

Louisville Metro Council City Agency Request

Neighborhood Development Fund (NDF)

▪ Capital Infrastructure Fund (CIF)

Municipal Aid Program (MAP)

Paving Fund (PAV)

Primary Sponsor: Bill Hollander

Amount: \$3,128.00 **Date:** August 31, 2017

Description of program/project including public purpose, additional funding sources, location of project/program and any external grantee(s):
 Grant to Division of Community Forestry to remove dead/decaying trees at the following properties in the right-of-way.

- 1947 Frankfort Avenue
- Island in front of 111 Crescent Court
- Center median in front of 711 Fairhill

Tree plantings will follow the tree and stump removals.

City Agency: Division of Community Forestry

Contact Person: Erin Thompson

Agency Phone: 502.574.4030

I have reviewed this request for an expenditure of city tax dollars, and have determined the funds will be used for a public purpose and have the attached documentation from the receiving department concerning the project/expenditure.

9		\$3,128.00	8/31/17
District #	Council Member Signature	Amount	Date

Approved by: _____
 Appropriations Committee Chairman Date

Clerk's Office & OMB Use Only:

Request Amount: _____ Amended Amount: _____

Reference #: _____ To OMB: _____

Budget Revision #: _____

Account #: _____

To Project Manager: _____ Completion Date: _____

Actual Cost: _____ Funds Returned: _____



Bob Ray Company, Inc.

"No Job Too Small, No Tree Too Tall"

www.bobrayco.com

Customer Name Louisville Metro Date 7/6/2017
 Phone 502-216-6768 Cell _____ Fax _____
 Job Location 711 Fairhill Dr City Louisville State KY Zip 40207
 Billing Address (if different) _____ Email erin.thompson@louisville.gov

-Specifications for Contract (or) Estimates -

Grind stump in common area next to 711 Fairhill Dr
 grind 10'-12" below grade

\$100

We propose to furnish material, labor and equipment to complete work in accordance with above specifications. The Bob Ray Co., Inc.'s estimated cost of the performance of the tasks presented above is \$_____. Should there be any reason to modify the scope of work, the Bob Ray Company, Inc. will seek your approval with a revised estimated cost before commencing any such additional work.

All work is to be completed in a workmanlike manner. All agreements are contingent upon weather, accidents and other delays beyond our control. See reverse side for the terms and conditions of work to be performed. The above price(s) and specification(s) are satisfactory and hereby accepted. You are authorized to do the work as specified.

This agreement and any noted attachments constitutes the entire agreement between the Bob Ray Co., Inc. and the below signed concerning the subject matter hereof. This agreement supersedes all prior agreements, discussions, representations, warranties and covenants between the Parties with respect to the above specified work. There are no warranties, representations, covenants or agreements, expressed or implied, between the parties except those expressly set forth in this agreement. Any amendments or modifications of this agreement shall be in writing and executed by the contracting parties.

Your signature below will constitute a binding contract

Representative's Signature _____ Customer's Signature _____

Date _____ Date _____





Bob Ray Company, Inc.

"No Job Too Small, No Tree Too Tall"

www.bobrayco.com

Customer Name Louisville Metro / Office of Sustainability Date 8.15.2017
 Phone _____ Cell 574-3927 Fax _____
 Job Location Island in front of 111 Crescent Ct. City _____ State _____ Zip _____
 Billing Address (if different) 527 West Jefferson Street 6th Floor 40202 Email barry.edgar@louisvilleky.gov

-Specifications for Contract(or) Estimates -

- 1). Dead CrabApple tree 19" \$768.00
- 2). Declining Sugar Maple tree 29" \$864.00
- 3). Declining Sugar Maple tree 26" \$864.00
- 4). Declining Service Berry tree 12.8" \$432.00

We propose to furnish material, labor and equipment to complete work in accordance with above specifications. The Bob Ray Co., Inc.'s estimated cost of the performance of the tasks presented above is \$ \$2928.00. Should there be any reason to modify the scope of work, the Bob Ray Company, Inc. will seek your approval with a revised estimated cost before commencing any such additional work.

All work is to be completed in a workmanlike manner. All agreements are contingent upon weather, accidents and other delays beyond our control. See reverse side for the terms and conditions of work to be performed. The above price(s) and specification(s) are satisfactory and hereby accepted. You are authorized to do the work as specified.

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Your signature below will constitute a binding contract.

Representative's Signature Adam Palmer 773-1120 Customer's Signature _____
 Date 8.15.2017 Date _____





Bob Ray Company, Inc.

"No Job Too Small, No Tree Too Tall"

www.bobrayco.com

Customer Name Lou Metro Attn: Erin Date 7.27.2017
 Phone _____ Cell 216-6768 Fax _____
 Job Location 1947 Frankfort Ave City Louisville State KY Zip 40206
 Billing Address (if different) on file Email _____

-Specifications for Contract (or) Estimates -

Remove stump in front of Clifton Baptist Church by fire hydrant, grind and haul excess.

We propose to furnish material, labor and equipment to complete work in accordance with above specifications. The Bob Ray Co., Inc.'s estimated cost of the performance of the tasks presented above is \$ 100.00. Should there be any reason to modify the scope of work, the Bob Ray Company, Inc. will seek your approval with a revised estimated cost before commencing any such additional work.

All work is to be completed in a workmanlike manner. All agreements are contingent upon weather, accidents and other delays beyond our control. See reverse side for the terms and conditions of work to be performed. The above price(s) and specification(s) are satisfactory and hereby accepted. You are authorized to do the work as specified.

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Your signature below will constitute a binding contract.

Representative's Signature Adam Palmer 773-1120 Customer's Signature _____
 Date 7.7.2017 Date _____



NDF, CIF, MAP OR PAV INTERAGENCY CHECKLIST

Interagency Name: Division of Community Forestry	
Program/Project Name: Tree and Stump Removal in the right-of-way	
	Yes/No/NA
Request Form: Is the Request Signed by all Council Member(s) Appropriating Funding?	Yes
Request Form: If matching funds are to be used, are they disclosed with account numbers in the request form description?	NA
Request Form: If matching funds are to be used, does the amount of the request exclude the matching fund amount?	NA
Request Form: If other funds are to be used for this project, are they disclosed with account numbers in the request form description?	NA
Funding Source: If CIF is being requested, does Metro Louisville own/will own the real estate, building or equipment? If not, the funding source is probably NDF.	Yes
Funding Source: If CIF is being requested, does the project have a useful life of more than one year? If not, the funding source is probably NDF.	Yes
Ordinance Required: Is the NDF request to a Metro Agency greater than \$5,000? If so, an ordinance is required.	NA
Ordinance Required: Is the request a transfer from NDF to cost center? If so, is the amount given for the fiscal year \$25,000 or less?	No
Supporting Documentation: Does the attachment include a valid estimate and description of cost?	Yes

Submitted by: Wyle Cotton

Date: 08/31/17