

Application and Certificate for Payment

TO OWNER: City of Lexington PO Box 70 Lexington, NE 68850	PROJECT: Dawson Co. Opportunity Center, Phase III 1501 Plum Creek Parkway Lexington, NE 68850 VIA ARCHITECT: BCDM Architects 100 Court Ave., Ste. #204 Des Moines, IA 50309	APPLICATION NO: 4 PERIOD TO: 7/31/11 CONTRACT FOR: General Construction CONTRACT DATE: 3/23/11 PROJECT NOS: / / BCDM# 4682-05	Distribution to: OWNER <input type="checkbox"/> ARCHITECT <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> FIELD <input type="checkbox"/> OTHER <input type="checkbox"/>
FROM CONTRACTOR: Central Contracting Corporation PO Box 68 Kearney, NE 68848			

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract. Continuation Sheet, AIA Document G703, is attached.

1. ORIGINAL CONTRACT SUM	\$ 906,600.00
2. Net change by Change Orders	\$ -0-
3. CONTRACT SUM TO DATE (Line 1 ± 2)	\$ 906,600.00
4. TOTAL COMPLETED & STORED TO DATE (Column G on G703)	\$ 624,774.00
5. RETAINAGE:	
a. <u>10</u> % of Completed Work (Column D + E on G703)	\$ 60,490.30
b. <u>10</u> % of Stored Material (Column F on G703)	\$ 1,987.10
Total Retainage (Lines 5a + 5b or Total in Column I of G703).....	\$ 62,477.40
6. TOTAL EARNED LESS RETAINAGE	\$ 562,296.60
(Line 4 Less Line 5 Total)	
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT	\$ 457,597.80
(Line 6 from prior Certificate)	
8. CURRENT PAYMENT DUE	\$ 104,698.80
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)	\$ 344,303.40

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner	\$	\$
Total approved this Month	\$	\$
TOTALS	\$	\$
NET CHANGES by Change Order	\$	

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR: CENTRAL CONTRACTING CORPORATION

By: Steven E. Lentell Date: 8/2/11

State of: NE Steven E. Lentell, Vice-President

County of: Buffalo

Subscribed and sworn to before
me this 2nd day of August 2011

Notary Public: Deborah L. Schrack

My Commission expires: 10/29/11



ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising this application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED \$ _____

(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and on the Continuation Sheet that are changed to conform with the amount certified.)

ARCHITECT:

By: _____ Date: _____

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

CAUTION: You should sign an original AIA Contract Document, on which this text appears in RED. An original assures that changes will not be obscured.

CONTINUATION SHEET

AIA DOCUMENT G703

PAGE 2 OF 2 PAGES

AIA Document G702, APPLICATION AND CERTIFICATE OF PAYMENT, containing Contractor's signed Certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

Use Column I on Contracts where variable retainage for line items may apply.

APPLICATION NUMBER: 4

APPLICATION DATE: 8/2/11

PERIOD TO: 7/31/11

ARCHITECT'S PROJECT NO: BCDM# 4682-05

A ITEM NO.	B DESCRIPTION OF WORK	C SCHEDULED VALUE	D E WORK COMPLETED		F MATERIALS PRESENTLY STORED (NOT IN D OR E)	G		H BALANCE TO FINISH (C - G)	I RETAINAGE
			FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD		TOTAL COMPLETED AND STORED TO DATE (D + E + F)	% (G ÷ C)		
1.	General Conditions	\$39,619.00	\$20,350.00	\$5,700.00		\$26,050.00	66	\$13,569.00	
2.	Bond	\$9,083.00	\$9,083.00			\$9,083.00	100	\$0.00	
3.	Demolition	\$21,644.00	\$14,584.00	\$5,474.00		\$20,058.00	93	\$1,586.00	
4.	Sitework	\$4,220.00		\$4,220.00		\$4,220.00	100	\$0.00	
5.	Concrete	\$8,777.00	\$2,505.00	\$6,272.00		\$8,777.00	100	\$0.00	
6.	Masonry	\$4,334.00	\$4,334.00			\$4,334.00	100	\$0.00	
7.	Steel	\$5,368.00	\$850.00			\$850.00	16	\$4,518.00	
8.	Rough Carpentry	\$845.00	\$845.00			\$845.00	100	\$0.00	
9.	Millwork & Cabinets	\$6,210.00				\$0.00	0	\$6,210.00	
10.	Roofing	\$3,905.00		\$3,905.00		\$3,905.00	100	\$0.00	
11.	Sealant	\$1,606.00				\$0.00	0	\$1,606.00	
12.	H.M. Drs Hardware	\$32,818.00	\$21,620.00			\$21,620.00	66	\$11,198.00	
13.	Access Drs	\$515.00	\$466.00			\$466.00	90	\$49.00	
14.	Glass & Glazing	\$20,257.00				\$0.00	0	\$20,257.00	
15.	Drywall	\$140,382.00	\$139,447.00			\$139,447.00	99	\$935.00	
16.	Flooring	\$94,193.00	\$45,430.00			\$45,430.00	48	\$48,763.00	
17.	ACT	\$22,046.00			\$12,785.00	\$12,785.00	58	\$9,261.00	
18.	Painting	\$23,591.00		\$10,740.00		\$10,740.00	46	\$12,851.00	
19.	Specialties	\$10,697.00	\$1,589.00		\$7,086.00	\$8,675.00	81	\$2,022.00	
20.	Plumbing	\$93,052.00	\$71,329.00	\$1,312.00		\$72,641.00	78	\$20,411.00	
21.	HVAC	\$218,258.00	\$96,076.00	\$54,112.00		\$150,188.00	69	\$68,070.00	
20.	Fire Sprinkler	\$22,644.00				\$0.00	0	\$22,644.00	
21.	Electrical	\$122,536.00	\$74,460.00	\$10,200.00		\$84,660.00	69	\$37,876.00	
22.									
23.									
24.									
25.									
		\$906,600.00	\$502,968.00	\$101,935.00	\$19,871.00	\$624,774.00	69	\$281,826.00	



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
7/26/2011

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 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).

PRODUCER INSUR, Inc. 1004 N Diers Ave Ste 140 PO Box 5884 Grand Island NE 68802-5884	CONTACT NAME: Kianne Lamb PHONE (A/C No. Ext.): (308) 382-8000 FAX (A/C No.): (308) 384-3417 E-MAIL ADDRESS: PRODUCER CUSTOMER ID #: 00007201 INSURER(S) AFFORDING COVERAGE NAIC #
INSURED T-C Ceilings, Inc 3236 Bachman Street PO Box 879 Grand Island NE 68802	INSURER A: United Fire & Casualty Co 13021 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES **CERTIFICATE NUMBER:** CL111410762 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS

INSR LTR	TYPE OF INSURANCE	ADDITIONAL INSURANCE	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY		60399208	1/1/2011	1/1/2012	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea. occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					MED EXP (Any one person) \$ 5,000
						PERSONAL & ADV INJURY \$ 1,000,000
						GENERAL AGGREGATE \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER					PRODUCTS - COMPROP AGG \$ 2,000,000
	<input checked="" type="checkbox"/> POLICY	<input type="checkbox"/> PROJECT				\$
A	AUTOMOBILE LIABILITY		60399208	1/1/2011	1/1/2012	COMBINED SINGLE LIMIT (Ea. accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS					PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS					Uninsured/Underinsured \$ 1,000,000
	<input type="checkbox"/> NON-OWNED AUTOS					Business Auto Extension \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB	<input checked="" type="checkbox"/> OCCUR	60399208	1/1/2011	1/1/2012	EACH OCCURRENCE \$ 5,000,000
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE				AGGREGATE \$ 5,000,000
	<input type="checkbox"/> DEDUCTIBLE					\$
	<input checked="" type="checkbox"/> RETENTION \$ 10,000					\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		60399208	1/1/2011	1/1/2012	<input checked="" type="checkbox"/> WC STATUS LIMITS <input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y/H <input checked="" type="checkbox"/> N/A				E.L. EACH ACCIDENT \$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE \$ 500,000
						E.L. DISEASE - POLICY LIMIT \$ 500,000
A	Rented/Leased Equipment		60399208	1/1/2011	1/1/2012	Limits \$26,000
A	Installation Floater		60399208	1/1/2011	1/1/2011	Limits \$50,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

RE: Dawson County Opportunity Center
 For materials stored at T-C Ceilings in the amount of \$12,000.

CERTIFICATE HOLDER (308) 237-4767 Central Contracting PO Box 68 Kearney, NE 68848	CANCELLATION 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 Jay Kaspar/KIANNE
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