



Transportation Improvement Board
Updated Cost Estimate

Form generated on 28 Apr 2026

Agency **MILLWOOD**
 TIB Project No **6-E-166(003)-1**
 Project Name Argonne Road Reconstruction - Phase 2 - E Trent Ave to
 150 ft s/o S Frederick Ave

BID OPENING
 Submit form PRIOR to award of contract

Current TIB Commitment
 \$ 1,409,230

TOTAL COST ESTIMATE AT BID OPENING

DESIGN PHASE		CONSTRUCTION PHASE		
Design Engineering	Right of Way	Construction Engineering	Construction Other	Contract Amount
191,000		218,535		1,278,465
Phase Total	191,000	Phase Total		1,497,000
				Total Project Cost
				1,688,000

Include a cost breakdown for Construction Other

DETERMINATION OF ELIGIBLE COST

Enter the current estimated totals for Landscaping and Other Noneligible Cost					
Engineering Over 30 Percent	Other Noneligible Cost	Total Landscaping Cost	Allowable Landscaping	Noneligible Landscaping	Total Noneligible Cost
25,996	0	0	0	0	25,996
Total Eligible Project Cost					1,662,005

Include a cost breakdown of Other Noneligible costs and justification for Engineering Over 30 Percent

Change in Eligible Total Project Cost (Total Eligible Project Cost - Previous Phase Eligible Cost)	178,605
Calculated Total TIB funds	1,409,230

If requesting any increase in TIB funds, contact your TIB Engineer first.

Requested Change	163,770
Requested Total TIB funds	1,573,000

Enter explanation for the change in Total Project Cost in the space below

Based on the cost information shown above, the agency requests a TIB fund increase in the amount of \$163,770

FUNDING PARTNER PARTICIPATION

Update Funding Partner(s) and their current participation		
Funding Partners	Previous Commitment	Current Participation
TIB	1,409,230	1,573,000
MILLWOOD	74,170	115,000
WSDOT	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
TOTALS	\$1,483,400	\$1,688,000

Funding Partner Total is Correct

REQUIRED ATTACHMENTS

- ▶ Submit BID TABULATIONS with Updated Cost Estimate
- ▶ Submit construction consultant agreement with Updated Cost Estimate
- ▶ Include a cost breakdown of Other Noneligible costs in cell B24
- ▶ Enter justification for COST INCREASE in cell B32

AGENCY OFFICIAL


By my signature below, I certify the costs shown are true and correct and I am authorized to financially indebt the agency.

Shawna Beese

Printed or Typed Name

Mayor

Title

 5/6/2026

Signature & Date

REGISTERED ENGINEER

I certify the bid tabulations are accurate and correct.

Matthew R. Gillis, PE

Printed or Typed Name

 5/5/2026

Signature & Date