Opened 6/13/25 8:52Am

JUG MP



ASPHALT SURFACING SINCE 1926

ROADS • STREETS • HIGHWAYS • DRIVEWAYS • PARKING LOTS

www.scottconstruct.com

Ph. 608-254-2555

In WI: 800-843-1556

Fax: 608-254-2249

P.O. BOX 340 LAKE DELTON, WI 53940

"An Equal Opportunity Employer."

Submitted To:	Contact:	Proposal/Date:
CITY OF RICHLAND CENTER	JASON KOCH	6/06/2025
RICHLAND COUNTY	608-647-3559	H0530611
450 S MAIN ST		6/6/2025
RICHLAND CENTER, WI 53581	prevailing wage determination number:	None
•		Provided

ITEM DESCRIPTION

EST. QTY.

UNITS.

UNIT PRICE

TOTAL

PAVE 1.5 INCH COMPACTED 5LT HOT MIX

1,500

TON

\$81.94

\$122,910.00

TACK INCLUDED

SPECIAL CONDITIONS:

ALL WORK INCLUDES 1 MOBILIZATION.

NO TRAFFIC CONTROL EXCEPT THAT SCI WILL SUPPLY FLAGGERS FOR OUR WORK.

MILLING IF WANTED T & M.

CITY SUPPLY RISER RINGS FOR MANHOLE AND WATERBOX.

IF SCI SUPPLIES WATER VALVE RISER, THEY WOULD BE AN EXTRA \$38.00 A RING

If SCI determines the scope and/or quantity of work to be performed under contract differs from this proposal, SCI retains the right to price adjust prior to commencement of the work.

Payment Terms: Net 30

NOTE: This proposal may be withdrawn by us if not accepted within 30 days from the date of issue.

Acceptance of Proposal - - The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Date of Acceptance:								
Customer Signature(s):								
SCI Representative Signature:	Tanner Kaun							

ADDITIONAL AGREEMENT PROVISIONS GENERAL TERMS

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. All agreements contingent upon strikes, accidents, or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workmen's Compensation and General Liability Insurance.

NOTICE OF LIEN RIGHTS

AS REQUIRED BY THE WISCONSIN CONSTRUCTION LIEN LAW, CONTRACTOR HEREBY NOTIFIES OWNER THAT PERSONS OR COMPANIES FURNISHING LABOR OR MATERIAL FOR THE CONSTRUCTION ON OWNER'S LAND MAY HAVE LIEN RIGHTS ON OWNER'S LAND AND BUILDINGS IF NOT PAID. THOSE ENTITLED TO LIEN RIGHTS, IN ADDITION TO THE UNDERSIGNED CONTRACTOR, ARE THOSE WHO CONTRACT DIRECTLY WITH THE OWNER OR THOSE WHO GIVE THE OWNER NOTICE WITHIN SIXTY (60) DAYS AFTER THEY FIRST FURNISH LABOR OR MATERIALS FOR THE CONSTRUCTION AND SHOULD GIVE A COPY OF EACH NOTICE RECEIVED TO THE MORTGAGE LENDER, IF ANY. CONTRACTOR AGREES TO COOPERATE WITH THE OWNER AND THE OWNER'S LENDER, IF ANY, TO SEE THAT ALL POTENTIAL LIEN CLAIMANTS ARE DULY PAID.

DELIQUENCY CHARGE

Payment is due and payable upon completion of work. IF OWNER/PURCHASER defaults on the payment required, OWNER/PURCHASER will be liable for all costs of collection, including reasonable attorneys' fees, and a delinquency charge on the balance at the maximum rates allowed by law. If OWNER/PURCHASER is an organization as defined by the Wis. Statute. Section 421.301 (28), the delinquency Charge rate shall be 1.5% per month (18%APR) plus all costs of collection, including reasonable attorneys' fees. CONTRACTOR retains title to all merchandise covered by the Agreement until full payment is received according to the above terms of sale. The reference to attorney fees is inapplicable if this is a consumer transaction.

INDIVIDUAL LIABILITY

The undersigned OWNER/PURCHASER or agent of OWNER/PURCHASER agrees to be individually liable for all the terms of the Agreement, regardless of whether he or she signs individually or as an agent for any other individual, partnership or corporation.

If this proposal indicates prevailing wage rates are not incorporated and in the event Scott Construction is awarded this project based on this proposal and it is later determined that Prevailing Wage Rates apply to this project, the owner agrees to pay Scott Construction any difference between the wage rate applied by Scott Construction in preparing this proposal and the actual Prevailing Wage Rate imposed in accordance with Wisconsin's Prevailing Wage Rate Law, Section 66.0903 of the Wisconsin Statues.

SCI will provide work zone traffic control while SCI crews are working on the road. The customer is responsible for any and all signage after SCI crews finish their work and leave the road. Unless specified, sweeping after SCI crews leave the road is Not included in SCI's scope of work.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/26/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s)

tl	his c	ertificate does not	confer rights to	the	certi	ificate holder in lieu of su	ich end	orsement(s)	policies may).	require an endorseme	III. A S	tatement on
PRODUCER					CONTACT NAME:							
Hαι	ISMa	nn Group, Inc. ent Street 4th Floo	or				PHONE (A/C, No, Ext): (608) 257-3795 FAX (A/C, No): (608) 257-4324					
PO	Box	259408	51				E-MAIL ADDRES	ss: commer	cial@myha	us.com		
Mad	dison	n, WI 53725-9408						IN	SURER(S) AFFOR	RDING COVERAGE		NAIC#
						INSURER A: Middlesex Insurance Co				23434		
INSURED							INSURER B:					
		Scott Constr	uction, Inc.				INSURER C:					
		PO Box 340 E9827 Count	v Road P				INSURER D:					
			ells, WI 53965					INSURER E :				
							INSURER F:					
CC	VER	AGES	CER	RTIFICATE NUMBER:			REVISION NUMBER:					
II C	NDICA ERTI XCLU	ATED. NOTWITHS FICATE MAY BE IS JSIONS AND CONDI	TANDING ANY R SSUED OR MAY TIONS OF SUCH I	EQUI PER POLIC	REMI TAIN, CIES.	SURANCE LISTED BELOW FENT, TERM OR CONDITION THE INSURANCE AFFORI LIMITS SHOWN MAY HAVE	N OF A DED BY	NY CONTRA 7 THE POLIC REDUCED BY	CT OR OTHER CIES DESCRIB PAID CLAIMS.	R DOCUMENT WITH RESP	ECT TO	WHICH THIS
INSF LTR		TYPE OF INSUI		INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)	LIM	ITS	4 000 000
Α	X	COMMERCIAL GENER								EACH OCCURRENCE	\$	1,000,000 500,000
		CLAIMS-MADE	X OCCUR			A0236022004		1/1/2025	1/1/2026	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	10,000
	-		·					į		MED EXP (Any one person)	\$	1,000,000
										PERSONAL & ADV INJURY	\$.	3,000,000
	GEN	N'L AGGREGATE LIMIT A								GENERAL AGGREGATE	\$	2,000,000
	-	POLICY X PRO-	LOC							PRODUCTS - COMP/OP AGG		2,000,000
A	A.1.17	OTHER:								COMBINED SINGLE LIMIT	\$	1,000,000
'`	X	OMOBILE LIABILITY ANY AUTO				A0236022001		1/1/2025	1/1/2026	(Ea accident)	\$.,,,,,,,,,
		OWNED AUTOS ONLY	SCHEDULED AUTOS			A0230022001		1/1/2023	17172020	BODILY INJURY (Per person)		
	X	HIRED AUTOS ONLY	NON-OWNED AUTOS ONLY							BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	\$	
		AUTOS ONLY	AUTOS ONLY							(Per accident)	\$	
A	X	UMBRELLA LIAB	X occur							EACH OCCURRENCE	\$	5,000,000
		EXCESS LIAB	CLAIMS-MADE			A0236022006		1/1/2025	1/1/2026	AGGREGATE	\$	5,000,000
		DED X RETENTION	ons 0							AGGREGATE	\$	
A	WOF	RKERS COMPENSATION EMPLOYERS' LIABILIT								X PER OTH-	1	
						A0236022005		1/1/2025	1/1/2026	E.L. EACH ACCIDENT	\$	500,000
	OFF (Mar	PROPRIETOR/PARTNER ICER/MEMBER EXCLUDE INDICATE IN NH)	ED?	N/A						E.L. DISEASE - EA EMPLOYE		500,000
	If yes	s, describe under CRIPTION OF OPERATI								E.L. DISEASE - POLICY LIMIT		500,000
											1	
L												
DES	SCRIPT	TION OF OPERATIONS /	LOCATIONS / VEHICI	ES (A	ACORI	O 101, Additional Remarks Schedu	ule, may b	e attached if mo	ore space is requi	red)		
<u> </u>												
CE	RTIF	FICATE HOLDER					CANO	ELLATION				
City of Richland Center 450 S. Main St.						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						

AUTHORIZED REPRESENTATIVE

Received 6/9/2025 10154pm

SCOTT

ASPHALT SURFACING SINCE 1926

P.O. BOX 340 LAKE DELTON, WI 53940

CITY OF RICHLAND CENTER
2025 STREET
OVERLAY PROJECT