



Building a Better World
for All of Us®

April 9, 2019

RE: TH 19 Utility Improvements
Cannon Falls, Minnesota
SEH No. CANNO 123363

Mr. David Maroney
City of Cannon Falls
918 River Road
Cannon Falls, MN 55009

Dear David:

Please find enclosed Application for Payment No. 2 (Final) for the above-referenced project, together with the following documentation:

- Consent of the surety to final payment
- Lien waivers
- Withholding Affidavit for Contractors and Subcontractors (IC 134 form)

We have reviewed the Application for Payment, and recommend payment to Schumacher Excavating in the amount of \$936.30. This represents 100% completion of the work.

The 1-year warranty period will commence with the final payment for this project. To ensure that any needed corrections are addressed during this warranty period, a final inspection of the project will be made prior to warranty expiration and the findings reported to the City.

Please don't hesitate to contact me with any questions or comments. Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read "Greg Anderson".

Greg Anderson, PE
City Engineer

ah

Enclosure

c: Schumacher Excavating

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Application for Payment
(Unit Price Contract)
No. 2 - Final

Eng. Project No.: CANNO 123363

Location: Cannon Falls, Minnesota

Contractor <u>Schumacher Excavating</u>	Contract Date _____
<u>50 Warren Avenue</u>	
<u>Zumbrota, MN 55992</u>	Contract Amount \$ <u>38,851.00</u>

Contract for TH 19 Utility Improvements

Application Date 2/22/19 For Period Ending 12/31/18

Item No.	Item	Unit	Est. Quantity	Quantity to Date	Unit Price	Total Price
1	MOBILIZATION	LS	1	<u>1</u>	\$2,000.00	<u>\$2,000.00</u>
2	TRAFFIC CONTROL	LS	1	<u>1</u>	1,000.00	<u>\$1,000.00</u>
3	CLEAR AND GRUB	TREE	3		500.00	
4	SAWCUT BITUMINOUS FULL DEPTH	LF	115	<u>115</u>	5.00	<u>\$575.00</u>
5	REMOVE BITUMINOUS PAVEMENT	SY	68	<u>110</u>	10.00	<u>\$1,100.00</u>
6	REMOVE CONCRETE CURB	LF	42		5.00	
7	REMOVE CONCRETE WALK	SY	77	<u>12</u>	8.00	<u>\$96.00</u>
8	ROCK EXCAVATION	CY	35		100.00	
9	GRANULAR BORROW (CV)	CY	35		18.00	
10	AGGREGATE BASE, CLASS 5 (CV)	CY	27	<u>30</u>	25.00	<u>\$750.00</u>
11	CONCRETE CURB DESIGN V	LF	42		40.00	
12	B618 CONCRETE CURB AND GUTTER	LF	42		40.00	
13	CONCRETE WALK (4")	SY	63	<u>12</u>	70.00	<u>\$840.00</u>
14	CONCRETE WALK (6")	SY	10		100.00	
15	TRUNCATED DOMES	SF	12		55.00	
16	PATCH BITUMINOUS PAVEMENT	SY	68	<u>110</u>	25.00	<u>\$2,750.00</u>
17	4" SEWER SERVICE PIPE	LF	130		35.00	
18	1" WATER SERVICE PIPE	LF	120	<u>130</u>	40.00	<u>\$5,200.00</u>
19	2" RIGID INSULATION	SY	36	<u>12</u>	20.00	<u>\$240.00</u>
20	1" CURB STOP	EA	1	<u>1</u>	500.00	<u>\$500.00</u>
21	1" CORPORATION STOP	EA	1	<u>1</u>	500.00	<u>\$500.00</u>

Item No.	Item	Unit	Est. Quantity	Quantity to Date	Unit Price	Total Price
22	CONNECT TO EXISTING WATER SERVICE	EA	1	<u>1</u>	200.00	<u>\$200.00</u>
23	CONNECT TO EXISTING WATER MAIN	EA	1	<u>1</u>	500.00	<u>\$500.00</u>
24	CONNECT TO EXISTING SEWER SERVICE	EA	1	<u></u>	250.00	<u></u>
25	CONNECT TO EXISTING SEWER MAIN	EA	1	<u></u>	500.00	<u></u>
26	SOD-LAWN TYPE	SY	220	<u>135</u>	10.00	<u>\$1,350.00</u>
27	TOPSOIL BORROW (CV)	CY	27	<u>25</u>	45.00	<u>\$1,125.00</u>
28	INLET PROTECTION	EA	4	<u></u>	100.00	<u></u>
Total Contract Amount						<u>\$18,726.00</u>

Application for Payment (continued)

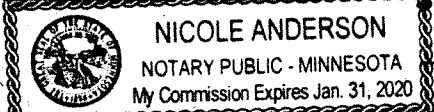
Total Contract Amount	\$ 38,851.00	Total Amount Earned	\$ 18,726.00
Contract Change Order No. _____		Material Suitably Stored on Site, Not Incorporated into Work	_____
Contract Change Order No. _____		Percent Complete _____	_____
Contract Change Order No. _____		Percent Complete _____	_____
Less Previous Applications:		GROSS AMOUNT DUE	\$ 18,726.00
AFP No. 1: <u>17,789.70</u>	AFP No. 6: _____	LESS _____ % RETAINAGE	\$ _____
AFP No. 2: _____	AFP No. 7: _____	AMOUNT DUE TO DATE	\$ 18,726.00
AFP No. 3: _____	AFP No. 8: _____	LESS PREVIOUS APPLICATIONS	\$ 17,789.70
AFP No. 4: _____	AFP No. 9: _____	AMOUNT DUE THIS APPLICATION	\$ 936.30
AFP No. 5: _____			

CONTRACTOR'S AFFIDAVIT

The undersigned Contractor hereby swears under penalty of perjury that (1) all previous progress payments received from the Owner on account of work performed under the Contract referred to above have been applied by the undersigned to discharge in full all obligations of the undersigned incurred in connection with work covered by prior Applications for Payment under said contract, TH 19 Utility Improvements, Cannon Falls, Minnesota, and (2) all material and equipment incorporated in said Project or otherwise listed in or covered by this Application for Payment and free and clear of all liens, claims, security interests and encumbrances.

Date April 9, 2019 _____ Schumacher Excavating
 _____ (Contractor)
 COUNTY OF Goodhue)
 STATE OF Minnesota) SS By Scott Schumacher Project Manager
 _____ (Name and Title)

Before me on this 9 day of April, 2019, personally appeared
Scott Schumacher known to be, who being duly sworn did depose and say that he is the Project Manager (office) of the Contractor above mentioned that he executed the above Application for Payment and Affidavit on behalf of said Contractor; and that all of the statements contained therein

My Commission expires 1/31/2020

 _____ (Notary Public)

The undersigned has checked the Contractor's Application for Payment shown above. A part of this Application is the Contractor's Affidavit stating that all previous payments to him under this contract have been applied by him to discharge in full all of his obligations in connecting with the work by all prior Applications for Payment.

In accordance with the Contract, the undersigned recommends approval of payment to the Contractor for the Amount due.

_____ By Greg Anderson, PE
 _____ Date April 9, 2019
 _____ City of Cannon Falls
 _____ By _____
 _____ Date _____



Contractor Affidavit Submitted

Thank you, your Contractor Affidavit has been approved.

Confirmation Summary

Confirmation Number: 0-417-987-520
Submitted Date and Time: 9-Apr-2019 11:19:41 AM
Legal Name: SCHUMACHER EXCAVATING INC
Federal Employer ID: 41-1737488
User Who Submitted: nanderson
Type of Request Submitted: Contractor Affidavit

Affidavit Summary

Affidavit Number: 658169856
Minnesota ID: 1994514
Project Owner: CITY OF CANNON FALLS
Project Number: TH 19 UTILITY IMPROVEMENTS
Project Begin Date: 02-Nov-2016
Project End Date: 13-Nov-2016
Project Location: CANNON FALLS, MN
Project Amount: \$18,726.00

Subcontractor Summary

Name	ID	Affidavit Number
CBR DRILLING	***-**-6289	1551261696
MATHY CONSTRUCTION	8749839	2133598208
CREATIVE CONCRETE DESIGNS	3996967	317530112

Important Messages

A copy of this page must be provided to the contractor or government agency that hired you.

Contact Us

If you need further assistance, contact our Withholding Tax Division at 651-282-9999, (toll-free) 800-657-3594, or (email) withholding.tax@state.mn.us. Business hours are 8:00 a.m. - 4:30 p.m. Monday - Friday.

Please [print this page](#) for your records using the print or save functionality built into your browser.



Contractor Affidavit

This Contractor Affidavit must be certified by the Minnesota Department of Revenue before the state of Minnesota or any of its subdivisions can make final payment to contractors. For more detailed information, see the instructions on the back of this form.

Please type or print clearly. This information will be used for returning the completed form.

Company name <u>COUNTRYSIDE LAWN & LANDSCAPE INC</u>		Daytime phone <u>507-732-4404</u>	Minnesota tax ID number <u>9314129</u>
Address <u>38 JEFFERSON DRIVE</u>		Total contract amount <u>\$ 1,100.00</u>	Month/year work began <u>NOV. 2016</u>
City <u>ZUMBOTA</u>	State <u>MN</u>	ZIP code <u>55992</u>	Amount still due <u>\$ 0</u>
			Month/year work ended <u>NOV. 2016</u>

Project number <u>TH 19 UTILITY IMPROVEMENTS</u>	Project location <u>CANNON FALLS</u>
Project owner <u>TH 19 UTILITY IMPROVEMENTS</u>	Address <u>CANNON FALLS</u>
	City <u>MN</u>
	State <u>MN</u>
	ZIP code <u>55992</u>

Did you have employees work on this project? Yes No. If no, who did the work?

Check the box that describes your involvement in the project and fill in all information requested.

- Sole contractor
- Subcontractor

Name of contractor who hired you
SCHUMACHER EXCAVATING

Address
50 WARREN AVE ZUMBOTA MN 55992

Prime contractor—If you subcontracted out any work on this project, all of your subcontractors must submit their own Contractor Affidavits and have them certified by the Department of Revenue before you can submit your Contractor Affidavit. For each subcontractor you had, fill in the information below and attach a copy of each subcontractor's certified Contractor Affidavit. If you need more space, attach a separate sheet.

Business name	Address	Owner/Officer

I declare that all information I have filled in on this form is true and complete to the best of my knowledge and belief. I authorize the Department of Revenue to disclose pertinent information relating to this project, including sending copies of this form, to the prime contractor if I am a subcontractor, and to any subcontractors if I am a prime contractor, and to the contracting agency.

Contractor's signature <u>[Signature]</u>	Title <u>OWNER</u>	Date <u>3-19-19</u>
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Mail to: Minnesota Revenue, Mail Station 6610, St. Paul, MN 55146-6610
Phone: 651-282-9999 or 1-800-657-3594

Certificate of Compliance

Based on records of the Minnesota Department of Revenue, I certify that the contractor who has signed this Contractor Affidavit has fulfilled all the requirements of Minnesota Statutes 290.92 and 270C.66 concerning the withholding of Minnesota income tax from wages paid to employees relating to contract services with the state of Minnesota and/or its subdivisions.

Department of Revenue approval
Nathaniel Clark

Date
APR 02 2019

494 1st st

Scott Schumacher

From: "Craig Shaw" <4craigshaw@gmail.com>
Date: Monday, March 11, 2019 11:06 AM
To: <scott@schumacherexcavating.com>
Subject: Fwd: Your Recent Contractor Affidavit Request

here is a copy of approval for IC 134 form for the city of cannon falls job in 2016

thanks,
Craig Shaw

----- Forwarded message -----

From: MN Revenue e-Services <eservices.mdor@state.mn.us>
Date: Mon, Mar 11, 2019 at 11:04 AM
Subject: Your Recent Contractor Affidavit Request
To: <4craigshaw@gmail.com>

This email is an automated notification and is unable to receive replies.

Contractor Affidavit Submitted

Thank you, your Contractor Affidavit has been approved.

Confirmation Summary

Confirmation Number: 0-507-063-232
Submitted Date and Time: 11-Mar-2019 11:04:29 AM
Legal Name: CBR DRILLING
Social Security Number: ***-**-6289 477-96-6289
Type of Request Submitted: Contractor Affidavit

Affidavit Summary

Affidavit Number: 1551261696
Project Owner: CITY OF CANNON FALLS
Project Number: TH 19 UTILITY IMPROVEMENTS
Project Begin Date: 03-Nov-2016
Project End Date: 03-Nov-2016
Project Location: CANNON FALLS
Project Amount: \$1,650.00
Subcontractors: No Subcontractors

Important Messages

A copy of this page must be provided to the contractor or government agency that hired you.

Contact Us

If you need further assistance, contact our Withholding Tax Division at 651-282-9999, (toll-free) 800-657-3594, or (email) withholding.tax@state.mn.us. Business hours are 8:00 a.m. - 4:30 p.m. Monday - Friday.

How to View and Print this Request

To view or print a copy of this request, return to the MN Contractor Affidavit at



Contractor Affidavit Submitted

Thank you, your Contractor Affidavit has been approved.

Confirmation Summary

Confirmation Number: 1-258-724-288
Submitted Date and Time: 19-Mar-2019 9:05:21 AM
Legal Name: MATHY CONSTRUCTION CO
Federal Employer ID: 39-0752519
User Who Submitted: mathy1
Type of Request Submitted: Contractor Affidavit

Affidavit Summary

Affidavit Number: 2133598208
Minnesota ID: 8749839
Project Owner: CITY OF CANNON FALLS
Project Number: CONNO 123363
Project Begin Date: 07-Nov-2016
Project End Date: 10-Nov-2016
Project Location: CANNON FALLS, MN
Project Amount: \$8,432.63
Subcontractors: No Subcontractors

Important Messages

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Contact Us

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Contractor Affidavit Submitted

Thank you, your Contractor Affidavit has been approved.

Confirmation Summary

Confirmation Number: 0-018-340-800
Submitted Date and Time: 26-Mar-2019 3:46:39 PM
Legal Name: CREATIVE CONCRETE DESIGNS, INC.
Federal Employer ID: 32-0463707
User Who Submitted: amhinz
Type of Request Submitted: Contractor Affidavit

Affidavit Summary

Affidavit Number: 317530112
Minnesota ID: 3996967
Project Owner: CITY OF CANNON FALLS
Project Number: CONNO123363
Project Begin Date: 11-Nov-2016
Project End Date: 11-Nov-2016
Project Location: HWY 19 CANNON FALLS
Project Amount: \$650.00
Subcontractors: No Subcontractors

Important Messages

A copy of this page must be provided to the contractor or government agency that hired you.

Contact Us

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