET 30 DAYS after completion of work unless specified otherwise under a separate written agreement.

I agree to complete a Project Information Form (next page) prior to scheduling of work.

Client Signature:	Today's date:	



15 Roundville Lane, Round Rock, Texas 78664 PHYSICAL Post Office Box 6565, Round Rock, Texas 78683 MAILING E13 677 0001 L 513 677 0002 and Language Language Company and Language Language Company and Language Language Company and Language Co

512.677.9001 | 512.677.9002 FAX | www.alphapaving.com

COMMERCIAL | MUNICIPAL | AVIATION | MULTI FAMILY
PAVING - REPAIRS - SEALCOAT - STRIPING - CONCRETE - ADA

Project Information Form

In order for work to be scheduled, a SIGNED PROPOSAL and a completed PROJECT INFORMATION FORM are required. Thank you!

Project Name (as shown on p	lans OR on our propo	osal):	
Project Address (exact legal address of property):			
What is the Tax Status of this Project? □ I'M NOT SURE □ TAXABLE PROJECT □ NO SALES TAX : EXEMPT □ NO SALES TAX : RESALE □ TAX ON MATERIALS ONLY SALES TAX ON TOTAL PLEASE PROVIDE TAX EXEMPT CERT PLEASE PROVIDE RESALE CERT RESIDENTIAL OR NEW CONST			
Alpha Paving is Wor	king for:	☐ THE OWNER / OWNER'S AGENT> FILL OUT SECTION A ONLY ☐ THE GENERAL CONTRACTOR> FILL OUT SECTION A + B ☐ A SUBCONTRACTOR> FILL OUT SECTION A + B + C	
Section A:	Company Name:		
ALPHA PAVING'S	Mailing Address:		
	City, State, Zip:	, ,	
Billing Conta	ict / Phone Number: illing Email Address:	() -	
Di	ming Linuii Auuress.		
	Company Name:		
Section B:	Mailing Address:		
	City, State, Zip:		
Billing Contact Person / Phone Number:		() -	
· · · · · · · · · · · · · · · · · · ·			
Section C:	Company Name:		
GENERAL CONTRACTOR	Mailing Address:		
	City, State, Zip:		
Billing Contact Perso	on / Phone Number:	() -	
Additional Informati			
☐ YES ☐ NO IS THERE A SEPARATE CONTRACT WHICH SPECIFIES ANY RETAINAGE TO BE HELD? IF YES, HOW MUCH?%			
 ☐ YES ☐ NO IS PROJECT GOVERNED UNDER A CONTROLLED INSURANCE PROGRAM? (ROCIP, OCIP, CCIP) ☐ YES ☐ NO IS PROJECT SUBJECT TO COMPLIANCE MONITORING? (COMPLIANCE DEPOT, SERVICE ALIVE, RMIS, MY COI) 			
		PLEASE FILL OUT THE FOLLOWING INFORMATION:	
BONDING	ng Company Name:		
BONDING	Bond Number:		
INFORMATION Address, City, State, Zip:			
Bonding Agent / Phone Number:		() -	