## HARTS BLUFF INDEPENDENT SCHOOL DISTRICT Harts Bluff ISD 2015 Additions and Renovations

Item #	Item/Description - Fees	Vendor Response		
1.	Pre-Construction Fee (Pre-Design through Bidding & Negotiations)	\$ 0.00		
	Construction Services Percentage:  X \$3,600,000.00  (Project Budget)	% 2.00%		
2.	Insert Extended Fee - % x Budget Amount:	\$ 72,000.00		
3.	Field & Office Staff (line 15):	\$ 120,350.00		
4.	General Conditions (line 25):	\$ 56,050.00		
5.	Total Cost = (\$ values of lines 1-4) =	\$ 248,400.00		
6.	Identify the following:  Percent of design/construction contingency carried for each phase. GMP amount shall include ALL Contractor identified contingencies AND any other allowances determined by the Contractor (e.g. "utility allowance", "scaffolding", "overtime") that aren't part of the Contractor's overhead for managing the work (e.g. "permitting", "temporary facilities", "cleaning").	SD: 5 % DD: 5 % CD: 5 % GMP: 2.5 %		
Onsite Field Office Staff (all staff not shown here shall be included in Item 2 above) include all overhead and multipliers within each line where applicable:				
7.	Project Manager	\$ 51,100.00		
8.	Superintendent	\$ 65,250.00		
9.	Other Field Office Staff – Accounting	\$ Included in CM Fee \$		
10.	Other Field Office Staff – Defined by Respondent	\$ n/a		
11.	Other Field Staff – Defined by Respondent	\$ n/a		

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12.	Other Field Office Sta	aff – Defined by Respondent	\$ n/a	
13.	Other Field Office Sta	aff – Defined by Respondent	\$ n/a	
14.	Other – Expenses of Home office to pass to project Identify each expense anticipated and dollar amount of each.		\$ 4,000.00	
15.	Subt	otal – On-site Field Office Staff	\$ 120,350.00	
	Percentage of	Project Manager:	50% on site/50% off site	
16.	time personnel dedicated to this project:	Superintendent:	100% on site	
	General Condit			
17.		All Risk Builder's Insurance	\$ 5,600.00	
18.		General Commercial Liability Insurance	\$ 13,700.00	
19.	All Other Insurance in Addition to CGL Required		\$ Included in Line 18	
20.		Contractor Bond:	\$ 36,750.00	
21.	Contractor Insurance:  Identify what the total percentage of subcontractors the contractor will require to be bonded and the total dollar amount that would be.		\$ Included in Line 18	
23.	Other – Please specify below:		\$ n/a \$ n/a	
24.	Other – Please specify below:		\$ n/a	
25.		Total - General Conditions:	\$ 56,050.00	
26.		Insurance Rate Modifier	.83	
27.		Amount of Commercial General Liability	7,000,000	