

# REQUEST FOR CHANGE ORDER

- OWNER
- ARCHITECT
- CONTRACTOR
- FIELD
- SUBCONTRACTOR



PROJECT: **KEY WEST CITY HALL - GLYNN ARCHER**  
 1300 White Street  
 Key West, Florida 33040

REQUEST FOR CHANGE ORDER NO.: **005**

REQUEST FOR CHANGE ORDER DATE: **11/27/2015**

PROJECTS NO.: **1415**

CONTRACTOR: **Burke Construction Group, Inc.**  
 3210 Flagler Avenue  
 Key West, FL 33040

DATE OF CONTRACT: 12/19/2014

**The Contract is changed as follows:**

Structural repairs to Bldg. A approx. 18 sq ft. of Minor Spalling Repairs are needed.

Structural repairs to Bldg. B approx. 20.11 sq.ft. of Severe Spalling Repairs are needed.

These repairs consist of several small areas in Bldg.A and Severe Spalling Repairs of the Window Columns in Bldg. B. The Auditorium has very minor that will be taken care with Window Jamb Columns in Bldg. B.

Please understand that the identified areas have become apparent while removing windows and doors and may increase as repairs progress.

**Our Estimate is based on a Two Hundred Fifty Dollars (\$ 250.00) per Sq. Ft.**

*FIELD LOG DOCUMENTATION ATTACHED • (PONSAGIE & KREED)*

*TIME NEEDS TO DOCUMENT CRITICAL PATH IMPACT - VERIFY*

Subtotals	\$	8,321.21
Contractor Fee: 10%		832.12
Contractor OH: 2.5%		208.03
GL Insurance: 1%		83.21
Bond : 1%		83.21

**TOTAL RCO: \$ 9,527.79**

**CONTRACT TIME INCREASE / (DECREASE): 14**

*TIME VERIFIED 1.13.16 BASED ON FIELD LOG.*

**Burke Construction Group, Inc.**  
 CONTRACTOR  
 3210 Flagler Avenue  
 ADDRESS  
 Key West, FL 33040

**Reservations:** This proposal is based solely on the usual cost elements such as labor material and normal markups, and does not include any amount for additional changes in the sequence of work, delays, disruptions, rescheduling, lost productivity, extended or unabsorbed overhead, overtime, acceleration and or impact costs, unless specifically stated. The right is expressly reserved to amend and make claim for any and all of these related items prior to final settlement of this contract.

BY (Signature)  
 David J Hahn, Project Manager  
 (Typed Name)

DATE 11/27/2015

# INFORMATION BULLETIN (IB)

---

**PROJECT:** Key West City Hall at Glynn Archer      **INFORMATION BULLETIN NO.** Five (5)  
**OWNER:** City of Key West      **DATE OF ISSUANCE:** June 9, 2015  
**TO CONTRACTOR:** Burke Construction Group, Inc.      **CONTRACT FOR:** Renovation  
3210 Flagler Ave.      **CONTRACT DATED:** Dec 30, 2014  
Key West, FL 33040      **ARCHITECT'S PROJECT NO.** 1305  
**ARCHITECT:** Bender & Associates Architects, P.A.  
410 Angela Street  
Key West, FL 33040

---

If the Contractor believes that the information contained herein will result in a change in the contract time or amount, Contractor must submit a written Request for Change Order within fifteen (15) days of the date of issuance of this I.B.

Some concrete spalling was discovered during selective demolition of windows at Building "B". Spalling repairs are authorized to proceed on a Unit Price basis of \$250/sq. foot plus Contractor mark up as identified on the attached Change Order Request No. 5. This authorization shall not exceed \$45,000.

Ron Gage and Kreed Howell will monitor progress and agree on total quantities to be used in a future Change Order.

BENDER & ASSOCIATES ARCHITECTS, P.A.



---

by: Bert Bender, Bender & Associates Architects

cc: Kreed Howell, Jim Bouquet, Javier Torres, Mark Keister, Laney Stoddard

Attachments: Change Order Request No. 5

# REQUEST FOR CHANGE ORDER

- OWNER
- ARCHITECT
- CONTRACTOR
- FIELD
- SUBCONTRACTOR



AIA Document G710

PROJECT: **KEY WEST CITY HALL - GLYNN ARCHER**  
 1300 White Street  
 Key West, Florida 33040

CHANGE ORDER NO. **REQUEST 5**

CHANGE ORDER DATE: 05/11/2015

PROJECTS NO. 1415

CONTRACTOR: **Burke Construction Group, Inc.**  
 3210 Flagler Avenue  
 Key West, FL 33040

DATE OF CONTRACT: 12/19/2014

**The Contract is changed as follows:**

Structural repairs to Bldg. A approx. 18 sq. ft. of Minor Spalling Repairs are needed.  
 Structural repairs to Bldg. B approx. 140 sq. ft. of Severe Spalling Repairs are needed.  
 These repairs consist of several small areas in Bldg. A and Severe Spalling Repairs of the Window Columns in Bldg. B.. Please understand that the identified areas have become apparent while removing windows and doors and may increase as repairs progress.  
 Our Estimate is based on a \$250.00 per sq. ft.

**NOTE:**

THIS WORK IS AUTHORIZED TO PROCEED ON A UNIT PRICE BASIS OF \$250/SQUARE FOOT. KEEFID HOWELL AND RON GAGE WILL MONITOR THE WORK AND QUANTIFY THE AREAS. A SUBSEQUENT CHANGE ORDER WILL BE ISSUED BASED ON THE AGREED UPON QUANTITY.  
 THIS AUTHORIZATION SHALL NOT EXCEED \$45,000 INCLUDING CONTRACTOR MARK-UP.

Subtotal:	\$39,500.00
Contractor Fee: 10%	\$3,950.00
Contractor OH: 2.5%	\$987.50
GL Insurance: 1%	\$395.00
<b>Total:</b>	<b>\$ 44,832.50</b>

**Not valid until signed by the Owner and Contractor**

The original (Contract Sum) (Guaranteed Maximum Price) was.....	\$ 14,219,900.00
Net change by previously authorized Change Orders.....	\$1,227,142.38
The (Contract Sum) (Guaranteed Maximum Price) prior to this Change Order was.....	13,170,357.62
The (Contract Sum) (Guaranteed Maximum Price) will be (increased) (decreased) (unchanged) by this Change Order in the amount of.....	\$ 44,832.50
The new (Contract Sum) (Guaranteed Maximum Price) including this Change Order will be.....	\$ 13,215,190.12
The Contract Time will be (increased) (decreased) (unchanged) by.....	14
Master Permit Issue Date <u>02/02/2015</u> Contract Base Days <u>380</u> Rev. Date..	02/26/2016
The date of Substantial Completion as of this Change Order therefore is.....	03/11/2016

Reservations: This proposal is based solely on the usual cost elements such as labor material and normal markups, and does not include any amount for additional changes in the sequence of work, delays, disruptions, reworking, lost productivity, extended or unabsorbed overhead, overtime, acceleration and or impact costs, unless specifically stated. The right is expressly reserved to amend and make claim for any and all of these related items prior to final settlement of this contract.

<b>Bender &amp; Associates Architects, p.a.</b>	<b>Burke Construction Group, Inc.</b>	<b>City of Key West</b>
ARCHITECT	SUBCONTRACTOR	CONTRACTOR
410 Angela Street	3210 Flagler Avenue	3126 Flagler Ave.
ADDRESS	ADDRESS	ADDRESS
Key West, FL 33040	Key West, FL 33040	Key West, Florida 33040
BY (Signature)	BY (Signature)	BY (Signature)
(Typed Name)	David J Hahn, Project Manager	(Typed Name)
DATE	DATE 04.22.2015	DATE

THIS SECTION IS NOT APPLICABLE

SPALL REPAIR LOG SHEET

11/27/2015

Field Numbers in inches

LOCATION	LENGTH	WIDTH	LENGTH	WIDTH	TOTAL	COST
Bldg. B	69	6	5.75	0.50	2.88	718.75
	69	6	5.75	0.50	2.88	718.75
	60	8	5.00	0.67	3.33	833.33
	79	8	6.58	0.67	4.39	1097.22
	48	9	4.00	0.75	3.00	750.00
	68	8	5.67	0.67	3.78	944.44
	31	4	2.58	0.33	0.86	215.28
	36	6	3.00	0.50	1.50	375.00
	120	6	10.00	0.50	5.00	1250.00
	36	6	3.00	0.50	1.50	375.00
Bldg. A	216	6	9.00	0.50	4.50	1125.00
	216	6	9.00	0.50	4.50	1125.00
			0.00	0.00	0.00	0.00
			0.00	0.00	0.00	0.00
			0.00	0.00	0.00	0.00
Subtotals	1048		0.00	0.00	0.00	0.00
Totals					38.11	9527.78

Total Cost

\$9,527.78

# REQUEST FOR CHANGE ORDER

- OWNER
- ARCHITECT
- CONTRACTOR
- FIELD
- SUBCONTRACTOR



PROJECT: **KEY WEST CITY HALL - GLYNN ARCHER**  
 1300 White Street  
 Key West, Florida 33040

REQUEST FOR CHANGE ORDER NO.: **009**

REQUEST FOR CHANGE ORDER DATE: **7.07.15**

PROJECTS NO.: **1415**

CONTRACTOR: **Burke Construction Group, Inc.**  
 3210 Flagler Avenue  
 Key West, FL 33040

DATE OF CONTRACT: 12/19/2014

**The Contract is changed as follows:**

The removal of two (2) concrete cisterns at the front of the Glynn Archer City Hall Bldg. A by providing equipment and labor to execute the task.

See attached invoice. CTS

*OK. — DOCUMENTED —*

*TIME ALLOWABLE - IMPACTED INSTALLATION OF WALL BRACING.*

*1.13.16*

Subtotals	\$	3,380.00
Contractor Fee: 10%		338.00
Contractor OH: 2.5%		84.50
GL Insurance: 1%		33.80
Bond : 1%		33.80

**TOTAL RCO: \$ 3,870.10**

**CONTRACT TIME INCREASE / (DECREASE): 2**

**Burke Construction Group, Inc.**

CONTRACTOR  
 3210 Flagler Avenue  
 ADDRESS  
 Key West, FL 33040

BY (Signature)  
 David J Hahn  
 (Typed Name)

**Reservations:** This proposal is based solely on the usual cost elements such as labor material and normal markups, and does not include any amount for additional changes in the sequence of work, delays, disruptions, rescheduling, lost productivity, extended or unabsorbed overhead, overtime, acceleration and or impact costs, unless specifically stated. The right is expressly reserved to amend and make claim for any and all of these related items prior to final settlement of this contract.

DATE 7.07.15

**CHARLEY TOPPINO & SONS, INC.**

P.O. BOX 787 KEY WEST, FLORIDA 33041 (305) 296-6606 FAX (305) 296-6189

Burke Construction  
3210 Flagler Ave.  
Key West, FL 33040

GLYNN ARCHER CITY HALL PROJECT

CONTRACT #:  
PO #: 1415-007  
CTS PRJ#: 1503

Attn: David Hahn

May 28, 2105

SUBJECT: Removal / Abandonment of two concrete cisterns

Dear David;

Please consider this letter as the invoice for the work performed at the Glynn Archer City Hall project for the removal & abandonment of two concrete cisterns. The following is a breakdown of equipment & labor for this work.

ITEM:	UNIT:	UNIT PRICE	QUANTITY	TOTAL
CAT EXCAVATOR, 908 MINI	HR	\$ 75.00	13	\$ 975.00
BOBCAT	HR	\$ 55.00	13	\$ 715.00
OPERATORS (2)	HR	\$ 40.00	26	\$ 1,040.00
LABORERS, SKILLED (2)	HR	\$ 25.00	26	\$ 650.00
				\$ 3,380.00

**TOTAL INVOICE AMOUNT:**

**\$ 3,380.00**

Sincerely;  
CHARLEY TOPPINO & SONS, INC.



Ronald J. Armstrong  
Project Manager

# REQUEST FOR CHANGE ORDER

- OWNER
- ARCHITECT
- CONTRACTOR
- FIELD
- SUBCONTRACTOR



PROJECT: **KEY WEST CITY HALL - GLYNN ARCHER**  
 1300 White Street  
 Key West, Florida 33040

REQUEST FOR CHANGE ORDER NO.: **014**

REQUEST FOR CHANGE ORDER DATE: **09/21/2015**

PROJECTS NO.: **1415**

CONTRACTOR: **Burke Construction Group, Inc.**  
 3210 Flagler Avenue  
 Key West, FL 33040

DATE OF CONTRACT: 12/19/2014

Emergency Abatement

**The Contract is changed as follows:**

Crawlspace abatement of Bldg B and Bldg. A. Beginning May 12, 2015- Completed May 28, 2015

Please see attach backup documentation.

Abatement: \$21,544.59

Testing: \$2,586.99

*OK -*

*TIME ALLOWED. STOPPED WORK UNTIL  
 ABATEMENT COMPLETED.*

*[Signature]*  
 1/13/16

Subtotals	\$	24,131.49
Contractor Fee: 10%		2413.15
Contractor OH: 2.5%		603.29
GL Insurance: 1%		241.31
Bond : 1%		241.31

**TOTAL RCO: \$ 27,630.56**

**CONTRACT TIME INCREASE / (DECREASE): 8**

**Burke Construction Group, Inc.**  
 CONTRACTOR  
 3210 Flagler Avenue  
 ADDRESS  
 Key West, FL 33040

**Reservations:** This proposal is based solely on the usual cost elements such as labor material and normal markups, and does not include any amount for additional changes in the sequence of work, delays, disruptions, rescheduling, lost productivity, extended or unabsorbed overhead, overtime, acceleration and or impact costs, unless specifically stated. The right is expressly reserved to amend and make claim for any and all of these related items prior to final settlement of this contract.

BY *(Signature)*  
 David J Hahn, Project Manager  
*(Typed Name)*

DATE 09/21/2015



# NON-HAZARDOUS WASTE MANIFEST

If waste is asbestos waste, complete all Sections.  
If waste is NOT asbestos waste, complete only Sections 1, 2, 3, 4 and 5.

Manifest No. \_\_\_\_\_

## SECTION 1 GENERATOR INFORMATION (generator to complete)

a) Generator's Name: AUS SERVICES INC j) Generating Location (Name): \_\_\_\_\_

b) Generator's Address: 5451 NE 41st St k) Address: 1402 WHITE ST  
TAMPA, FL 33610 KINGWOOD FL 33990

c) Generator's Representative: \_\_\_\_\_ l) Telephone Number: ( 813 ) 488-1254

d) Telephone Number: ( 813 ) 795-4000

e) WASTE MANAGEMENT APPROVAL CODE

f) Common Name of Waste: ASBESTOS m) Asbestos ONLY -  Friable;  Both; \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

g) Description of Waste: FRIBILE  Non-friable;  N/A

h) Disposal Volume: \_\_\_\_\_ n) Type of Containers:

\_\_\_\_\_ Tons  Cubic Yards \_\_\_\_\_ Other \_\_\_\_\_

i) Number of Containers: 1

o) I hereby warrant that the above named material is the same material as represented on the Special Waste Disposal Application identified by the above Waste Management Code and such material was delivered to the transporter on the shipment date referenced below.

KONIGAGOL Generator's Authorized Agent Name (print/type) [Signature] Signature of Generator's Authorized Agent 6/23/15 Shipment Date

**TYPE OF CONTAINERS**  
 TR - TRUCK  
 DM - METAL DRUM  
 DP - PLASTIC DRUM  
 BA - BAG  
 BB - 6 MIL. PLASTIC BAG  
 BC - 12 MIL. PLASTIC BAG

## SECTION 2 TRANSPORTER 1 SECTION 3 TRANSFER FACILITY - (Complete if applicable)

a) Transporter's Name: WASTE MANAGEMENT a) Transfer Facility's Name: \_\_\_\_\_

b) Transporter's Address: 15510 US HWY 19 N b) Transfer Facility's Address: \_\_\_\_\_

c) Telephone Number: ( 813 ) 424-1195 c) Telephone Number: ( ) \_\_\_\_\_

d) Vehicle License No./State: \_\_\_\_\_ d) Vehicle License No./State: \_\_\_\_\_

e) Trailer or Container No.: \_\_\_\_\_ e) Trailer or Container No.: \_\_\_\_\_

f) Name of Driver (print/type) \_\_\_\_\_ f) Name of Transfer Facility's Authorized Agent (print/type) \_\_\_\_\_

g) I hereby warrant that the above named and described material was received from the generator on the date of receipt referenced below. g) I hereby warrant that the above named and described material was received from the transporter on the date of receipt referenced below.

[Signature] Signature of Driver 6/15/15 Date of Receipt [Signature] Signature of Transfer Facility's Authorized Agent \_\_\_\_\_ Date of Receipt \_\_\_\_\_

h) I hereby warrant that the above named and described material was delivered without incident or contamination on the date of delivery referenced below. h) I hereby warrant that the above named and described material was delivered to the transporter without incident or contamination on the date of delivery referenced below.

[Signature] Signature of Driver \_\_\_\_\_ Date of Delivery \_\_\_\_\_ [Signature] Signature of Transfer Facility's Authorized Agent \_\_\_\_\_ Date of Delivery \_\_\_\_\_

## SECTION 4 TRANSPORTER 2 - (Complete if applicable) SECTION 5 DESTINATION (Disposal Facility)

a) Transporter's Name: \_\_\_\_\_ a) Disposal Facility's Name: THE NEW SERVICE

b) Transporter's Address: \_\_\_\_\_ b) Physical Address: 1822-7600

c) Telephone Number: ( ) \_\_\_\_\_ c) Telephone Number: ( ) \_\_\_\_\_

d) Vehicle License No./State: \_\_\_\_\_ d) Mailing Address: \_\_\_\_\_

e) Trailer or Container No.: \_\_\_\_\_ e) Name of Disposal Facility's Authorized Agent (print/type) \_\_\_\_\_

f) Name of Driver (print/type) \_\_\_\_\_ f) The material delivered by the Transporter has been received at the Disposal Facility.

g) I hereby warrant that the above named and described material was received on the date of receipt referenced below. \_\_\_\_\_

[Signature] Signature of Driver \_\_\_\_\_ Date of Receipt \_\_\_\_\_ [Signature] Signature of Disposal Facility's Authorized Agent \_\_\_\_\_ Date of Receipt \_\_\_\_\_

h) I hereby warrant that the above named and described material was delivered on the delivery date referenced below. \_\_\_\_\_

[Signature] Signature of Driver \_\_\_\_\_ Date of Delivery \_\_\_\_\_ [Signature] Signature of Disposal Facility's Authorized Agent \_\_\_\_\_ Date of Rejection \_\_\_\_\_

[Signature] Signature of Driver \_\_\_\_\_ Date of Delivery \_\_\_\_\_ [Signature] Signature of Driver \_\_\_\_\_ Date of Rejection \_\_\_\_\_

## SECTION 6 ASBESTOS (operator to complete)

"Operator" is defined as the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both.

a) Operator's Name: \_\_\_\_\_ c) Telephone Number: ( ) \_\_\_\_\_

b) Operator's Address: \_\_\_\_\_

d) Recommended special handling instructions and additional information: \_\_\_\_\_

e) Operator's Certification: I hereby warrant and declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and domestic law, regulations, ordinances, orders, rules and/or standards.

[Signature] Operator's Name (print/type) [Signature] Signature of Operator's Authorized Agent 6/23/15 Date

f) Responsible Agency Name and Address: \_\_\_\_\_



# CHANGE ORDER

- OWNER
- ARCHITECT
- CONTRACTOR
- FIELD
- SUBCONTRACTOR



AIA Document G710

PROJECT: **KEY WEST CITY HALL - GLYNN ARCHER**  
1300 White Street  
Key West, Florida 33040

CHANGE ORDER NO. **3**

CHANGE ORDER DATE: 09/01/2015

PROJECTS NO. **1415**

TO: **ADS Services, Inc.**  
Attn: Gregory J. Godec  
5451 N. 59th Street  
Tampa, Florida 33610

DATE OF CONTRACT: 01/26/2015

FOR: Emergency Abatement

**The Contract is changed as follows:**

**Scope of Work: Mobilize to the subject project site with all additional labor, operators, supervision, materials, equipment, and dumpsters required to complete the following scope of work;**

**1. Submit an "Emergency" EPA NESHAPS "Notice of Asbestos Removal Project" form and corresponding fees to the local Monroe County FDEP South District Branch Office for the KWCH property (Notification Fee of \$1,000.00).**

**2. Provide a copy of all applicable "Pre-Job" submittals including, but not limited to the following; copies of ADS's State of Florida Asbestos Abatement Contractor license, insurance certificates, EPA AHERA Asbestos Supervisor and Worker training certifications, and copies of OSHA-required surveillance/personnel clearances, respirator training, and fit testing documentation.**

**3. Removal Friable Asbestos-Containing Materials in crawlspace of Building B. Special precautions provided throughout the crawlspace to expose the entire crawlspace to ensure all asbestos that was uncovered, as well as use of water to wet the asbestos materials down to prevent dust and fiber release followed by the supply and installation of 6-mil polyethylene sheeting to temporarily cover the asbestos until it could be properly abated. 8 men for 96 hours. (96 @ \$45.00/hour = \$4,320.00)**

**4. Nonfriable Asbestos-Containing Materials in crawlspace of Building A. Special precautions including manual removal of the existing wood floor joists throughout the crawlspace to expose the designated areas of crawlspace to ensure all asbestos was uncovered, as well as use of water to wet the asbestos materials down to prevent dust and fiber release on May 21-22, 2015) 8 men for 8 hours. (64 @ \$45.00/hour = \$2,880.00)**

**5. Mobilize and demobilize to and from the subject project site with all required materials and equipment to complete the following additional scope of work (emergency asbestos abatement). This includes four (4) men for four (4) hours each to load/unload the truck with all materials and equipment and eight (8) hours each to load/unload the truck with all materials and equipment and eight (8) hours each for travel to and from the project for a total of 96 man hours plus truck and fuel for \$875.00. (96 @ \$45.00/hour = \$4,320.00 plus \$875.00 = \$5,195.00).**

**6. Install a regulated asbestos abatement area consisting of "Asbestos Warning" signage, two (2) layers of 6 mil polyethylene sheeting and temporary framing sealed with duct tape, as required to create temporary walls and a ceiling, as applicable, negative air machines, along with an attached three-stage personnel and equipment decontamination unit located in the crawlspace area of Building B on May 23, 2015. Remove, double-bag, label, and load-out for disposal of approximately 2,200 square feet of existing friable asbestos containing "air cell" pipe insulation and associated asbestos-contaminated soil located within the south side of the Building B crawlspace On May 24, 2015. Remove, double-bag, label, and load-out for disposal of approximately 5,400 square feet of existing Category 1 nonfriable asbestos-containing 9" x 9" vinyl floor tile debris and associated asbestos-contaminated soil located within the south side of the Building A crawlspace on May 24, 2015. This includes five (5) men for a total of 14.5 hours each for a total of approximately**

145 man hours of premium time (overtime).(72.5 @ \$60.00/hour = \$4,350.00)

7. Burke will supply independent third party independent survey, bulk sampling, Polarized Light Microscopy (PLM) lab analysis, ambient sampling and final visual inspections and asbestos clearance air monitoring using Phase Contrast Microscopy (PCM) lab analysis by EE&G.

8. ADS,Services will cordinate with EE&G.

9. Following receipt of successful Final Air Testing results from EE&G, tear down and remove existing containment area in Building B and bag up all materials on May 26, 2015. This includes four (4) men for a total of 4 hours each for a total of 16 man hours. (16 @ \$45.00/hour = \$720.00)

10. Supply 40 cubic yard enclosed dumpster along with transportation, disposal and manifesting of existing friable and Category 1 nonfriable asbestos-containing materials located in Buildings A and B by Waste Management. (\$2,677.91 x 15%@ \$3,079.59).

Licensing:

ADS Services, Inc. is a State of Florida licensed Asbestos Contractor (CJC056716), and State of Florida Licensed Building Contractor (CBC015628).

The original Contract Sum was.....	\$	236,800.00
The net change by previously authorized Change Order is.....	\$	7,255.00
The Contract Sum prior to this Change Order was.....	\$	244,055.00
The Contract Sum will be increased/decreased by this Change Order in the amount of.....		\$21,544.59
The new Contract Sum including this Change Order will be.....	\$	265,599.59
The Contract Time will be decreased by.....		0
The date of Substantial Completion as of this Change Order therefore is.....		0

**Not valid until signed by all parties below.**

<del>ARCHITECT</del>	<b>ADS Services, Inc.</b>	<b>BURKE CONSTRUCTION GROUP, INC.</b>
<del>ADDRESS</del>	SUBCONTRACTOR 5451 N. 59th Street ADDRESS Tampa, Florida 33610	CONTRACTOR 3210 Flagler Avenue ADDRESS Key West, Florida 33040
<del>BY (Signature)</del>	BY (Signature)	BY (Signature)
<del>(Typed Name)</del>	(Typed Name)	David J. Hahn (Typed Name)
<del>DATE</del>	DATE	DATE



EE&G Environmental Services, LLC  
 5751 Miami Lakes Drive  
 Miami Lakes, Florida 33014  
 305-374-8300

June 11, 2015  
 Project No: 2015-2323.IH Invoice  
 No: 604137  
 Due Date: July 11, 2015  
 Project Manager Richard Grupenhoff

David Hahn  
 Burke Construction Group, Inc.  
 10145 NW 19th Street  
 Doral, FL 33172

Project 2015-2323.IH Glynn Archer Key West City Hall - 1300 White Street, Key West, FL

**Professional Services from May 01, 2015 to May 31, 2015**

Phase SURV ACMSURV - Asbestos Survey

B Crawlspace

**Professional Personnel**

	Hours	Rate	Amount	
Senior Project Professional Grupenhoff, Richard	1.50	95.00	142.50	
Industrial Hygiene Technician Garcia, Reynaldo	10.00	65.00	650.00	
Totals	11.50		792.50	
<b>Total Labor</b>				<b>792.50</b>

**Consultants**

Sub - Labs 5/19/2015 EMSL Analytical, Inc.	5/18/15 561501965 (37) PLM Asbestos		599.40	
<b>Total Consultants</b>	<b>1.15 times</b>		<b>599.40</b>	<b>689.31</b>

**Reimbursable Expenses**

Travel - Transportation 5/15/2015 Ray Garcia	Mileage - 266 miles @ .45		119.70	
<b>Total Reimbursables</b>	<b>1.15 times</b>		<b>119.70</b>	<b>137.66</b>

**Total this Phase \$1,619.47**

Phase PCMF PCMF - PCM Final

B Crawlspace

**Professional Personnel**

	Hours	Rate	Amount	
Senior Project Professional Grupenhoff, Richard	1.50	95.00	142.50	
Environmental Technician Nemser, Sean	11.00	57.00	627.00	
Administrative Assistant Maldonado, Barbara	.50	40.00	20.00	
Totals	13.00		789.50	
<b>Total Labor</b>				<b>789.50</b>

**Reimbursable Expenses**

Travel - Transportation 5/26/2015 Nemser, Sean			154.80	
<b>Total Reimbursables</b>	<b>1.15 times</b>		<b>154.80</b>	<b>178.02</b>

**Total this Phase \$967.52**

**Total this Invoice \$2,586.99**

# EE&G

## AIR SAMPLE ANALYSIS REPORT

**PREPARED FOR:** BURKE CONSTRUCTION GROUP, INC.  
 ATTN: ANTHONY BURKE  
 10145 NW 19 STREET  
 DORAL, FL 33172  
 (305) 468-6604; FAX (305) 468-6654

**PREPARED BY:** EE&G ENVIRONMENTAL SERVICES, LLC  
 5751 MIAMI LAKES DRIVE  
 MIAMI LAKES, FL 33014  
 (305) 374-8300; FAX (305) 374-9004

**TEST TYPE :** PREP

**PROJECT :** GLYNN ARCHER KEY WEST CITY HALL  
**LOCATION :** BUILDING B

**RECEIVED :** 5/26/2015  
**RECEIVED BY :** RDG

**SAMPLED BY :** SN

Material Being Removed : PIPE INSULATION  
 Respiratory Protection : 1/2 FACE

PROJECT NUMBER: 2015-2323

ID#	ANA	SN	SAMPLE NUMBER	DATE SAMPLED	LOCATION DESCRIPTION	VOLUME (Liters)	DURATION (Minutes)	FLOW (L/Min)	# OF FIBERS	# OF FIELDS	CONCENTRATION (Fibers/cc)
01A	SN	1		5/26/2015	WEST	600	30	20.0	2.0	100	< 0.008
02A	SN	2		5/26/2015	WEST CENTER	600	30	20.0	3.0	100	< 0.008
03A	SN	3		5/26/2015	CENTER	600	30	20.0	1.0	100	< 0.008
04A	SN	4		5/26/2015	EAST CENTER	600	30	20.0	0.0	100	< 0.008
05A	SN	5		5/26/2015	EAST	600	30	20.0	1.0	100	< 0.008
06A	SN	6		5/26/2015	BLANK	0	0	0.0	0.0	100	0.000
07A	SN	7		5/26/2015	BLANK	0	0	0.0	0.0	100	0.000

ACCEPTABLE  
MAY 29 2015  
 Quality Control Officer

EE&G, LLC's liability, if any, for the results indicated herein is specifically limited to the cost of this report, all warranties whether expressed or implied being disclaimed.

ABBREVIATIONS: ANA = Analyst; ID# = Sample ID

METHODS: All air sample preparations and laboratory analyses were carried out following NIOSH Method 7400 (Phase Contrast Microscopy).

REPORT TO: RGRUPENHOFF @  
 eeandg.com



EE&G Environmental Services, LLC  
 5751 Miami Lakes Drive  
 Miami Lakes, Florida 33014

561501965

### BULK TRANSMITTAL FORM CHAIN OF CUSTODY

CLIENT: ADS PROJECT: KW CITY HALL  
 CLIENT CONTACT: \_\_\_\_\_ PROJECT NUMBER: 15-2323  
 DATE COLLECTED: 5-15-15 BILL GROUP/PHASE: 1A / SWR  
 DATE SENT: 5-15-15 DATE VERBAL NEEDED: 6 HR  
 STOP AT FIRST POSITIVE: Y N (circle one) DATE WRITTEN NEEDED: 6 HR

SAMPLE PREFIX \_\_\_\_\_

SAMPLE NUMBER	COLOR	SAMPLE DESCRIPTION	SAMPLE LOCATION
1. <u>1</u>	<u>GRAY</u>	<u>AIR CGL PIPE LOS.</u>	<u>B WING (W)</u>
2. <u>2</u>	↓	↓	<u>(E)</u>
3. <u>3</u>	↓	↓	<u>(E)</u>
4. <u>4</u>	<u>BROWN</u>	<u>PAPER</u>	<u>(S)</u>
5. <u>5</u>	↓	↓	<u>(N)</u>
6. <u>6</u>	↓	<u>WIRING</u>	<u>(S)</u>
7. <u>7</u>	<u>GRAY/BROWN</u>	<u>PLASTER</u>	<u>B WING</u>
8. <u>8</u>	↓	↓	<u>A WING</u>
9. <u>9</u>	<u>GRAY</u>	<u>PLASTIC</u>	<u>B WING</u>
10. <u>10</u>	<u>BLACK</u>	<u>ROOF MEMBRANE</u>	↓
11. <u>11</u>	<u>GREEN</u>	<u>VFT / MASTIC</u>	<u>A WING (N)</u>
12. <u>12</u>	↓	↓	<u>B WING (E)</u>
13. <u>13</u>	↓	↓	<u>(W)</u>
14. <u>14</u>	<u>RED</u>	↓	<u>AUDITORIUM</u>
15. <u>15</u>	<u>BEIGE</u>	↓	<u>A WING (NE)</u>
16. <u>16</u>	<u>2 BROWN</u>	↓	<u>(SE)</u>
17. <u>17</u>	<u>D. BROWN</u>	↓	<u>(SW)</u>
18. <u>18</u>	<u>L. GREEN</u>	↓	<u>(SW)</u>
19. <u>19</u>	<u>KHAKI</u>	<u>24 GREEN</u>	<u>(SW)</u>
20. <u>20</u>	<u>BROWN/BEIGE</u>	<u>VFT</u>	↓ <u>(SE)</u>

CHAIN OF CUSTODY:  
 DATE/TIME

PRINT NAME/SIGNATURE

PURPOSE

5-15-15  
5-15-15  
05/18/15 @  
10:20 AM

REY  
AL. GAVIST - Fed SW  
8082 0025 6901  
 C= Collection T= Transportation A= Analysis

Ⓞ T A  
 C Ⓞ A  
 C T A

# EE&G AIR SAMPLE ANALYSIS REPORT

PREPARED FOR: **BURKE CONSTRUCTION GROUP, INC.**

**ATTN: ANTHONY BURKE**  
**10145 NW 19 STREET**  
**DORAL, FL 33172**  
**(305) 468-6604; FAX (305) 468-6654**

TEST TYPE : PREP

PROJECT : GLYNN ARCHER KEY WEST CITY HALL  
 LOCATION : BUILDING B

PREPARED BY: **EE&G ENVIRONMENTAL SERVICES, LLC**  
**5751 MIAMI LAKES DRIVE**  
**MIAMI LAKES, FL 33014**  
**(305) 374-8300; FAX (305) 374-9004**

RECEIVED : 5/26/2015  
 RECEIVED BY : RDG

SAMPLED BY : SN

Material Being Removed : PIPE INSULATION  
 Respiratory Protection : 1/2 FACE

PROJECT NUMBER: 2015-2323

ID#	ANA	SN	SAMPLE NUMBER	DATE SAMPLED	LOCATION DESCRIPTION	VOLUME (Liters)	DURATION (Minutes)	FLOW (L/Min)	# OF FIBERS	# OF FIELDS	CONCENTRATION (Fibers/cc)
01A	SN	1	5/26/2015	WEST	600	30	20.0	2.0	2.0	100	< 0.008
02A	SN	2	5/26/2015	WEST CENTER	600	30	20.0	3.0	3.0	100	< 0.008
03A	SN	3	5/26/2015	CENTER	600	30	20.0	1.0	1.0	100	< 0.008
04A	SN	4	5/26/2015	EAST CENTER	600	30	20.0	0.0	0.0	100	< 0.008
05A	SN	5	5/26/2015	EAST	600	30	20.0	1.0	1.0	100	< 0.008
06A	SN	6	5/26/2015	BLANK	0	0	0.0	0.0	0.0	100	0.000
07A	SN	7	5/26/2015	BLANK	0	0	0.0	0.0	0.0	100	0.000

**QC ACCEPTABLE**  
 MAY 29 2015  
 Quality Control Officer

EE&G, LLC's liability, if any, for the results indicated herein is specifically limited to the cost of this report, all warranties whether expressed or implied being disclaimed.

ABBREVIATIONS: ANA = Analyst; ID# = Sample ID

METHODS: All air sample preparations and laboratory analyses were carried out following NIOSH Method 7400 (Phase Contrast Microscopy).



5751 Miami Lakes Drive  
Miami Lakes, Florida 33014  
(305) 374-8300 & (305) 374-1666 Fax

*John Am*

DATE:	CLIENT:	PROJECT:	WORK AREA LOCATION(S):		RESPIRATOR TYPE:	1/2 FACE TYPE "C"	FULL FACE TYPE "C"	NONE					
			MEANS OF PUMP CALIBRATION:	MEANS OF PUMP CALIBRATION:									
TEST TYPE(S):	PUMP #	24 HOUR CLOCK	TIME (IN MIN)	FLOW (L/MIN)	RATE (L/MIN)	STOP FLOW	START FLOW	TOTAL AIR VOLUME (LITERS)	# OF FIBERS	# OF FIBERS	COUNT	INFO	
SAMPLE #	SAMPLE DESCRIPTION/LOCATION	CREW WORK ACTIVITY	ON/OFF TIME	START FLOW	STOP FLOW	START FLOW	STOP FLOW	AVG FLOW	# OF FIBERS	# OF FIBERS	# OF FIBERS	CONCENTRATION (FIB/CC)	SHR TWA (FIB/CC)
1	west	Person	10:30-11:00	20	20	20	20	20	600	2	100		
2	Wishcoren									3	100		
3	center									1	100		
4	East Center									0	100		
5	East									1	100		
6-B	Birth									0	100		
7-B	Birth									0	100		

DATE: 5/24/15  
 CLIENT: South C construction group  
 PROJECT: Gymnasium  
 P/N: 15-2020  
 FILTER TYPE: PC  
 FLOW: 25mm / 37mm  
 MEANS OF PUMP CALIBRATION: note

CHAIN OF CUSTODY:  
 NAME & AFFILIATION: \_\_\_\_\_  
 DATE/TIME: 5/26/15  
 COLLECTION: TRANSPORT ANALYSIS  
 PURPOSE: \_\_\_\_\_  
 CASSETTE LOT#: \_\_\_\_\_  
 RESULTS NEEDED BY: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
 AT PHONE/BEEPER#: \_\_\_\_\_

561501965



CONTINUATION OF BULK TRANSMITTAL FORM CHAIN OF CUSTODY

PROJECT NUMBER: 15-2323

SAMPLE PREFIX \_\_\_\_\_

BILL GROUP/PHASE: 17 / SURV

SAMPLE NUMBER	COLOR	SAMPLE DESCRIPTION	SAMPLE LOCATION
21. 21	ORANGE	VF7 1A04	A WING
22. 22	BLUE	CERAMIC TILE 1A04	↓
23. 23	↓	VF7	↓
24.			
25.			
26.			
27.			
28.			
29.			
30.			
31.			
32.			
33.			
34.			
35.			
36.			
37.			
38.			
39.			
40.			
41.			
42.			
43.			
44.			
45.			
46.			
47.			
48.			
49.			
50.			
51.			
52.			
53.			
54.			
55.			

CHAIN OF CUSTODY:

DATE/TIME	PRINT NAME/SIGNATURE	PURPOSE
5-15-15	PEL [Signature]	ⓐ T A
5-15-15	[Signature]	ⓐ A
05/18/15 @ 10:20 AM	PEL-GMVA-Ed Ex. 8082 0025 0901	ⓐ T A

C= Collection T= Transportation A= Analysis





5751 Miami Lakes Drive  
Miami Lakes, Florida 33014  
(305) 374-8300 & (305) 374-1666 Fax

*Sam*

DATE:	CLIENT:	PROJECT:	WORK AREA LOCATION(S):		RESPIRATOR TYPE:	COUNT	INFO	8HR TWA (FIB/CC)							
			1/2 FACE	FULL FACE											
TEST TYPE(S):	PCMT (NA)	PCMT	MOE	MEANS OF PUMP CALIBRATION:	PAPR	# OF FIBERS	# OF FIELDS	CONCENTRATION (FIB/CC)							
SAMPLE #	SAMPLE DESCRIPTION/LOCATION	CREW WORK ACTIVITY	PUMP #	TIME (IN MIN)	ON/OFF TIME	24 HOUR CLOCK	TOTAL MINUTES	FLOW	RATE	(L/MIN)	TOTAL AIR VOLUME (LITERS)	FIBER	# OF FIBERS	CONCENTRATION (FIB/CC)	8HR TWA (FIB/CC)
1	West	Prison		10:30-11:00	30	20	20	20	20	20	600	2	100		
2	W/S Center											3	100		
3	Center											1	100		
4	East Center											0	100		
5	East											1	100		
6-B	Bin h											0	100		
7-B	Bin h											0	100		

CHAIN OF CUSTODY: NAME & AFFILIATION \_\_\_\_\_ DATE/TIME \_\_\_\_\_ PURPOSE \_\_\_\_\_

5/26/15 \_\_\_\_\_ COLLECTION \_\_\_\_\_

5/26/15 \_\_\_\_\_ TRANSPORT \_\_\_\_\_

5/26/15 \_\_\_\_\_ ANALYSIS \_\_\_\_\_

CASSETTE LOT# \_\_\_\_\_ RESULTS NEEDED BY \_\_\_\_\_ CONTACT \_\_\_\_\_

AT PHONE/BEEPER# \_\_\_\_\_

Project	2015-2323.IH	Glynn Archer KW City Hall-1300 White St	Invoice	604137
---------	--------------	---	---------	--------

# Billing Backup

Thursday, June 11, 2015

06 EE&G Environmental Services, LLC

Invoice 604137 Dated 6/11/2015

10:47:27 AM

Project	2015-2323.IH	Glynn Archer Key West City Hall - 1300 White Street, Key West, FL
---------	--------------	---

Phase	SURV	ACMSURV - Asbestos Survey
-------	------	---------------------------

### Professional Personnel

			Hours	Rate	Amount	
Senior Project Professional						
Senior Project Professional						
GRU01E	118 - Grupenhoff, Richard	5/18/2015	.50	95.00	47.50	
	pm crawlspace					
GRU01E	118 - Grupenhoff, Richard	5/19/2015	.50	95.00	47.50	
	crawlspace A&B pm					
GRU01E	118 - Grupenhoff, Richard	5/20/2015	.50	95.00	47.50	
	pm A&B crwalspace and notice					
Industrial Hygiene Technician						
Industrial Hygiene Technician						
GAR19E	57 - Garcia, Reynaldo	5/15/2015	3.00	65.00	195.00	
	Survey					
GAR19E	57 - Garcia, Reynaldo	5/15/2015	7.00	65.00	455.00	
	Commute back from Keys					
	Totals		11.50		792.50	
	<b>Total Labor</b>					<b>792.50</b>

### Consultants

Sub - Labs						
AP	145241	5/19/2015		EMSL Analytical, Inc. / 5/18/15 561501965	599.40	
				(37) PLM Asbestos		
	<b>Total Consultants</b>			<b>1.15 times</b>	<b>599.40</b>	<b>689.31</b>

### Reimbursable Expenses

Travel - Transportation						
JE	0005-15-2015	5/15/2015		Ray Garcia / Mileage - 266 miles @ .45	119.70	
	<b>Total Reimbursables</b>			<b>1.15 times</b>	<b>119.70</b>	<b>137.66</b>

**Total this Phase \$1,619.47**

Phase	PCMF	PCMF - PCM Final
-------	------	------------------

### Professional Personnel

			Hours	Rate	Amount	
Senior Project Professional						
Senior Project Professional						
GRU01E	118 - Grupenhoff, Richard	5/26/2015	1.00	95.00	95.00	
	data and emails					
GRU01E	118 - Grupenhoff, Richard	5/27/2015	.25	95.00	23.75	
GRU01E	118 - Grupenhoff, Richard	5/29/2015	.25	95.00	23.75	
	DATA sheets					
Environmental Technician						
Environmental Technician						
NEM01E	38 - Nemser, Sean	5/26/2015	3.00	57.00	171.00	
	B CRawl PCM final and analysis					
NEM01E	38 - Nemser, Sean	5/26/2015	8.00	57.00	456.00	
	travel					

## Administrative Assistant

Administrative Assistant					
MAL01E	1 - Maldonado, Barbara	5/27/2015	.50	40.00	20.00
	Totals		13.00		789.50
	<b>Total Labor</b>				<b>789.50</b>

## Reimbursable Expenses

## Travel - Transportation

EX	00000006645	5/26/2015	Nemser, Sean / 344.00 miles @ 0.45		154.80
	<b>Total Reimbursables</b>		<b>1.15 times</b>	<b>154.80</b>	<b>178.02</b>

**Total this Phase \$967.52**

**Total this Project \$2,586.99**

**Total this Report \$2,586.99**

**MEDLEY LANDFILL**

9350 N.W. 89th Avenue  
Medley, Florida 33178

Site Code: Medley Landfill

Transaction # 4630992 Acct: 1009 IN OUT DIR: I  
Acct: WASTE MANAGEMENT - DADE CO DATE 06/23/15 06/23/15 MIN: 0

Truck: 56625 Trailer: TIME 10:00 10:00 SITE: ME  
Fleet ID: 411262 ID YPR YPR

Transaction Type: 120 - Ask Rate

Payment: 1 - Charge

Payment Type:	GROSS	40000	20.00	MAN WT
Vehicle Type: 5 - Container (40 - + cy)	TARE	34600	17.30	MAN WT
Origin Type: 15 - Private	NET	5400	2.70	

Destination Type: 61 - Medley Landfill

Material Type: 98 - Medley Asbestos IN

Rate: \$0.00/tn

Cubic Yards: 0

Route/Book:

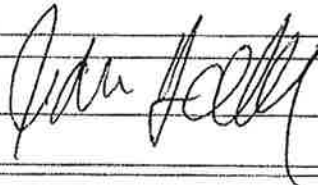
Voucher #:

Tip Fee:	0.00
Spec Fee:	0.00
Transfer Fee:	0.00
TOTAL FEE:	0

NOTE: ADS SERV 404803FL ASB FRIABLE

9999 - Default Driver

Default Driver  
**DRIVER'S SIGNATURE**



**CUSTOMER'S NAME**



# REQUEST FOR CHANGE ORDER

- OWNER
- ARCHITECT
- CONTRACTOR
- FIELD
- SUBCONTRACTOR



PROJECT: **KEY WEST CITY HALL - GLYNN ARCHER**  
 1300 White Street  
 Key West, Florida 33040

REQUEST FOR CHANGE ORDER NO.: **016**

REQUEST FOR CHANGE ORDER DATE: **11/27/2015**

PROJECTS NO.: **1415**

CONTRACTOR: **Burke Construction Group, Inc.**  
 3210 Flagler Avenue  
 Key West, FL 33040

DATE OF CONTRACT: 12/19/2014

**Cementous Crack Repairs Auditorium Walls**

**The Contract is changed as follows:**

The Contractor will provide all the Labor, materials, and equipment to complete approximately 540 Lineal Feet of Crack Repairs in the Auditorium walls. The cracks will be cleaned of loose debris and prepared for the application of Mapei repair mortar. Surfaces will be finished to the existing surface texture to match interior masonry surface and the exterior will be slightly recessed to allow for Historic Stucco finish to be applied. Approx.. \$23.715 per lineal foot. Max.540 ft.

**Please see attached directive.**

*OK.*

*NEED TO VERIFY THAT WORK IMPACTED THE CRITICAL PATH.*

*1.13.16*

*TIME ALLOWED - IMPACTED PRESTRESS PLANK INSTALL*

*1.18.16*

Subtotals	\$	12,806.12
Contractor Fee: 10%		1280.61
Contractor OH: 2.5%		320.15
GL Insurance: 1%		128.06
Bond : 1%		128.06

**TOTAL RCO: \$ 14,663.01**

**CONTRACT TIME INCREASE / (DECREASE): 7**

**Burke Construction Group, Inc.**  
 CONTRACTOR  
 3210 Flagler Avenue  
 ADDRESS  
 Key West, FL 33040

**Reservations:** This proposal is based solely on the usual cost elements such as labor material and normal markups, and does not include any amount for additional changes in the sequence of work, delays, disruptions, rescheduling, lost productivity, extended or unabsorbed overhead, overtime, acceleration and or impact costs, unless specifically stated. The right is expressly reserved to amend and make claim for any and all of these related items prior to final settlement of this contract.

BY *(Signature)*  
 David J Hahn, Project Manager  
*(Typed Name)*

DATE 11/27/2015



May 18, 2015

Mr. David Hahn, Project Manager  
3210 Flagler Avenue  
Key West, Florida 33040

**RE: KWCH, Epoxy of Cracks at Auditorium**

Dear David,

This letter is written at your request and will clarify crack repair requirements at the auditorium.

On or about March 26, 2015, Mark Keister and I inspected the work in progress at the Key West City Hall. We noted some cracking in the auditorium walls. Mark issued a field report recommending that these cracks be sealed with epoxy. You submitted a request for compensation which was substantial. Due to the expense, I spoke with Mark about options. Our findings are summarized as follows.

The building has a new steel structural system that supports the loads. The historic concrete walls do not support structural loads. The purpose of the epoxy was to seal the cracks. This can be accomplished using mortar or the Mapei repair mortar system.

Because the purpose is weatherproofing only, the extra strength provided by the epoxy is not needed and therefore, the additional cost of the epoxy cannot be justified.

Mark is copied. You may contact him directly if you want to confirm the above.

Thank you for bringing your concerns to my attention.

Sincerely,

A handwritten signature in blue ink, appearing to read "Bert L. Bender".

Bert L. Bender, Architect

BLB/ddk

CC: Mark Keiser  
Kreed Howell  
James Bouquet  
Javier Torres

410 Angela Street  
Key West, Florida 33040  
Telephone (305) 296-1347  
Facsimile (305) 296-2727  
Florida License AAC002022  
www.BenderArchitects.com

# ATLANTIC ENGINEERING SERVICES

6501 Arlington Expressway  
Building B, Suite 201  
JACKSONVILLE, FLORIDA 32211-5795

PHONE (904) 743-4633

TO

Pender & Associates

DATE	7/19/10	JOB NO.	717-1010
PROJECT	Key West City Hall @ Calum Drive		
LOCATION	Key West, Florida		
CONTRACTOR	Burke Construction	OWNER	City of Key West, Florida
WEATHER	Partly Cloudy	TEMP.	80° at 11:00 AM
PRESENT AT SITE	Mario Martinez, David Martinez, David Hahn, Ron Gray, Javier Torres, Port Pender, David Galay, Fred Howell, Mark Keister		

THE FOLLOWING WAS NOTED:

> Demolition is complete in the auditorium with removal of floor finishes in wings A, and B nearly complete. Wall finishes and ceiling finishes are removed from the wood walls, second floor and roof.

The concrete wall cracks were reviewed at the three cracks at window lintels in the auditorium and the two cracks at window lintels in wing A (above the south stair window and above the south exterior door). These cracks need to be cleaned of loose concrete and injected with epoxy. The wall cracks in the remainder of building A in the solid wall portions of the wall should be cleaned of loose concrete and filled with a non-drink repair mortar.



# Hydro-Proof Systems Inc.

## Painting and Waterproofing Proposal (Cementitious Crack Repairs)

**Proposal submitted to: Burke Construction Group**

**Attention: David Hahn**

**Date: October 14, 2015**

**Fax:**

**Street: 10145 NW 19 Street,**

**Cell: 561-255-9995**

**City, State, Zip: Doral, Florida 33172**

**Email: rsandoval@bcgconstruction.net**

**Office phone: 305-468-6604**

**Job name: Key West City Hall**

**Job address: City of Key West, Florida**

**We hereby submit this proposal for: Crack repair with Mapei Planitop XS**

We propose to perform the work as follows:

1. **NATURE OF WORK:** Hydro-proof Systems Inc. shall furnish the labor, equipment and materials necessary to perform the construction work described herein or in the referenced contract documents. Hydro-proof Systems Inc. does not provide engineering, consulting or architectural services. It is the Owner's responsibility to retain a licensed architect or engineer to determine proper design and code compliance. Hydro-proof Systems Inc. assumes no responsibility for structural integrity, compliance with building codes, or design. If plans, specifications or other design documents have been furnished to Hydro-proof Systems Inc., Customer warrants that they are sufficient and conform to all applicable laws and building codes. Hydro-proof Systems Inc. is not responsible for any loss, damage or expense due to defects in plans or specifications or building code violations unless such damage results from a deviation by Hydro-proof Systems Inc. from the contract documents. .
2. **SPECIFICATIONS:**

### SCOPE OF WORK

1. We propose to perform the structural crack repairs to the areas identified during the job site visit on 4.3.2015.
2. The cracks on the interior and exterior will be routed with a square crack chaser to create a surface for which the repair material will adhere.
3. After the routing is complete the excess dust will be blown or brushed off the surfaces to be treated.
4. Once preparation has been completed, the grooves will be filled with Mapei Planitop XS structural repair mortar.
5. The finish surface of the repair will be smooth. Any attempt to match existing stucco finish is to be by others.

**Key West City Hall: Surface crack repairs**

**Page 1 of 2**

6. The interior of the building will be accessed with ladders from first and second floors.

# Hydro-Proof Systems Inc.

## Painting and Waterproofing

7. The exterior of the building will be accessed with either ladders or high reach equipment.
8. Hydro-Proof Systems Inc. will dispose of all its related debris in a container provided by Burke Construction.
9. All products specified will be installed as per manufacturer's recommended method of installation.
10. This proposal covers up to 540 lineal feet of wall cracks.

### Exclusions:

1. Mechanical, electrical, plumbing, asbestos abatement or any other work not specifically noted above in exhibit.
2. Cost of permit is not included in proposal.

The total for crack preparation, repair, equipment, manpower and supervision as stated above is: **\$12,806.12**

Note: This system does not carry a warranty against future cracking at the repaired locations and is to serve as a preventative to keep moisture out of the existing cracks, and a base for decorative stucco overlay.

**Authorized Signature:**

**Note:** This proposal may be withdrawn by us if not accepted within: 30 days

**Francisco O. Gonzalez**

All work to be completed in a workman like manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be performed on a time and material basis up to \$500.00 upon which a written change order will be executed and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Interest on all unpaid balances past 30 days. Our workers are fully covered by Workmen's Compensation Insurance. Any warranty service will only be performed during normal working hours, Mon-Fri between 8:00 a.m. – 4:30 p.m.

---

**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.

**Signature:** \_\_\_\_\_

**Date of Acceptance:** \_\_\_\_\_

**Key West City Hall: Surface crack repairs**

**Page 2 of 2**

# REQUEST FOR CHANGE ORDER

- OWNER
- ARCHITECT
- CONTRACTOR
- FIELD
- SUBCONTRACTOR



**PROJECT:** KEY WEST CITY HALL - GLYNN ARCHER  
 1300 White Street  
 Key West, Florida 33040

REQUEST FOR CHANGE ORDER NO.: 017

REQUEST FOR CHANGE ORDER DATE: 11/27/2015

PROJECTS NO.: 1415

**CONTRACTOR:** Burke Construction Group, Inc.  
 3210 Flagler Avenue  
 Key West, FL 33040

DATE OF CONTRACT: 12/19/2014

**PLUMBING: Terminate & Install Clean-outs at Gym property line (2) 4" Sanitary Waste Lines in Parking Lot**

The Contract is changed as follows:

Contractor will provide all equipment and labor to locate, terminate, and install Schedule 40 PVC Cleanouts for the two hidden sanitary sewer laterials in the packing area. Termination will be at the property line at the rear of the Gym.

*COST ALLOWABLE*

*TIME DENIED*

*[Signature]*  
 1-18-2016

*NO TIME*

Subtotals	\$	2,172.00
Contractor Fee: 10%		217.20
Contractor OH: 2.5%		54.30
GL Insurance: 1%		21.72
Bond : 1%		21.72

**TOTAL RCO: \$ 2,486.94**

**CONTRACT TIME INCREASE / (DECREASE):** 1

**Burke Construction Group, Inc.**

CONTRACTOR  
 3210 Flagler Avenue  
 ADDRESS  
 Key West, FL 33040

**Reservations:** This proposal is based solely on the usual cost elements such as labor material and normal markups, and does not include any amount for additional changes in the sequence of work, delays, disruptions, rescheduling, lost productivity, extended or unabsorbed overhead, overtime, acceleration and or impact costs, unless specifically stated. The right is expressly reserved to amend and make claim for any and all of these related items prior to final settlement of this contract.

BY (Signature)  
 David J Hahn, Project Manager  
 (Typed Name)

DATE 11/27/2015

## David Hahn

---

**From:** Priscilla Ceja <Priscilla@clkp.com>  
**Sent:** Wednesday, November 25, 2015 1:52 PM  
**To:** David Hahn  
**Cc:** Felix Aguiar  
**Subject:** Sewer Lines for Gym

Dave,

In order to locate the 4" lines, we will need to excavate with a machine and laborers. We will allot 1 full day for this. A plumber and helper will then cap off the lines. We will allot half a day for this. With materials, tax and labor, the total cost for this is \$2,172.00.

Regards,

Priscilla Ceja | Certified Lower Keys Plumbing Inc. | O: 305-296-5959 | F: 305-294-2462  
1014 White Street Key West, FL 33040 | [priscilla@clkp.com](mailto:priscilla@clkp.com) | [www.clkp.com](http://www.clkp.com)



# REQUEST FOR CHANGE ORDER

- OWNER
- ARCHITECT
- CONTRACTOR
- FIELD
- SUBCONTRACTOR



PROJECT: **KEY WEST CITY HALL - GLYNN ARCHER**  
 1300 White Street  
 Key West, Florida 33040

REQUEST FOR CHANGE ORDER NO.: **018**

REQUEST FOR CHANGE ORDER DATE: **11/27/2015**

PROJECTS NO.: **1415**

CONTRACTOR: **Burke Construction Group, Inc.**  
 3210 Flagler Avenue  
 Key West, FL 33040

DATE OF CONTRACT: 12/19/2014

**Application of Liquid Window & Door Flashing**

**Unforeseen Conditions not in Spec's or on the Plans**

**The Contract is changed as follows:**

Contractor will provide all equipment, materials, and labor to apply Shewin-Williams SherCrete Flexible Concrete/masonry Waterproofer, liquid flashing as directed by the Building Official to all window and door jambs, sills, and headers.

See attached. Labor \$4500.00

Materials \$1063.31

**Subtotal: \$5563.31** ✓

*OK -  
 ADDED WEATHERPROOFING,  
 WINDOW INSTALL IMPACTS CRITICAL PATH,  
 TIME ALLOWED*

*[Signature]*  
 1.13.16

Subtotals	\$	5,563.31
Contractor Fee: 10%		556.33
Contractor OH: 2.5%		139.08
GL Insurance: 1%		55.63
Bond : 1%		55.63

**TOTAL RCO: \$ 6,369.99**

**CONTRACT TIME INCREASE / (DECREASE): 3**

**Burke Construction Group, Inc.**  
 CONTRACTOR  
 3210 Flagler Avenue  
 ADDRESS  
 Key West, FL 33040

**Reservations:** This proposal is based solely on the usual cost elements such as labor material and normal markups, and does not include any amount for additional changes in the sequence of work, delays, disruptions, rescheduling, lost productivity, extended or unabsorbed overhead, overtime, acceleration and or impact costs, unless specifically stated. The right is expressly reserved to amend and make claim for any and all of these related items prior to final settlement of this contract.

BY *(Signature)*  
 David J Hahn, Project Manager  
 (Typed Name)

DATE 11/27/2015



Proposal Submitted to:  
Burke Construction  
10145 NW 19<sup>th</sup> Street  
Doral, FL 33172

Date: 11/6/2015 Revised  
Job Name: Key West City Hall  
Key West, FL  
Architect: Bender & Associates  
Date of Plans: 8/8/14

We hereby submit specifications and estimates for **Waterproofing at Window Openings**

**Waterproofing Work**

Roll or Brush on Waterproofing at exterior facing side of window openings  
Use GC provided Sher-Crete Textured Waterproofing material

**Waterproofing Work Labor Only ..... \$4,500.00**

**NOTES & EXCLUSIONS:**

**No Door Openings included in price  
Lodging/Hospitality Included in price  
Scaffolding Included in price  
Price based on single mobilization**

\_\_\_\_\_  
Guillermo Swain - Principal  
Zarco Construction, LLC

**Note:** This proposal may be withdrawn by us if not accepted within fifteen (15) days. Our prices are based on our material prices currently charged to us by our suppliers. After a thirty (30) day grace period, any increase in price on materials given to us will be passed on to the general contractor.

**ACCEPTANCE OF PROPOSAL:** The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. This proposal will be incorporated in the contract documents.

Date of Acceptance: \_\_\_\_\_

Company: **Burke Construction Group, Inc**

By: \_\_\_\_\_

Title: \_\_\_\_\_



**SHERWIN  
WILLIAMS.**

113.50

**SHER-CRETE®**  
Flexible Concrete  
Waterproofer - Textured  
A5 Series

As of 09/10/2015, Complies with:			
OTC	Yes	LEED@ 09CI	Yes
SCAQMD	Yes	LEED@ 09NC	Yes
CARB	Yes	LEED@ 09CS	Yes
CARB SCM 2007	Yes	LEED@ H	Yes
MPI	42	NGBS	Yes

<u>CHARACTERISTICS</u>	<u>SPECIFICATIONS</u>	<u>SPECIFICATIONS</u>																																																
<p><b>Sher-Crete Flexible Concrete Waterproofer</b> is an interior/exterior flexible and breathable waterproof coating based on a unique combination of acrylic resin and mineral aggregate.</p> <p>Use <b>Sher-Crete Flexible Concrete Waterproofer</b> to waterproof all types of above-or on-grade concrete and masonry including foundations, block walls, balconies, window and door openings, walkways, parapets, planter boxes, and vertical or horizontal concrete substrates.</p> <p><b>Advantages</b></p> <ul style="list-style-type: none"> <li>• Apply to fresh concrete (less than 28 days old)</li> <li>• Can be applied over substrates with a high pH (up to 13)</li> <li>• Primer not typically required over properly prepared surfaces</li> <li>• Sher-Crete Flexible Concrete Waterproofer passes ADA requirements of slip resistance</li> </ul>	<p><b>Color:</b> Most colors <b>Coverage:</b> 125 to 150 ft<sup>2</sup> per gal. 10 - 12 mils wet per coat</p> <p>2 coats of the Sher-Crete Flexible Concrete Waterproofer at 10 - 12 wet mils per coat and a surface with 10 or less pinholes per square foot is required for a waterproofing system. Coverage will vary depending on the porosity and texture of the substrate.</p> <p>For maximum protection and washability, 2 coats of the following clear coats are recommended:</p> <p>Interior and Exterior Use</p> <p><b>Low/Medium traffic pedestrian areas</b> H&amp;C Paver Sealer Gloss or Natural or H&amp;C Concrete Sealer Wet Look</p>	<p>If a stucco finish is to be applied over the Sher-Crete Flexible Concrete Waterproofer, follow the stucco manufacturers recommendations.</p> <p><b>Drying Time, @ 77°F, 50% RH:</b> temperature and humidity dependent</p> <p>Touch: 1 hour Recoat: 4 hours For foot traffic: 24 hours</p> <p><b>Finish:</b> Flat <b>Flash Point:</b> N/A <b>Tinting with CCE:</b></p> <table border="0"> <tr> <td><b>Base</b></td> <td><b>oz/gal</b></td> <td><b>Strength</b></td> </tr> <tr> <td>Extra White</td> <td>0-5</td> <td>100%</td> </tr> <tr> <td>Deep Base</td> <td>4-12</td> <td>100%</td> </tr> </table> <p><b>Vehicle Type:</b> Acrylic <b>Extra White A05W00005</b> <b>VOC (less exempt solvents):</b> &lt;50 g/L - 0.42 lb/gal As per 40 CFR 59.406 and SOR/2009-264, s.12</p> <p><b>Volume Solids:</b> 52 ± 2% <b>Weight Solids:</b> 69 ± 2% <b>Weight per Gallon:</b> 12.72 lb</p>	<b>Base</b>	<b>oz/gal</b>	<b>Strength</b>	Extra White	0-5	100%	Deep Base	4-12	100%																																							
<b>Base</b>	<b>oz/gal</b>	<b>Strength</b>																																																
Extra White	0-5	100%																																																
Deep Base	4-12	100%																																																
<table border="0"> <thead> <tr> <th>REPORT</th> <th>TEST METHOD</th> <th>TEST CRITERIA</th> <th>TEST RESULTS</th> </tr> </thead> <tbody> <tr> <td>Tensile Strength</td> <td>ASTM D-412</td> <td>without mesh</td> <td>100 psi</td> </tr> <tr> <td>Elongation</td> <td>ASTM D-412</td> <td>without mesh</td> <td>57%</td> </tr> <tr> <td>Flexibility Mandrel Bend</td> <td>ASTM D-522</td> <td>28 days</td> <td>Pass 1/8" @ 77° F Pass</td> </tr> <tr> <td>Abrasion Resistance</td> <td>ASTM D-4060 -90</td> <td>1000 cycles – 24hr cure</td> <td>0.01 gram loss</td> </tr> <tr> <td>Water Absorption</td> <td>ASTM D-570</td> <td>24 hour immersion</td> <td>17%</td> </tr> <tr> <td>Water Vapor Permeability</td> <td>ASTM D 1653</td> <td></td> <td>12 perms</td> </tr> <tr> <td>Meets ADA Requirements for Coefficient of Friction</td> <td></td> <td>Static Coefficient of Friction</td> <td>Kinetic Coefficient of Friction</td> </tr> <tr> <td></td> <td>A05W00005</td> <td>1.13</td> <td>0.81</td> </tr> <tr> <td></td> <td>A05W00053</td> <td>1.09</td> <td>0.81</td> </tr> <tr> <td>Flame Spread Index:</td> <td>ASTM E84</td> <td>1/4" fiber cement board</td> <td>10</td> </tr> <tr> <td>Smoke Developed Index:</td> <td>ASTM E84</td> <td>1/4" fiber cement board</td> <td>15</td> </tr> </tbody> </table> <p>Typical values for material cured at 73° F (23° C) and 50% R.H. Product test results from A05W00005</p>	REPORT	TEST METHOD	TEST CRITERIA	TEST RESULTS	Tensile Strength	ASTM D-412	without mesh	100 psi	Elongation	ASTM D-412	without mesh	57%	Flexibility Mandrel Bend	ASTM D-522	28 days	Pass 1/8" @ 77° F Pass	Abrasion Resistance	ASTM D-4060 -90	1000 cycles – 24hr cure	0.01 gram loss	Water Absorption	ASTM D-570	24 hour immersion	17%	Water Vapor Permeability	ASTM D 1653		12 perms	Meets ADA Requirements for Coefficient of Friction		Static Coefficient of Friction	Kinetic Coefficient of Friction		A05W00005	1.13	0.81		A05W00053	1.09	0.81	Flame Spread Index:	ASTM E84	1/4" fiber cement board	10	Smoke Developed Index:	ASTM E84	1/4" fiber cement board	15		
REPORT	TEST METHOD	TEST CRITERIA	TEST RESULTS																																															
Tensile Strength	ASTM D-412	without mesh	100 psi																																															
Elongation	ASTM D-412	without mesh	57%																																															
Flexibility Mandrel Bend	ASTM D-522	28 days	Pass 1/8" @ 77° F Pass																																															
Abrasion Resistance	ASTM D-4060 -90	1000 cycles – 24hr cure	0.01 gram loss																																															
Water Absorption	ASTM D-570	24 hour immersion	17%																																															
Water Vapor Permeability	ASTM D 1653		12 perms																																															
Meets ADA Requirements for Coefficient of Friction		Static Coefficient of Friction	Kinetic Coefficient of Friction																																															
	A05W00005	1.13	0.81																																															
	A05W00053	1.09	0.81																																															
Flame Spread Index:	ASTM E84	1/4" fiber cement board	10																																															
Smoke Developed Index:	ASTM E84	1/4" fiber cement board	15																																															



**SHER-CRETE®**  
Flexible Concrete  
Waterproofer - Textured  
A5 Series

**SURFACE PREPARATION**

**WARNING!** Removal of old paint by sanding, scraping or other means may generate dust or fumes that contain lead. Exposure to lead dust or fumes may cause brain damage or other adverse health effects, especially in children or pregnant women. Controlling exposure to lead or other hazardous substances requires the use of proper protective equipment, such as a properly fitted respirator (NIOSH approved) and proper containment and cleanup. For more information, call the National Lead Information Center at 1-800-424-LEAD (in US) or contact your local health authority.

Remove all surface contamination by washing with an appropriate cleaner, rinse thoroughly and allow to dry. Existing peeled or checked paint should be removed. Recognize that any surface preparation short of total removal of the old coating may compromise the service length of the system.

**Concrete, Stucco**

Pressure clean to remove all dirt, dust, grease, oil, loose particles, laitance, foreign material, peeling and defective coatings, chalk, form release agents, moisture curing membranes, etc. Allow the surface to dry thoroughly.

Concrete and mortar must be cured at least 7 days at 75°F. On tilt-up and poured-in-place concrete, commercial detergents and sandblasting may be necessary to remove sealers, release compounds, and to provide an anchor pattern.

Use caution when preparing the substrate to create a uniform surface. Voids, cracks, crevices, and through-wall openings must be patched using Concrete & Masonry Sealant or Patch.

Stripe coat all inside and outside corners and edges with Sher-Crete Flexible Concrete Waterproofer.

**Vertical Wood Window & Door Jambs**

Apply one coat of Sher-Crete Flexible Waterproofer at a rate of 70 – 90 square feet per gallon, achieving a total dry film thickness of 10 – 12 mils. Embed Sher-Crete 6" Blue Repair Mesh to reinforce the lower corners over the sill, across the sill, and up both sides of the lower corners approximately 4". Apply a second coat of the waterproofer over the mesh and around the window opening, in the return to the window flange.

**APPLICATION**

Apply at temperatures between 50°F and 100°F.

**Do not reduce.**

**Brush** - Use a nylon/polyester brush.

**Roller** - Use a ¾" to 1½" nap synthetic roller cover.

**Notched squeegee with backroll**

Use proper finish roll application technique to avoid roller tracking.

**Texture Sprayer-Low Pressure**

Tip orifice..... 4

**OVER-COATING**

Sher-Crete Flexible Concrete Waterproofer can be used as a stand-alone product or may be over-coated to provide a surface that will be smoother and easier to keep clean and to improve the abrasion resistance in areas that see significant foot traffic.

Over-coating should be done after the Sher-Crete has dried for at least 4 hours (77°F and 50% RH) and before it is exposed to any use. Follow all application and dry time information found on the label and data page for the specific over-coat.

**Slip Resistance**

Some surfaces may require a slip resistant additive for safety. Add H&C SharkGrip® Slip Resistant Additive to the final coat applied following label directions. This product should not be used in place of a non-skid finish.

**CLEAN UP**

Clean tools and equipment with water immediately after use. Cured material can only be removed mechanically.

**CAUTIONS**

Protect from freezing.

Non-photochemically reactive.

Not recommended for roofing applications or as a primary waterproofing over occupied space.

Not recommended for bridging joints or dynamic cracks in concrete.

Not for use in areas subject to vehicle traffic.

**LABEL CAUTIONS**

**CAUTION contains CRYSTALLINE SILICA and ZINC** Use only with adequate ventilation. To avoid overexposure, open windows and doors or use other means to ensure fresh air entry during application and drying. If you experience eye watering, headaches, or dizziness, increase fresh air, or wear respiratory protection (NIOSH approved) or leave the area. Adequate ventilation required when sanding or abrading the dried film. If adequate ventilation cannot be provided wear an approved particulate respirator (NIOSH approved). Follow respirator manufacturer's directions for respirator use. Avoid contact with eyes and skin. Wash hands after using. Keep container closed when not in use. Do not transfer contents to other containers for storage. **FIRST AID:** In case of eye contact, flush thoroughly with large amounts of water. Get medical attention if irritation persists. If swallowed, call Poison Control Center, hospital emergency room, or physician immediately. **DELAYED EFFECTS FROM LONG TERM OVEREXPOSURE.** Abrading or sanding of the dry film may release crystalline silica which has been shown to cause lung damage and cancer under long term exposure. **WARNING:** This product contains chemicals known to the State of California to cause cancer and birth defects or other reproductive harm. **DO NOT TAKE INTERNALLY. KEEP OUT OF THE REACH OF CHILDREN.**

HOTW 09/10/2015 A05W00005 23 46

The information and recommendations set forth in this Product Data Sheet are based upon tests conducted by or on behalf of The Sherwin-Williams Company. Such information and recommendations set forth herein are subject to change and pertain to the product offered at the time of publication. Consult your Sherwin-Williams representative or visit [www.paintdocs.com](http://www.paintdocs.com) to obtain the most current version of the PDS and/or an SDS.



# MATERIAL SAFETY DATA SHEET

A5W5  
24 00

DATE OF PREPARATION  
Oct 17, 2015

## SECTION 1 — PRODUCT AND COMPANY IDENTIFICATION

### PRODUCT NUMBER

A5W5

### PRODUCT NAME

SherCrete® Flexible Concrete Waterproofer, Extra White

### MANUFACTURER'S NAME

THE SHERWIN-WILLIAMS COMPANY  
101 Prospect Avenue N.W.  
Cleveland, OH 44115

### Telephone Numbers and Websites

Product Information	www.sherwin-williams.com
Regulatory Information	(216) 566-2902 www.paintdocs.com
Medical Emergency	(216) 566-2917
Transportation Emergency*	(800) 424-9300
*for Chemical Emergency ONLY (spill, leak, fire, exposure, or accident)	

## SECTION 2 — COMPOSITION/INFORMATION ON INGREDIENTS

% by Weight	CAS Number	Ingredient	Units	Vapor Pressure
28	14808-60-7	Quartz		
		ACGIH TLV	0.025 mg/m3 as Resp. Dust	
		OSHA PEL	0.1 mg/m3 as Resp. Dust	
11	13463-67-7	Titanium Dioxide		
		ACGIH TLV	10 mg/m3 as Dust	
		OSHA PEL	10 mg/m3 Total Dust	
		OSHA PEL	5 mg/m3 Respirable Fraction	
2	1314-13-2	Zinc Oxide		
		ACGIH TLV	Not Available	
		OSHA PEL	Not Available	

## SECTION 3 — HAZARDS IDENTIFICATION

### ROUTES OF EXPOSURE

INHALATION of vapor or spray mist.  
EYE or SKIN contact with the product, vapor or spray mist.

### EFFECTS OF OVEREXPOSURE

EYES: Irritation.  
SKIN: Prolonged or repeated exposure may cause irritation.  
INHALATION: Irritation of the upper respiratory system.

In a confined area vapors in high concentration may cause headache, nausea or dizziness.

### SIGNS AND SYMPTOMS OF OVEREXPOSURE

Redness and itching or burning sensation may indicate eye or excessive skin exposure.

### MEDICAL CONDITIONS AGGRAVATED BY EXPOSURE

None generally recognized.

### CANCER INFORMATION

For complete discussion of toxicology data refer to Section 11.

### HMIS Codes

Health	1*
Flammability	0
Reactivity	0

## SECTION 4 — FIRST AID MEASURES

EYES: Flush eyes with large amounts of water for 15 minutes. Get medical attention.

SKIN: Wash affected area thoroughly with soap and water.

Remove contaminated clothing and laundry before re-use.

INHALATION: If affected, remove from exposure. Restore breathing. Keep warm and quiet.

INGESTION: Do not induce vomiting. Get medical attention immediately.

## SECTION 5 — FIRE FIGHTING MEASURES

FLASH POINT	LEL	UEL	FLAMMABILITY CLASSIFICATION
Not Applicable	Not Applicable	Not Applicable	Not Applicable

### EXTINGUISHING MEDIA

Carbon Dioxide, Dry Chemical, Alcohol Foam

### UNUSUAL FIRE AND EXPLOSION HAZARDS

Closed containers may explode (due to the build-up of pressure) when exposed to extreme heat.

During emergency conditions overexposure to decomposition products may cause a health hazard. Symptoms may not be immediately apparent. Obtain medical attention.

### SPECIAL FIRE FIGHTING PROCEDURES

Full protective equipment including self-contained breathing apparatus should be used.

Water spray may be ineffective. If water is used, fog nozzles are preferable. Water may be used to cool closed containers to prevent pressure build-up and possible autoignition or explosion when exposed to extreme heat.

## SECTION 6 — ACCIDENTAL RELEASE MEASURES

### STEPS TO BE TAKEN IN CASE MATERIAL IS RELEASED OR SPILLED

Remove all sources of ignition. Ventilate the area.

Remove with inert absorbent.

## SECTION 7 — HANDLING AND STORAGE

### STORAGE CATEGORY

Not Applicable

### PRECAUTIONS TO BE TAKEN IN HANDLING AND STORAGE

Keep container closed when not in use. Transfer only to approved containers with complete and appropriate labeling. Do not take internally.

Keep out of the reach of children.

## SECTION 8 — EXPOSURE CONTROLS/PERSONAL PROTECTION

### PRECAUTIONS TO BE TAKEN IN USE

Use only with adequate ventilation.

Avoid contact with skin and eyes. Avoid breathing vapor and spray mist.

Wash hands after using.

This coating may contain materials classified as nuisance particulates (listed "as Dust" in Section 2) which may be present at hazardous levels only during sanding or abrading of the dried film. If no specific dusts are listed in Section 2, the applicable limits for nuisance dusts are ACGIH TLV 10 mg/m<sup>3</sup> (total dust), 3 mg/m<sup>3</sup> (respirable fraction), OSHA PEL 15 mg/m<sup>3</sup> (total dust), 5 mg/m<sup>3</sup> (respirable fraction).

Removal of old paint by sanding, scraping or other means may generate dust or fumes that contain lead. Exposure to lead dust or fumes may cause brain damage or other adverse health effects, especially in children or pregnant women. Controlling exposure to lead or other hazardous substances requires the use of proper protective equipment, such as a properly fitted respirator (NIOSH approved) and proper containment and cleanup. For more information, call the National Lead Information Center at 1-800-424-LEAD (in US) or contact your local health authority.

### VENTILATION

Local exhaust preferable. General exhaust acceptable if the exposure to materials in Section 2 is maintained below applicable exposure limits. Refer to OSHA Standards 1910.94, 1910.107, 1910.108.

### RESPIRATORY PROTECTION

If personal exposure cannot be controlled below applicable limits by ventilation, wear a properly fitted organic vapor/particulate respirator approved by NIOSH/MSHA for protection against materials in Section 2.

When sanding or abrading the dried film, wear a dust/mist respirator approved by NIOSH/MSHA for dust which may be generated from this product, underlying paint, or the abrasive.

### PROTECTIVE GLOVES

Wear gloves which are recommended by glove supplier for protection against materials in Section 2.

### EYE PROTECTION

Wear safety spectacles with unperforated sideshields.

**SECTION 9 — PHYSICAL AND CHEMICAL PROPERTIES**

<b>PRODUCT WEIGHT</b>	12.72 lb/gal	1523 g/l
<b>SPECIFIC GRAVITY</b>	1.53	
<b>BOILING POINT</b>	212 - 500 °F	100 - 260 °C
<b>MELTING POINT</b>	Not Available	
<b>VOLATILE VOLUME</b>	48%	
<b>EVAPORATION RATE</b>	Slower than ether	
<b>VAPOR DENSITY</b>	Heavier than air	
<b>SOLUBILITY IN WATER</b>	Not Available	
<b>pH</b>	> 2.0, < 11.5	
<b>VOLATILE ORGANIC COMPOUNDS (VOC Theoretical - As Packaged)</b>		
	0.38 lb/gal	46 g/l
	0.21 lb/gal	25 g/l
	Less Water and Federally Exempt Solvents	
	Emitted VOC	

**SECTION 10 — STABILITY AND REACTIVITY****STABILITY — Stable****CONDITIONS TO AVOID**

None known.

**INCOMPATIBILITY**

None known.

**HAZARDOUS DECOMPOSITION PRODUCTS**

By fire: Carbon Dioxide, Carbon Monoxide

**HAZARDOUS POLYMERIZATION**

Will not occur

**SECTION 11 — TOXICOLOGICAL INFORMATION****CHRONIC HEALTH HAZARDS**

Crystalline Silica (Quartz, Cristobalite) is listed by IARC and NTP. Long term exposure to high levels of silica dust, which can occur only when sanding or abrading the dry film, may cause lung damage (silicosis) and possibly cancer.

IARC's Monograph No. 93 reports there is sufficient evidence of carcinogenicity in experimental rats exposed to titanium dioxide but inadequate evidence for carcinogenicity in humans and has assigned a Group 2B rating. In addition, the IARC summary concludes, "No significant exposure to titanium dioxide is thought to occur during the use of products in which titanium is bound to other materials, such as paint."

**TOXICOLOGY DATA**

CAS No.	Ingredient Name			
14808-60-7	Quartz	LC50 RAT	4HR	Not Available
		LD50 RAT		Not Available
13463-67-7	Titanium Dioxide	LC50 RAT	4HR	Not Available
		LD50 RAT		Not Available
1314-13-2	Zinc Oxide	LC50 RAT	4HR	Not Available
		LD50 RAT		Not Available

**SECTION 12 — ECOLOGICAL INFORMATION****ECOTOXICOLOGICAL INFORMATION**

No data available.

**SECTION 13 — DISPOSAL CONSIDERATIONS****WASTE DISPOSAL METHOD**

Waste from this product is not hazardous as defined under the Resource Conservation and Recovery Act (RCRA) 40 CFR 261. Incinerate in approved facility. Do not incinerate closed container. Dispose of in accordance with Federal, State/Provincial, and Local regulations regarding pollution.

**SECTION 14 — TRANSPORT INFORMATION**

Multi-modal shipping descriptions are provided for informational purposes and do not consider container sizes. The presence of a shipping description for a particular mode of transport (ocean, air, etc.), does not indicate that the product is packaged suitably for that mode of transport. All packaging must be reviewed for suitability prior to shipment, and compliance with the applicable regulations is the sole responsibility of the person offering the product for transport.

**US Ground (DOT)**

Not Regulated for Transportation.

**Canada (TDG)**

Not Regulated for Transportation.

**IMO**

Not Regulated for Transportation.

**IMO**

Not Regulated for Transportation.

**IATA/ICAO**

Not Regulated for Transportation.

**SECTION 15 — REGULATORY INFORMATION**

**SARA 313 (40 CFR 372.65C) SUPPLIER NOTIFICATION**

CAS No.	CHEMICAL/COMPOUND	% by WT	% Element
	Zinc Compound	2	1.5

**CALIFORNIA PROPOSITION 65**

WARNING: This product contains chemicals known to the State of California to cause cancer and birth defects or other reproductive harm.

**TSCA CERTIFICATION**

All chemicals in this product are listed, or are exempt from listing, on the TSCA Inventory.

**SECTION 16 — OTHER INFORMATION**

This product has been classified in accordance with the hazard criteria of the Canadian Controlled Products Regulations (CPR) and the MSDS contains all of the information required by the CPR.

The above information pertains to this product as currently formulated, and is based on the information available at this time. Addition of reducers or other additives to this product may substantially alter the composition and hazards of the product. Since conditions of use are outside our control, we make no warranties, express or implied, and assume no liability in connection with any use of this information.

# SAFETY DATA SHEET

A5W5

## Section 1. Identification

**Product name** : SherCrete® Flexible Concrete Waterproofer  
Extra White

**Product code** : A5W5

**Other means of identification** : Not available.

**Product type** : Liquid.

**Relevant identified uses of the substance or mixture and uses advised against**

Not applicable.

**Manufacturer** : THE SHERWIN-WILLIAMS COMPANY  
101 Prospect Avenue N.W.  
Cleveland, OH 44115

**Emergency telephone number of the company** : (216) 566-2917

**Product Information Telephone Number** : Not available.

**Regulatory Information Telephone Number** : (216) 566-2902

**Transportation Emergency Telephone Number** : (800) 424-9300

## Section 2. Hazards identification

**OSHA/HCS status** : This material is considered hazardous by the OSHA Hazard Communication Standard (29 CFR 1910.1200).

**Classification of the substance or mixture** : CARCINOGENICITY - Category 1A

Percentage of the mixture consisting of ingredient(s) of unknown toxicity: 38.9%

### GHS label elements

**Hazard pictograms** :



**Signal word** : Danger

**Hazard statements** : May cause cancer.

### Precautionary statements

**General** : Read label before use. Keep out of reach of children. If medical advice is needed, have product container or label at hand.

**Prevention** : Obtain special instructions before use. Do not handle until all safety precautions have been read and understood. Wear protective gloves. Wear eye or face protection. Wear protective clothing.

**Response** : IF exposed or concerned: Get medical attention.

**Storage** : Store locked up.

**Disposal** : Dispose of contents and container in accordance with all local, regional, national and international regulations.

**Date of issue/Date of revision**

: 10/17/2015

**Date of previous issue**

: 9/10/2015

**Version** : 1.04

1/11

## Section 2. Hazards identification

### Supplemental label elements

WARNING: This product contains chemicals known to the State of California to cause cancer and birth defects or other reproductive harm. Adequate ventilation required when sanding or abrading the dried film. If Adequate ventilation cannot be provided wear an approved particulate respirator (NIOSH approved). Follow respirator manufacturer's directions for respirator use. DELAYED EFFECTS FROM LONG TERM OVEREXPOSURE. Abrading or sanding of the dry film may release Crystalline Silica which has been shown to cause lung damage and cancer under long term exposure. Please refer to the SDS for additional information. Do not transfer contents to other containers for storage.

### Hazards not otherwise classified

: None known.

## Section 3. Composition/information on ingredients

Substance/mixture : Mixture

Other means of identification : Not available.

### CAS number/other identifiers

Ingredient name	% by weight	CAS number
Quartz	≥25 - <50	14808-60-7
Titanium Dioxide	≥10 - <25	13463-67-7
zinc oxide	≥1 - <3	1314-13-2

Any concentration shown as a range is to protect confidentiality or is due to batch variation.

There are no additional ingredients present which, within the current knowledge of the supplier and in the concentrations applicable, are classified as hazardous to health and hence require reporting in this section.

Occupational exposure limits, if available, are listed in Section 8.

## Section 4. First aid measures

### Description of necessary first aid measures

- Eye contact** : Immediately flush eyes with plenty of water, occasionally lifting the upper and lower eyelids. Check for and remove any contact lenses. Continue to rinse for at least 10 minutes. Get medical attention.
- Inhalation** : Remove victim to fresh air and keep at rest in a position comfortable for breathing. If not breathing, if breathing is irregular or if respiratory arrest occurs, provide artificial respiration or oxygen by trained personnel. It may be dangerous to the person providing aid to give mouth-to-mouth resuscitation. Get medical attention. If unconscious, place in recovery position and get medical attention immediately. Maintain an open airway. Loosen tight clothing such as a collar, tie, belt or waistband.
- Skin contact** : Flush contaminated skin with plenty of water. Remove contaminated clothing and shoes. Wash contaminated clothing thoroughly with water before removing it, or wear gloves. Continue to rinse for at least 10 minutes. Get medical attention. Wash clothing before reuse. Clean shoes thoroughly before reuse.
- Ingestion** : Wash out mouth with water. Remove dentures if any. Remove victim to fresh air and keep at rest in a position comfortable for breathing. If material has been swallowed and the exposed person is conscious, give small quantities of water to drink. Stop if the exposed person feels sick as vomiting may be dangerous. Do not induce vomiting unless directed to do so by medical personnel. If vomiting occurs, the head should be kept low so that vomit does not enter the lungs. Get medical attention. Never give anything by mouth to an unconscious person. If unconscious, place in recovery position and get medical attention immediately. Maintain an open airway. Loosen tight clothing such as a collar, tie, belt or waistband.

### Most important symptoms/effects, acute and delayed

Date of issue/Date of revision

: 10/17/2015

Date of previous issue

: 9/10/2015

Version : 1.04

2/11

## Section 4. First aid measures

### Potential acute health effects

- Eye contact** : No known significant effects or critical hazards.  
**Inhalation** : No known significant effects or critical hazards.  
**Skin contact** : No known significant effects or critical hazards.  
**Ingestion** : No known significant effects or critical hazards.

### Over-exposure signs/symptoms

- Eye contact** : No specific data.  
**Inhalation** : No specific data.  
**Skin contact** : No specific data.  
**Ingestion** : No specific data.

### Indication of immediate medical attention and special treatment needed, if necessary

- Notes to physician** : Treat symptomatically. Contact poison treatment specialist immediately if large quantities have been ingested or inhaled.  
**Specific treatments** : No specific treatment.  
**Protection of first-aiders** : No action shall be taken involving any personal risk or without suitable training. If it is suspected that fumes are still present, the rescuer should wear an appropriate mask or self-contained breathing apparatus. It may be dangerous to the person providing aid to give mouth-to-mouth resuscitation. Wash contaminated clothing thoroughly with water before removing it, or wear gloves.

See toxicological information (Section 11)

## Section 5. Fire-fighting measures

### Extinguishing media

- Suitable extinguishing media** : Use an extinguishing agent suitable for the surrounding fire.  
**Unsuitable extinguishing media** : None known.

**Specific hazards arising from the chemical** : In a fire or if heated, a pressure increase will occur and the container may burst.

- Hazardous thermal decomposition products** : Decomposition products may include the following materials:  
carbon dioxide  
carbon monoxide  
metal oxide/oxides

**Special protective actions for fire-fighters** : Promptly isolate the scene by removing all persons from the vicinity of the incident if there is a fire. No action shall be taken involving any personal risk or without suitable training.

**Special protective equipment for fire-fighters** : Fire-fighters should wear appropriate protective equipment and self-contained breathing apparatus (SCBA) with a full face-piece operated in positive pressure mode.

## Section 6. Accidental release measures

### Personal precautions, protective equipment and emergency procedures

- For non-emergency personnel** : No action shall be taken involving any personal risk or without suitable training. Evacuate surrounding areas. Keep unnecessary and unprotected personnel from entering. Do not touch or walk through spilled material. Avoid breathing vapor or mist. Provide adequate ventilation. Wear appropriate respirator when ventilation is inadequate. Put on appropriate personal protective equipment.

## Section 6. Accidental release measures

**For emergency responders** : If specialised clothing is required to deal with the spillage, take note of any information in Section 8 on suitable and unsuitable materials. See also the information in "For non-emergency personnel".

**Environmental precautions** : Avoid dispersal of spilled material and runoff and contact with soil, waterways, drains and sewers. Inform the relevant authorities if the product has caused environmental pollution (sewers, waterways, soil or air).

### Methods and materials for containment and cleaning up

**Small spill** : Stop leak if without risk. Move containers from spill area. Dilute with water and mop up if water-soluble. Alternatively, or if water-insoluble, absorb with an inert dry material and place in an appropriate waste disposal container. Dispose of via a licensed waste disposal contractor.

**Large spill** : Stop leak if without risk. Move containers from spill area. Approach release from upwind. Prevent entry into sewers, water courses, basements or confined areas. Wash spillages into an effluent treatment plant or proceed as follows. Contain and collect spillage with non-combustible, absorbent material e.g. sand, earth, vermiculite or diatomaceous earth and place in container for disposal according to local regulations (see Section 13). Dispose of via a licensed waste disposal contractor. Contaminated absorbent material may pose the same hazard as the spilled product. Note: see Section 1 for emergency contact information and Section 13 for waste disposal.

## Section 7. Handling and storage

### Precautions for safe handling

**Protective measures** : Put on appropriate personal protective equipment (see Section 8). Avoid exposure - obtain special instructions before use. Do not handle until all safety precautions have been read and understood. Do not get in eyes or on skin or clothing. Do not ingest. Avoid breathing vapor or mist. If during normal use the material presents a respiratory hazard, use only with adequate ventilation or wear appropriate respirator. Keep in the original container or an approved alternative made from a compatible material, kept tightly closed when not in use. Empty containers retain product residue and can be hazardous. Do not reuse container.

**Advice on general occupational hygiene** : Eating, drinking and smoking should be prohibited in areas where this material is handled, stored and processed. Workers should wash hands and face before eating, drinking and smoking. Remove contaminated clothing and protective equipment before entering eating areas. See also Section 8 for additional information on hygiene measures.

**Conditions for safe storage, including any incompatibilities** : Store in accordance with local regulations. Store in original container protected from direct sunlight in a dry, cool and well-ventilated area, away from incompatible materials (see Section 10) and food and drink. Store locked up. Keep container tightly closed and sealed until ready for use. Containers that have been opened must be carefully resealed and kept upright to prevent leakage. Do not store in unlabeled containers. Use appropriate containment to avoid environmental contamination.

## Section 8. Exposure controls/personal protection

### Control parameters

#### Occupational exposure limits



## Section 8. Exposure controls/personal protection

Ingredient name	Exposure limits
Quartz	<p><b>OSHA PEL Z3 (United States, 2/2013).</b> TWA: 250 MPPCF / (%SiO<sub>2</sub>+5) 8 hours. Form: Respirable TWA: 10 MG/M<sup>3</sup> / (%SiO<sub>2</sub>+2) 8 hours. Form: Respirable</p> <p><b>ACGIH TLV (United States, 3/2015).</b> TWA: 0.025 mg/m<sup>3</sup> 8 hours. Form: Respirable fraction</p> <p><b>NIOSH REL (United States, 10/2013).</b> TWA: 0.05 mg/m<sup>3</sup> 10 hours. Form: respirable dust</p>
Titanium Dioxide	<p><b>ACGIH TLV (United States, 3/2015).</b> TWA: 10 mg/m<sup>3</sup> 8 hours.</p> <p><b>OSHA PEL (United States, 2/2013).</b> TWA: 15 mg/m<sup>3</sup> 8 hours. Form: Total dust</p>
zinc oxide	<p><b>NIOSH REL (United States, 10/2013).</b> CEIL: 15 mg/m<sup>3</sup> Form: Dust TWA: 5 mg/m<sup>3</sup> 10 hours. Form: Dust and fumes STEL: 10 mg/m<sup>3</sup> 15 minutes. Form: Fume</p> <p><b>OSHA PEL (United States, 2/2013).</b> TWA: 5 mg/m<sup>3</sup> 8 hours. Form: Fume TWA: 5 mg/m<sup>3</sup> 8 hours. Form: Respirable fraction TWA: 15 mg/m<sup>3</sup> 8 hours. Form: Total dust</p> <p><b>ACGIH TLV (United States, 3/2015).</b> TWA: 2 mg/m<sup>3</sup> 8 hours. Form: Respirable fraction STEL: 10 mg/m<sup>3</sup> 15 minutes. Form: Respirable fraction</p>

**Appropriate engineering controls** : If user operations generate dust, fumes, gas, vapor or mist, use process enclosures, local exhaust ventilation or other engineering controls to keep worker exposure to airborne contaminants below any recommended or statutory limits.

**Environmental exposure controls** : Emissions from ventilation or work process equipment should be checked to ensure they comply with the requirements of environmental protection legislation. In some cases, fume scrubbers, filters or engineering modifications to the process equipment will be necessary to reduce emissions to acceptable levels.

### Individual protection measures

**Hygiene measures** : Wash hands, forearms and face thoroughly after handling chemical products, before eating, smoking and using the lavatory and at the end of the working period. Appropriate techniques should be used to remove potentially contaminated clothing. Wash contaminated clothing before reusing. Ensure that eyewash stations and safety showers are close to the workstation location.

**Eye/face protection** : Safety eyewear complying with an approved standard should be used when a risk assessment indicates this is necessary to avoid exposure to liquid splashes, mists, gases or dusts. If contact is possible, the following protection should be worn, unless the assessment indicates a higher degree of protection: safety glasses with side-shields.

### Skin protection

## Section 8. Exposure controls/personal protection

- Hand protection** : Chemical-resistant, impervious gloves complying with an approved standard should be worn at all times when handling chemical products if a risk assessment indicates this is necessary. Considering the parameters specified by the glove manufacturer, check during use that the gloves are still retaining their protective properties. It should be noted that the time to breakthrough for any glove material may be different for different glove manufacturers. In the case of mixtures, consisting of several substances, the protection time of the gloves cannot be accurately estimated.
- Body protection** : Personal protective equipment for the body should be selected based on the task being performed and the risks involved and should be approved by a specialist before handling this product.
- Other skin protection** : Appropriate footwear and any additional skin protection measures should be selected based on the task being performed and the risks involved and should be approved by a specialist before handling this product.
- Respiratory protection** : Use a properly fitted, air-purifying or air-fed respirator complying with an approved standard if a risk assessment indicates this is necessary. Respirator selection must be based on known or anticipated exposure levels, the hazards of the product and the safe working limits of the selected respirator.

## Section 9. Physical and chemical properties

### Appearance

- Physical state** : Liquid.
- Color** : Not available.
- Odor** : Not available.
- Odor threshold** : Not available.
- pH** : 9.5
- Melting point** : Not available.
- Boiling point** : 100°C (212°F)
- Flash point** : Closed cup: >93.3°C (>199.9°F)
- Evaporation rate** : 0.09 (butyl acetate = 1)
- Flammability (solid, gas)** : Not available.
- Lower and upper explosive (flammable) limits** : Not available.
- Vapor pressure** : 0.31 kPa (2.333 mm Hg) [at 20°C]
- Vapor density** : 1 [Air = 1]
- Relative density** : 1.53
- Solubility** : Not available.
- Partition coefficient: n-octanol/water** : Not available.
- Auto-ignition temperature** : Not available.
- Decomposition temperature** : Not available.
- Viscosity** : Kinematic (room temperature): >0.205 cm<sup>2</sup>/s (>20.5 cSt)  
Kinematic (40°C (104°F)): >0.205 cm<sup>2</sup>/s (>20.5 cSt)
- Molecular weight** : Not applicable.

### Aerosol product

- Heat of combustion** : 1.513 kJ/g

## Section 10. Stability and reactivity

Reactivity	: No specific test data related to reactivity available for this product or its ingredients.
Chemical stability	: The product is stable.
Possibility of hazardous reactions	: Under normal conditions of storage and use, hazardous reactions will not occur.
Conditions to avoid	: No specific data.
Incompatible materials	: No specific data.
Hazardous decomposition products	: Under normal conditions of storage and use, hazardous decomposition products should not be produced.

## Section 11. Toxicological information

### Information on toxicological effects

#### Acute toxicity

Not available.

#### Irritation/Corrosion

Product/ingredient name	Result	Species	Score	Exposure	Observation
Titanium Dioxide	Skin - Mild irritant	Human	-	72 hours 300 Micrograms Intermittent	-
zinc oxide	Eyes - Mild irritant	Rabbit	-	24 hours 500 milligrams	-
	Skin - Mild irritant	Rabbit	-	24 hours 500 milligrams	-

#### Sensitization

Not available.

#### Mutagenicity

Not available.

#### Carcinogenicity

Not available.

#### Classification

Product/ingredient name	OSHA	IARC	NTP
Quartz	-	1	Known to be a human carcinogen.
Titanium Dioxide	-	2B	-

#### Reproductive toxicity

Not available.

#### Teratogenicity

Not available.

#### Specific target organ toxicity (single exposure)

Not available.

#### Specific target organ toxicity (repeated exposure)

Not available.

## Section 11. Toxicological information

### Aspiration hazard

Not available.

**Information on the likely routes of exposure** : Not available.

### Potential acute health effects

**Eye contact** : No known significant effects or critical hazards.  
**Inhalation** : No known significant effects or critical hazards.  
**Skin contact** : No known significant effects or critical hazards.  
**Ingestion** : No known significant effects or critical hazards.

### Symptoms related to the physical, chemical and toxicological characteristics

**Eye contact** : No specific data.  
**Inhalation** : No specific data.  
**Skin contact** : No specific data.  
**Ingestion** : No specific data.

### Delayed and immediate effects and also chronic effects from short and long term exposure

#### Short term exposure

**Potential immediate effects** : Not available.  
**Potential delayed effects** : Not available.

#### Long term exposure

**Potential immediate effects** : Not available.  
**Potential delayed effects** : Not available.

#### Potential chronic health effects

Not available.

**General** : No known significant effects or critical hazards.  
**Carcinogenicity** : May cause cancer. Risk of cancer depends on duration and level of exposure.  
**Mutagenicity** : No known significant effects or critical hazards.  
**Teratogenicity** : No known significant effects or critical hazards.  
**Developmental effects** : No known significant effects or critical hazards.  
**Fertility effects** : No known significant effects or critical hazards.

### Numerical measures of toxicity

#### Acute toxicity estimates

Route	ATE value
Oral	138086.8 mg/kg

## Section 12. Ecological information

### Toxicity

Product/ingredient name	Result	Species	Exposure
Titanium Dioxide zinc oxide	Acute LC50 >1000000 µg/l Marine water	Fish - Fundulus heteroclitus	96 hours
	Acute IC50 1.85 mg/l Marine water	Algae - Skeletonema costatum	96 hours
	Acute IC50 46 µg/l Fresh water	Algae - Pseudokirchneriella subcapitata - Exponential growth phase	72 hours
	Acute LC50 98 µg/l Fresh water	Daphnia - Daphnia magna - Neonate	48 hours
	Acute LC50 1.1 ppm Fresh water	Fish - Oncorhynchus mykiss	96 hours

### Persistence and degradability

Not available.

### Bioaccumulative potential

Product/ingredient name	LogP <sub>ow</sub>	BCF	Potential
Titanium Dioxide	-	352	low
zinc oxide	-	60960	high

### Mobility in soil

Soil/water partition coefficient (K<sub>oc</sub>) : Not available.

Other adverse effects : No known significant effects or critical hazards.

## Section 13. Disposal considerations

**Disposal methods** : The generation of waste should be avoided or minimized wherever possible. Disposal of this product, solutions and any by-products should at all times comply with the requirements of environmental protection and waste disposal legislation and any regional local authority requirements. Dispose of surplus and non-recyclable products via a licensed waste disposal contractor. Waste should not be disposed of untreated to the sewer unless fully compliant with the requirements of all authorities with jurisdiction. Waste packaging should be recycled. Incineration or landfill should only be considered when recycling is not feasible. This material and its container must be disposed of in a safe way. Care should be taken when handling emptied containers that have not been cleaned or rinsed out. Empty containers or liners may retain some product residues. Avoid dispersal of spilled material and runoff and contact with soil, waterways, drains and sewers.

## Section 14. Transport information

	DOT Classification	TDG Classification	Mexico Classification	IATA	IMDG
UN number	Not regulated.	Not regulated.	Not regulated.	Not regulated.	Not regulated.
UN proper shipping name	-	-	-	-	-
Transport hazard class(es)	-	-	-	-	-

## Section 14. Transport information

Packing group	-	-	-	-	-
Environmental hazards	No.	No.	No.	No.	No.
Additional information	<u>Special provisions</u> Not Applicable	<u>Special provisions</u> Not Applicable	<u>Special provisions</u> Not Applicable	<u>Special provisions</u> Not Applicable	<u>Emergency schedules (EmS)</u> Not Applicable

**Special precautions for user** : Multi-modal shipping descriptions are provided for informational purposes and do not consider container sizes. The presence of a shipping description for a particular mode of transport (sea, air, etc.), does not indicate that the product is packaged suitably for that mode of transport. All packaging must be reviewed for suitability prior to shipment, and compliance with the applicable regulations is the sole responsibility of the person offering the product for transport. People loading and unloading dangerous goods must be trained on all of the risks deriving from the substances and on all actions in case of emergency situations.

**Transport in bulk according to Annex II of MARPOL 73/78 and the IBC Code** : Not available.

**Proper shipping name** : Not available.  
**Ship type** : Not available.  
**Pollution category** : Not available.

## Section 15. Regulatory information

### SARA 313

SARA 313 (40 CFR 372.45) supplier notification can be found on the Environmental Data Sheet.

### California Prop. 65

WARNING: This product contains chemicals known to the State of California to cause cancer and birth defects or other reproductive harm.

## Section 16. Other information

### Hazardous Material Information System (U.S.A.)

Health	*	1
Flammability		0
Physical hazards		0

The customer is responsible for determining the PPE code for this material.

Caution: HMIS® ratings are based on a 0-4 rating scale, with 0 representing minimal hazards or risks, and 4 representing significant hazards or risks. Although HMIS® ratings are not required on SDSs under 29 CFR 1910.1200, the preparer may choose to provide them. HMIS® ratings are to be used with a fully implemented HMIS® program. HMIS® is a registered mark of the National Paint & Coatings Association (NPCA). HMIS® materials may be purchased exclusively from J. J. Keller (800) 327-6868.

### Procedure used to derive the classification

#### Classification

Carc. 1A, H350

#### Justification

Calculation method

### History

**Date of printing** : 10/17/2015

## Section 16. Other information

**Date of issue/Date of revision** : 10/17/2015  
**Date of previous issue** : 9/10/2015  
**Version** : 1.04  
**Key to abbreviations** : ATE = Acute Toxicity Estimate  
BCF = Bioconcentration Factor  
GHS = Globally Harmonized System of Classification and Labelling of Chemicals  
IATA = International Air Transport Association  
IBC = Intermediate Bulk Container  
IMDG = International Maritime Dangerous Goods  
LogPow = logarithm of the octanol/water partition coefficient  
MARPOL 73/78 = International Convention for the Prevention of Pollution From Ships, 1973 as modified by the Protocol of 1978. ("Marpol" = marine pollution)  
UN = United Nations

### Notice to reader

It is recommended that each customer or recipient of this Safety Data Sheet (SDS) study it carefully and consult resources, as necessary or appropriate, to become aware of and understand the data contained in this SDS and any hazards associated with the product. This information is provided in good faith and believed to be accurate as of the effective date herein. However, no warranty, express or implied, is given. The information presented here applies only to the product as shipped. The addition of any material can change the composition, hazards and risks of the product. Regulatory requirements are subject to change and may differ between various locations and jurisdictions. The customer/buyer/user is responsible to ensure that his activities comply with all country, federal, state, provincial or local laws. The conditions for use of the product are not under the control of the manufacturer; the customer/buyer/user is responsible to determine the conditions necessary for the safe use of this product. The customer/buyer/user should not use the product for any purpose other than the purpose shown in the applicable section of this SDS without first referring to the supplier and obtaining written handling instructions. Due to the proliferation of sources for information such as manufacturer-specific SDS, the manufacturer cannot be responsible for SDSs obtained from any other source.



**SHERWIN-WILLIAMS.**

**SHERWIN-WILLIAMS**

908 KENNEDY DR  
KEY WEST FL 33040 4017

Visit [www.sherwin-williams.com](http://www.sherwin-williams.com)

Store 2690 BEULAH  
(305)296-8501  
Fax - (305)296-4918

**CHARGE  
INVOICE  
No. 9582-7**

ACCOUNT: 5221-2945-1 JOB 01 BURKE CONSTRUCTION  
SHIPPED TO:

PO:1415

BURKE CONSTRUCTION  
10145 NW 19TH ST  
DORAL FL 33172 2529

FL

DATE: 11/17/15  
TIME: 10:22 AM

2-4453  
E18/15163 11

(305)468-6604

\* INDICATES SALE PRICE

TERMS:NET PAYMENT DUE ON DEC. 20th

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6403-83790	5 GAL	ASWE	SHRCRT FLEX CON WP	15	32.49	487.35
180-7585	EACH	997585000	XL ARTIST BRUSHES	1	5.19	5.19
			Discount (%15.00)			-.78
6503-03498	4 INCH		HGTV 4" MINI RLR 4PC	1	10.00 *	10.00

-----  
Thank You  
receipt required for refund

SUBTOTAL BEFORE TAX	501.76
7.500% SALES TAX:1-103304000	37.64
CHARGE	\$539.40

**STORE HOURS**

SUNDAY 10:00 AM - 6:00 PM  
 MONDAY - FRIDAY 7:00 AM - 7:00 PM  
 SATURDAY 8:00 AM - 6:00 PM

MERCHANDISE RECEIVED IN GOOD ORDER BY:

RON

DATE (CENTRALIZED INVOICE)





**SHERWIN-WILLIAMS.**

**SHERWIN-WILLIAMS**

908 KENNEDY DR  
KEY WEST FL 33040 4017

Visit [www.sherwin-williams.com](http://www.sherwin-williams.com)

Store 2690 REID  
(305)296-8501  
Fax - (305)296-4918

**CHARGE  
INVOICE  
No. 3209-9**

ACCOUNT: **5221-2945-1** JOB 01 BURKE CONSTRUCTION

BURKE CONSTRUCTION  
10145 NW 19TH ST  
DORAL FL 33172 2529

PO:1415  
ORDER:OE0114060Q2690  
DATE: 11/06/15  
TIME: 10:10 AM

2-4453  
E73/10822 **11**

**TERMS:NET PAYMENT DUE ON DEC. 20th**

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
6403-83790	5 GAL	A5W5	SHRCRT FLEX CON WP	15	37.87	568.05

----- Thank You -----  
receipt required for refund

SUBTOTAL BEFORE TAX 568.05  
7.500% SALES TAX:1-103304000 42.60  
CHARGE \$610.65

**STORE HOURS**

SUNDAY 10:00 AM - 6:00 PM  
MONDAY - FRIDAY 7:00 AM - 7:00 PM  
SATURDAY 8:00 AM - 6:00 PM

MERCHANDISE RECEIVED IN GOOD ORDER BY:

DELIVERED BY BLAKE SW REP

DATE (CENTRALIZED INVOICE)

Reprinted  
12/28/15  
12/25/15

THE SHERWIN-WILLIAMS CO.  
908 KENNEDY DR  
KEY WEST FL 33040 4017

REPRINTED  
DOCUMENT



SHERWIN-WILLIAMS.

CHARGE  
CORRECT  
No. 3220-6

Visit [www.sherwin-williams.com](http://www.sherwin-williams.com)  
Store 2690  
(305) 296-8501  
JOB 01 BURKE CONSTRUCTION

PAGE 1 OF 1  
PO#

DATE: 11/06/2015  
TIME: 11:17 AM  
2-4453  
E07/10822



ACCOUNT: 5221-2945-1

APPRVL

BURKE CONSTRUCTION  
10145 NW 19TH ST  
DORAL FL 33172 2529

(305) 468-6604

\* INDICATES SALE PRICE

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE	
*****CHANGED FROM*****							
6403-83790	5 GAL	A5W5	SHRCRT FLEX CON WP	15	-37.87	-568.05	
						SUBTOTAL BEFORE TAX	-568.05
						7.500%:1-103304000	-42.60
*****CHANGED TO*****							
6403-83790	5 GAL	A5W5	SHRCRT FLEX CON WP	15	37.87*	568.05	
			DISCOUNT (\$)			-80.70	
			CORRECTION				
						SUBTOTAL BEFORE TAX	487.35
						7.500%:1-103304000	36.56
*****CORRECTED TOTALS*****							

ORIGINAL  
TERM: 10822  
TRAN: 32099  
DATE: 11/06/2015

Thank You  
receipt required for refund

SUBTOTAL BEFORE TAX -80.70  
7.500% SALES TAX:1-103304000 -6.04  
CORRECT SUBTOTAL -80.70  
TOTAL TAX -6.04  
DUE CUSTOMER  
CHARGE CREDIT \$-86.74

CHANGED THE PRICE

S-W SIGNATURE

# REQUEST FOR CHANGE ORDER

- OWNER
- ARCHITECT
- CONTRACTOR
- FIELD
- SUBCONTRACTOR



PROJECT: **KEY WEST CITY HALL - GLYNN ARCHER**  
 1300 White Street  
 Key West, Florida 33040

REQUEST FOR CHANGE ORDER NO.: **019**

REQUEST FOR CHANGE ORDER DATE: **11/27/2015**

PROJECTS NO.: **1415**

CONTRACTOR: **Burke Construction Group, Inc.**  
 3210 Flagler Avenue  
 Key West, FL 33040

DATE OF CONTRACT: 12/19/2014

Parapet Repairs in preparation for roofing

**The conditions were hidden by the existing roofing**

The Contract is changed as follows:

This change order pertains to the application of New Stucco to repair Bldgs. A & B Parapet in preparation of roofing. All Chipping and removal of loose concrete/stucco and humps, and prep surfaces with Acrylic Bonding Agent, metal lath at gaps gaps and transitions with Ameri-mix factory blended stucco material. Stucco will be smooth and level to create a continuous smooth surface in the preparation for the roofing system.

*OE. ADDITIONAL PREPARATION REQUIRED BY ROOFING MANUFACTURER IN ORDER TO OBTAIN WARRANTY.*

*NEED TO VERIFY TIME IMPACT TO THE CRITICAL PATH.*

Subtotals	\$	14,500.00
Contractor Fee: 10%		1450.00
Contractor OH: 2.5%		362.50
GL Insurance: 1%		145.00
Bond : 1%		145.00

**TOTAL RCO: \$ 16,602.50**

**CONTRACT TIME INCREASE / (DECREASE): 8**

*1.13.2016*  
*ROOFING DELAYS IMPACT CRITICAL PATH - FACTORY WAS SHUT DOWN. TIME ALLOWED - ADDITIONAL TIME MAY BE JUSTIFIED*

**Burke Construction Group, Inc.**  
 CONTRACTOR  
 3210 Flagler Avenue  
 ADDRESS  
 Key West, FL 33040

**Reservations:** This proposal is based solely on the usual cost elements such as labor material and normal markups, and does not include any amount for additional changes in the sequence of work, delays, disruptions, rescheduling, lost productivity, extended or unabsorbed overhead, overtime, acceleration and or impact costs, unless specifically stated. The right is expressly reserved to amend and make claim for any and all of these related items prior to final settlement of this contract.

BY (Signature)  
 David J Hahn, Project Manager  
 (Typed Name)

DATE 11/27/2015



Proposal Submitted to:  
Burke Construction  
10145 NW 19<sup>th</sup> Street  
Doral, FL 33172

Date: 11/2/2015  
Job Name: Key West City Hall  
Key West, FL  
Architect: Bender & Associates  
Date of Plans: 8/8/14

We hereby submit specifications and estimates for **PARAPET REPAIR WORK** as follows:

**Stucco Repair Work**

- Chip and remove loose concrete/stucco and humps
- Acrylic Bonding Agent at concrete surfaces and re-stucco surfaces
- Metal lath at gaps and transitions
- Ameri-mix factory blended stucco material
- Stucco fill and level as to allow for a continuous smooth surfacing in preparation for roofing system

We hereby furnish material and labor in accordance with the above mentioned scope of work as follows:

<b>Parapet Repair work Building B .....</b>	<b>\$7,000.00</b>
<b>Parapet Repair work Building A .....</b>	<b>\$7,500.00</b>

**NOTES & EXCLUSIONS:**

- Lodging/Hospitality Included in price
- Scaffolding Included in price
- Price based on single mobilization

---

Guillermo Swain - Principal  
Zarco Construction, LLC

**Note:** This proposal may be withdrawn by us if not accepted within fifteen (15) days. Our prices are based on our material prices currently charged to us by our suppliers. After a thirty (30) day grace period, any increase in price on materials given to us will be passed on to the general contractor.

**ACCEPTANCE OF PROPOSAL:** The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. This proposal will be incorporated in the contract documents.

Date of Acceptance: \_\_\_\_\_

Company: **Burke Construction Group, Inc**

By: \_\_\_\_\_

Title: \_\_\_\_\_

# REQUEST FOR CHANGE ORDER

- OWNER
- ARCHITECT
- CONTRACTOR
- FIELD
- SUBCONTRACTOR



PROJECT: **KEY WEST CITY HALL - GLYNN ARCHER**  
1300 White Street  
Key West, Florida 33040

REQUEST FOR CHANGE ORDER NO.: **020**

REQUEST FOR CHANGE ORDER DATE: **11/27/2015**

PROJECTS NO.: **1415**

CONTRACTOR: **Burke Construction Group, Inc.**  
3210 Flagler Avenue  
Key West, FL 33040

DATE OF CONTRACT: 12/19/2014

**Temporary Bracing Redesign**  
**Temporary Strong-backs Rental, Installation, and**  
**Removal Bldg. A and B. Refer to IB#3**

The Contract is changed as follows:

Due to the absence of critical information the Temporary Bracing Plan has been redesign with the following additional cost and time to the contractor.

*COST DENIED*

*TIME ALLOWED -  
CONFIRMED W/ FIELD LOG  
RECORDS.*

*1.18.2016*

TOTAL RCO: \$ 61,857.50

CONTRACT TIME INCREASE / (DECREASE): 38

**Burke Construction Group, Inc.**

CONTRACTOR  
3210 Flagler Avenue  
ADDRESS  
Key West, FL 33040

**Reservations:** This proposal is based solely on the usual cost elements such as labor material and normal markups, and does not include any amount for additional changes in the sequence of work, delays, disruptions, rescheduling, lost productivity, extended or unabsorbed overhead, overtime, acceleration and or impact costs, unless specifically stated. The right is expressly reserved to amend and make claim for any and all of these related items prior to final settlement of this contract.

BY (Signature)  
David J Hahn, Project Manager  
(Typed Name)

DATE 11/27/2015

# INFORMATION BULLETIN (IB)

---

**PROJECT:** Key West City Hall at Glynn Archer **INFORMATION BULLETIN NO. Three (3)**

**DATE OF ISSUANCE:** April 16, 2015

**OWNER:** City of Key West

**CONTRACT FOR:** Renovation

**CONTRACT DATED:** Dec 30, 2014

**ARCHITECT'S PROJECT NO. 1305**

**TO CONTRACTOR:**

**Burke Construction Group, Inc.  
3210 Flagler Ave.  
Key West, FL 33040**

**ARCHITECT:**

**Bender & Associates Architects, P.A.  
410 Angela Street  
Key West, FL 33040**

---

If the Contractor believes that the information contained herein will result in a change in the contract time or amount, Contractor must submit a written Request for Change Order within fifteen (15) days of the date of issuance of this I.B.

The second floor framing and floor sheathing at Building A and B shall remain in place until Temporary Bracing is installed which has been reviewed and approved by the A/E Team.

From Atlantic Engineering Services, the A/E Structural Engineer:

We have the following comments regarding the wall panel calculations:

- 1) Calculations appear to use a wall thickness of 15.25 inches. According to the field reports, the existing walls are 11" thick including a minimum of 1" of plaster each side leaving us a maximum of 9" thick of concrete wall.
- 2) Calculations appear to use a concrete strength of 2500 psi. The cores of the existing walls that were tested provided existing compressive strength values ranging from 520 psi to 2630 psi with an average value of 1375 psi over 9 cores. Dropping the highest and lowest values, we feel comfortable with a compressive strength of 1500 psi on average to be used in the analysis of the walls.
- 3) It appears that the 104 mph service-level wind load is used without the appropriate load factor (1.6 required per ACI 318-11, Section 9.2.1b).
- 4) The letter submitted with the calculations states that the modulus of rupture is utilized to determine the design capacity of the panels. It is assumed that this means the cracking moment (as determined by Section 9.5.2.3 of ACI 318-11) was used as the moment capacity (with the associated phi factor applied) and the ultimate moment was compared to this value. However, this method provides an unconservative value for the moment capacity as compared to the method for determining the strength of a flexural member from Section 22.5.1 (structural plain concrete). Note that field testing showed little to no reinforcing in most of the existing wall panels; hence, the need to run the analysis for unreinforced walls.

Please revise and resubmit the calculations based on the comments above. Alternately, provide bracing at the existing floor and roof levels as stated in the specifications to ensure the walls are braced as they were prior to demolition (a system that has been working for the life of the structure).

BENDER & ASSOCIATES ARCHITECTS, P.A.

A handwritten signature in blue ink, appearing to read 'Bert Bender', with a long horizontal line extending to the right.

---

by: Bert Bender, Bender & Associates Architects

cc: Kreed Howell, Jim Bouquet, Mike Vieux, Javier Torres, Mark Keister, Laney Stoddard

Attachments: none



2. The temporary bracing system shall be designed and constructed based on actual elevations and bracing dimensions in accordance with the contract and accepted submittals.
  3. Temporary bracing shall be installed at the second floor and roof levels and shall be spaced at a maximum of 12'-0" on center.
  4. The proposed bracing systems shall have foundations designed for allowable soil bearing pressures in accordance with the geotechnical investigation prepared for the Project. Foundations shall be concrete dead men embedded into the cap rock.
- C. Temporary Bracing Design Criteria:
1. The temporary bracing shall be designed for a minimum ultimate design wind speed (3 second gust),  $V_{ult} = 130$  mph.

#### 1.4 SUBMITTALS

- A. Submit under provisions of Division 01 Section "General Requirements."
- B. Shop Drawings indicating layout, member sizes, connection details, and construction sequence for temporary bracing. No work related to bracing shall take place until the Engineer has reviewed the Shop Drawings.
- C. Design calculations of temporary bracing showing member stresses and connections due to imposed loads.

#### 1.5 QUALITY ASSURANCE

- A. Design calculations and Shop Drawings of proposed temporary bracing of the structure shall be prepared, stamped, and signed by a Structural Engineer registered in the State of Florida.

### PART 2 - PRODUCTS

#### 2.1 MATERIALS FOR TEMPORARY BRACING

- A. Materials for temporary bracing shall be undamaged, high quality materials.
- B. The Contractor shall be responsible for the supply, safe storage, and handling of all materials associated with this work.

### PART 3 - EXECUTION

#### 3.1 CONSTRUCTION

- A. Construction of temporary bracing shall be in accordance with the reviewed Shop Drawings prepared by the Subcontractor's Engineer.
- B. The Subcontractor shall hire the Engineer responsible for the design of temporary bracing and inspection of the work as detailed on the bracing Shop Drawings, prior to sawcutting or removing portions of the structure.
- C. The Engineer responsible for design of temporary bracing shall write a letter to the Engineer certifying that construction of bracing was completed in accordance with the bracing Shop Drawings and meets its approval, prior to placement of concrete, sawcutting, and removal or modification of portions of the structure.

---

**David Hahn**

---

**From:** David Hahn  
**Sent:** Wednesday, April 29, 2015 4:08 PM  
**To:** bibender@bellsouth.net  
**Cc:** Mario Martinez; Ron Gage  
**Subject:** KWCH- Project #1415 Response to IB#3 KWCH.pdf (70 KB)  
**Attachments:** IB #3 KWCH.pdf

Bert, Good afternoon.

Burke CG, Inc. has reviewed the attached IB #3 and wishes to notify Owner and Designer that it may result in an increase of time and cost.

The IB #3 KWCH, references information that Burke CG, Inc. was not privy too prior to bidding of and now contracted project. This has directly and indirectly affected the demolition schedule, design and installation of the Temporary Bracing System.

*Kind Regards,*

**David J. Hahn – Project Manager**



**3210 Flager Avenue**  
**Key West, Florida 33040**  
☎ **OFF: 305-916-5050**  
☎ **FAX: 305-468-6654**  
☎ **CELL: 786-376-6088**

E-mail [dhahn@bcgconstruction.net](mailto:dhahn@bcgconstruction.net)

**Miami-Dade County Office:**

10145 N.W. 19<sup>th</sup> Street  
Doral, Florida 33172  
☎ **OFF: 305-468-6604**  
☎ **FAX: 305-468-6654**

# REQUEST FOR CHANGE ORDER

- OWNER
- ARCHITECT
- CONTRACTOR
- FIELD
- SUBCONTRACTOR



PROJECT: **KEY WEST CITY HALL - GLYNN ARCHER**  
 1300 White Street  
 Key West, Florida 33040

REQUEST FOR CHANGE ORDER NO.: **021**

REQUEST FOR CHANGE ORDER DATE: **11/27/2015**

PROJECTS NO.: **1415**

CONTRACTOR: **Burke Construction Group, Inc.**  
 3210 Flagler Avenue  
 Key West, FL 33040

DATE OF CONTRACT: 12/19/2014

**Addition of thicken edge to slabs in Breezeways**

**The Contract is changed as follows:**

The response to RFI 56 by AES will require a change in scope of work and additional time to add the thickened edge as described in the drawing returned in RFI 56 AES response. Please see attached CO 007 for Bella.

MODIFICATION REQUIRED BECAUSE EXPECTED FOOTING WAS NON-EXISTENT

TIME JUSTIFIED: IMPACTED INSTALLATION OF BRIDGE SUPPORT STEEL

OIC.

1.13.16

Subtotals	\$	5,559.10
Contractor Fee: 10%		555.91
Contractor OH: 2.5%		138.98
GL Insurance: 1%		55.59
Bond : 1%		55.59

**TOTAL RCO: \$ 6,365.17**

**CONTRACT TIME INCREASE / (DECREASE): 7**

**Burke Construction Group, Inc.**  
 CONTRACTOR  
 3210 Flagler Avenue  
 ADDRESS  
 Key West, FL 33040

**Reservations:** This proposal is based solely on the usual cost elements such as labor material and normal markups, and does not include any amount for additional changes in the sequence of work, delays, disruptions, rescheduling, lost productivity, extended or unabsorbed overhead, overtime, acceleration and or impact costs, unless specifically stated. The right is expressly reserved to amend and make claim for any and all of these related items prior to final settlement of this contract.

BY (Signature)  
 David J Hahn, Project Manager  
 (Typed Name)

DATE 11/27/2015

# Request for Information (RFI)



**TO:**  
Bender & Associates Architects p.a.  
410 Angela Street  
Key West, Florida 33040

**FROM:**  
David J Hahn  
3210 Flagler Avenue  
Key West, Fl. 33040

**Project:**  
Glynn Archer - Key West City Hall  
1300 White Street  
Key West, FL 33040

**Plan Issue Date:**  
Permit Set

**RFI Number:** 56

**Project #:** 1415

<b>Date Sent:</b>	October 5, 2015
<b>Requested Reply Date:</b>	October 10, 2015
<b>Copies Furnished To:</b>	Burt Bender

**RFI Description:** Bert, Please see attached drawing for reference.  
We are requesting some clarification regarding the placement of steel columns along the exterior of Auditorium Walls. There doesn't appear to be a drawing detail or scope for these coulmns.

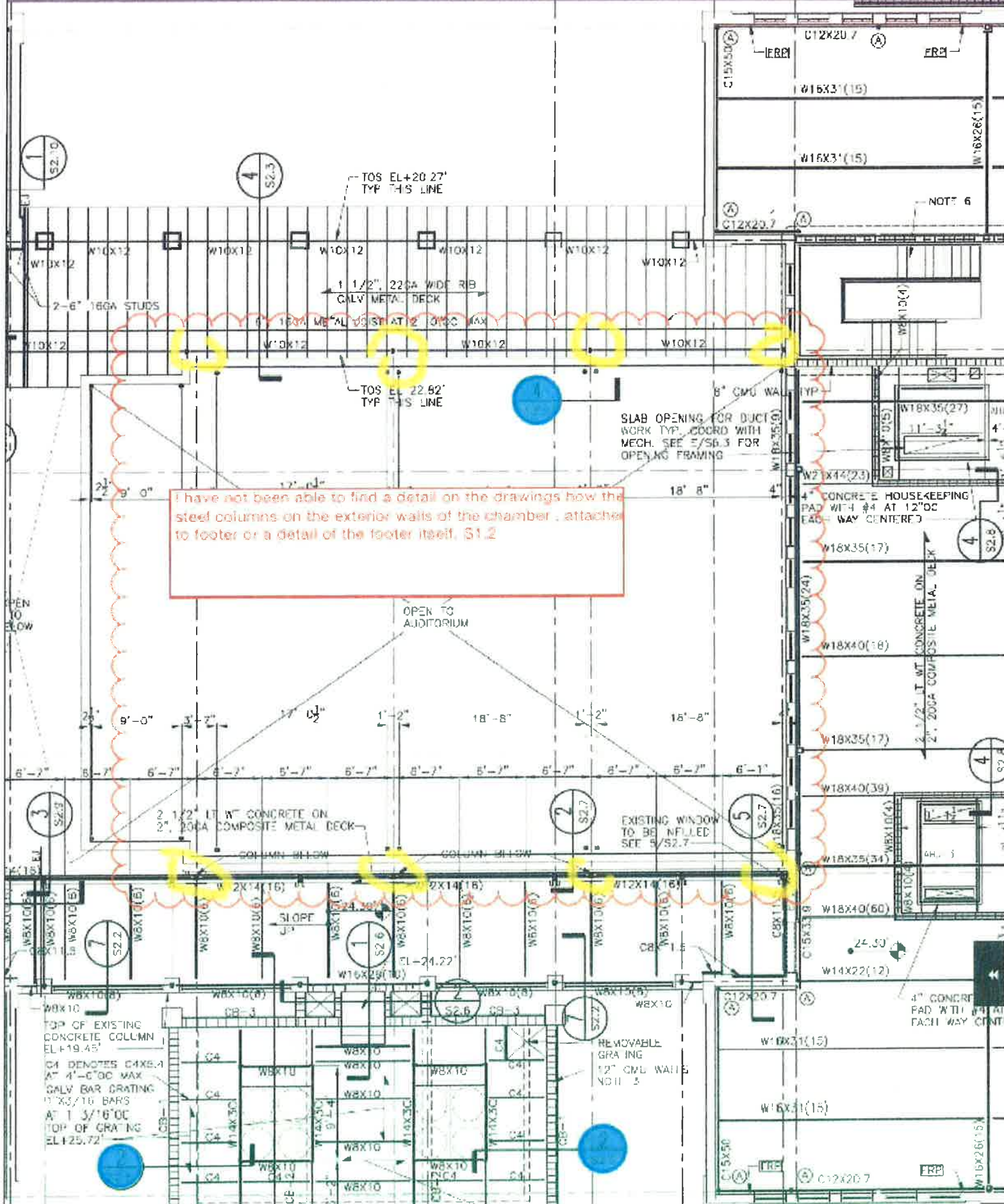
*Please advise.*

**Senders Recommendation:** (recommended solution, cost, and schedule impact)

**Receiver's Response:** (Provide answer to RFI including cost and schedule considerations.)  
Columns shall bear on thickened slab. See attached revised plan and detail.

- Laney Stoddard, P.E.  
Atlantic Engineering Services

# SECOND FLOOR FRAMING PLAN



I have not been able to find a detail on the drawings how the steel columns on the exterior walls of the chamber, attached to footer or a detail of the footer itself. S1.2

TOP OF EXISTING CONCRETE COLUMN EL+19.45'  
C4 DENOTES C4X5.4 AT 4'-0" O.C. MAX GALV BAR GRATING 1" X 3/16 BARS AT 1 3/16" O.C. TOP OF GRATING EL+25.72'

REMOVABLE GRATING 12" OML WALLS NOTED 3

4" CONCRETE PAD WITH #4 AT 12" O.C. EACH WAY CENTERED

NO. DESCRIPTION DATE	
1. APPROVAL	
2. REVISION	
3. APPROVAL	
4. REVISION	
5. APPROVAL	
6. REVISION	
7. APPROVAL	
8. REVISION	
9. APPROVAL	
10. REVISION	

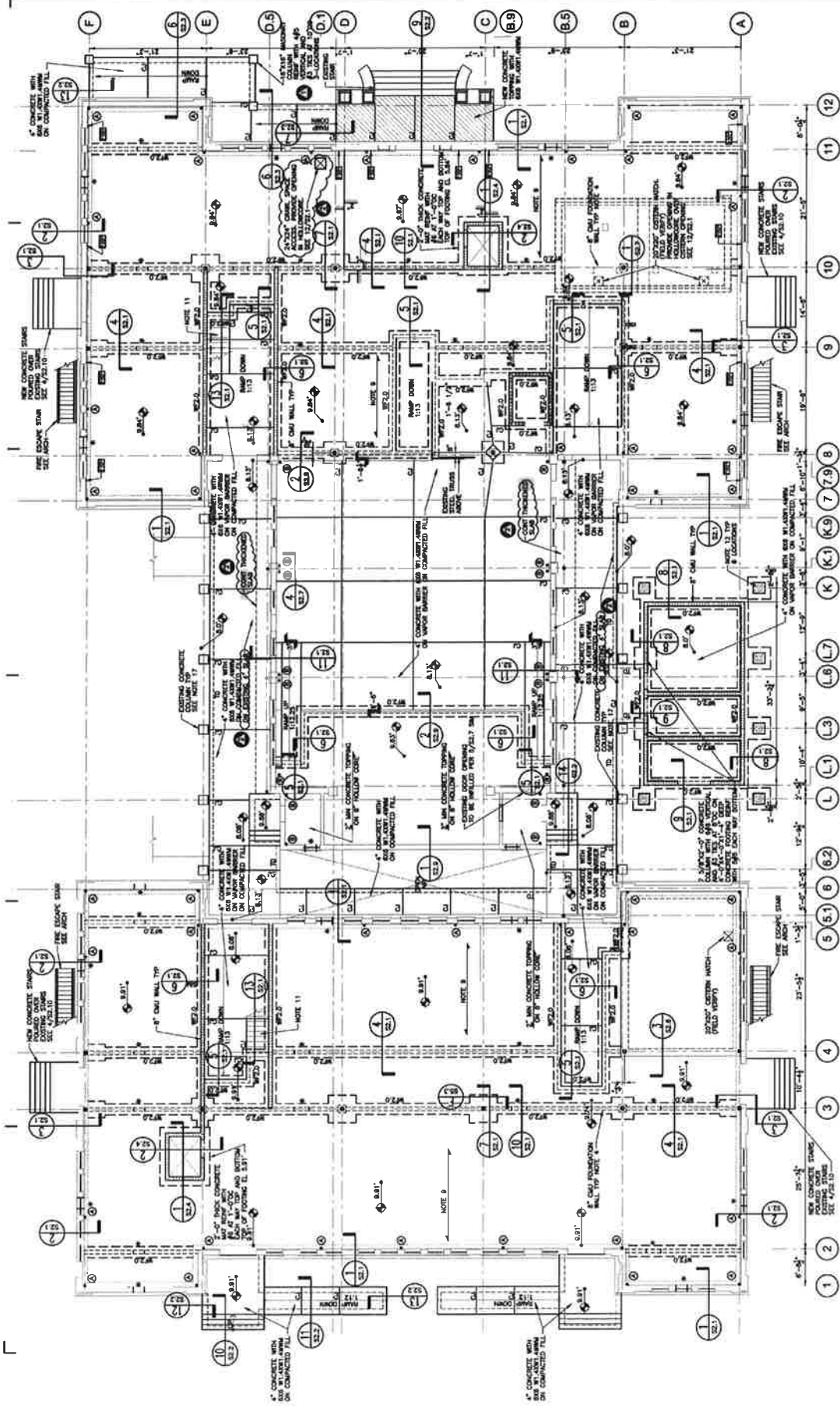
KEY WEST CITY HALL  
AT GYNN ARCHER  
1302 WHITE STREET KEY WEST, FLORIDA  
CITY OF KEY WEST



BENDER & ASSOCIATES  
ARCHITECTS  
1302 WHITE STREET  
KEY WEST, FLORIDA 33440  
TEL: 305-241-1111  
WWW.BENDERANDASSOCIATES.COM

FOUNDATION AND FIRST FLOOR PLAN  
DATE: 05/21/11  
SCALE: AS SHOWN

S1.1  
5 OF 25



- NOTES:
1. FINISH FLOOR ELEVATION = +6.17' ABOVE AND BELOW GRADE. SEE ARCH.
  2. TOP OF FOOTING ELEVATION = +1.00'. ALL ELEVATION MARKS ARE IN FEET.
  3. ALL CONCRETE SHALL BE 3000 PSI STRENGTH CONCRETE UNLESS OTHERWISE NOTED. SEE ARCH.
  4. ALL CONCRETE SHALL BE 3000 PSI STRENGTH CONCRETE UNLESS OTHERWISE NOTED. SEE ARCH.
  5. ALL CONCRETE SHALL BE 3000 PSI STRENGTH CONCRETE UNLESS OTHERWISE NOTED. SEE ARCH.
  6. ALL CONCRETE SHALL BE 3000 PSI STRENGTH CONCRETE UNLESS OTHERWISE NOTED. SEE ARCH.
  7. W.P. 2.0 - IDENTIFY 2'-0" DEEP CONCRETE CONCRETE AND IS TO BE AT 1'-4" ON CENTER. EXPOSED CONCRETE SHALL BE 4'-0" INTO ISOLATED COLUMN FOUNDATION. SEE ARCH. (L) (K) (J) (I) (H) (G) (F) (E) (D) (C) (B) (A)
  8. SEE ARCHITECTURAL DETAILS FOR EXISTING WALLS AND LOCATIONS OF EXISTING WALLS. SEE ARCH.
  9. 8" PRECAST/PRECAST CONCRETE HELIX/SCREW SLAM WITH 2" STEEL REINFORCING BARS SHALL BE USED FOR ALL EXISTING WALLS. SEE ARCH.
  10. LOCATIONS OF ALL EXISTING WALLS SHALL BE INDICATED BY A DOTTED LINE. SEE ARCH.
  11. ALL EXISTING WALLS SHALL BE REINFORCED WITH 2" STEEL REINFORCING BARS. SEE ARCH.
  12. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  13. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  14. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  15. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  16. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  17. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  18. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  19. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  20. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  21. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  22. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  23. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  24. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  25. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  26. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  27. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  28. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  29. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  30. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  31. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  32. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  33. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  34. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  35. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  36. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  37. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  38. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  39. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  40. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  41. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  42. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  43. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  44. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  45. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  46. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  47. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  48. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  49. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.
  50. 24" x 24" CONCRETE COLUMN REINFORCED WITH 14#6 VERTICAL AND 14#6 HORIZONTAL REINFORCING BARS. SEE ARCH.

FOUNDATION AND FIRST FLOOR PLAN  
SCALE: 3/8" = 1'-0"

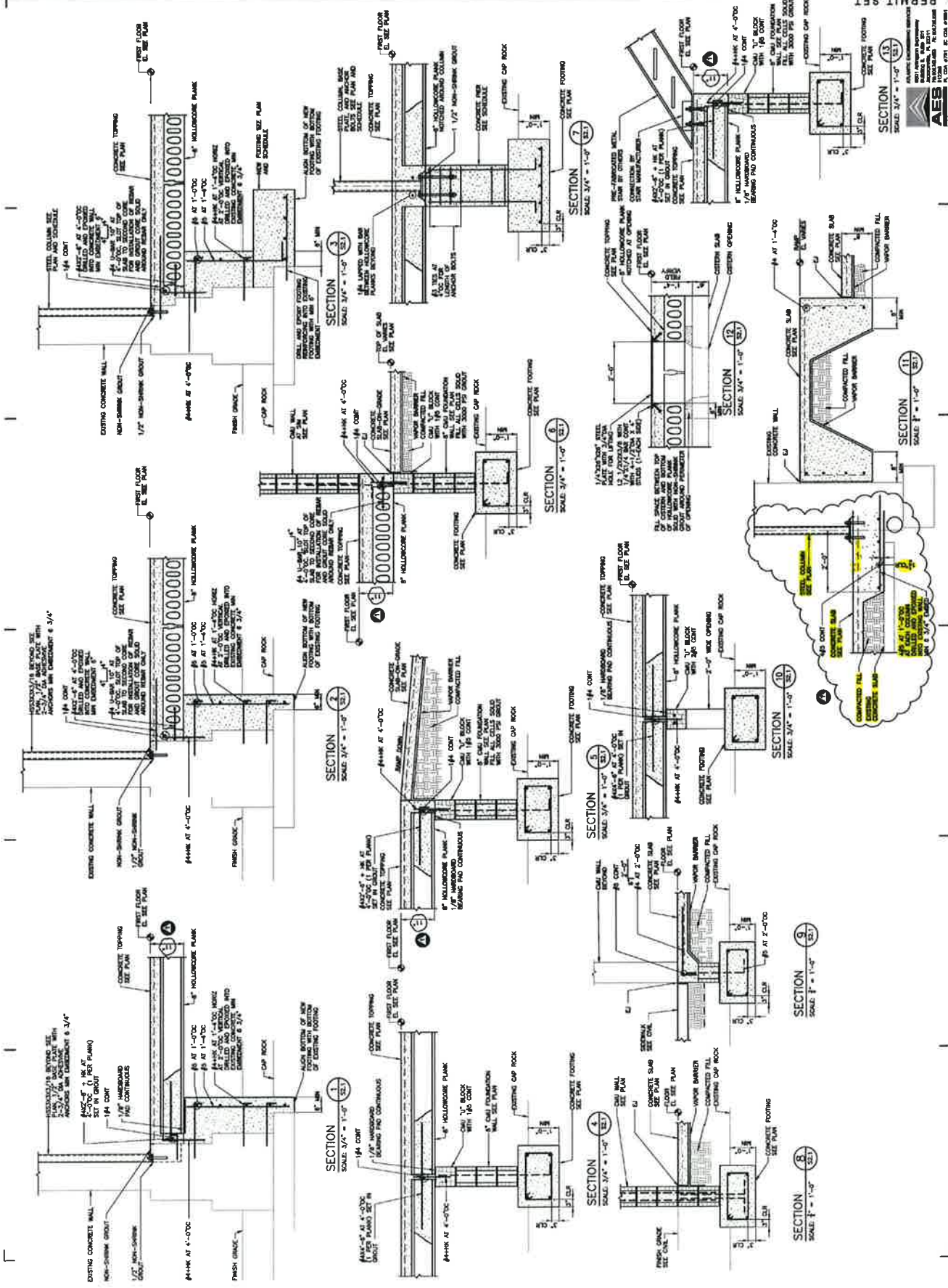
NO.	DESCRIPTION	DATE
1	START SHEET	
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		

**KEY WEST CITY HALL  
AT GLYNN ARCHER  
1302 WHITE STREET KEY WEST, FLORIDA  
CITY OF KEY WEST**



NO.	SECTION
1	SECTION
2	SECTION
3	SECTION
4	SECTION
5	SECTION
6	SECTION
7	SECTION
8	SECTION
9	SECTION
10	SECTION
11	SECTION
12	SECTION
13	SECTION
14	SECTION
15	SECTION
16	SECTION
17	SECTION
18	SECTION
19	SECTION
20	SECTION

**S2.1**  
100% 2/3



**AES**  
SCALE 3/4" = 1'-0"  
SECTION 13

**AES**  
SCALE 3/4" = 1'-0"  
SECTION 14

**AES**  
SCALE 3/4" = 1'-0"  
SECTION 15

**AES**  
SCALE 3/4" = 1'-0"  
SECTION 16

**AES**  
SCALE 3/4" = 1'-0"  
SECTION 17

**AES**  
SCALE 3/4" = 1'-0"  
SECTION 18

**AES**  
SCALE 3/4" = 1'-0"  
SECTION 19

**AES**  
SCALE 3/4" = 1'-0"  
SECTION 20

**AES**  
SCALE 3/4" = 1'-0"  
SECTION 21

PERMIT SET  
1302 WHITE STREET  
KEY WEST, FLORIDA 33440  
TEL: 305.236.1234  
WWW.MCMURRY.COM  
AES  
SCALE 3/4" = 1'-0"  
SECTION 22

**Bella Construction of Key West, Inc.**

**CGC 1518284**

35 Diamond Drive  
Key West, FL 33040

Ofc (305) 292-9888

Fax (305) 292-9880

[dick@concretebella.com](mailto:dick@concretebella.com)

**COVER SHEET**

Date:	October 21, 2015	Change Order Request No.:	7
To:	Burke Construction Group	From:	Richard Szurek
Attn:	David Hahn	Re:	Key West City Hall 1300 White Street Key West, FL 33040
Email:	<a href="mailto:dhahn@bcgconstruction.com">dhahn@bcgconstruction.com</a>		

David,  
Attached is the change requested for adding thickened slab at links for steel columns RFI # 56.

Thank you,

Richard Szurek  
305-292-9888



**BELLA CONSTRUCTION OF KEY WEST, INC.**

PROJECT: Key West City Hall  
 SUBCONTRACT NO.: 586  
 DATE: 10/21/2015  
 CHANGE ORDER REQUEST NO.: 7  
 DESCRIPTION: Add Thickened Edge at Link per RFI #56

LABOR DESIGNATION	Rate	OT Rate	Reg. Hrs.	OT Hrs.	Reg. Cost	OT Cost	Total Cost
LABOR	\$35.00	\$52.50	29		\$1,015.00	\$0.00	\$1,015.00
		\$0.00			\$0.00	\$0.00	\$0.00
		\$0.00			\$0.00	\$0.00	\$0.00
		\$0.00			\$0.00	\$0.00	\$0.00
<b>LABOR SUBTOTAL</b>							<b>\$1,015.00</b>

MATERIALS	Quantity	Unit	Unit Price				
Rebar	1238#	.50 #	\$619.00				\$619.00
Epoxy		1 Case	\$700.00				\$700.00
Concrete		6 c.y.	\$250.00				\$1,500.00
							\$0.00
							\$0.00
<b>MATERIAL SUBTOTAL</b>							<b>\$2,819.00</b>

EQUIPMENT	Oper. Rate	Idle Rate	Oper. Hrs.	Idle Hrs.	Oper. Cost	Idle Cost	Total
Backhoe	\$125.00		8		\$1,000.00	\$0.00	\$1,000.00
					\$0.00	\$0.00	\$0.00
					\$0.00	\$0.00	\$0.00
<b>EQPT. SUBTOTAL</b>							<b>\$1,000.00</b>

SUBCONTRACTOR	Quantity	Unit Price				
						\$0.00
<b>SUBCONTRACTOR SUBTOTAL</b>						<b>\$0.00</b>

MISCELLANEOUS ITEM	Quantity	Unit Price				
						\$0.00
<b>MISC. ITEM SUBTOTAL</b>						<b>\$0.00</b>

**NOTES:**

Add thickened slab with rebar at links for columns figured at 165'x3'x4" added rebar, epoxy and labor add fill 5'x4"x165' planned on using fill on site.

Note Concrete extra yardage is 6 CY no material figured in my proposal

SUBCONTRACTOR	\$0.00
LABOR	\$1,015.00
EQUIPMENT	\$1,000.00
MATERIAL	\$2,819.00
<b>SUBTOTAL</b>	<b>\$4,834.00</b>
OH & P Markup, 15%	\$725.10
<b>SUBTOTAL W/Markup</b>	<b>\$5,559.10</b>
LIABILITY & BOND	\$0.00
<b>GRAND TOTAL</b>	<b>\$ 5,559.10</b>

# REQUEST FOR CHANGE ORDER

- OWNER
- ARCHITECT
- CONTRACTOR
- FIELD
- SUBCONTRACTOR



PROJECT: **KEY WEST CITY HALL - GLYNN ARCHER**  
 1300 White Street  
 Key West, Florida 33040

REQUEST FOR CHANGE ORDER NO.: **022**

REQUEST FOR CHANGE ORDER DATE: **11/27/2015**

PROJECTS NO.: **1415**

CONTRACTOR: **Burke Construction Group, Inc.**  
 3210 Flagler Avenue  
 Key West, FL 33040

DATE OF CONTRACT: 12/19/2014

**Additional Concrete Used Foundations, 2nd Floor Deck & Roof Metal Deck Deflection Bldg. A, B, & Bridge**

**The Contract is changed as follows:**

The following is a break down of the additional concrete placed at foundations Bldg. A & B. Also the additional concrete placed to make up the deflection of 2nd Floor, Metal Floor Decks and Metal Roof Decks.

Please refer to RFI 033 Response.

**Foundations: 33.42 Cubic Yards 3057HC @ 176.75 = 5906.99**

**Deflection: 21.57 Cubic Yards 40LW @ 250.00 = 5392.50**

*MY CALCULATIONS DON'T JUSTIFY THIS.*

Wing A Second Flr Topping Slab	5.0 CY
Wing A Rooftop Topping Slab	5.25 CY
Wing B Second Flr Topping Slab	4.75 CY
Wing B Rooftop Topping Slab	5.09 CY

*FOUNDATIONS ALLOWED  
 DECK DEFLECTION DENIED.  
 TIME ALLOWED B 1.18.2016*

*5906.99  
 590.70  
 147.67  
 59.07  
 59.07  
 6763.50*

Subtotals	\$	11,299.49
Contractor Fee: 10%		1129.95
Contractor OH: 2.5%		282.49
GL Insurance: 1%		112.99
Bond : 1%		112.99

**TOTAL RCO: \$ 12,937.92**

**CONTRACT TIME INCREASE / (DECREASE): 2**

**Burke Construction Group, Inc.**

CONTRACTOR  
 3210 Flagler Avenue  
 ADDRESS  
 Key West, FL 33040

**Reservations:** This proposal is based solely on the usual cost elements such as labor material and normal markups, and does not include any amount for additional changes in the sequence of work, delays, disruptions, rescheduling, lost productivity, extended or unabsorbed overhead, overtime, acceleration and or impact costs, unless specifically stated. The right is expressly reserved to amend and make claim for any and all of these related items prior to final settlement of this contract.

BY *(Signature)*  
 David J Hahn, Project Manager  
*(Typed Name)*

DATE 11/27/2015

**Request for Information (RFI)**



**TO:**  
**Bender & Associates Architects p.a.**  
410 Angela Street  
Key West, Florida 33040

**FROM:**  
David J Hahn  
3210 Flagler Avenue  
Key West, Fl. 33040

**Project:**  
**Glynn Archer - Key West City Hall**  
1300 White Street  
Key West, FL 33040

**Plan Issue Date:**  
Permit Set

**RFI Number:**

<b>Date Sent:</b>	<b>June 2, 2015</b>
<b>Requested Reply Date:</b>	<b>June 3, 2015</b>

**Project #:**

**Copies Furnished To:** **Burt Bender**

**RFI Description:** **Foundation changes Bldg.B**  
**Bert, Were still waiting for the drawing from Mark. To keep things moving see the attached RFI from Bella.**

**Senders Recommendation:** (recommended solution, cost, and schedule impact)

**Receiver's Response:** (Provide answer to RFI including cost and schedule considerations.)

THE DETAIL WAS ISSUED ON MAY 29, 2015  
SEE ATTACHED.

 6.8.15



**ATLANTIC  
ENGINEERING  
SERVICES**

6501 Arlington Expy.  
Building B, Suite 201  
Jacksonville, FL 32211  
PH: 904.743.4633  
FX: 904.725.9295  
jax@aespj.com  
www.aespj.com

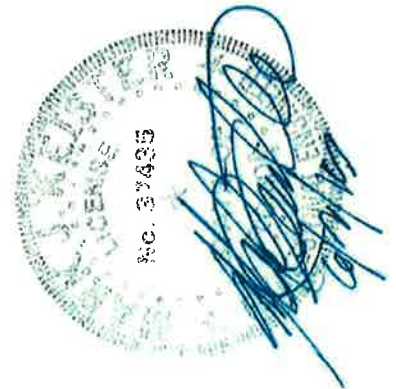
### Confirmation of Telephone Conversation

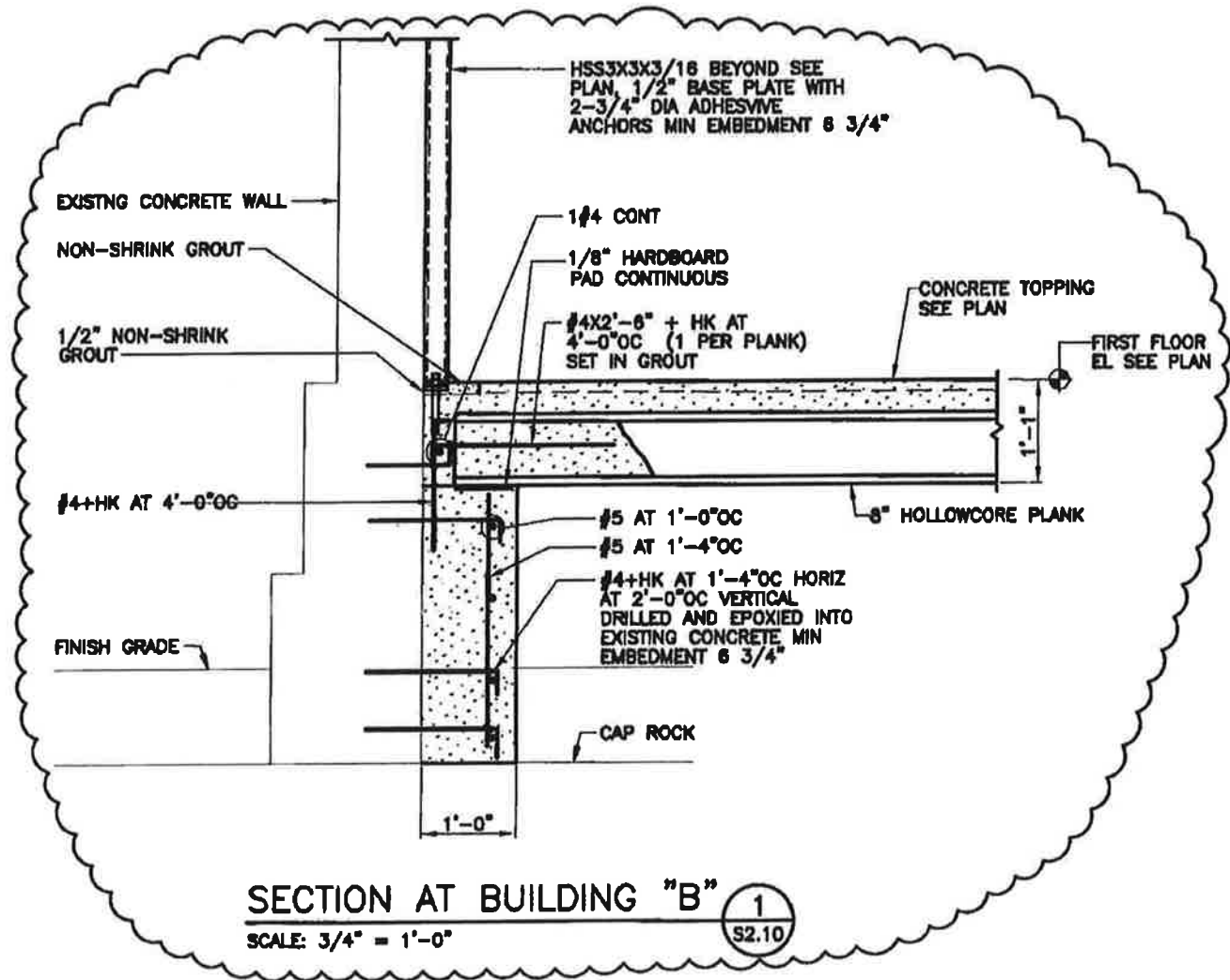
<b>Date:</b>	05-29-15	<b>Project:</b>	Key West City Hall at Glynn Archer	
<b>Time:</b>	9:30 am	<b>Project No.:</b>	312-295	
<b>Telephone No.:</b>	(305 ) 296-1347	<b>Call:</b>	<input type="checkbox"/> Placed	<input checked="" type="checkbox"/> Received
<b>I,</b>	Mark J. Keister, P.E.	<b>spoke with</b>	Bert L. Bender, RA, Ron Gage, Kreed Howell and Dick Szurek	
<b>of</b>	Bender & Associates, Architects; Burke Construction Group, Inc.; City of Key West and Bella Construction	<b>regarding</b>	Building B Perimeter Foundations	

#### Comments:



The Building B perimeter walls are not stepped on the inside at their bases like Building A and they do not bear on foundations in the hard cap rock but bear directly on the hard cap rock. As discussed, to accommodate the hollowcore plank first floor framing, thicken the foundation walls on the inside 1'-0" minimum as shown in the attached sketches and bear the new concrete, like the foundation walls, directly on the hard cap rock.

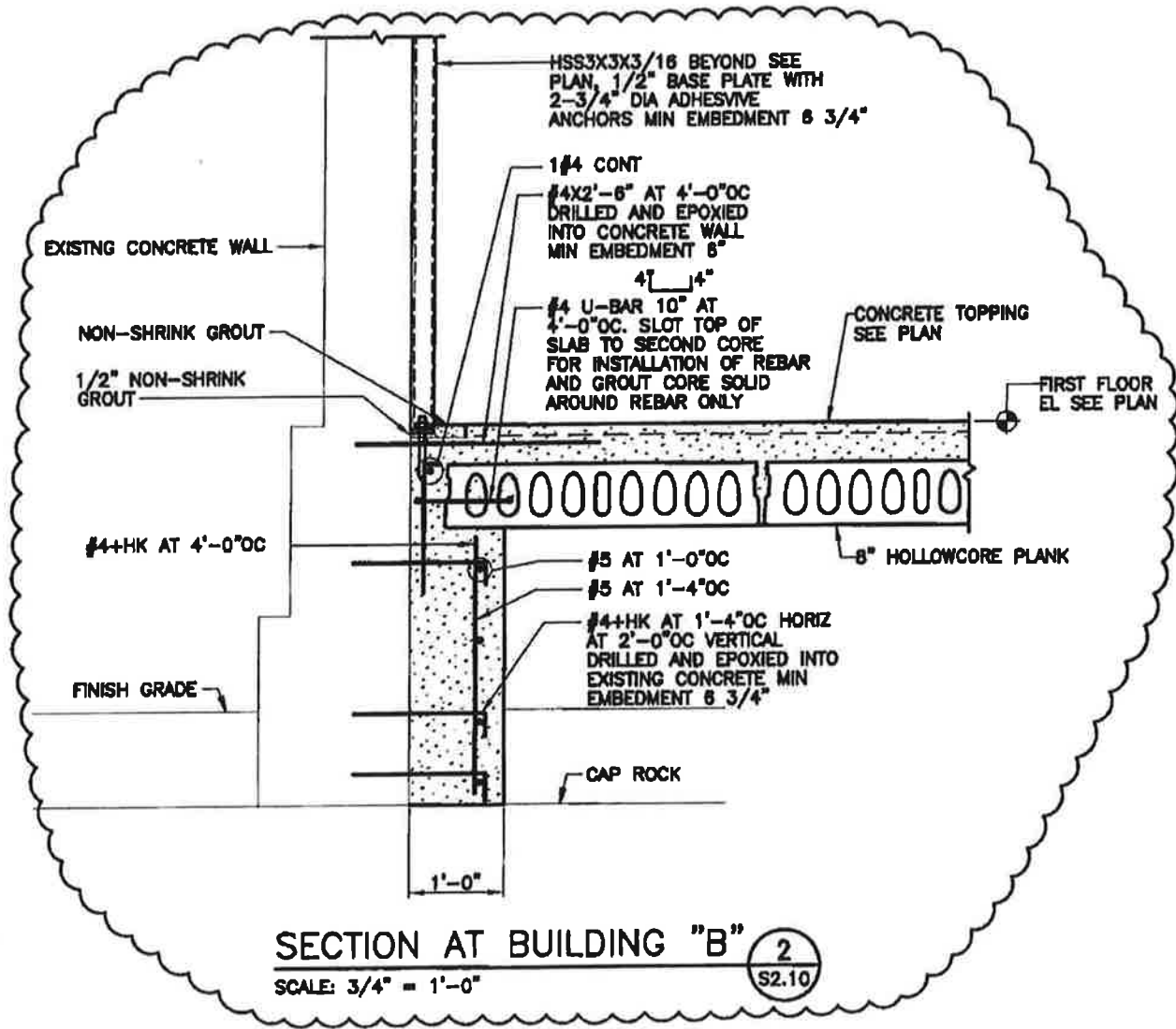
Mark J. Keister, P.E.  
Principal






MARK J KEISTER PE 37435

SHEET TITLE <p style="text-align: center;">SECTION</p>	SCALE <p style="text-align: center;">AS NOTED</p>	REVISION RF#30 	DATE <p style="text-align: center;">05/29/15</p>
 <p>6501 Arlington Expressway          Building B, Suite 201          Jacksonville, FL 32211          PH: 904.743.4633 FX: 904.725.9295          FL COA #791 SC COA #1891</p>	PROJECT <p style="text-align: center;">KEY WEST CITY HALL          AT GLENN ARCHER          CITY OF KEY WEST</p>		PROJECT NO. <p style="text-align: center;">312-295</p> WORK W/ SHEET <p style="text-align: center;">S2.10</p> SKETCH NO. <p style="text-align: center;">SK-10</p>



MARK J KEISTER PE 37435

SHEET TITLE <b>SECTION</b>	SCALE AS NOTED	REVISION RF1#30	DATE 05/29/15
	PROJECT KEY WEST CITY HALL AT GLENN ARCHER CITY OF KEY WEST		PROJECT NO. 312-295
 6501 Arlington Expressway Building B, Suite 201 Jacksonville, FL 32211 PH: 904.743.4633 FX: 904.725.9295 FL COA #791 SC COA #1691			WORK W/ SHEET S2.10
			SKETCH NO. SK-11

# BELLA CONSTRUCTION OF KEY WEST, INC.

## REQUEST FOR INFORMATION

RFI#: 00004  
DATE: 6/2/2015

CONTRACT TITLE: Key West City Hall #586  
ATTENTION: David Hahn  
REFERENCE: SPEC/DRAWINGS/LOCATION Attached Drawing 2/S2.1 B Building

### QUESTIONS / CONCERNS / CLARIFICATIONS:

The detail on the drawing does not match what is actually there. The footing width varies from 18" +to 24"+

Can we install the new foundation on the existing footings per the attached drawing.

These dimensions makes the rebar work.

REQUIRED RESPONSE DATE: ASAP

SUBMITTED BY: Richard Szurek

IMPACT: \_\_\_\_\_

### RESPONSE

\*\*\*SEND RESPONSE SECTION BACK BY RESPONSE DATE ABOVE\*\*\*

DATE: \_\_\_\_\_

RESPONSE: \_\_\_\_\_

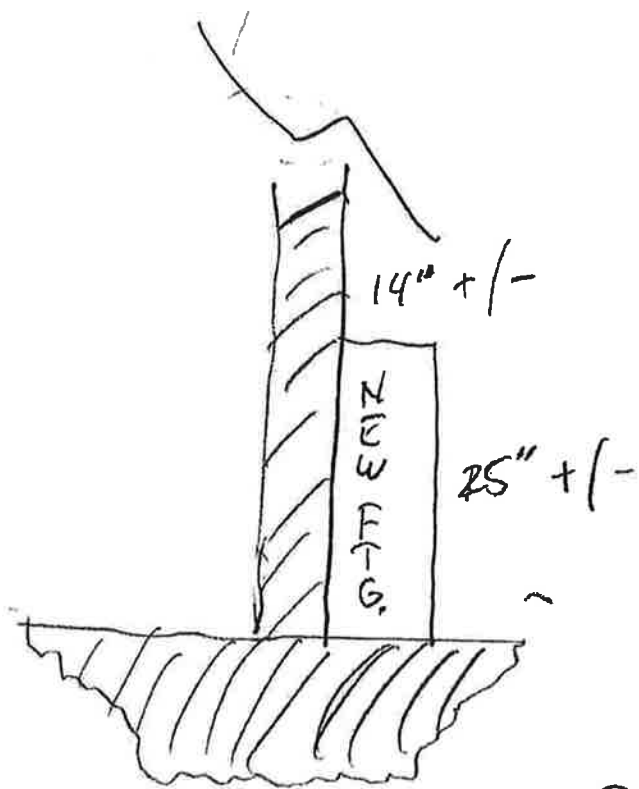
RFP REQUEST: YES NO

RESPONSE BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

COPY TO: \_\_\_\_\_

TITLE: \_\_\_\_\_



EXISTING FOOTING B



# REQUEST FOR CHANGE ORDER

- OWNER
- ARCHITECT
- CONTRACTOR
- FIELD
- SUBCONTRACTOR



PROJECT: **KEY WEST CITY HALL - GLYNN ARCHER**  
 1300 White Street  
 Key West, Florida 33040

REQUEST FOR CHANGE ORDER NO.: **023**

REQUEST FOR CHANGE ORDER DATE: **11/27/2015**

PROJECTS NO.: **1415**

CONTRACTOR: **Burke Construction Group, Inc.**  
 3210 Flagler Avenue  
 Key West, FL 33040

DATE OF CONTRACT: 12/19/2014

**The Addition of Transoms to Entry Doors in Bldg B.  
 Door Openings #152, 130B (Type D Door) to Type E**

**The Contract is changed as follows:**

This increase in contract amount and time is in referenced to RFI 026 which describes the new requirements for door openings #152, 130B (Type D Door). The use of (Type E Door) is required to fill the Historic opening. Please see attached RFI 026 Response and CO request from ASP for additional materials and labor for installation.

*COST ALLOWABLE -*

*NEED TO ESTABLISH IMPACT TO THE CRITICAL PATH TO ALLOW TIME.*

*TIME DENIED 1.18.2016 B*

*1,131.16*

Subtotals	\$	3,216.80
Contractor Fee: 10%		321.68
Contractor OH: 2.5%		80.42
GL Insurance: 1%		32.17
Bond : 1%		32.17

**TOTAL RCO: \$ 3,683.24**

**CONTRACT TIME INCREASE / (DECREASE): 2**

**Burke Construction Group, Inc.**

CONTRACTOR  
 3210 Flagler Avenue  
 ADDRESS  
 Key West, FL 33040

**Reservations:** This proposal is based solely on the usual cost elements such as labor material and normal markups, and does not include any amount for additional changes in the sequence of work, delays, disruptions, rescheduling, lost productivity, extended or unabsorbed overhead, overtime, acceleration and or impact costs, unless specifically stated. The right is expressly reserved to amend and make claim for any and all of these related items prior to final settlement of this contract.

BY (Signature)  
 David J Hahn, Project Manager  
 (Typed Name)

DATE 11/27/2015

# Request for Information (RFI)



**TO:**  
Bender & Associates Architects p.a.  
410 Angela Street  
Key West, Florida 33040

**FROM:**  
David J Hahn  
3210 Flagler Avenue  
Key West, Fl. 33040

**Project:**  
Glynn Archer - Key West City Hall  
1300 White Street  
Key West, FL 33040

**Plan Issue Date:**  
Permit Set

**RFI Number:** 026

<b>Date Sent:</b>	May 7, 2015
<b>Requested Reply Date:</b>	May 13, 2015

**Project #:** 1415

**Copies Furnished To:** Burt Bender

### RFI Description:

Bert, We have discovered that door openings 130B & 152 on page A2.1B of the plans have much greater heights in the field. The described door height is 7' on page A11.0. But the field measurements are 9'-11". We are unable to find a detail for this specific doors or a Transom for these doors on the plans. Please let me know on how we should proceed. SEE ATTACHED

Unknown

### Schedule Impact Associated with RFI: (List Activity #)

**Senders Recommendation:** (recommended solution, cost, and schedule impact)

Add a Transom to Spec. Doors. Yes the schedule will be impacted and there will be additional cost to be determined.

**Receiver's Response:** (Provide answer to RFI including cost and schedule considerations.)

YOUR RECENT DEMOLITION UNCOVERED A LARGER OPENING THAN WAS VISIBLE PREVIOUSLY. WE HAVE DETERMINED THAT THE LARGER OPENING IS THE HISTORIC OPENING. AT DOORS 152 AND 130B, USE A TYPE "E" DOOR IN LIEU OF THE SPECIFIED TYPE "D" DOOR.

 5.13.15

## David Hahn

---

**From:** Jovan Rodriguez <jovan@aspwindows.com>  
**Sent:** Wednesday, May 20, 2015 6:27 PM  
**To:** David Hahn  
**Cc:** Ricky Sandoval  
**Subject:** Re: KWCH- Project #1415 RFI 026

David,

The added cost for adding the Transoms to these doors is \$3,216.80.

Mark 152: \$1,608.40

Mark 130B: \$1,608.40

Total added cost = \$3,216.80 (Materials & Installation)

Thanks,

--



Jovan Rodriguez  
ASP Windows and Doors  
10801 NW 14 Street #103 | Miami, FL 33172  
[jovan@aspwindows.com](mailto:jovan@aspwindows.com) | [www.aspwindows.com](http://www.aspwindows.com)

Mobile | 305-525-6026

On Mon, May 18, 2015 at 5:24 PM, David Hahn <[dhahn@bcgconstruction.net](mailto:dhahn@bcgconstruction.net)> wrote:

Jovan, As we spoke of this RFI this afternoon (see attached) the directive is in lieu the spec'd doors in door openings 152, 130B (Type D Door). Use of a Type E Door is required to fit the Historic opening.

If you need to discuss this matter please contact me.

*Kind Regards,*

**David J. Hahn – Project Manager**

# REQUEST FOR CHANGE ORDER

- OWNER
- ARCHITECT
- CONTRACTOR
- FIELD
- SUBCONTRACTOR



PROJECT: **KEY WEST CITY HALL - GLYNN ARCHER**  
1300 White Street  
Key West, Florida 33040

REQUEST FOR CHANGE ORDER NO.: **024**

REQUEST FOR CHANGE ORDER DATE: **11/27/2015**

PROJECTS NO.: **1415**

CONTRACTOR: **Burke Construction Group, Inc.**  
3210 Flagler Avenue  
Key West, FL 33040

DATE OF CONTRACT: 12/19/2014

### Weather Delays, Lost Production, and Disruptions

#### The Contract is changed as follows:

This increase in contract time is for delays, lost productivity, and disruptions due to Weather.

5 days of lost production to placing steel, welding, and placing concrete due to high winds and very heavy rain.  
7/23, 9/17, 9/23, 12/03, and 12/04

5 days Hurricane Erika Readiness Implementation, Shut down project, removed Crane.  
08/27 thru 08/31

OK.  
DOCUMENTED W/  
WEATHER SERVICE RECORDS

TOTAL RCO: \$ -

CONTRACT TIME INCREASE / (DECREASE): **10**

#### **Burke Construction Group, Inc.**

CONTRACTOR  
3210 Flagler Avenue  
ADDRESS  
Key West, FL 33040

**Reservations:** This proposal is based solely on the usual cost elements such as labor material and normal markups, and does not include any amount for additional changes in the sequence of work, delays, disruptions, rescheduling, lost productivity, extended or unabsorbed overhead, overtime, acceleration and or impact costs, unless specifically stated. The right is expressly reserved to amend and make claim for any and all of these related items prior to final settlement of this contract.

BY (Signature)  
David J Hahn, Project Manager  
(Typed Name)

DATE 11/27/2015

# REQUEST FOR CHANGE ORDER

- OWNER
- ARCHITECT
- CONTRACTOR
- FIELD
- SUBCONTRACTOR



PROJECT: **KEY WEST CITY HALL - GLYNN ARCHER**  
 1300 White Street  
 Key West, Florida 33040

REQUEST FOR CHANGE ORDER NO.: **025**

REQUEST FOR CHANGE ORDER DATE: **11/27/2015**

PROJECTS NO.: **1415**

CONTRACTOR: **Burke Construction Group, Inc.**  
 3210 Flagler Avenue  
 Key West, FL 33040

DATE OF CONTRACT: 12/19/2014

**The addition of Steel Access Hatch & Angle Iron**

**The Contract is changed as follows:**

This increase in contract amount and time is in reference to IB# 07 which describes that a additional Access Opening Frame and Steel Hatch in the floor of Room 100B Bldg. A, and Reference RFI 30 Response the addition of an Angle Iron and Epoxy Bolts to support Precast Hollow Core Slabs at Cistern.

Frame and Steel Hatch - installed  
 Angle Iron and Threaded Bolts- installed

*OK*  
*TIME ALLOWED*  
*1.18.2016*  
*B*

*OK - COST VERIFIED.*

*IMPACT TO CRITICAL PATH CONFIRMED*

*B*

*1.13.16*

Subtotal	\$	1,590.00
Contractor Fee: 10%		159.00
Contractor OH: 2.5%		39.75
GL Insurance: 1%		15.90
Bond : 1%		15.90

**TOTAL RCO: \$ 1,820.55**

**CONTRACT TIME INCREASE / (DECREASE): 1**

**Burke Construction Group, Inc.**  
 CONTRACTOR  
 3210 Flagler Avenue  
 ADDRESS  
 Key West, FL 33040

**Reservations:** This proposal is based solely on the usual cost elements such as labor material and normal markups, and does not include any amount for additional changes in the sequence of work, delays, disruptions, rescheduling, lost productivity, extended or unabsorbed overhead, overtime, acceleration and or impact costs, unless specifically stated. The right is expressly reserved to amend and make claim for any and all of these related items prior to final settlement of this contract.

BY *(Signature)*  
 David J Hahn, Project Manager  
 (Typed Name)

DATE 11/27/2015

# INFORMATION BULLETIN (IB)

---

**PROJECT:** Key West City Hall at Glynn Archer      **INFORMATION BULLETIN NO. Seven (7)**

**DATE OF ISSUANCE:** July 15, 2015

**OWNER:** City of Key West

**CONTRACT FOR:** Renovation

**CONTRACT DATED:** Dec 30, 2014

**ARCHITECT'S PROJECT NO. 1305**

**TO CONTRACTOR:**

**Burke Construction Group, Inc.  
3210 Flagler Ave.  
Key West, FL 33040**

**ARCHITECT:**

**Bender & Associates Architects, P.A.  
410 Angela Street  
Key West, FL 33040**

---

If the Contractor believes that the information contained herein will result in a change in the contract time or amount, Contractor must submit a written Request for Change Order within fifteen (15) days of the date of issuance of this I.B.

Provide a 24 inch square access hole to the crawl space at Building A through the floor. Locate the hole in the reception space, Room 100B.

Two sketches are attached identifying the location: an architectural plan and the prestress plank shop drawing plan. Details of the access panel will follow at a later date.

BENDER & ASSOCIATES ARCHITECTS, P.A.

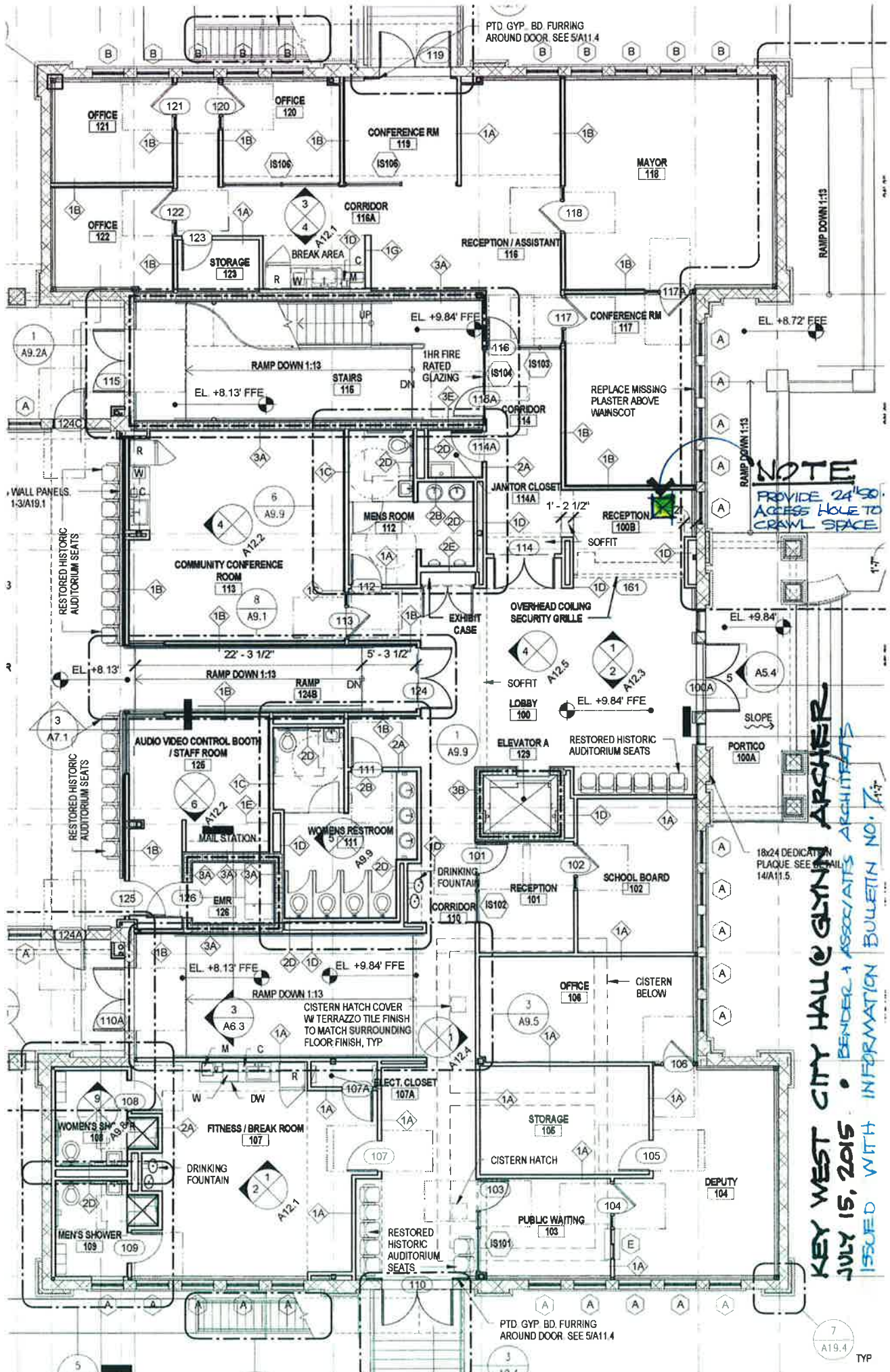


---

by: Bert Bender, Bender & Associates Architects

cc: Kreed Howell, Javier Torres, Mark Keister, Laney Stoddard, Niels Hubbell

Attachments: Two (2) 11 x 17" sketches, Architectural plan and Pre-Cast Specialties, Inc. plan



**NOTE**  
 PROVIDE 24" x 30" ACCESS HOLES TO CRAWL SPACE

**KEY WEST CITY HALL @ GLYNN ARCHER**  
 JULY 15, 2015 • BENDER + ASSOCIATES ARCHITECTS  
 ISSUED WITH INFORMATION BULLETIN NO. 7

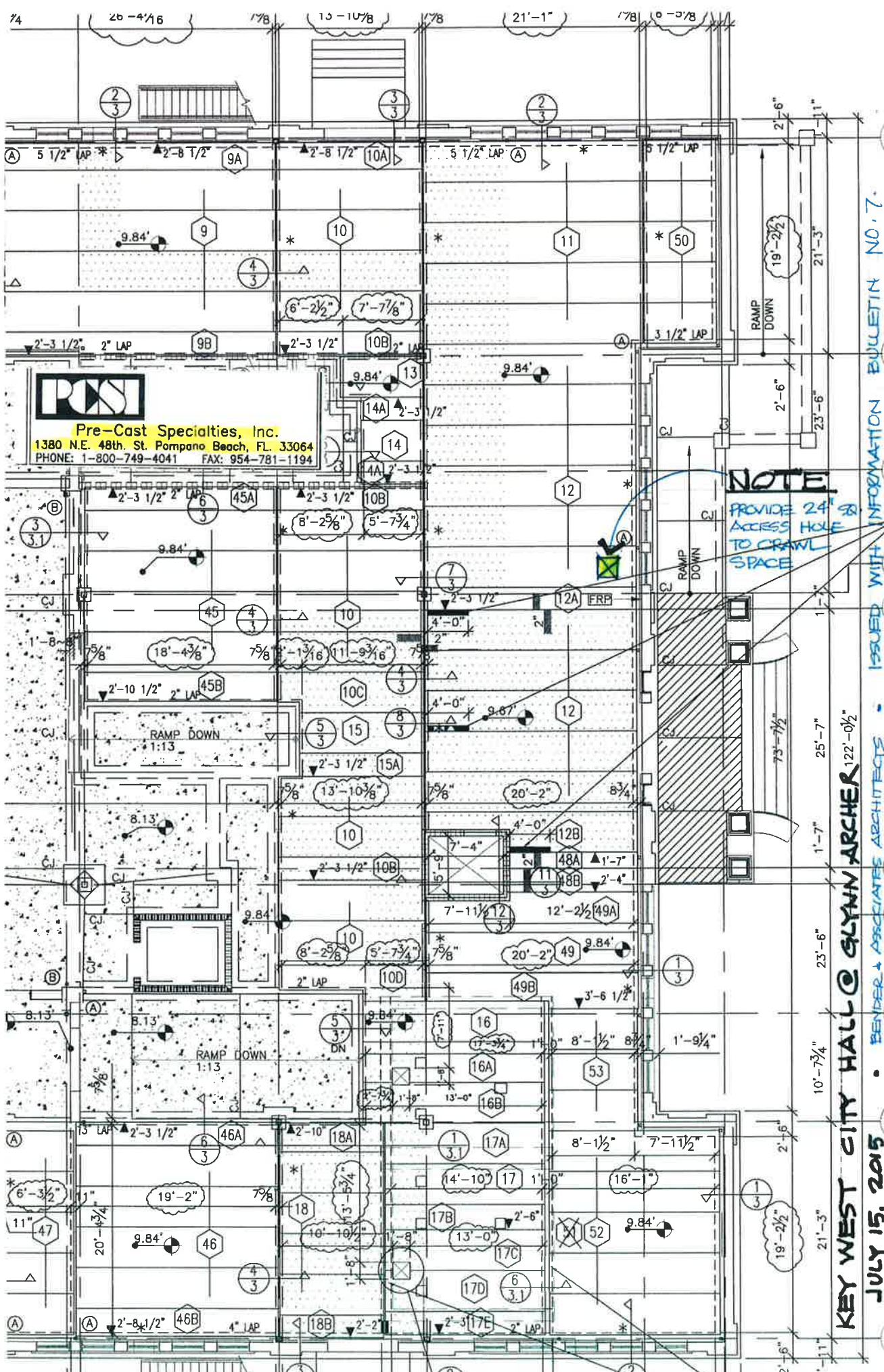
18x24 DEDICATION PLAQUE SEE MAIL 14/A/11.5.

PTD GYP. BD. FURRING AROUND DOOR SEE 5/A/11.4

PTD GYP. BD. FURRING AROUND DOOR SEE 5/A/11.4

7  
A19.4

TYP



**Pre-Cast Specialties, Inc.**  
 1380 N.E. 48th. St. Pompano Beach, FL 33064  
 PHONE: 1-800-749-4041 FAX: 954-781-1194

**NOTE**  
 PROVIDE 24" x 8" ACCESS HOLE TO CRAWL SPACE

**KEY WEST CITY HALL @ GYNN ARCHER** 122'-0 1/2"  
 JULY 15, 2015 • BENDER & ASSOCIATES ARCHITECTS • ISSUED WITH INFORMATION BULLETIN NO. 7





# Request for Information (RFI)



**TO:**  
Bender & Associates Architects p.a.  
410 Angela Street  
Key West, Florida 33040

**FROM:**  
David J Hahn  
3210 Flagler Avenue  
Key West, Fl. 33040

**Project:**  
Glynn Archer - Key West City Hall  
1300 White Street  
Key West, FL 33040

**Plan Issue Date:**  
Permit Set

**RFI Number:** 030

**Project #:** 1415

<b>Date Sent:</b>	May 19, 2015
<b>Requested Reply Date:</b>	May 24, 2015
<b>Copies Furnished To:</b>	Burt Bender

**RFI Description:**

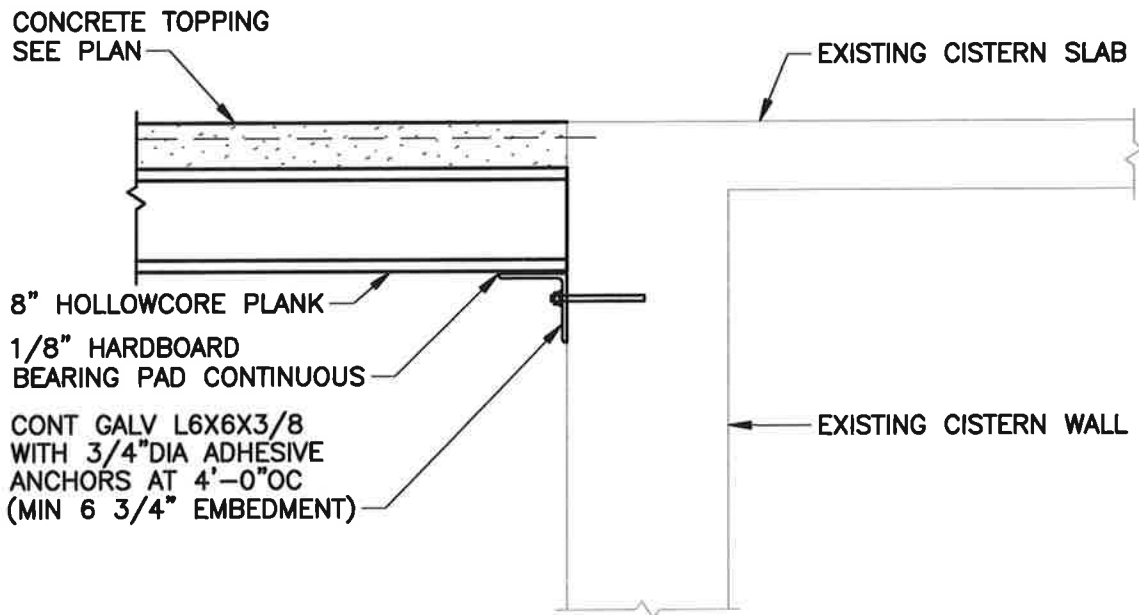
Bert, Bella Construction as requested a footing detail for the intersection of the Precast plank and cistern in Bld.B  
Please see attached Detail 4, Sheet A18.1.  
The end of the plank doesn't appear to be supported. Is there an other detail showing otherwise?

**Senders Recommendation:** (recommended solution, cost, and schedule impact)

**Receiver's Response:** (Provide answer to RFI including cost and schedule considerations.)

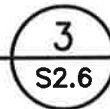
See attached detail.

Laney Stoddard, P.E.  
Atlantic Engineering Services  
5/20/2015





SECTION

SCALE: 3/4" = 1'-0"



MARK J KEISTER PE 37435

<p>SHEET TITLE</p> <p style="text-align: center;">SECTION</p>	<p>SCALE</p> <p style="text-align: center;">AS NOTED</p>	<p>REVISION</p> <p style="text-align: center;">RFI#30</p> 	<p>DATE</p> <p style="text-align: center;">05/20/15</p>
 <p>6501 Arlington Expressway Building B, Suite 201 Jacksonville, FL 32211 PH: 904.743.4633 FX: 904.725.9295 FL COA #791 SC COA #1691</p>	<p>PROJECT</p> <p style="text-align: center;">KEY WEST CITY HALL AT GLENN ARCHER  CITY OF KEY WEST</p>		<p>PROJECT NO.</p> <p style="text-align: center;">312-295</p> <p>WORK W/ SHEET</p> <p style="text-align: center;">S2.6</p> <p>SKETCH NO.</p> <p style="text-align: center;">SK-9</p>



# CAPITOL STEEL STRUCTURES

## CHANGE ORDER REQUEST # 1 PROJECT # 1180A

2188 NW 25 AVE . Miami, FL 33142. (305) 633-5008 Office . (305) 633-5058 Fax . [rdiaz@capitolsteelstructures.com](mailto:rdiaz@capitolsteelstructures.com)

Client: Burke Construction Group  
Project: Key West City Hall  
1320 White Street  
Key West, FL

June 22, 2015

**Structural Steel:**

- (1) L 6 x 6 x 3/8" x 21'-0" H.D. Galvanized Angle
- (21) 3/4" Threaded Rods +/- 12" long each

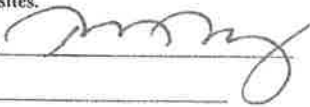
**Fabrication and Supply Only..... \$735.00**

All work performed by certified steel welders.  
All work performed under SFBC. Latest edition for steel construction.  
All workers OSHA Certified.  
All work fabricated under AISC codes for steel fabrication.

**Exclusions:**

- Shoring
- Unforeseen conditions for logistic purposes
- Repairs to slab
- Permit and permit fees
- Tests or testing
- Grouting
- Finished paints
- Layouts and installation of embeds if applicable
- Any Items not listed in proposal description
- After hours work schedule.

**This quote was based on emailed drawings by Bender & Associates Architects P.A., dated 8/8/14  
This document does constitute a contract, if you accept please sign this agreement.  
% of payments as by payment requisites.**

Respectfully Submitted      Ruben Diaz  6/23/15

Contractor Accepted \_\_\_\_\_

Print Name \_\_\_\_\_

# CAPITOL STEEL STRUCTURES

PROJECT PROPOSAL # 1180A-co2

2188 NW 25 AVE . Miami, FL. 33142. (305) 633-5008 Office . (305) 633-5058 Fax . [rdiaz@capitolsteelstructures.com](mailto:rdiaz@capitolsteelstructures.com)

Client: Burke Construction Group  
Project: Key West City Hall  
1320 White Street  
Key West, FL

August 25, 2015

We hereby propose to furnish all the materials and perform all labor necessary, to fabricate as per A.I.S.C. specifications and to grades and elevations established by others, the miscellaneous metals as follows:

**Structural Steel:**

2-1/2 x 2 x 3/8 angle cistern hatches W/ 1 nelson stud..... \$855.00 Each hatch.

All work performed by certified steel welders.  
All work performed under SFBC. Latest edition for steel construction.  
All workers OSHA Certified.  
All work fabricated under AISC codes for steel fabrication.

**Exclusions:**

Unforeseen conditions for logistic purposes  
Hot dip Galvanized  
Shop prime Only  
Repairs to slab  
Permit and permit fees  
Tests or testing  
Grouting  
Finished paints  
Layouts and installation of embeds if applicable  
Any Items not listed in proposal description  
After hours work schedule.

**This quote was based on emailed drawings by Bender & Associates Architects P.A., dated 8/8/14  
This document does constitute a contract, if you accept please sign this agreement.  
% of payments as by payment requisites.**

Respectfully Submitted      Ruben Diaz \_\_\_\_\_

Contractor Accepted \_\_\_\_\_

Print Name \_\_\_\_\_

# REQUEST FOR CHANGE ORDER

- OWNER
- ARCHITECT
- CONTRACTOR
- FIELD
- SUBCONTRACTOR



PROJECT: **KEY WEST CITY HALL - GLYNN ARCHER**  
 1300 White Street  
 Key West, Florida 33040

REQUEST FOR CHANGE ORDER NO.: **026**

REQUEST FOR CHANGE ORDER DATE: **11/27/2015**

PROJECTS NO.: **1415**

CONTRACTOR: **Burke Construction Group, Inc.**  
 3210 Flagler Avenue  
 Key West, FL 33040

DATE OF CONTRACT: 12/19/2014

**Removal and replacing the 90+ year old interior plaster**

**The Contract is changed as follows:**

This increase in contract amount and time is in reference to the unforeseen condition of the 90+ year old interior plaster. After the demolition and installation of steel framing elements it has become clear the interior plaster continues to show signs of delamination from the masonry walls.

The two experts ( Old World Finishes and Zarco) who bid the plaster scope of work will not fully warranty the existing plaster which continually falls off the wall. Framers are also having difficulty attaching furring for the wainscott. We are proposing the removal of all the interior plaster and replace with new. We also propose a credit back for the initial repair scope of \$37,000 and an additional proposed cost for all new interior plaster of \$100,500.00 which would be a base cost of \$63,500.

OK. COST JUSTIFIED PER MEETING  
 W/ DAVID MARTINEZ. 1.18.2016  
 AND ADDITIONAL BACKUP DOCUMENTATION  
 PROVIDED ON 1.25.2016

TIME INCREASED TO ALLOW FOR  
 ADDITIONAL CO.ORDINATION &  
 DELAYS TO CRITICAL PATH,

1.25.2016

Subtotal	63,500.00
Contractor Fee: 10%	6,350.00
Contractor OH: 2.5%	1,587.50
GL Insurance: 1%	635.00
Bond : 1%	635.00
<b>TOTAL RCO: \$</b>	<b>72,707.50</b>

**CONTRACT TIME INCREASE / (DECREASE):** 14/21

**Burke Construction Group, Inc.**  
 CONTRACTOR  
 3210 Flagler Avenue  
 ADDRESS  
 Key West, FL 33040

**Reservations:** This proposal is based solely on the usual cost elements such as labor material and normal markups, and does not include any amount for additional changes in the sequence of work, delays, disruptions, rescheduling, lost productivity, extended or unabsorbed overhead, overtime, acceleration and or impact costs, unless specifically stated. The right is expressly reserved to amend and make claim for any and all of these related items prior to final settlement of this contract.

BY (Signature)  
 David J Hahn, Project Manager  
 (Typed Name)

DATE 11/27/2015



Proposal Submitted to:  
Burke Construction  
10145 NW 19<sup>th</sup> Street  
Doral, FL 33172

Date: 1-18-2016  
Job Name: Key West City Hall  
Key West, FL  
Architect: Bender & Associates  
Date of Plans: 8/8/14

We hereby submit specifications and estimates for **INTERIOR PLASTER DEMOLITION and INTERIOR PLASTER WORK** as follows:

**Demolition of Interior Plaster**

Demolition of interior plaster at perimeter walls as needed  
Reparation of substrate as needed to receive new plaster  
Removal of debris to designated dumpster on site

**29,590 SQFT @ \$.73 = \$21,600.00**

**Interior Plaster Work Preparation of surface to receive plaster finish above wainscot paneling,**

Preparation of joints to receive plaster finish  
USG Plaster Bonder at monolithic concrete  
Application of scratch and base coat using USG Imperial Basecoat Plaster  
Application of finish coat using gauging plaster/lime finish such as USG Red top Finish Plaster

**19,725 SQFT @ \$4.00 = \$78,900.00**

**NOTES & EXCLUSIONS:**

**Lodging/Hospitality Included in price**  
**Scaffolding Included in price**  
**Dust mitigation not included in price**  
**Mold mitigation not included in price**  
**No decorative plaster work included in price, No interior molding work included in price**  
**Price based on single mobilization**  
**Additional repairs due to unexpected conditions will be an additional charge**



---

Guillermo Swain - Principal  
Zarco Construction, LLC

**Note:** This proposal may be withdrawn by us if not accepted within fifteen (15) days. Our prices are based on our material prices currently charged to us by our suppliers. After a thirty (30) day grace period, any increase in price on materials given to us will be passed on to the general contractor.

**ACCEPTANCE OF PROPOSAL:** The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. This proposal will be incorporated in the contract documents.

Date of Acceptance: \_\_\_\_\_

Company: **Burke Construction Group, Inc**

By: \_\_\_\_\_

Title: \_\_\_\_\_