APPENDIX I

CONSTRUCTION & ADMINISTRATION FORMS

October 1, 2025

Contractor name and address

Delivery via email: Contractor Email

RE: **NOTICE-OF-AWARD –** Flo971523B Nutrient Reduction Wetland Project, Contract 25-14

Dear _____,

This is to notify you that the Division of Soil Conservation and Water Quality has determined _____ is the successful bidder for the Flo971523B Nutrient Reduction Wetland Project. Award is being made for the base bid of $_____.

In accordance with Item #9 of the Instructions to Bidders, Document BB, you have fourteen (14) calendar days from the date of receipt of this notice to obtain the Performance Bond (*Document NN*), submit your Construction Progress Schedule (*Document JJ*) for review, and execute the Contract (*Document DD*). In addition, the Division must be provided with a Certificate of Insurance pursuant to the General Conditions, Insurance and Related Provisions (*Document FF, Part 6-01*).

Please note that Iowa Code Section 91C.7, requires that all construction contractors awarded a contract to perform work for the state or an agency of the state must be registered with the Iowa Department of Inspections, Appeals & Licensing. The Division of Soil Conservation and Water Quality cannot execute a contract with your firm unless you provide proof of this registration. Be sure to fill in the Department of Inspections, Appeals & Licensing registration number blank on the Contract (*Document DD*).

Enclosed are the Contract (*Document DD*), Construction Progress Schedule form (*Document JJ*), and the Performance Bond (*Document NN*). Please complete, sign and return scanned electronic copies along with completed Performance Bond. In addition, we must have the Certificate of Insurance pursuant to the General Conditions and/or Special Conditions.

Congratulations on being the successful bidder. We look forward to working with your company on this project. If you have any questions, please contact Tracy Bruun, (515) 344-6279.

Sincerely,

Jake Hansen, Chief
Water Resources Bureau
Division of Soil Conservation and Water Quality

JH/tab
Enclosures
CC:

STATE OF IOWA
DIVISION OF SOIL CONSERVATION AND WATER QUALITY
CONSTRUCTION PROGRESS SCHEDULE

Project ID: Flo971523B Date: _____

Contractor: _____

Contract End Dates:

All Construction Work Except Seeding: November 15, 2026

Seeding: December 15, 2026

Scheduled Dates:

Anticipated Construction Start Date:

Preconstruction Conference Date Range*:
**Preconstruction Conference must be held prior to Construction Start Date, by no more than seven (7) days*

Estimated Completion Date of All Work Except Seeding:
Final Walkthrough should be held prior to Contract End Date for all construction work except seeding

Major Construction Work Item(s)	Order of Work	Estimated Duration of Work
(Items to be established/grouped by Division on an individual project basis)		

Dates established in this schedule may be adjusted as described in Document FF, Paragraph 3-21.

FOR THE CONTRACTOR

_____
(Company Representative)

_____
(Date)

_____
(Name of Company)

_____
(Address of Company)

_____
(City, State, Zip code

FOR THE DIVISION

_____
Mike Bourland, Water Resources Bureau
Division of Soil Conservation and Water Quality

_____
(Date)

Accepted ☐

Adjustment Requested ☐

If adjustment is requested, describe below:

END OF DOCUMENT JJ

APPLICATION AND CERTIFICATE FOR PAYMENT

DOCUMENT SS

PAGE 1 OF 2

DISTRIBUTION TO:
DIVISION
CONTRACTOR
ENGINEER

TO DIVISION:

Iowa Division of Soil Conservation and Water Quality
1305 East Walnut Street
Des Moines, IA 50319-0050

FROM CONTRACTOR:

Contractor Name

Contractor Address

ENGINEER:

Engineer Name

Engineer Address

PROJECT:

Bid No.

Project ID

Date:

Period To:

Summary of Approved Change Orders & Contract Amendments

Number	Addition	Deduction

		PAYMENT #1 -Ret	PAYMENT #2 -Ret	PAYMENT #3 -Ret	PAYMENT #4 -Ret	PAYMENT #5 -Ret	PAYMENT #6 - Ret	RETAINAGE ONLY
Net change by Change Orders and Contract Amendments	$ -	DATE	DATE	DATE	DATE	DATE	DATE	DATE
1. ORIGINAL CONTRACT SUM:		$ -						
2. Net Changes by Change Orders/Amendments		$ -						
(from table)								
3. Contract Sum to Date		$ -						
(Line 1+/-2)								
4. Total Completed & Stored to Date		$ -						
(Column G on Continuation Sheet)								
5. Retainage		$ -						
(3% of Line 4)								
6. Total Earned Less Retainage		$ -						
(Line 4 less Line 5)								
7. Previous Certificates For Payment		$ -						
(Line 6 from prior Certificate)								
8. Balance to Finish, Plus Retainage		$ -						
(Line 3 less Line 6)								
9. Current Payment Due		$ -						
(Line 6 less Line 7)								

The undersigned Contractor certifies that to the best of Contractor's knowledge, information, and belief, the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid to Contractor for which previous Certificates for Payment were issued and payments received from the Division and that current payment shown herein is now

By:_____ Date _____
CONTRACTOR

In accordance with the Contact Documents, based on on-site observations and the data comprising this application, Engineer certifies to the Division that to the best of the Engineer's knowledge, information, and belief, the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and Contractor is entitled to payment of the AMOUNT CERTIFIED.

By:_____ Date_____
ENGINEER'S CERTIFICATE FOR PAYMENT

AMOUNT CERTIFIED $_____

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment, and acceptance of payment are without prejudice to any rights of Contracting Officer or Contractor under this Contract.

CONTINUATION SHEET FOR APPLICATION AND CERTIFICATE FOR PAYMENT **DOCUMENT SS**

PAGE 2 of 2

A	B	C	D	E	F	G	H	I
Item No.	Description of Work	Scheduled Value	Work From Previous Application (D+E)	Completed This Period	Materials Presently Stored Not in D or E	Total Completed & Stored (D+E+F)	% Complete (G/C)	Balance to Finish (C-G)
1	Bid Item 1	$ -	$ -	$ -		$ -	0%	$ -
2	Bid Item 2	$ -	$ -	$ -		$ -	0%	$ -
3	Bid Item 3	$ -	$ -	$ -		$ -	0%	$ -
4	Bid Item 4	$ -	$ -	$ -		$ -	0%	$ -
5	Bid Item 5	$ -	$ -	$ -		$ -	0%	$ -
6	Bid Item 6	$ -	$ -	$ -		$ -	0%	$ -
7	Bid Item 7	$ -	$ -	$ -		$ -	0%	$ -
8	Bid Item 8	$ -	$ -	$ -		$ -	0%	$ -
9	Bid Item 9	$ -	$ -	$ -		$ -	0%	$ -
10	Bid Item 10	$ -	$ -	$ -		$ -	0%	$ -
11	Bid Item 11	$ -	$ -	$ -		$ -	0%	$ -
12	Bid Item 12	$ -	$ -	$ -		$ -	0%	$ -
13	Bid Item 13	$ -	$ -	$ -		$ -	0%	$ -
14	Bid Item 14	$ -	$ -	$ -		$ -	0%	$ -
15	Bid Item 15	$ -	$ -	$ -		$ -	0%	$ -
16	Bid Item 16	$ -	$ -	$ -		$ -	0%	$ -
17	Bid Item 17	$ -	$ -	$ -		$ -	0%	$ -
18	Bid Item 18	$ -	$ -	$ -		$ -	0%	$ -
19	Bid Item 19	$ -	$ -	$ -		$ -	0%	$ -
TOTALS FOR PAYMENT #1		$ -	$ -	$ -		$ -	0%	$ -

Current Payment Due	**$ -**

STATE OF IOWA
DIVISION OF SOIL CONSERVATION AND WATER QUALITY
CHANGE ORDER REQUEST

Change Order Request No. _____

Project ID: Flo971523B Date: _____

Name of Project: Flo971523B

Location of Project: Floyd County

Name of Contractor: _____

Architect/Engineer: Bolton & Menk, Brandon Short P.E.

Contract Plan and Detail Reference: _____

Change Order Request Drawing No. and Date: _____

Contract Specification Reference: _____

Description of Change: _____

BREAKDOWN OF CONTRACT COST:

Original Project Contract Amount:	$_____
Approved Change Orders No. ___thru __:	$_____
Pending Recommended Change Order Requests Nos. ___:	$_____
This Change Order Request:	$_____
Resulting Total Recommended Amount:	$_____

Reason for Contract Change: _____

_____

Change Requested by: _____

_____ _____
(Signature) (Date)

CONTRACTOR APPROVAL

_____ By: _____
(Company) (Signature)

_____ _____
(Address) (Date)

_____

_____

IDALS PROJECT REPRESENTATIVE RECOMMENDATIONS

_____ Concur _____ Recommend Rejection (Attach Explanation)

IDALS Project Representative: _____ _____
(Signature) (Date)

DIVISION OF SOIL CONSERVATION AND WATER QUALITY AUTHORIZATION

Change Order required due to:

_____

_____

Immediate authorization to proceed granted: _____ Yes _____ No

APPROVED:

_____
Susan Kozak, Director
Division of Soil Conservation and Water Quality
Iowa Department of Agriculture
and Land Stewardship

_____
(Date)

DENIED:

_____
Susan Kozak, Director
Division of Soil Conservation and Water Quality
Iowa Department of Agriculture
and Land Stewardship

_____
(Date)

END OF DOCUMENT HH

State of Iowa
Iowa Department of Agriculture and Land Stewardship
DIVISION OF SOIL CONSERVATION AND WATER QUALITY
Flo971523B Nutrient Reduction Wetland Project Construction Contract Amendment

THIS AMENDMENT, made this _____ day of _____, 20____, by and between the State of Iowa, acting through:

Iowa Department of Agriculture and Land Stewardship
Division of Soil Conservation and Water Quality

hereinafter called the ***DIVISION***, and

_____
(Name of Company)

_____
(Address)

_____
(City, State, Zip)

hereinafter called the ***CONTRACTOR***.

WITNESSETH: That the ***DIVISION*** and the ***CONTRACTOR*** mutually agree to amend the agreement made the _____day of _____, 20_____, for the Floyd County Nutrient Reduction Wetland Project (Flo971523B – Bid No. 25-14) in this Amendment Number _____ as described below:

Description of Amendment:

_____
_____
_____

Contract Plan Sheet(s)
and Detail Reference(s): _____

Amendment No. _____
Drawing No. and Date: _____

Contract Specification
Reference(s): _____

Reason for Revision of
Contract Completion Date(s): _____
_____
_____

Original Contract Completion Date for All Work Except Seeding:	November 15, 2026
Original Contract Completion Date for Seeding:	December 15, 2026
Current Completion Date for All Work Except Seeding:	
Current Completion Date for Seeding:	
Revised Completion Date for All Work Except Seeding, This Amendment:	
Revised Completion Date for Seeding, This Amendment:	

BREAKDOWN OF AMENDMENT CONTRACT COST BY BID ITEM:

Item #	Description	Adjustment Quantity	Unit Cost	Total Cost Adjustment
			$	$
			TOTAL	**$**

Original Project Contract Amount:	$ 0.00
Approved Contract Amendments No. ____ through ____:	$ 0.00
Pending Recommended Change Order Requests No. ____ through ____:	$ 0.00
Approved Change Order Requests No. ____ through ____:	$ 0.00
This Amendment Request:	$ 0.00
Resulting Total Recommended Amount:	**$ 0.00**

IN WITNESS WHEREOF, the parties hereto have executed this Amendment, in the day and year first above mentioned.

FOR THE DIVISION

Grant D. Menke, Deputy Secretary
Iowa Department of Agriculture and Land Stewardship

(Date)

FOR THE CONTRACTOR

(Company Representative)

(Date)

(Name of Company)

(Address of Company)

(City, State, Zip Code)

Seal if by a corporation

CONSENT FROM SURETY

(Surety Representative)

(Name of Surety)

(Date)

END OF DOCUMENT II

IOWA
Department of Revenue
www.state.ia.us/tax

Designated Exempt Entity
Iowa Construction Sales Tax Exemption Certificate

This document may be completed by a designated exempt entity and given to their contractor and/or subcontractor along with an authorization letter. *Seller:* Keep this certificate in your files. *Contractor/Exempt Entity:* Keep a copy of this certificate for your records. **Do not send this to the Department of Revenue**

Designated Exempt Entity		
Division of Soil Conservation and Water Quality Iowa Department of Agriculture and Land Stewardship		
Address 1 **1305 East Walnut Street**		
Address 2		
City **Des Moines**	State **IA**	Zip Code **50319**
Construction Project Name **Flo971523B Nutrient Reduction Wetland Project**		
Construction Project Number (if used) **Job No. 25-14**		

General Contractor or Subcontractor Name		
Sample		
Address 1 **123 Construction Ave**		
Address 2		
City **Dig City**	State **IA**	Zip Code **55555**

Description of contract/subcontract (please print/type clearly)

Construction of Nutrient Reduction Wetland.

The named contractor may purchase building materials used in the contract, exempt from sales tax. This exemption does NOT apply to materials, equipment and supplies consumed by the contractor or subcontractor.

Designated Exempt Entity Authorized Agent ._____ Date: _____

Authorization Letter From Division of Soil Conservation and Water Quality - Agriculture and Land Stewardship

Pursuant to Iowa Code Sections: 422.42 (16) & (17), and 422.47 (5), you are authorized to purchase construction materials tax free for the contract specified above.

The exemption certificate (or a copy of the certificate) may be provided to the suppliers of your construction materials and will authorize them to sell you the materials exempt from Iowa sales tax and any applicable local option sales tax and school infrastructure local option sales tax. Complete information on qualifying materials can be found at www.state.ia.us/tax, the Department of Revenue (IDR) website.

It is your responsibility to have records identifying the materials purchased and verifying they were used on this contract. Any materials purchased tax-free and not used on the construction project are subject to sales and applicable local option taxes. Should this occur, the tax must be paid directly by you to IDR in the same calendar quarter the project is completed. E-mail the department at: idrf@idrf.state.ia.us if you have questions on this requirement.

Contractors should be aware that use of the certificate to claim exemption from tax for items not used on this project or that do not qualify for exemption could result in civil or criminal penalties.

31-013 (12/10/02)