



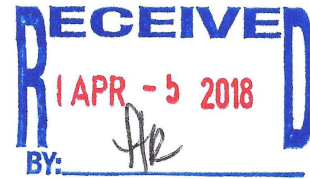
ARKANSAS DEPARTMENT OF TRANSPORTATION

ARDOT.gov | IDriveArkansas.com | Scott E. Bennett, P.E., Director

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March 29, 2018



The Honorable Bart Castleberry  
Mayor of Conway  
1201 Oak Street  
Conway, AR 72032

Re: Job 080522  
F.A.P. RTP-1302(265)  
Dave Ward Dr. Ped. Overpass (RTP-15) (S)  
Faulkner County

Dear Mayor Castleberry:

We have received your request for concurrence in award, the bid tabulations, and the 1% administration fee for the referenced project. The Department concurs in the award of the project in the amount of \$3,363,903.35 to the low bidder, Manhattan Road & Bridge Co., based on a review of the bid tabulations and the City's certification that the project was advertised and bids were received in accordance with the regulations governing Federal-aid projects and all other applicable state and federal regulations. As stated in the Agreement between the City and the Department, the maximum approved Federal-aid amount for this project is \$1,011,000.

Once the contract is executed, you may issue a work order to begin construction. The Report of Daily Work Performed (enclosed) must be submitted with each request for Construction Certification Reimbursement and the Final Acceptance Report (enclosed) must be submitted at the completion of the project. The forms must be submitted to David Ross, the Department's Resident Engineer in Conway, who can be contacted at (501) 327-4861. Also, David must be invited to attend the pre-construction conference for this project. You must submit all change orders to the contract to David for review and approval for program eligibility.

Sincerely,

*FOR*   
Kevin Thornton  
Assistant Chief Engineer – Planning

Enclosures

c: Deputy Director and Chief Engineer  
Program Management  
Transportation Planning and Policy  
Construction  
District 8  
Resident Engineer #84  
Job 080522 'C' File

**City of Conway**  
**LPA Report of Daily Work Performed**

Job Name: Dave Ward Dr. Ped. Overpass (RTP-15) (S)	Job No.: 080522
FAP No.: RTP-1302(265)	Contractor: Manhattan Road & Bridge Co.
Date: _____	Hours Worked: _____ - _____
Report No.: _____	

<b>Project Conditions</b>		
<u>Site Conditions</u> <input type="checkbox"/> Useable <input type="checkbox"/> Partly Useable <input type="checkbox"/> Not Useable <hr/> Min Temp. (F) _____ Max Temp. (F) _____	<u>Weather</u> <input type="checkbox"/> Sunny <input type="checkbox"/> Partly Cloudy <input type="checkbox"/> Rain <hr/> Rainfall Amt. (in.) _____	<u>Number of Contractor's Personnel</u> <input type="checkbox"/> Laborers <input type="checkbox"/> Carpenters <input type="checkbox"/> Concrete Laborers <input type="checkbox"/> Equip. Operators <input type="checkbox"/> Electricians <input type="checkbox"/> Plumbers <input type="checkbox"/> Foreman <input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____
<u>Comments</u>      		

<b>Location and Description of Work Performed</b>

<b>Special Instructions and/or Conversations</b>

Signed: _____ Designated Full-time Employee
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City of Conway  
**LPA Final Acceptance Report**

<b>Job Name: Dave Ward Dr. Ped. Overpass (RTP-15) (S)</b>		<b>Date:</b>
<b>Job No: 080522</b>	<b>FAP No: RTP-1302(265)</b>	
<b>County: Faulkner</b>	<b>Route:</b>	
<b>Contractor: Manhattan Road &amp; Bridge Co.</b>		
<b>Date Work Began:</b>	<b>Date Work Completed:</b>	
<b>Attendees:</b>		
<b>Remarks:</b>		
<b>Project Completed in Substantial Compliance with Plans and Specifications and Recommended for Final Acceptance by Sponsor</b>	<b>Recommended for Acceptance in Accordance with Project Agreement</b>	
_____	_____	
<b>Engineer/Architect</b>	<b>ARDOT Resident Engineer</b>	

<b><u>Project Recommended for Acceptance</u></b>
<b>Designated Full-time Employee:</b> _____

**I certify that the Contractor and/or subcontractor(s) have complied with the provisions of FHWA-1273, Required Contract Provisions, Federal-aid Construction Contracts, and Supplements; that the project has been completed by the Contractor in accordance with the plans and specifications; that the Contractor has been paid for this work, and the project is hereby accepted.**

\_\_\_\_\_  
*Bart Castleberry, Conway Mayor*

**CONSTRUCTION CERTIFICATION AND REIMBURSEMENT REQUEST**

Job No.: <u>080522</u>	Payee/Sponsor: <u>City of Conway</u>	DATE: _____
FAP: <u>RTP-1302(265)</u>	address <u>1201 Oak Street</u>	
County: <u>Faulkner</u>	<u>Conway, AR 72032</u>	PAY REQUEST # _____
Job Name: <u>Dave Ward Dr. Ped. Overpass</u>	Federal Tax ID No.: _____	FROM: _____ TO: _____
<u>(RTP-15) (S)</u>		

**SPONSOR'S REQUEST FOR PAYMENT**

1 Maximum Approved Federal-aid Amount	_____	\$1,011,000.00
2 Original Contract Amount	_____	\$3,363,903.35
3 Net Changes by Change Orders	_____	
4 Present Contract Total	_____	\$3,363,903.35
5 Present Federal-aid Amount (80% of Line 4 or Amount on Line 1, whichever is less)	_____	\$1,011,000.00
6 Work Completed to Date	_____	
7 Federal Match (80% of Line 6 or amount on Line 5, whichever is less)	_____	
8 Previous Reimbursements (Federal)	_____	
9 <b>Amount Due this Estimate</b> (subtract Line 8 from Line 7)	_____	

**Designated Full Time Employee In Responsible Charge**

The information provided in this document is true and correct and I recommend that payment be made to the Contractor for this work.

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

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

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes previously approved		
Total approved this Request Period		
<b>TOTALS</b>		
<b>NET CHANGES</b> by Change Order (Line 3 above)		

**Sponsor's CEO**

Payment is requested from the Arkansas Department of Transportation for the Amount Due. I certify that the Contractor and/or subcontractor(s) are complying with the provisions of FHWA-1273, Required Contract Provisions, Federal-aid Construction Contracts, and Supplements; that the work has been completed by the Contractor in accordance with the plans and specifications; and that the Contractor has been paid for this work.

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

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

DEPARTMENT USE ONLY

Recommended for Payment in Accordance with Project Agreement  _____ Resident Engineer	Approved for Payment  _____ State Construction Engineer	<b>PAID</b>  Voucher No. _____  Date: _____
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