

CITY OF TREASURE ISLAND

CONTRACTOR'S

VALUATION AND COST OF WORK

For Substantial Improvement

Property Address: _____

Company Name: _____

Contractor Name: _____

Contractor Address: _____

City: _____ State: _____ Zip: _____

License Number: _____ Phone Number () _____ - _____

Owners Name: _____

Description of Work: _____

Number	Description	Estimated Cost	Adjusted Cost	Remarks
1.	General Conditions			
.001	Equipment Rental			
.002	Clean-up			
.003	Overhead			
.004	Temp. Construction			
.005	Testing & Analysis			
.006	Supervision			
.007	Survey & Layout			
.008	Soil Test			
.009	Permit & Fees			
.010	Chemical Toilets			
.011	Job Signs			
.012	Temp. Utilities			
.013	Travel Expense			
.014	Other			

Number	Description	Estimated Cost	Adjusted Cost	Remarks
.2	Site Work			
.001	Excavation & Backfill			
.002	Rough Grading Site			
.003	Finish Grade Site			
.004	Landscaping			
.005	Driveway			
.006	Dewatering			
.007	Sanitary Sewer			
.008	Storm Sewer			
.009	Street Lights			
.010	Water Lines			
.011	Gas Service			
.012	Pilings			
.013	Sidewalks			
.014	Curbs & Gutters			
.015	Soil Poisoning			
.016	Other			
3.	Concrete			
.001	Footings & Pile Caps			
.002	Foundation Walls			
.003	Slabs on Grade			
.004	Flatworks & Topping			
.005	Columns & Beams			
.006	Pre-cast			
.007	Concrete Stairs			
.008	Wire Mesh			
.009	Vapor Barrier			
.010	Other			

Number	Description	Estimated Cost	Adjusted Cost	Remarks
4.	Masonry			
.001	Masonry Brick/Block			
.002	Masonry Cutstone			
.003	Masonry Granite			
.004	Other			
5.	Metals			
.001	Structural Steel			
.002	Bar Joist			
.003	Steel Erection			
.004	Metal Decks			
.005	Misc. Steel			
.006	Other			
6.	Carpentry			
.001	Carpentry rough Labor			
.002	Lumber Framing Blocking			
.003	Millwork			
.004	Carpentry Finish Labor			
.005	Other			
7.	Moisture Protection			
.001	Insulation			
.002	Roofing			
.003	Sheet Metal			
.004	Metal Siding & Trim			
.005	Caulk & Weather Strip			
.006	Water Proofing			
.007	Other			

Number	Description	Estimated Cost	Adjusted Cost	Remarks
8.	Doors/Windows/Glass			
.001	Metal Doors/frames			
.002	Windows			
.003	Glass/Glazing			
.004	Other Doors/Frames			
.005	Tub & Shower Enclosures			
.006	Mirrors			
.007	Other			
9.	Finishes			
.001	Lath/Plaster/Stucco			
.002	Partition			
.003	Drywall			
.004	Ceilings			
.005	Paintings/Decorating			
.006	Floors			
.007	Ceramic Tile			
.008	Floors/Hardeners/Sealers			
.009	Other			
10.	Specialties			
.001	Bath Accessories			
.002	Fire Ext.			
.003	Telephone Booths			
.004	Roof Hatches			
.005	Other			

Number	Description	Estimated Cost	Adjusted Cost	Remarks
11.	Architect. Equip.			
.001	Mailboxes			
.002	Skylights			
.003	Others			
12.	Furnishings			
.001	Cabinets			
.002	Special Equipment			
.003	Spa/Gym Equipment			
.004	Others			
13.	Other Construction			
.001	Swimming Pools			
.002	Sauna Bath			
.003	Bar-B-que Grilles			
.004	Other			
14.	Conveying Systems			
.001	Elevators			
.002	Escalators			
.003	Other			
15.	Mechanical			
.001	Heating			
.002	Ventilation & Ducts			
.003	Air Conditioning Equip			
.004	Solar Equip.			
.005	LP/NAT Gas Piping			
.006	LP/NAT Gas Equip.			

CITY OF TREASURE ISLAND

CONTRACTOR'S

Scope and Cost of Work

AFFIDAVIT

Property Address: _____
Company Name: _____
Contractor Name: _____
Contractor Address: _____
City: _____ State: _____ Zip: _____
License Number: _____ Phone Number () _____ - _____
Owners Name: _____
Description of Work: _____

I hereby attest to the fact that I, or a member of my firm, Prepared the Cost Estimate for the additions, renovations or remodeling of the above-referenced property. The cost encompasses all of the work as delineated on the plans and specifications submitted for permit application. I further attest that the amount shown on the contract between property owner and contractor submitted herewith in the sum of \$_____ is the total amount for the work described.

I understand that I am subject to enforcement, penalties and/or fines for violation if inspection of the property reveals that I have made additions, renovations or remodeling to the property which were not included in the permit application documents.

Contractor's Signature

STATE OF FLORIDA)
COUNTY OF PINELLAS)

The foregoing instrument was acknowledged before me this _____ day
of _____, 2003, by _____ who
Is personally know to me or provided identification _____
and did (did not) take an oath.

Notary Public

NOTARY PUBLIC
State of Florida at Large
My Commission Expires:
Commission Number:

CITY OF TREASURE ISLAND

OWNERS

Valuation and Cost of Work

AFFIDAVIT

Property Address: _____
Company Name: _____
Contractor Name: _____
Contractor Address: _____
City: _____ State: _____ Zip: _____
License Number: _____ Phone Number () _____ - _____
Owners Name: _____
Description of Work: _____

I hereby attest that the additions, renovations or remodeling as delineated in the submittals for a building permit is a complete listing of all work to be performed at the referenced property. I further attest that the amount shown on the contract between property owner and contractor in the sum of \$ _____ is the total amount for the work described and that this cost does not equal or exceed 50% of the market value of the structure, which has been indicated as \$ _____ (Copy of Appraisal attached).

I understand that I am subject to enforcement, penalties and/or fines for violation if inspection of the property reveals that I have made additions, renovations or remodeling to the property which were not included in the permit application documents.

Owner's Signature

STATE OF FLORIDA)
COUNTY OF PINELLAS)

The foregoing instrument was acknowledged before me this _____ day
of _____, 2003, by _____ who
I personally know to me or provided identification _____
and did (did not) take an oath.

Notary Public

NOTARY PUBLIC
State of Florida at Large
My Commission Expires:
Commission Number: