# BOARD OF TRUSTEES JEFFERSON TOWNSHIP, MONTGOMERY COUNTY, OHIO

#### **RESOLUTION NO 17-101**

THE JEFFERSON TOWNSHIP BOARD OF TRUSTEES ACCEPTS THE ROOF
REPLACEMENT PROPOSAL SUBMITTED BY R. Campbell Roofing. IN THE AMOUNT OF
\$ 23,400 00 AND THE PAYMENT IS BEING PROVIDED BY THE OTARMA INSURANCE COMPANY
MINUS THE DEDUCTIBLE AND DEPRECIATION

The Board of Trustees of Jefferson Township, Montgomery County, Ohio met in regular meeting on the 5<sup>th</sup> day of September 2017 at the Township Offices located at One Business Park Drive, Dayton, Ohio with the following members present:

Roy Mann () James McGuire () Russell Back ()

Trustee MeGoire moved for the adoption of the following resolution:

WHEREAS, The Jefferson Township Board of Trustees are responsible for maintaining insurance coverage on all Township facilities; and

WHEREAS, the Trustee have coverage on Station #59; and

WHEREAS, the cause of storm / wind damage to Station #59's roof system has to be replaced;

WHEREAS, it is in the interest of the Township and its residents to have the roof replaced since it is damaged;

WHEREAS, the claims Division of OTARMA, named PERSO, has agreed to cover the damage and replace the roof subject to depreciation;

WHEREAS, there will be limited expense to the Township for covering the deductible and depreciation cost of the roof replacement in the amount not to exceed \$5,000 to be allocated to the Fire/EMS fund code 2111-760-720-0100.

NOW, THEREFORE, BE IT RESOLVED the Jefferson Township Board of Trustees accept the roof replacement proposal submitted by Reamphall Roding in the amount of \$ 23,400° and the payment is being provided by the OTARMA Insurance Company minus the deductible and deprecation. (Quotations and Scope of Work attachments, from Insurance Company and Contractors)

Trustee Back seconded the motion and the roll was called on the question of its adoption.

The vote was as follows: Roy Mann ( ) James McGuire ( ) Russell Back ( )

Adopted: 5th day of September 2017

Roy Mann, President

James McGuire, Vice President

Russell Back, Trustee

Attest:

Tracey Edwards, Fiscal Officer

RES. 17-101

#### **ROOF REPLACEMENT PROPOSAL'S**

AVSTON CONSTRUCTION \$26,000.00 \*Includes 3-layer roof tear-off

DEROD \$17,500.00

MAXIM ROOFING CO. \$21,265.00

R. CAMPBELL ROOFING, INC. \$23,400.00

**NOTE**: There is interior water damage to the ceiling and inside Station #59. There will be additional repairs paid for by the insurance company to replace the drywall and paint areas and various ceiling repairs.

**ADDITIONAL NOTE**: The overall estimate for all repairs including the roof and interior damage is presently \$29,763. This figure could go up after the vendor begins working and additional damage is found.

**RESOLUTION 17-101** 

# SWORN STATEMENT IN PROOF OF LOSS

(For Use With Replacement Cost Coverages)

AMOUNT OF POLICY AT TIME OF LOSS	OTR018774A1 POLICY NUMBER
7/10/2016	
7/10/2017	AGENT
DATE EXPIRES	AGENCY AT
To the Ohio Township Association Risk Management Authority	
of At time of loss, by the above indicated policy of insurance you insured: Jefferson Township / Montgomery County	
against loss by All Risk to the property described u	inder Schedule "A," according to the
terms and conditions of the said policy and all forms, endorsements, transfers and assignments attached thereto.  1. Time and Origin: A loss occurred about the hour of (State Kind)	o'clockM
on the24 day ofMay 2017 The cause and origin of the said loss were: Windstorm damage to fire station	
2. Occupancy: The building described, or containing the property described, was occupied at the time of the lopurpose whatever: N/A	ss as follows, and for no other
3. Title and Interest: At the time of the loss the interest of your insured in the property described therein was:  Owner	
No other person or persons had any interest therein or incumbrance thereon, except:  N/A	
4. Changes: Since the said policy was issued there has been no assignment thereof, or change of interest, use, exposure of the property described, except: None	Occupancy, possession, location, or
<ul> <li>5. Total Insurance: The total amount of 'insurance upon the property described by this policy was, at the time of as more particularly specified in the apportionment attached under Schedule "C," besides which there was no policy written or oral, valid or invalid.</li> <li>6. The Full Replacement Cost of said property at the time of the loss was</li></ul>	
7. The Full Cost of Repair or Replacement is	. \$29,763.01
8. Applicable Depreciation or Betterment is	\$14,090.25
9.Actual Cash Value Loss is (Line 7 minus Line 8)	\$15,672.76
9.Actual Cash Value Loss is (Line 7 minus Line 8)	\$15,672.76 \$500
10. Less deductibles and/or participation by the insured	\$500
10. Less deductibles and/or participation by the insured	\$500
10. Less deductibles and/or participation by the insured	\$500  . \$15,172.76  . \$14,090.25  or this affiant; nothing has been the policy, or render it void; nothing has been the policy, or render it void; nothing has been the policy, or render it void; nothing has been the policy, or render it void; nothing has been the policy, or render it void; nothing has been the policy, or render it void; nothing has been the policy of the policy
10. Less deductibles and/or participation by the insured	\$500  . \$15,172.76  . \$14,090.25  or this affiant; nothing has been the policy, or render it void; nothing has been the policy, or render it void; nothing has been the policy, or render it void; nothing has been the policy, or render it void; nothing has been the policy, or render it void; nothing has been the policy, or render it void; nothing has been the policy of the policy
10. Less deductibles and/or participation by the insured  11. Actual Cash Value Claim is (Line 9 minus Line 10)  12. Supplemental Claim, to be filed in accordance with the terms and conditions of the Replacement Cost Coverage within 365 days from the date of loss as shown above, will not exceed.  (This figure will be that portion of the amounts shown on Lines 8 and 10 which is recoverable.)  The said loss did not originate by any act, design or procurement on the part of your insured, one by or with the privity or consent of your insured or this affiant, to violate the conditions o rticles are mentioned herein or in annexed schedules but such as were destroyed or dama roperty saved has in any manner been concealed, and no attempt to deceive the said compa as in any manner been made. Any other information that may be required will be furnished and The furnishing of this blank or the preparation of proofs by a representative of the above insuring of its rights.	\$500  . \$15,172.76  . \$14,090.25  or this affiant; nothing has been the policy, or render it void; not ged at the time of said loss; not ny, as to the extent of said loss considered a part of this proof.
10. Less deductibles and/or participation by the insured  11. Actual Cash Value Claim is (Line 9 minus Line 10)  12. Supplemental Claim, to be filed in accordance with the terms and conditions of the Replacement Cost Coverage within 365 days from the date of loss as shown above, will not exceed.  (This figure will be that portion of the amounts shown on Lines 8 and 10 which is recoverable.)  The said loss did not originate by any act, design or procurement on the part of your insured, one by or with the privity or consent of your insured or this affiant, to violate the conditions or ticles are mentioned herein or in annexed schedules but such as were destroyed or damage roperty saved has in any manner been concealed, and no attempt to deceive the said compa as in any manner been made. Any other information that may be required will be furnished and The furnishing of this blank or the preparation of proofs by a representative of the above insuring of its rights.	\$500  . \$15,172.76  . \$14,090.25  or this affiant; nothing has been fithe policy, or render it void; not ged at the time of said loss; not as to the extent of said loss considered a part of this proof.
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10. Less deductibles and/or participation by the insured	\$500  . \$15,172.76  . \$14,090.25  or this affiant; nothing has been fithe policy, or render it void; not ged at the time of said loss; not as to the extent of said loss considered a part of this proof.

Form FF003 (Rev. 11/88) PRINTED IN U S.A.



6602 East 75th Street Ste #500

Indianapolis IN 46250 Phone: 800-879-6805 fax 855-570-4800

Email: John\_Carnevale@us.crawco.com

Insured: Contact Chief Larry Sexton Jefferson Township / Mo

Cell: (937) 545-8825

Property: 7828 Dayton Liberty Rd

Dayton, OH 45417

Home: Jefferson Township / Montgomery Cnty, One

Business

Dayton, OH 45417

Business: Jefferson Township / Montgomery Cnty, One

**Business** 

Dayton, OH 45417

Claim Rep.: JJCARN

Estimator: John Carnevale Business: (513) 560-4370

Position: Adjuster E-mail: JJCARN@us.crawco.com

Business: 7271 Engle Road Ste. 303

Cleveland, OH 44130

Claim Number: OTR018774A1 Policy Number: Type of Loss: Other

 Coverage
 Deductible
 Policy Limit

 PlaceHolder1
 \$0.00
 \$0.00

Date Contacted: 6/8/2017 6:00 PM

Date of Loss: 5/24/2017 Date Received: 6/8/2017

Date Inspected: Date Entered: 6/12/2017 3:49 PM

Price List: OHDT8X\_JUN17

Restoration/Service/Remodel

Estimate: CONTACT\_CHIEF\_LARRY\_ Branch-File#: 06658-3036412

Client Code: 017164



6602 East 75th Street Ste #500 Indianapolis IN 46250 Phone: 800-879-6805

fax 855-570-4800

Email: John\_Carnevale@us.crawco.com

#### CONTACT\_CHIEF\_LARRY\_

#### Roof

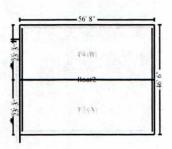


#### Roof1

3968.70 Surface Area253.00 Total Perimeter Length

39.69 Number of Squares68.90 Total Ridge Length

DESCRIPTION	QUANTITY	UNIT PRICE	TAX	RCV	DEPREC.	ACV
Remove Laminated - High grade - comp. shingle rfg w/ felt	39.69 SQ	41.26	0.00	1,637.61	(0.00)	1,637.61
2. Remove Add. layer of comp. shingles, remove & disp Laminated	79.37 SQ	28.01	0.00	2,223.15	(0.00)	2,223.15
2 ADDITIONAL LAYERS						
3. Laminated - High grd - comp. shingle rfg w/out felt	43.67 SQ	194.23	0.00	8,482.02	(5,301.26)	3,180.76
4. Roofing felt - 15 lb.	35.60 SQ	23.34	0.00	830.90	(830.90)	0.00
5. Ice & water shield	408.66 SF	1.29	0.00	527.17	(439.31)	87.86
6. R&R Flashing - pipe jack	2.00 EA	36.47	0.00	72.94	(44.46)	28.48
7. R&R Roof vent - turtle type - Metal	5.00 EA	51.96	0.00	259.80	(161.18)	98.62
8. R&R Rain cap - 8"	1.00 EA	46.72	0.00	46.72	(30.66)	16.06
9. Drip edge	253.00 LF	1.80	0.00	455.40	(325.29)	130.11
Totals: Roof1			0.00	14,535.71	7,133.06	7,402.65



#### Roof2

2852.78 Surface Area 214.01 Total Perimeter Length 28.53 Number of Squares 56.63 Total Ridge Length

DESCRIPTION	QUANTITY	UNIT PRICE	TAX	RCV	DEPREC.	ACV
10. Remove Laminated - High grade - comp. shingle rfg w/ felt	28.53 SQ	41.26	0.00	1,177.15	(0.00)	1,177.15
11. Remove Add. layer of comp. shingles, remove & disp Laminated	57.06 SQ	28.01	0.00	1,598.25	(0.00)	1,598.25
2 ADDITIONAL LAYERS						
12. Laminated - High grd - comp. shingle rfg w/out felt	31.67 SQ	194.23	0.00	6,151.26	(3,844.54)	2,306.72



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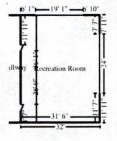
fax 855-570-4800

Email: John\_Carnevale@us.crawco.com

#### **CONTINUED - Roof2**

DESCRIPTION	QUANTITY UN	NIT PRICE	TAX	RCV	DEPREC.	ACV
13. Roofing felt - 15 lb.	25.13 SQ	23.34	0.00	586.53	(586.53)	0.00
14. Ice & water shield	340.00 SF	1.29	0.00	438.60	(365.50)	73.10
15. R&R Flashing - pipe jack	4.00 EA	36.47	0.00	145.88	(88.91)	56.97
16. R&R Roof vent - turtle type - Metal	5.00 EA	51.96	0.00	259.80	(161.18)	98.62
17. R&R Rain cap - 8"	1.00 EA	46.72	0.00	46.72	(30.66)	16.06
18. Step flashing	49.00 LF	7.59	0.00	371.91	(265.65)	106.26
Where roof meets siding.						
19. Drip edge	214.01 LF	1.80	0.00	385.22	(275.16)	110.06
Totals: Roof2			0.00	11,161.32	5,618.13	5,543.19
Total: Roof			0.00	25,697.03	12,751.19	12,945.84

#### Interior



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1194.67	SF Walls
2554.42	SF Walls & Ceiling
151.08	SY Flooring
149.33	LF Ceil. Perimeter

**Recreation Room** 

1359.75 SF Ceiling 1359.75 SF Floor 149.33 LF Floor Perimeter

DESCRIPTION	QUANTITY UN	IT PRICE	TAX	RCV	DEPREC.	ACV
20. Drywall patch / small repair, ready for paint	6.00 EA	67.63	0.00	405.78	(0.00)	405.78
21. Seal the surface area w/PVA primer - one coat	96.00 SF	0.42	0.00	40.32	(0.00)	40.32
22. Paint the ceiling - one coat	1,359.75 SF	0.48	0.00	652.68	(217.56)	435.12
Totals: Recreation Room			0.00	1.098.78	217.56	881.22

Height: 8'



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fax 855-570-4800

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Hallway



-	 	
	1035.33	SF Walls
	1329 48	SF Walls & Co

eiling

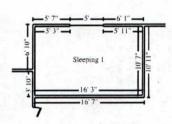
32.68 SY Flooring 129.42 LF Ceil. Perimeter

Height: 8' 294.15 SF Ceiling

294.15 SF Floor

129.42 LF Floor Perimeter

DESCRIPTION	QUANTITY UNIT PRICE	TAX	RCV	DEPREC.	ACV
**No damage, room created for reference.***					
Totals: Hallway		0.00	0.00	0.00	0.00



Sleeping 1

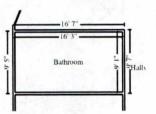
428.13 SF Walls 599.12 SF Walls & Ceiling

19.00 SY Flooring 53.52 LF Ceil. Perimeter Height: 8'

170.99 SF Ceiling 170.99 SF Floor

53.52 LF Floor Perimeter

DESCRIPTION	QUANTITY UN	IT PRICE	TAX	RCV	DEPREC.	ACV
23. Contents - move out then reset - Small room	1.00 EA	34.36	0.00	34.36	(0.00)	34.36
24. Drywall patch / small repair, ready for paint	1.00 EA	67.63	0.00	67.63	(0.00)	67.63
25. Seal the surface area w/PVA primer - one coat	10.00 SF	0.42	0.00	4.20	(0.00)	4.20
26. Paint the ceiling - one coat	170.99 SF	0.48	0.00	82.08	(27.36)	54.72



**Bathroom** 

404.79 SF Walls 552.13 SF Walls & Ceiling 16.37 SY Flooring

50.60 LF Ceil. Perimeter

Height: 8'

147.35 SF Ceiling 147.35 SF Floor

50.60 LF Floor Perimeter

DESCRIPTION	QUANTITY UNIT PRICE	TAX	RCV	DEPREC.	ACV
**No damage, room created for reference.***					
Totals: Bathroom		0.00	0.00	0.00	0.00
CONTACT_CHIEF_LARRY_				8/3/2017	Page:

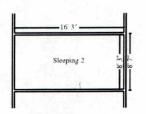


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Sleeping 2



391.33	SF Walls
525.05	SF Walls & Ceiling
1100	CV: El

14.86 SY Flooring

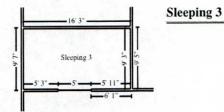
48.92 LF Ceil. Perimeter

Height: 8'

133.72 SF Ceiling 133.72 SF Floor

48.92 LF Floor Perimeter

DESCRIPTION	QUANTITY	UNIT PRICE	TAX	RCV	DEPREC.	ACV
**No damage, room created for reference.***						
Totals: Sleeping 2			0.00	0.00	0.00	0.00



406.67 SF Walls 555.93 SF Walls & Ceiling 16.58 SY Flooring

50.83 LF Ceil. Perimeter

Height: 8'

Height: 8'

149.26 SF Ceiling 149.26 SF Floor

50.83 LF Floor Perimeter

DESCRIPTION	QUANTITY	UNIT PRICE	TAX	RCV	DEPREC.	ACV
**No damage, room created for reference.***						
Totals: Sleeping 3			0.00	0.00	0.00	0.00



Garage 1882.04 SF Walls 5301.21 SF Walls & Ceiling 379.91 SY Flooring 235.25 LF Ceil. Perimeter

3419.18 SF Ceiling 3419.18 SF Floor 235.25 LF Floor Perimeter

DESCRIPTION	QUANTITY	UNIT PRICE	TAX	RCV	DEPREC.	ACV
27. Drywall tape joint/repair - per LF	140.00 LF	6.95	0.00	973.00	(0.00)	973.00
28. Seal the surface area w/PVA primer - one coat	140.00 SF	0.42	0.00	58.80	(0.00)	58.80
29. Paint the ceiling - one coat	3,419.18 SF	0.48	0.00	1,641.21	(1,094.14)	547.07
Totals: Garage		frige .	0.00	2,673.01	1,094.14	1,578.87



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Email: John\_Carnevale@us.crawco.com

**Total: Interior** 

0.00 3,960.06 1,339.06 2,621.00

#### **Debris Removal**

DESCRIPTION	QUANTITY	UNIT PRICE	TAX	RCV	DEPREC.	ACV
30. Haul debris - per pickup truck load - including dump fees  Debris allowance for interior only.	1.00 EA	105.92	0.00	105.92	(0.00)	105.92
Totals: Debris Removal			0.00	105.92	0.00	105.92
Line Item Totals: CONTACT_CHIEF_LARRY_			0.00	29,763.01	14,090.25	15,672.76

# **Grand Total Areas:**

5,742.95	SF Walls	5,674.39	SF Ceiling	11,417.34	SF Walls and Ceiling	
5,674.39	SF Floor	630.49	SY Flooring	717.87	LF Floor Perimeter	
0.00	SF Long Wall	0.00	SF Short Wall	717.87	LF Ceil. Perimeter	
5,674.39	Floor Area	5,854.55	Total Area	5,742.95	Interior Wall Area	
4,151.88	Exterior Wall Area	359.09	Exterior Perimeter of Walls			
6,821.48	Surface Area	68.21	Number of Squares	253.00	Total Perimeter Length	
125.54	Total Ridge Length	0.00	Total Hip Length			



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Email: John\_Carnevale@us.crawco.com

# **Summary for PlaceHolder1**

Line Item Total	29,763.01
Replacement Cost Value Less Depreciation	<b>\$29,763.01</b> (14,090.25)
Actual Cash Value Net Claim	\$15,672.76 \$15,672.76
Total Recoverable Depreciation	14,090.25
Net Claim if Depreciation is Recovered	\$29,763.01

John Carnevale Adjuster



6602 East 75th Street Ste #500 Indianapolis IN 46250 Phone: 800-879-6805 fax 855-570-4800

Email: John\_Carnevale@us.crawco.com

**Recap of Taxes** 

CONTACT\_CHIEF\_LARRY\_

8/3/2017

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6602 East 75th Street Ste #500 Indianapolis IN 46250 Phone: 800-879-6805 fax 855-570-4800

Email: John\_Carnevale@us.crawco.com

# Recap by Room

Estimate: CONTACT\_CHIEF\_LARRY\_

Area: Roof		
Roof1	14,535.71	48.84%
Roof2	11,161.32	37.50%
Area Subtotal: Roof	25,697.03	86.34%
Area: Interior		
Recreation Room	1,098.78	3.69%
Sleeping 1	188.27	0.63%
Garage	2,673.01	8.98%
Area Subtotal: Interior	3,960.06	13.31%
Debris Removal	105.92	0.36%
Subtotal of Areas	29,763.01	100.00%
Total	29,763.01	100.00%

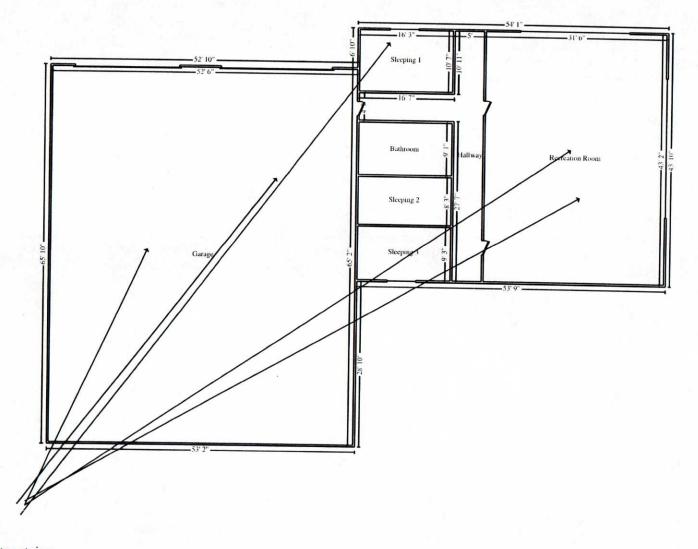


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Email: John\_Carnevale@us.crawco.com

# **Recap by Category with Depreciation**

Items	RCV	Deprec.	ACV
CONTENT MANIPULATION	34.36		34.36
GENERAL DEMOLITION	6,850.08		6,850.08
DRYWALL	1,446.41		1,446.41
PAINTING	2,479.29	1,339.06	1,140.23
ROOFING	18,952.87	12,751.19	6,201.68
Subtotal	29,763.01	14,090.25	15,672.76



Water stains.

Interior

# DeRod

DeRod Home Improvement 6759 Dayton Farmersville Rd. Dayton, Ohio 45417 Phone 937-608-0304 Email DeRodHmIm@aol.com

# **Estimate**

To :Jefferson twp fire dept. Job location : liberty fire house

Day, oh

# Roof work

DeRod home imp will provide and install all material and labor for :

- Removal and disposal of all shingles, roof felt, pipe boots, drip metal and old copula from all roof areas.
- 2. Install new 30 year dimensional shingle with roof felt, drip metals, pipe boots and all flashings necessary to complete new roof.
- 3. Total price includes replacement of any sub roofing wood as needed.

Total for all work 17,500.00



#### **PROPOSAL**

Over 30 Years of Roofing Excellence

50500 WaDayton Dr.

Fairborn, OH 45324

Phone:937-256-4240 • Fax:937-256-3908

www.maximroofing.com

To: JEF

JEFFERSON TOWNSHIP

Date:

September 1, 2017

One Business Park Dr.

Phone:

937-262-3591

Dayton, OH 45417

Job:

FIRE STATION #59

ATTN: STEVEN WOOLF

swoolf@swohio.twcbc.com

Subject to acceptance by October 1, 2017, and to all conditions stipulated in the enclosed "Conditions of Proposal." We are pleased to provide you with this proposal:

#### SCOPE OF WORK: 7828 DAYTON-LIBERTY RD.

- 1. Deliver and secure all materials to the roof.
- 2. Tear off existing layers of shingles (3 layers) down to wood and haul away. Inspect substrate for structural integrity (See Note 4).
- 3. Remove existing cupola and properly dispose of.
- 4. Install ice and watershield membrane at gutter edge to meet Ohio Building Code (2 rows installed at lower level gutter edge). Install ice and watershield at roof to wall transitions.
- 5. Install new synthetic felt.
- 6. Install new aluminum drip and rake edge throughout.
- 7. Install new starter shingles at all gutter and rake edges.
- 8. Install new 240# per square CertainTeed Landmark Lifetime Dimensional Shingles in the standard color of your choice using five nails per shingle. (Includes 40 year Commercial warranty)
- 9. Install new pipe boot flashings and paint pipes to match shingles.
- 10. Install new substrate at box vent openings.
- 11. Cut in and install new cap-over ridge ventilation with proper hip and ridge cap shingles.
- 12. Install new large damper vent.
- 13. Paint existing heat stacks to match shingles.
- 14. At walls: install new step-flashing. Re-use existing counter-flashing.
- 15. Flash all walls, transitions and penetrations according to manufacturer's specifications.
- 16. Clean up daily and run magnet for nails.
- 17. Maintain a safe and clean jobsite at all times.
- 18. Maxim Roofing Company's five year workmanship warranty included.

#### Notes:

- 1. Normal wage rates applied.
- 2. Any work above this scope will be performed at a rate of \$65.00 per man hour, plus materials.
- 3. Taxes are NOT included.
- 4. Any deteriorated substrate will be documented and replaced at a rate of \$1.50 per square foot, only as needed.

TOTAL COST: \$21,265.00

\*\*\*IF ONLY 2 LAYERS OF SHINGLES ARE PRESENT, PLEASE DEDUCT \$1,370.00\*\*\*

TERMS: Thirty percent (30%) upon contract acceptance; balance payable upon completion of job

(A 2% monthly service charge applies to all unpaid accounts over 15 days from invoice date)

Maxim (mak'sim) n. a concisely expressed principle or rule of conduct, or a statement of general truth.

# Our name says it all... TRUTH PRINCIPLE CONDUCT

If you are looking for a top quality roofing company that considers "old-fashioned" values and friendly, personal service among their most important assets, then Maxim Roofing is your answer.

Maxim Roofing Company was established in 1998 to serve both residential and commercial customers. Our vision is to provide top quality roofing services combined with "old-fashioned" values. We are firm believers in this philosophy and continue to move forward as being one of the hardest-working and most trusted contractors in the local roofing industry.

Materials, styles, warranties and procedures change over time, leaving you with many questions. From your first contact with us to the completion of your job, know that our courteous staff of employees are there to provide you with the expertise and professionalism you deserve.

We are well-acquainted with all types of roofing systems and manufacturers, and we install nearly every type of roofing system available.

# Please give us a call today!

937.256.4240

500 W. Dayton Dr. | Fairborn, OH maximroofing@maximroofing.com

Maxim Roofing will handle your job, large or small, residential and commercial, on **YOUR** schedule.

SHINGLE ROOF INSTALLATION
STANDING SEAM
GUTTERS AND DOWNSPOUTS
CHIMNEY CAPS AND FLASHING
ROUTINE MAINTENANCE
GUTTER CLEANING
SKYLIGHTS

SKYLIGHTS
ALL TYPES OF REPAIRS

\*\*COMMERCIAL/ INDUSTRIAL SERVICE\*\*
including
TEAR OFF & REPLACEMENT

PREVENTIVE MAINTENANCE
RESTORATIONS
5-30 YR NDL WARRANTED OPTIONS

WE USE TOP QUALITY MATERIALS FROM MANUFACTURERS SUCH AS

















WE ARE PROUD MEMBERS OF





























RESIDENTIAL SERVICES

Your home is probably your single largest investment, and whether you need a repair, a new roof or gutters, our estimators will talk with you in detail about your concerns and provide you with an honest opinion as to your best options.

Our estimates are free, and we have no gimmicks or coupons—just honest, professional service at a fair price.

#### COMMERCIAL ROOFING

From the roof on your home to buildings the size of shopping centers, we are able to take care of your roof needs. Maxim Roofing is licensed to install Firestone, Garland, Carlisle, and Duro-Last roof systems. We install and maintain modified bitumen, EPDM and standing seam metal roofs. Routine maintenance can be scheduled to monitor and protect your rooftop investment. We offer a wide variety of restoration options for your existing roof with warranties.



# PROPOSAL

# R. Campbell Roofing, Inc.

5897 Soldiers Home Miamisburg Rd. Miamisburg, OH 45342 (937) 866-1371 Fax (937) 384-0358 www.rcampbellroofing.com



PROPOSAL SUBMITTED TO	PHONE	DATE
Jefferson Township, Jefferson Twp	545-8825	08-16-17
STREET	JOB NAME	
7828 Dayton Liberty Rd.	Same	
CITY, STATE and ZIP CODE	JOB LOCATION	
Dayton Ohio 45417		
ARCHITECT DATE OF PLANS		JOB PHONE
T.M.		

We hereby submit specifications and estimates for:

Remove 3layers of shingles and haul away debris.

Replace any rotted wood at the rate of \$1.25 per sq. ft.

Remove piculo from top of roof.

Install ice guard along roofs gutter edge.

Install 15# felt over rest of roof area

Install aluminum eging aroundroofs perimeter.

Install Lifetime Limited deminsional shingles over entire roof.

Install new LO750 roof vents.

Install new pipe flashings around existing vent stacks.

Flash all protrusions to obtain a water tight job.

#### LIFETIME LIMITED SHINGLE WARRANTY

TEN YEAR LABOR WARRANTY

We Propose hereby to furnish material and labor — complete in accordance with above specifications, for the sum of:

Twenty Three Thousand Four Thousand-----00 dollars (\$23.400.00

Payment to be made as follows:

-upon completion-

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tomado and other necessary insurance. Our workers are fully covered by Workman's Compensation Insurance.

Acceptance of Proposal — The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Date of Acceptance:

Authorized Signature Tom Mason 422-6726

Note: This proposal may be withdrawn by us if not accepted within

-30-

\_\_\_ days.

Signature 2014

Signature

Russell Beich

# R. Campbell Roofing, Inc.

5897 Soldiers Home Miamisburg Rd. Miamisburg, OH 45342 (937) 866-1371 Fax (937) 384-0358 www.rcampbellroofing.com

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Acceptance of Proposal — The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Date of Acceptance: \_

Authorized Tom Mason 422-6786

Note: This proposal may be withdrawn by us if not accepted within -30-

days

Signature



#### Bureau of Workers' Compensation

30 W. Spring St. Columbus, OH 43215

# Certificate of Ohio Workers' Compensation

This certifies that the employer listed below participates in the Ohio State Insurance Fund as required by law. Therefore, the employer is entitled to the rights and benefits of the fund for the period specified. This certificate is only valid if premiums and assessments, including installments, are paid by the applicable due date. To verify coverage, visit www.bwc.ohio.gov, or call 1-800-644-6292.

This certificate must be conspicuously posted.

Policy number and employer 01706346

R CAMPBELL CONSTRUCTION LLC 5897 SOLDIERS HOME MIAMISBURG RD MIAMISBURG, OH 45342-1468

www.bwc.ohio.gov Issued by: WC Period Specified Below 07/01/2017 to 07/01/2018

Administrator/CEO

You can reproduce this certificate as needed

#### Ohio Bureau of Workers' Compensation

# Required Posting

Effective Oct. 13, 2004, Section 4123.54 of the Ohio Revised Code requires notice of rebuttable presumption. Rebuttable presumption means an employee may dispute or prove untrue the presumption (or belief) that alcohol or a controlled substance not prescribed by the employee's physician is the proximate cause (main reason) of the work-related injury.

The burden of proof is on the employee to prove the presence of alcohol or a controlled substance was not the proximate cause of the work-related injury. An employee who tests positive or refuses to submit to chemical testing may be disqualified for compensation and benefits under the Workers' Compensation Act.



Bureau of Workers' Compensation

You must post this language with the Certificate of Ohio Workers' Compensation.