



MARATHON COUNTY HUMAN RESOURCES, FINANCE & PROPERTY COMMITTEE MEETING AGENDA

Date & Time of Meeting: **Tuesday, June 22, 2021 4:00 p.m.** Meeting Location: **Marathon County Courthouse, County Board Assembly Room 500 Forest Street, Wausau WI 54403**

Members: John Robinson, Chair; Alyson Leahy, Vice-Chair; Craig McEwen, Kurt Gibbs, Yee Leng Xiong, Jonathan Fisher, Vacant

Marathon County Mission Statement: *Marathon County Government serves people by leading, coordinating, and providing county, regional, and statewide initiatives. It directly, or in cooperation with other public and private partners, provides services and creates opportunities that make Marathon County and the surrounding area a preferred place to live, work, visit, and do business. (Last updated: 12/20/05)*

The meeting site identified above will be open to the public. However, due to the COVID-19 pandemic and associated public health directives, Marathon County encourages Public Safety Committee members and the public to attend this meeting remotely. Instead of attendance in person, Committee members and the public may attend this meeting by **telephone conference**. If Committee members or members of the public cannot attend remotely, Marathon County requests that appropriate safety measures, including adequate social distancing, be utilized by all in-person attendees.

Persons wishing to attend the meeting by phone may call into the **telephone conference beginning five (5) minutes prior to the start time indicated above using the following number:**

Phone#: 1-408-418-9388 Access Code: 146 078 0067 When you enter the phone conference, **PUT YOUR PHONE ON MUTE!**

1. **Call Meeting to Order**
2. **Public Comment Period**
3. **Approval of the Minutes of the May 25 and June 8, 2021 Human Resources, Finance and Property Committee Meeting**
4. **Educational Presentations/Outcome Monitoring Reports**
 - A. American Rescue Plan Update
 - a. Develop a Schedule of Activities for Public Engagement
 - i. Scheduling and meeting dates
 - ii. Logistics
 - B. Broadband Expansion Opportunities
5. **Operational Functions required by Statute, Ordinance, or Resolution:**
 - A. Discussion and Possible Action by Human Resources and Finance and Property Committee
 1. None
 - B. **Discussion and Possible Action by Committee to Forward to the County Board for its consideration**
 1. Intergovernmental Budget Transfers
 2. Committee Approval of the Facilities and Capital Management CIP Requests for inclusion in the 2022 CIP requests
 3. 2022 Rolling Stock Timeline for Purchase of Equipment
 4. Capital Improvement Project Approval Process
 - a) What is the Process for the 2022 CIP Plan?
 - b) How to we move to a 5 year CIP Program?
6. **Policy Issues Discussion and Committee Determination**
7. **Announcements:**

Next Meeting Date- **July 6, 2021 at 3:30 p.m.**
8. **Adjourn**

Any person planning to attend this meeting who needs some type of special accommodation in order to participate should call the County Clerk's Office at 715 261-1500 or e-mail infomarathon@mail.co.marathon.wi.us one business day before the meeting.

| | | |
|-------------|---|-----------------------------------|
| FAXED TO: | <u>Wausau Daily Herald, City Pages, and</u> | <u>J Robinson/s/K Palmer</u> |
| FAXED TO: | <u>Other Media Groups, Record Review</u> | Presiding Officer or Designee |
| FAXED BY: | <u>K. Palmer</u> | NOTICE POSTED AT COURTHOUSE |
| FAXED DATE: | <u>6/18/2021 at 1:00 pm</u> | BY: <u>K. Palmer</u> |
| FAXED TIME: | | DATE: <u>6/18/2021 at 1:00 pm</u> |
| | | TIME: _____ |

Posted to the County Website: <https://www.co.marathon.wi.us/Home/Calendar.aspx>



MARATHON COUNTY HUMAN RESOURCES, FINANCE & PROPERTY COMMITTEE

MEETING MINUTES

Date & Time of Meeting: **Tuesday, May 25, 2021 4:00 p.m.** Via WebEx **Marathon County Courthouse, County Board Assembly Room 500 Forest Street, Wausau WI**

| Members | Present/Web-Phone | Absent |
|-------------------------|-------------------|--------|
| Chair John Robinson | P | |
| Vice Chair Alyson Leahy | W | |
| Craig McEwen | W | |
| Kurt Gibbs | P | |
| Yee Leng Xiong | W | |
| Jonathan Fisher | W | |
| EJ Stark | W | |

Also Present: Kristi Palmer, Molly Adzic, Scott Corbett, Mike Puerner

VIA Web or Phone: Jean Maszk, Dejan Adzic, David Baker, Lance Leonhard, Kim Trueblood, Gerry Klein, Terry Kaiser, Jim Griesbach, Brian Grefe, Connie Beyersdorff, Jessica Blahnik

1. Chair Robinson called the meeting to order at 4:00 pm

2. **Public Comment Period -None**

3. **Approval of the Minutes of the May 11, 2021 Human Resources, Finance and Property Committee Meeting**

MOTION BY GIBBS; SECOND BY LEAHY TO APPROVE THE MAY 11, 2021 HUMAN RESOURCES, FINANCE AND PROPERTY COMMITTEE MEETING MINUTES; MOTION CARRIED

4. **Educational Presentations/Outcome Monitoring Reports**

A. American Rescue Plan-Update

a. Public Engagement Process

Discussion: The ARPA State of Local Coronavirus aid funds have 4 elements 1. Response to Public Health Emergency, 2. Respond to essential workers in regards to pay and work during the emergency, 3. Reduction of revenues at the County and 4. Infrastructure for Water, Sewer and Broadband. There is an interim rule that has specific information in regards eligible program costs. There is a methodology that determines if there is a reduction of revenues below the average estimated revenue increases that are expected on an annual basis. Gibbs-It is critical to see what the revenue loss impact would be. McEwen-Would this be something that should be on the agenda of the Eastern and Western Towns Association? Robinson-Would the committee be open to having one meeting and what would the timing of the meetings look like? Gibbs-I think there are two paths-one with the public (and business community) and another one with the municipalities. I would be supportive the public engagement model. What are we asking them?

Follow up: For the next meeting, develop a schedule of activities for the public engagement. We can work through McDevco and the Chamber of Commerce and possibly United Way. I would like to see us start this work in the June to July time table.

5. **Operational Functions required by Statute, Ordinance, or Resolution:**

A. Discussion and Possible Action by Human Resources and Finance and Property Committee

1. None

B. Discussion and Possible Action by Committee to Forward to the County Board for its consideration

1. Interdepartmental Budget Transfers

a) Finance Department-American Rescue Plan Act Coronavirus-State and Local Recovery Funds Act

b) Medical Examiner-Morgue Space Needs Study

MOTION BY GIBBS; SECOND BY FISHER TO APPROVE THE INTERDEPARTMENTAL TRANSFERS; MOTION CARRIED

2. Review of Marathon County Procurement Code; Discussion Regarding Possible Amendment or Repeal and Creation of New Code

Discussion: From April 27 meeting discussion, Corbett provided an updated version of the procurement code of the County and went through the updated Code. One of the major items that we have updated is the range of activities that this Code covers. Permits purchasing agents to purchase through purchasing consortium. How do we get rid of Marathon County property? There needs to be an activity to dispose of property and we do use surplus auction for this purposes. In the updated version there is written language that states that no employee or family member can bid on purchase surplus property so that we have a transparent transaction when disposing of property. Budget limitations –purchasing agents can enter into purchasing limits or their department budget or the Capital Improvement Project (CIP) budget limits. Small purchase definitions for the Federal government include Micro-purchases are under \$10,000 and small purchase is \$10,000 -\$250,000 for the Federal government. This committee should consider \$80,000 as a small purchase definition would be appropriate

instead of an escalator clause. If other governmental entities purchases good or services for the County under this Code, we want them to comply with our process but provide them some flexibility. Robinson-I think there should be a cap on that amount such as the Federal small purchase limit of \$250,000. Corporation Counsel will amend this portion for the next version of the Code.

Follow up: Robinson-Everyone is comfortable with the \$80,000 small purchase definition/limit? Are you comfortable with the \$250,000 dollar maximum be added to the wording on the other governmental entities purchasing? The Federal small purchase limit was increased in August 2020. Gibbs-I suggest that we use the Federal limit with wording to provide the dollar amount of that limit (currently \$250,000). The committee will look for a semi-final/final version of the Procurement Code at the June 8 meeting. Klein-The vendor consortium can get good prices and we would want to continue to use the consortium pricing or beat it in our purchasing strategy.

3. Approve City County Information Technology Commission Updated Intergovernmental and New Operating Agreement-Klein

Klein-Discussed that the CCTIC has been around for 42 years and highlighted in the language changes and created an operating agreement that is new.

MOTION BY XIONG; SECOND BY FISHER TO APPROVE THE CCITC UPDATED INTERGOVERNMENTAL AND NEW OPERATING AGREEMENT; MOTION CARRIED

6. Policy Issues Discussion and Committee Determination

A. None

7. Announcements:

Next Meeting Date-June 8, 2021 at 3:30 p.m.

8. Adjourn at 5:15 pm

MOTION BY GIBBS; SECOND BY MCEWEN TO ADJOURN THE MAY 25, 2021 HUMAN RESOURCES, FINANCE AND PROPERTY COMMITTEE MEETING AT 5:15 PM; MOTION CARRIED



MARATHON COUNTY HUMAN RESOURCES, FINANCE & PROPERTY COMMITTEE

MEETING AGENDA

Date & Time of Meeting: **Tuesday, June 8, 2021 3:30 p.m.** Meeting Location: **Marathon County Courthouse, County Board Assembly Room 500 Forest Street, Wausau WI 54403**

| Members | Present/Web-Phone | Absent |
|-------------------------|-------------------|--------|
| Chair John Robinson | P | |
| Vice Chair Alyson Leahy | W | |
| Craig McEwen | W | |
| Kurt Gibbs | P at 4:15 | |
| Yee Leng Xiong | W | |
| Jonathan Fisher | W | |
| vacant | | |

Also Present: Kristi Palmer, Molly Adzic, Dejan Adzic, Mike Puerner, Sarah Dowidat, Lance Leonhard, Kim Trueblood, Gerry Klein, Mary Jo Maly, Lance Leonhard

VIA Web or Phone: Jean Maszk, Terry Kaiser, Troy Torgerson, Connie Beyersdorff

- 1. Call Meeting to Order** By Chair Robinson at 3:30
- 2. Public Comment Period** –Al owns property adjoining County property that was taken for 312 Chicago Ave and the County is paying to mow it and the property valued at \$10,400. I have put a bid on it so that the county can put it back on the tax roll.

3. Approval of the Minutes of the April 27, 2021 Human Resources, Finance and Property Committee Meeting
POSTPONE APPROVEAL OF THE MAY 25 MINUTES UNTIL JUNE 22 DUE TO THE DATE BEING NOTICED AS APRIL.

4. Educational Presentations/Outcome Monitoring Reports

A. American Rescue Plan Update

- a. Develop a Schedule of Activities for Public Engagement

Tentative schedule of activities has been provided to the committee with public engagement sessions in July.

Discussion: Discussion on the tentative Public engagement schedule. The committee would like to have participation in some of the meetings. Public Access may be able to provide meeting access at the various events.

Follow up: For the next meeting, finalize the schedule and survey the committee for availability. Public access can record these meetings if there is internet access at the meeting sites.

Discussion: The ARPA State of Local Coronavirus aid funds is allowed to use the ARPA funds for Broadband. There is a current broadband grant application timeline that will need to be applied for the grants by the end of July. We are looking at the plan that Kewaunee County has developed and may model a Broadband plan after the plan they have created. There are several Broadband providers that are looking to partner with Marathon County to develop a Broadband plan here in Marathon County.

Follow up: Continue to pursue Broadband strategies and look to work with providers.

5. Operational Functions required by Statute, Ordinance, or Resolution:

A. Discussion and Possible Action by Human Resources and Finance and Property Committee

1. Tax Deed Bid Opening/Approval

- a) Sale 2021-5 1427 Lake Street Wausau WI (\$5,000 appraised value)

MOTION BY LEAHY; SECOND BY MCEWEN TO APPROVE THE BID FOR \$1,000; MOTION CARRIED

- b) Sale 2019-4 312 Chicago Ave Wausau, WI (\$10,400 set value) back taxes of \$15,427 from February 2019

MOTION BY FISHER; SECOND BY LEAHY TO APPROVE THE BID FOR \$4,000; MOTION CARRIED

A bid came in today for Parcel 2021-8 with a value of 1504 Brady Street Wausau, WI of \$174,000.

There is a bid for \$120,000

MOTION BY MCEWEN; SECOND BY LEAHY TO APPROVE THE BID FOR \$120,000; MOTION CARRIED

2. Approval of May Claims and Questioned Costs

MOTION BY MCEWEN; SECOND BY FISHER TO APPROVE THE MAY CLAIMS; MOTION CARRIED

B. Discussion and Possible Action by Committee to Forward to the County Board for its consideration

1. Intergovernmental Budget Transfers

MOTION BY MCEWEN; SECOND BY FISHER TO APPROVE THE INTERGOVERNMENTAL BUDGET TRANSFERS; MOTION CARRIED

2. Resolution Amendment or Repeal and Creation of New Code of Marathon County Procurement Code

Discussion: The key language changes discussed by the committee in May are provided in the proposed document. There are still changes that can be made in regards to layout and content

Follow up: County administration and Corporation Counsel will continue to fine tune that Code and bring it back to the Committee once those changes are made.

3. 2022 Rolling Stock Timeline for Purchase of Equipment

Discussion: The Highway Department have been notified that in order to purchase rolling stock for 2022, the vendors are requesting that the purchases be made this year with delivery in 2022. This is a supply chain issue not a procurement issue. Is the supply chain issue a short term or long term issue? The intern approach is to amend the 2021 CIP to allow for the encumbrance of the funds and approval for the purchase in 2021. Gibbs-We should know what departments need to purchase rolling stock and whether or not payment must be made in advance. We should find out if it is just rolling stock or would we need to include such items as IT hardware. Do we pursue the Amendment of the 2021 CIP for allowance of the encumbrance of funds and approval of the purchases of rolling stock and IT hardware (that would be purchased in 2022)?

Follow up: Provide clarification of what rolling stock needs for 2022 and if each department purchase need to be order and paid for in 2021 or 2022 and bring back a plan for the June meeting.

4. Capital Improvement Project Approval Process-Role of Capital Improvement Committee

Discussion: Leahy discussed the CIP workgroup progress. As the workgroup continue its work that we suspend Rule 2.05 which defines the role of the CIP committee for the 2022 CIP process and come back with a complete CIP policy with a permanent solution in the future. Think about suspending the rules relative the CIP committee and that the Board Rules Committee look at making a permanent determination in the future for the CIP Committee Recommend to 2.05 be suspended for the remainder of 2021

MOTION BY LEAHY AND SECONDED BY FISHER TO SUSPEND RULE 2.05 FOR THE REMAINDER OF 2021 AND HAVE RULES REVIEW LOOK AT THIS SECTION OF THE RULES

Follow up:

C. **Motion by GIBBS AND SECONDED BY LEAHY TO GO INTO Closed Session (Roll Call Vote Suggested), pursuant to s. 19.85(1)(g), Wis. Stats., for the Purpose of conferring with legal counsel for the governmental body who is rendering oral or written advice concerning strategy to be adopted by the body with respect to litigation in which it is or is likely to become involved**

| Members | Present/Web-Phone | Absent |
|-------------------------|-------------------|--------|
| Chair John Robinson | Y | |
| Vice Chair Alyson Leahy | Y | |
| Craig McEwen | Y | |
| Kurt Gibbs | Y | |
| Yee Leng Xiong | Y | |
| Jonathan Fisher | Y | |
| vacant | | |

D. **Motion to Return to Open Session** (No Roll Call Vote Required)

1. Announcements and/or possible action on matters discussed in closed session. No further action taken in closed session

6. **Policy Issues Discussion and Committee Determination-None**

7. **Announcements:**

Next Meeting Date- **June 22, 2021 at 4:00 p.m.**

8. **Adjourn**

MOTION BY GIBBS; SECOND BY FISHER TO ADJOURN THE JUNE 8, 2021 HUMAN RESOURCES, FINANCE AND PROPERTY COMMITTEE MEETING AT 5:20 PM; MOTION CARRIED

ARPA Public Engagement Strategy

Purpose: Engage the public in a discussion of community priorities in the allocation of some or all of the funds Marathon County has received through the American Rescue Plan Act. Identify options for the use of the one-time funds. Identify opportunities to collaborate with other local units of government.

Public Listening Session on Use of American Rescue Plan Funding allocated to Marathon County.

Potential engagement dates:

- July 20** **Informational Meeting Wausau**
- July 26** **Informational Meeting Hatley**
- July 29** **Towns Association Joint Meeting Rib River Ballroom**
- August 3** **Informational Meeting Edgar**
- August 6** **Deadline for submitting written/email comments.**

Proposed agenda for meetings:

- Overview of the American Rescue Plan Act
- Eligible Activities
- Timelines
- Public Comments

Potential questions:

- Where have you seen the biggest economic impact because of the pandemic?
- What does economic recovery look like to you?
- What should we consider as we evaluate and consider programs to use these funds?
- In light of the eligibility criteria how do you think the county should invest the funds?
- How would the proposed investment impact the community?

MARATHON COUNTY

Budget Transfer Authorization Request Form

This form must be completed electronically and emailed to **Season Welle, Kristi Palmer**, and to your Department Head. This email will confirm that your Department Head acknowledges and approves this transfer. Forms that are incomplete, incorrect, out-of-balance, or that have not been sent to your Department Head will be returned. The Finance Department will forward completed forms to the Marathon County Human Resources, Finance & Property Committee.

DEPARTMENT: Facilities & Capital Management

BUDGET YEAR: 2021

TRANSER FROM:

| Action | Account Number | Account Description | Amount |
|----------------------|----------------|---|-----------|
| Expenditure Decrease | 621 92198364 | 21SH-01C Juvenile Facility Roof Replacement | \$150,000 |

TRANSER TO:

| Action | Account Number | Account Description | Amount |
|----------------------|----------------|-------------------------------|-----------|
| Expenditure Increase | 621 92198465 | Jail Gym Skylight Replacement | \$150,000 |

I, the undersigned, respectfully request that the Human Resources, Finance & Property Committee approve the following change in budget / transfer of funds as discussed in the attached supplemental information.

Requested By: Terry Kaiser (prepared by Season Welle per email)

Date Completed: 6/8/2021

COMPLETED BY FINANCE DEPARTMENT:

Approved by Human Resources, Finance & Property Committee: _____

Date Transferred: _____

MARATHON COUNTY

Budget Transfer Authorization Request – Supplemental Information

Attach this supplemental information to the original Budget Transfer Authorization Request Form. All questions must be completed by the requesting department or the Budget Transfer Authorization Request Form will be returned.

- 1) What is the name of this Program/Grant? (DO NOT use abbreviations or acronyms)
CIP
- 2) Provide a brief (2-3 sentence) description of what this program does.
See attached email
- 3) This program is: (Check one)
 - An Existing Program.
 - A New Program.
- 4) What is the reason for this budget transfer?
 - Carry-over of Fund Balance.
 - Increase/Decrease in Grant Funding for Existing Program.
 - Increase/Decrease in Non-Grant Funding (such as tax levy, donations, or fees) for Existing Program.
 - Set up Initial Budget for New Grant Program.
 - Set up Initial Budget for New Non-Grant Program
 - Other. Please explain: Transfer funds from one CIP project to another
- 5) If this Program is a Grant, is there a "Local Match" Requirement?
 - This Program is not a Grant.
 - This Program is a Grant, but there is no Local Match requirement.
 - This Program is a Grant, and there is a Local Match requirement of: (Check one)
 - Cash (such as tax levy, user fees, donations, etc.)
 - Non-cash/In-Kind Services: (Describe) [Click here to enter description](#)
- 6) Does this Transfer Request increase any General Ledger 8000 Account Codes? (Capital Outlay Accounts)
 - No.
 - Yes, the Amount is Less than \$30,000.
 - Yes, the Amount is \$30,000 or more AND: (Check one)
 - The capital request HAS been approved by the CIP Committee.
 - The capital request HAS NOT been approved by the CIP Committee.

COMPLETED BY FINANCE DEPARTMENT:

Is 10% of this program appropriation unit or fund? No Is a Budget Transfer Resolution Required? No



Capital Improvement Plan (CIP) Project Request Form

| | | | |
|---|---|--------------|------------------------------------|
| Date of Request | 6-2-21 | | |
| Department | Facilities and Capital Management | | |
| Contact Person | Craig Christians | | |
| Phone | 715-261-6987 | Email | craig.christians@co.marathon.wi.us |
| Project Title | Courthouse Exterior Envelope Repairs Connector Link and South | | |
| Location | 500 Forest Street | | |
| Is the project new, a repair/replacement or a continuation of an existing project? | New <input type="checkbox"/> Repair/Repl <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> (see below) | | |

If continuation, fill in below:

Planning % complete Design/engineering % complete Construction/installation % complete

| | | |
|---|------------------------------|--|
| Has this request been approved by the appropriate Standing Committee or Board? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
|---|------------------------------|--|

| | | | | | | | | | | | | |
|--|--------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------|
| Departmental Priority <small>(check a different priority for each project)</small> | (High) | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | (Low) |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

| | |
|------------------------------------|--|
| Description Summary / Scope | <p>This project scope is to address the exterior envelope deficiencies. Items to be addressed are caulking, masonry cleaning, tuck-pointing, masonry sealing, painting and window sealing. (see the attached report from Quast Consulting)</p> |
|------------------------------------|--|

Relation to Other Projects (if applicable):

Alternatives Considered:

1. Do Nothing
- 2.
- 3.

Reasons Alternatives Rejected:

- 1.
- 2.
- 3.



Capital Project Request Form

PROJECT PURPOSE(S) - Check all that apply and please explain below:

- This project is required to meet legal, mandated or contractual obligations?
- This project will result in the protection of life and/or property and maintain/improve public health and safety?
- This project will result in reductions in expenditures (save money)?
- This project will result in a positive return for Marathon County?
- This project repairs/replaces an important existing physically deteriorated or functionally obsolete county facility, system, service or equipment?
- This project provides a new service, facility, system or equipment?
- This project would generate sufficient revenues to be essentially self-supporting in its operations?
- This project would make existing facilities or personnel more efficient or increase their use with minimal or no operating cost increase?
- This project will benefit and/or be utilized by other Marathon County departments?
- This project is consistent with an overall County plan, policy, or goal; and is necessary to complete a project that has begun or under construction?

Please explain all checked boxes below:

This project will seal up the exterior envelope of the building protecting the building from mold, mildew, deterioration, and rot. The existing caulking is leaking and the exterior façade sealant is gone so water is penetrating causing cracking and deterioration. Water mixed with salt is leaking through the parking lot joints causing the concrete structure to deteriorate. With further deterioration expensive repairs will be needed in the future.



Capital Project Request Form

PROJECT COST

| Estimated Cost Components | | Cost Allocation Per Fiscal Year | | |
|---|---------------------|--|---|-----------------------------|
| Preliminary Design / Study | \$0.00 | If project funds can be allocated over more than 1 year, please indicate the amount to be allocated for each year below: | | |
| Final Design and Engineering | \$46,000.00 | | | |
| Land Acquisition | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Construction / Installation | \$525,532.00 | Fiscal Year | Amount | \$0.00 |
| Equipment/Furnishings | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Other: Contingency | \$85,729.00 | Fiscal Year | Amount | \$0.00 |
| Miscellaneous Costs | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Project Budget (total of estimated cost components) | \$657,261.00 | ←----- (sum of above should equal) -----! | | |
| Is this project to be funded entirely with CIP funds? | | | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Total CIP Funding Requested | | \$657,261.00 | | |

| If not funded entirely with CIP funds, list below any other (non-CIP) funding sources for this project | Funding Amount |
|--|----------------|
| • | \$ |
| • | \$ |
| • | \$ |

ASSET LIFE, RECURRING COSTS AND RETURN ON INVESTMENT

| | |
|--|---------------|
| If an existing asset (facility or equipment) is being renovated or replaced, what is the age of the existing asset in years? | 30 |
| Expected service life (in years) of the existing asset, based on applicable industry standards? | 20 |
| Estimated Service Life of Improvement (in years) | 20 |
| Existing Estimated Costs | |
| Annual Operating Costs | \$0.00 |
| Repair / Maintenance Costs | \$0.00 |
| Other Non-Capital Costs | \$0.00 |
| Existing Operating Costs | \$0.00 |
| Future Estimated Costs | |
| Annual Operating Costs | \$0.00 |
| Annual Maintenance Costs | \$0.00 |
| Other Non-Capital Costs | \$0.00 |
| Future Operating Costs | \$0.00 |
| Estimated Return on Investment (in years) | \$ |



Capital Project Request Form

Explain any other annual benefits to implementing this project:

5 YEAR FORECASTED PROJECTS (if you want a project considered please put on this list)

| Program Year | Project | Description of Project | Estimated Cost |
|--------------|---------|------------------------|----------------|
| 20 | | | |
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1055 Indianhead Drive
P.O. Box 241
Mosinee, WI 54455
Phone: 715-693-TEST (8378)
Fax: 715-693-0689
www.qct-usa.com



Memorandum

Date: May 20, 2021
To: Craig Christians-Marathon County, Terry Kaiser-Marathon County
From: Jon Denton-Quast Consulting and Testing
Re: Marathon County Courthouse QCT-6273
Exterior Envelope Review

The purpose of this memo is to highlight items as reviewed at the Marathon County Courthouse as well as the entrance/link area from the north side of the courthouse to the jail. Quast Consulting and Testing, Inc. (QCT) has been asked to complete an exterior envelope review and identify maintenance items that need to be/should be addressed for the courthouse and the link.

This memo outlines those items as well as works as an indexed to pursue budget pricing for the work. The intent would be to break out the budget pricing listing as identified below so that costs associated with each step could be reviewed and as needed prioritized for the repairs.

The main courthouse itself was constructed in 1953. The original structure consisted of a limestone veneer for the main structure, with all joints bedded with mortar. The mechanical area on the rooftop consists of brick veneer two or three wythes's thick. There is no true air and water barrier on the structure and would be considered a surface sealed system. *My reviews did not include the roof assembly but I do have forthcoming photos of areas that need attention.*

Windows were replaced in 2004. The courthouse originally had punched opening windows but it appears that portions of the limestone were removed and the new windows consist of horizontal strip windows with the glass structurally glazed to the vertical mullions. The window system installed in the courthouse is an exterior glazed system because the areas associated with perpendicular walls or columns. These locations have a non-vision spandrel glass that had to be glazed/installed from the exterior.

The entrance areas or as I refer to as the link from the courthouse to the jail, was constructed in 1986/87. The exterior veneer here also includes a limestone product and horizontal strip windows, which also has the glass structurally glazed to the vertical mullions. Note that the window systems in the link and in the courthouse are two different manufacturer products.

Unfortunately, the 1986/87 construction also lacks a true air and water barrier within the wall assembly and that too is a surface sealed system.

I am providing this list of needed repairs prior to my formal report due to timing and the necessity to get budget pricing for next year's budget allocation. I still would plan on providing a formal report which includes photos and documentation of the areas needing maintenance repairs (which I'm sure will be requested for by the county board). All exterior seals are to be a nonbleeding commercial grade silicone product by manufacturers such as Tremco and/or Dow. *Properly installed silicone seals will last in the excess of 20 years.*

East Entrance Stairs at Link:

1. The east entrance stairs which consist of granite pavers does not include any waterproofing below the pavers and is experiencing water infiltration in occupied space below. Water appears to be coming through near or at penetrations for the handrail. The water getting into the system is most likely through failed existing caulk joints and running down to the handrail posts. All existing caulk joints in the granite to granite, and granite to adjacent walls at the landing and steps must be removed and replaced. The sealant around the handrails themselves should also be removed and replaced. Sealants must be a minimum one quarter-inch thick and have a minimum one quarter-inch bonding/adhesion to the surface and proper backer rod material. *My recommendation is to use a medium modulus silicone product at the sealant joints due to the longevity in the life expectancy of silicones.*

Drive Through Parking:

2. The drive through parking structure on the northeast corner of the jail is experiencing water infiltration to the below grade parking. This area does not include a waterproofing material within the structure. Once again, the topping or concrete surface is acting as a surface sealed system. There are failed caulk joints on three sides, south/west/north that need to be completely removed/cleaned and replaced. I would price out the use of Tremco Spectrem 800 for the sealant application at these joints. This is a commercial grade silicone product used on highways. If the joints get too large they could be backed with an expansion joint material specifically designed for larger control joints (EMSEAL). Install it so that it is located approximately 1 inch below the surface and then covered with the Spectrem 800.

Roof Mechanical Area on Courthouse:

3. Grind out and tuck point three-quarter inch deep mortar joints as needed. Estimate 20 to 25% of the mortar joints.

Grind out and caulk the precast to limestone mortar joints at the coping caps exposed at the upper mechanical area. Include the continuous horizontal joint between the limestone and the brick veneer below.

Grind out and caulk hairline cracks through the brick veneer and/or limestone caps. Joints must be ground out to 3/16 x 3/16" minimum. *For the age of the structure there really isn't that many cracks.*

Clean and apply water repellent to the brick veneer, Chem-Trete 400.

4. Cut out and replace all sealants at louvers and hollow metal doors. (There's one new louver that has never been caulked on the exterior)

Option to cover or remove the non-active louvers. Not an urgent item, but they could be covered with a composite caulked panel system.

Remove the not needed or uses steel components on the south wall, caulk holes.

Courthouse Vertical Wall Repairs:

5. Cut out and replace all caulk joints and grind existing mortar joints 3/8 of an inch deep, clean and replace all limestone to limestone joints with a non-bleed silicone sealant. *Right now, it appears that most of the top two floors have already been caulked, it's not known how deep the original mortar joints were ground out for the sealant. The sealant is a urethane product and has met its life expectancy. An option would be to get a price for replacing existing seals now and grinding out and caulking all mortar joints at a later date. (This could be a large ticket item)*

There are three horizontal feature bands that appear to be an EIFS product painted maroon or off red. The sealant at this material is to be removed and replaced with a silicone sealant. While the exterior sealant is removed at this band, and where accessible, replace or install silicone sealant between the limestone to limestone joint directly behind the EIFS. Caulk or recaulked both the top and bottom of this horizontal band. (At the upper band, I confirmed that there is no sealant on the underside of the EIFS strip, but it is to be caulked.)

Lightly clean existing paint and repaint with a silicone sealant. Color to be determined.

Clean (power wash) the exterior limestone surface to the best of your ability and apply Chem-Trete 40 D repellent. *Care must be taken to not damage the limestone surface during cleaning.*

6. Cut out and replace all exterior perimeter seals at the horizontal strip windows. At the lower level windows there are two seals at the head, one above the drip edge and one below the drip edge to the window frame. At the sill there is one seal that has to be cut out and replaced between the window and the sill flashing and an additional seal installed at the underside of the drip flashing at the sill.

On three sides of the building (west, south and east) at the first and second floors, there is an additional extruded tube at the window head. This tube has an additional seal to the top of the tube, one from the tube to the drip edge and then one at the underside of the drip edge. The sill has one seal that needs to be cut out/replaced from the frame to the sill flashing and an additional seal required at the underside of the drip edge.

Splice joints in the sill flashing, drip edge and joints in the tube at the head of the window must receive a precured silicone boot set in sealant. *The butt joint between the vertical glass to glass conditions is a silicone product and is in good shape and does not need to be replaced.*

The head and sill of the window frames are extrusions approximately 15 to 20 feet long and have failed splice joints at the metal to metal conditions. At these locations the exterior glazing beads should be removed, the splice joints cleaned, and properly resealed using a silicone sealant. *We might be able to just remove the exterior seal, clean the area at the splice joint and re-pump it with silicone sealant. At the one condition I cut out there were end dams in the extrusions to control water in the system but no full depth seal at the failed splice joint.*

7. The foundation wall or the poured wall below the lower level windows has a significant number of hairline cracks in the vertical wall, these cracks should be ground out to 3/16 x 3/16 of an inch and sealed.

8. There are covered entrances on the east and west elevations with the canopies above these entrances consisting of a copper bathtub roofing with a drain. Based on my observations and water residue below the canopy, there is significant water migration through the roofing on the west entrance. There appears to be less moisture movement through the copper roof on the east. Option would be to replace the copper with an EPDM roofing material.

Main Entrance/Link Vertical Wall Repairs:

9. Cut out and replace all existing limestone to limestone caulk joints.

Clean the exterior limestone surface and apply Chem-Trete 40 D.

10. There are two horizontal bands of the EIFS that are to have the sealant removed and replaced and repainting of the EIFS surface with the silicone paint.

11. The windows in the link do not include the drip at the head of the window or sill flashing so there are only two continuous perimeter seals, one at the head one at the sill. These are to be cut out and replaced with the silicone sealant.

Once again splice joints in the sill and head have sealant failures and need to be replaced. This window system isn't exactly the same as the one on courthouse and it is unknown as to how the splicing interface takes place. My suggestion is to look at replacing the exterior of the splice joints in the system with a precured silicone boot.

In order to minimize the amount of water that gets into the framing of the system I would cut the lip of the glazing gasket at the head and sill of the window frame, and apply a continuous cap bead from the aluminum to the surface of the glass. *This has already been done at the first floor windows on the east side.*

12. There are two roof skylights on the link, although some of the sealants are in fairly good shape others are in bad shape and have had urethane sealant applied over the silicone sealant. Unfortunately, urethanes do not adhere to cured silicone. I would cut out and replace all cap bead seals, seals at the perimeter, pressure plates and fastener seals on both skylights.

13. At the south side of the west entrance, there is an area well with an EIFS veneer over the poured wall. This material has been damaged throughout the years and requires spot repairs and to be repainted. I'm not critical of the use of a silicone paint here but the silicone paint product would last twice as long as a regular latex paint. *I want the silicone paint at the feature strips on the vertical wall.*

I'm open to your thoughts and as to how far we can afford to go at this time through the exterior repairs to these areas.

jd

Hi-Lo Service Company Inc.

PO Box 472
Wausau WI 54402

Estimate

| | |
|----------|------------|
| Date | Estimate # |
| 6/9/2021 | 727 |

Name / Address

Marathon County Facilities & Capital Man.
1000 Lakeview Drive, Ste 300
Wausau, WI 54403
ATT. Craig Christians

Project

| Description | Total |
|--|--------------|
| ESTIMATE FOR MARATHON COUNTY COURTHOUSE EXTERIOR RESTORATION | |
| This is a list of work estimated to be done on the exterior of the building: Clean the masonry. Replace all mortar joints with silicone caulking. Replace the window caulk. Caulk and paint the red bands. Repair the cracks in the foundation. Tape the seams on the loose window metal. Waterproofing all masonry. All materials and lift equipment are included in the price. | |
| The 'bridge' between the courthouse and the jail, the east and west sides. Price - \$117,972.00 | |
| The northside two short walls of the courthouse. Price - \$72,070.00 | |
| The east and west ends of the courthouse Price - 116,250.00 | |
| The south end of the building. Price - \$126,670.00 | |
| The mechanical room on the roof. This price includes replacing 30% of the mortar joints, caulking and waterproofing. Price - \$22,700.00 | |
| Electronic signature - Randy Booth | Total |

Phone #

7155745687

E-mail

hiloserviceco@gmail.com

Web Site

hiloservice-wi.com

Hi-Lo Service Company Inc.

PO Box 472
Wausau WI 54402

Estimate

| | |
|----------|------------|
| Date | Estimate # |
| 6/9/2021 | 727 |

| |
|--|
| Name / Address |
| Marathon County Facilities & Capital Man. 1000 Lakeview Drive, Ste 300 Wausau, WI 54403 ATT. Craig Christians |

| |
|---------|
| Project |
| |

| Description | Total |
|--|--|
| Re-caulking the two roof skylights. Price - \$9100.00 | |
| Caulking the east steps and surrounding granite. Price - \$10,830.00 | |
| Caulking 280 lineal feet of floor joint in the parking garage. Price - \$2940.00 | |
| TOTAL <u>\$478,532.00</u> | |
| Cut out and reseal window head and sill splice joints at courthouse strip windows Price- \$23,000 jd | |
| Repair and paint EIFS just south of the West entrance at link entry Price- \$4000 jd | |
| Overlay rubber roof at bathtubs above east and west entries of courthouse Price- Craig Christians? <i>-\$20,000.00</i> | |
| <i>ARCHITECTURAL BID PACKAGE \$16,000.00</i> | |
| <i>OVERSIC CONSTRUCTION \$30,000.00</i> | |
| Electronic signature - Randy Booth | Total <i>\$571,532.00</i> \$478,532.00 |

| |
|------------|
| Phone # |
| 7155745687 |

| | |
|-------------------------|--------------------|
| E-mail | Web Site |
| hiloserviceco@gmail.com | hiloservice-wi.com |

15% CONTINGENCY \$85,729.00

GRAND TOTAL \$657,261.00



Photo #71: The lighter color mortar is replacement mortar and the bonding of it to the adjacent substrate isn't that good.



Photo #72: North wall of the west entrance needs all joints attended to.



Photo #69: Grind out and replace mortar with silicone sealant.



Photo #70: This is the west elevation, north end where the office is that leaked below. There is no flashing protruding from the window head and the joints in this area are still mortared with cracks.



Photo #61: I would recommend a procured silicone boot bedded in sealant at the coping splice joints, not just sealant.



Photo #62: Coping is not typically caulked at the splice joints, only at that southeast corner.



Photo #63: Vertical joint at the upper floor is caulked, needs to be replaced.



Photo #64: The spatula is slid into the deteriorated caulk joint about 3". Failed joints could be the cause of leakage at the window heads.

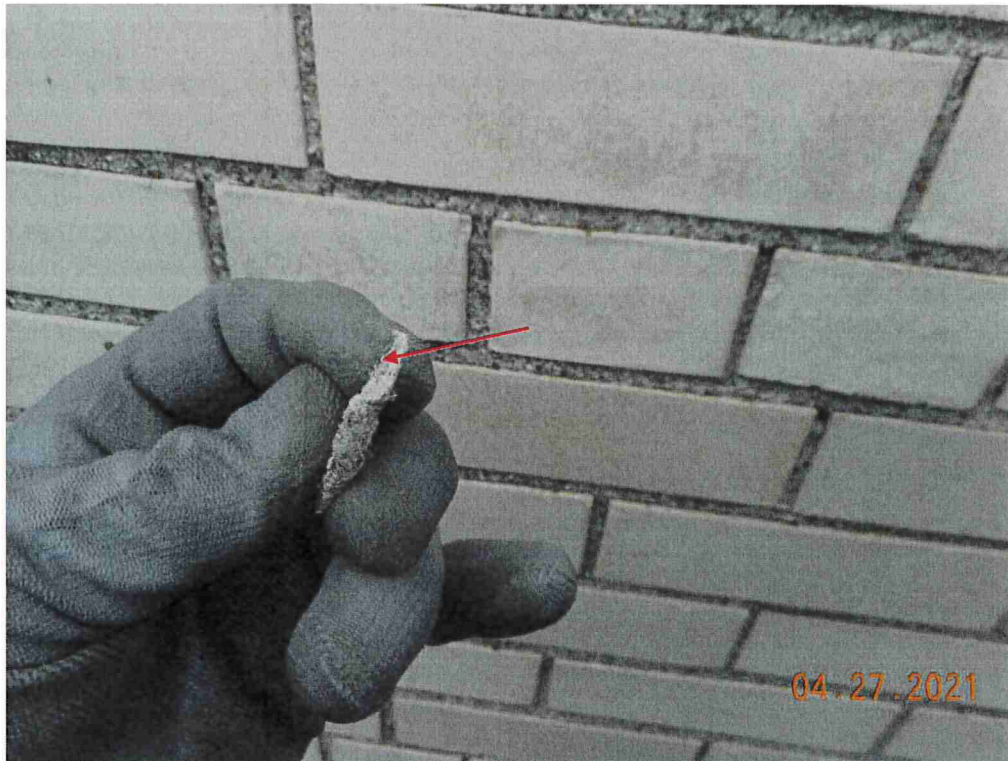


Photo #39: The mortar wasn't deep enough to retain the bond that it needed.



Photo #40: Northeast corner, new louver location. This wall it's self has taken a beating and needs some attention.

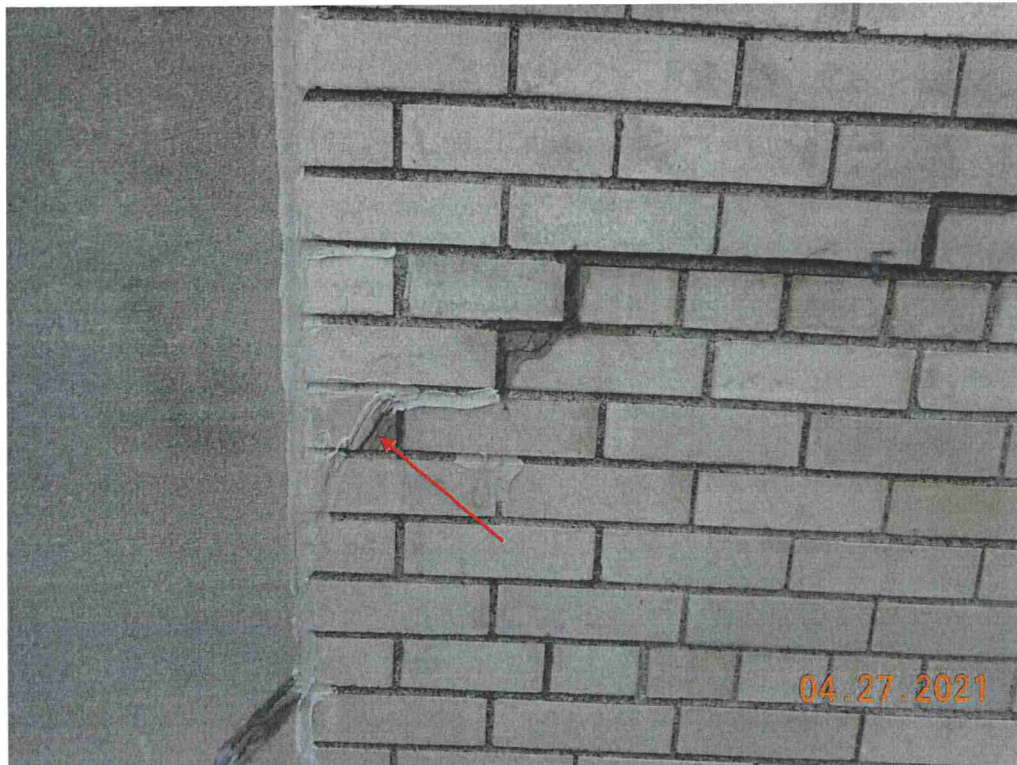


Photo #37: Cracks through the brick need to be ground out to 3/16" x 3/16" minimum and then caulked.



Photo #38: The old tuck point mortar is loose in some areas, but not wide spread.



Photo #41: Grind out and caulk that joint above the new brick, directly above the louver. Seal the exterior of the louver frame to the brick.



Photo #42: If this louver is not active cover it with composite panel.



Photo #43: Replace the seals at the hollow metal door frames.

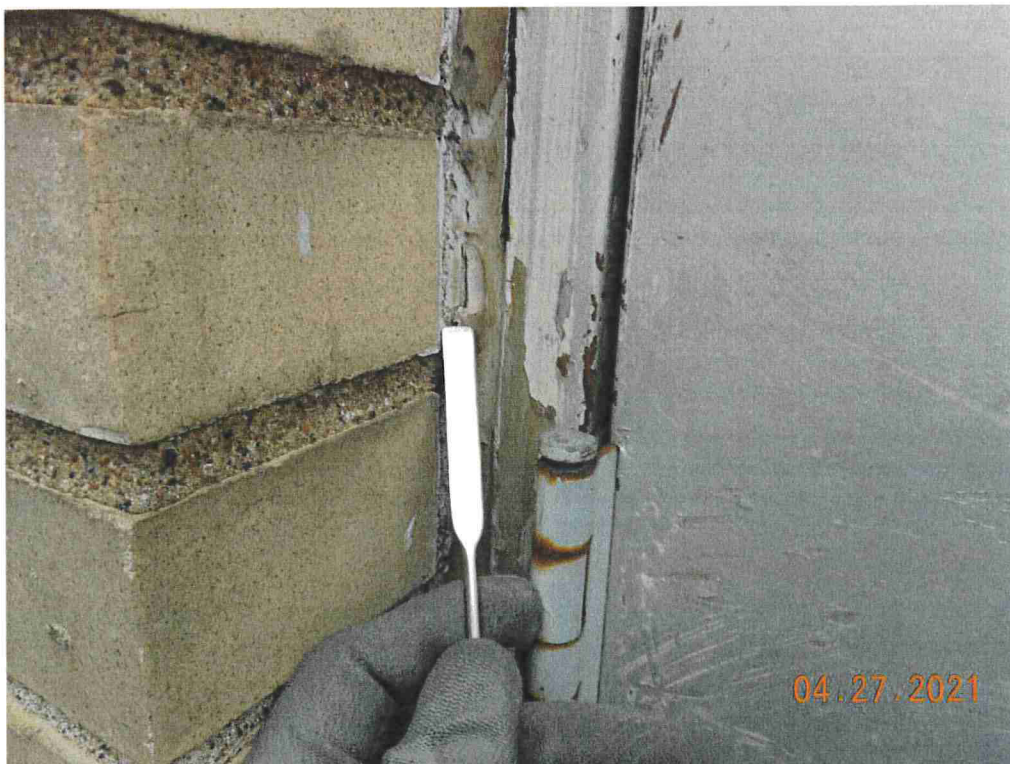


Photo #44: Seal from the side of the brick to the door frame.



Capital Project Request Form

| | | | |
|-----------------------|--|----------------------------|--|
| Project | | CIP Funds Requested | |
| Project Number | <i>(Do NOT fill in – for use by F&CM Department)</i> | | Request for Year 2021 |

General Instructions for completing this form:

- Enter requested information after placing the cursor (point and click) in the corresponding gray-shaded blank.
- For all but the most obvious items, more detailed instructions are available by typing the F1 key while the cursor placed on the corresponding blank.
- Each box will expand as necessary to include your text. Limits on text length are noted in the F1 instructions.
- Use the tab key to advance the cursor to the next blank; use shift/tab to move the cursor to the previous blank.
- *If this Charter form is not completed in its entirety, your request may not be ranked.*

| | | | |
|---|--|---|----------------------------------|
| 1. REQUEST INFORMATION | | | |
| Project Title | HVAC Replacement Jail Admin and Kitchen | | |
| Location | 500 Forest Street, Wausau WI Jail Admin / Kitchen | | |
| Description | Construction including demolition and controls for NEW HVAC and controls, replacement at jail kitchen and admin. | | |
| Date of Request | 5/12/21 | Project Type | Repair/Replacement |
| Submitted By | Troy Torgerson | Phone | 715-261-6980 |
| Department | Facilities and Capital Management | Email | Troy.torgerson@co.marathon.wi.us |
| Has this request been approved by the appropriate standing committee or board. | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> | <i>Minutes of the meeting in which the funding request was approved must be submitted to F&CM Dept. prior to July 1st.</i> | |
| Has funding for this project been requested previously but not ranked high enough to be funded? | Y <input type="checkbox"/> N <input checked="" type="checkbox"/> | If so, how many times has the request been submitted previously? | |
| Is this request a continuation of a previously funded CIP project? | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> | If so, in which year was that project funded? | 2020 Design |
| Will this project be closed out within three years of the fiscal year in which it was funded? If not, please explain why below. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | | |
| Is this project necessary due to a federal, state, or local legal mandate? If yes, please identify the specific mandate below. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | | |
| DSPS SPS 364 HVAC | | | |
| Will this project comply with recommendations or objectives addressed in an adopted plan (e.g. strategic plan), referendum, or study? If yes, please identify the specific plan, referendum, or study below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | | |



Capital Project Request Form

| 2. PROJECT DEFINITION AND SCOPE | | | |
|--|---|---|---------|
| Project Objective(s) | Replace existing NON functioning HVAC air handling unit for the jail admin and kitchen | | |
| Alignment to Departmental Mission Statement | The department performs maintenance and custodial duties to maintain County facilities, equipment, machinery, and furnishings in good repair and in clean orderly, and safe condition for Marathon County employees and patrons. The department will preserve and extend the useful life of existing facilities, maintaining the appearance of buildings and grounds, assist in the efficient usage of space, provide emergency repairs and preventive maintenance of equipment and structures. | | |
| Departmental Priority (check a different priority for each project) | (High) | 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input checked="" type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> | (Low) |
| Related Other Projects | | | |
| Alternatives Considered | 1. Do nothing and not be in compliance with DSPS Chapter SPS 364 HVAC. 2. 3. | | |
| Why Alternatives Listed Above Were Rejected | 1. No air exchange in the kitchen currently. 2. Existing air handling unit is not working. 3. Safety. Slip Fall hazard because of humidity on floor. | | |
| Target Start Date | 01/01/21 | Anticipated Completion Date | 10/1/21 |
| Project Scope Statement <i>List the major components of the project's scope of work below. Refer to documentation such as RFP's, proposals, functional specifications, etc. to set and limit the project scope.</i> | | | |
| <p>"In Scope" = everything the project will include to meet the requirements of the project objectives.</p> <p>"Not in Scope" = any responsibilities, activities, deliverables, or other areas that are NOT to be funded as part of this project, even though they may have some relation to it.</p> | <p>In Scope:</p> <ul style="list-style-type: none"> All general construction and mechanical construction needed for replacement Demo and dispose existing equipment. Install new HVAC unit Replace outdated Pnuematic controls with digital controls Building Automation System and monitoring capability Remove existing unused duct work | <p>Not in Scope:</p> <ul style="list-style-type: none"> | |



Capital Project Request Form

3. PROJECT RISK FACTORS

| | |
|---------------------|--|
| Assumptions | DSPS SPS 364 Heating, Ventilation and Air Conditioning regulations will not change the mechanical ventilation requirements currently in place. |
| Dependencies | |
| Constraints | |

4. PROJECT COST

| Estimated Cost Components | | Cost Allocation Per Fiscal Year | |
|--|--------------------------------|---|---|
| Preliminary Design or Study | \$0.00 | If project funds can be allocated over more than 1 year, please indicate the amount to be allocated for each year below: | |
| Final Design and Engineering | \$0.00 | | |
| Land Acquisition | \$0.00 | Fiscal Year 2022 | Amount \$0.00 |
| Construction | \$1,011,765.00 | Fiscal Year | Amount \$0.00 |
| Equipment/Furnishings | Included in construction costs | Fiscal Year | Amount \$0.00 |
| Other: | \$0.00 | Fiscal Year | Amount \$0.00 |
| Miscellaneous Costs | \$0.00 | Fiscal Year | Amount \$0.00 |
| Project Budget (total of estimated cost components) | \$1,011,765.00 | ◀----- (sum of above should equal) -----! | |
| Is this project to be funded entirely with CIP funds? | | | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| If not, list below any other (non-CIP) funding sources for this project | | | Funding Amount |
| • | | | \$ |
| • | | | \$ |
| • | | | \$ |
| Total CIP Funding Requested | | \$1,011,765.00 | |

5. ASSET LIFE, RECURRING COSTS, AND RETURN ON INVESTMENT

| | | |
|---|------------------------------|---------------|
| If an existing asset (facility or equipment) is being renovated or replaced, what is the age of the existing asset in years? | 25+ | |
| Expected service life (in years) of the existing asset, based on applicable industry standards? | 20 | |
| Estimated Service Life of Improvement (in years) | 30 | |
| Future Estimated Recurring Costs | Annual Operating Costs | \$0.00 |
| | Annual Maintenance Costs | \$0.00 |
| | Other Non-Capital Costs | \$0.00 |
| | Total Recurring Costs | \$0.00 |
| Estimated Return on Investment (in years) | | |



Capital Project Request Form

| | | |
|---|------------------------------|--|
| 6. OPERATING COST IMPACT | | |
| Will this project lead to a reduction in personnel or maintenance costs? If yes, please explain below. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| Will this project lead to increased efficiency or productivity? If yes, please explain below. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| Will this project provide an additional revenue generating opportunity? If yes, please explain below. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |

| | | |
|---|---|--|
| 7. ECONOMIC AND PUBLIC BENEFIT | | |
| Does this project have the potential to promote economic development county-wide? If yes, please explain below. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| Does this project have the potential to promote economic development within a specific area of the county? If yes, please explain below. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| Will this project result in an increase of long-term jobs within the county? If yes, please explain below. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| Does this project enhance or increase recreational opportunities and/or green space? If yes, please explain below. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| Does this project contribute toward improved transportation efficiency? If yes, please explain below. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| Does this project impact the quality of life of the general county population? If yes, please explain below. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| Does this project impact the quality of life of a specific demographic within the county? If yes, please explain below. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| <i>Marathon county jailers, inmates and employees</i> | | |
| Does this project enhance or increase cultural or educational opportunities? If yes, please explain below. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| Does this project contribute toward improving the wellness of Marathon County Citizens? If yes, please explain below. | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |



Capital Project Request Form

Page
5 of 5

8. RELATED DOCUMENTS

List below any attached documentation including estimates, studies or plans, photographs, standing committee or board minutes, etc. that supports this project request.

- Estimate from DCE
- Preliminary Plans,
 - https://docs.legis.wisconsin.gov/code/admin_code/sps/safety_and_buildings_and_environment/361_366/364/ii/0403

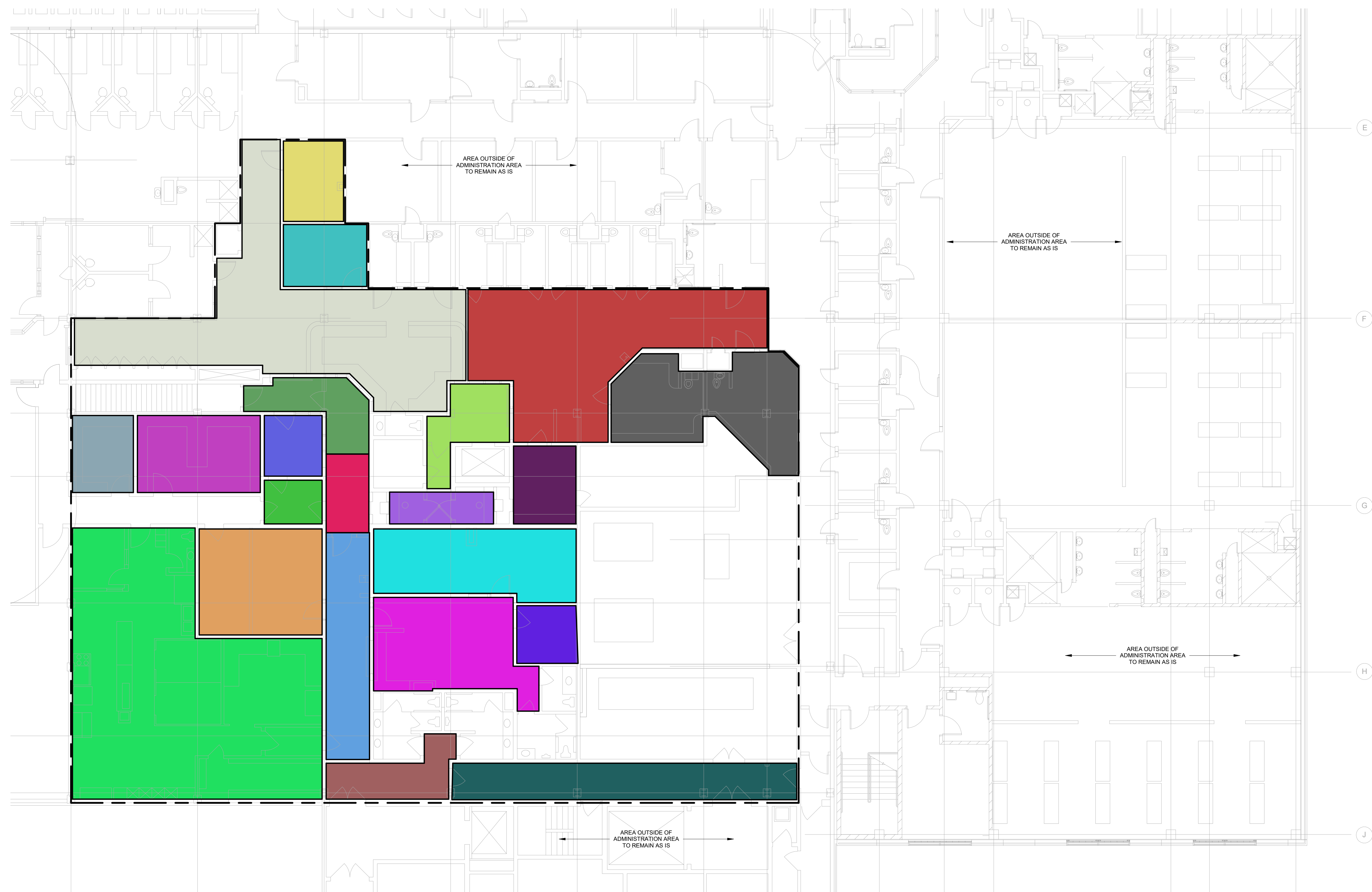
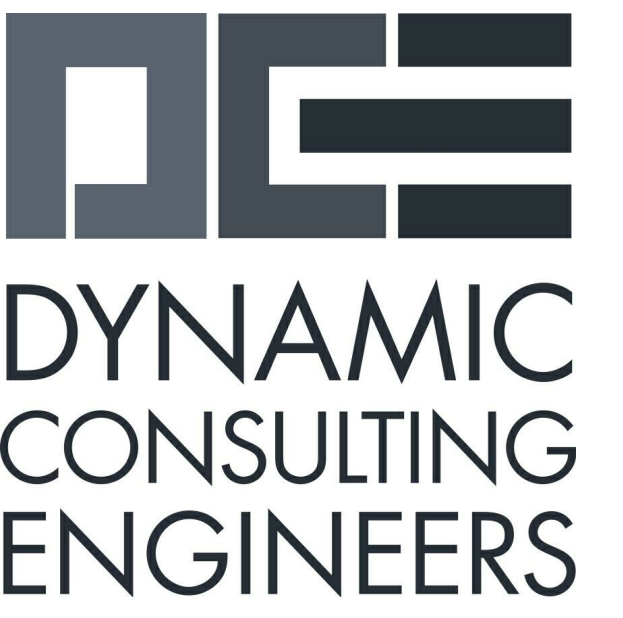


OPINION OF PROBABLE CONSTRUCTION COST

PROJECT NAME:
PROJECT NUMBER:
DATE:

MARATHON COUNTY | JAIL AHU REPLACEMENT
2107
April 20, 2021

| Equipment | Quantity | Unit | Cost Material | Total Material | Man Hours | Man Hours | Sub Contracts | | Grand Total |
|--|----------|-------------|------------------|-------------------|--------------|--------------|---------------|-----------|--------------------|
| | | | | | | | Materials | Man Hours | |
| HVAC Equipment | | | | | | | | | |
| AHU-8 | 1 | Each | \$30,000 | \$30,000 | 120 | 120 | | | |
| AHU-8 Return Fan | 1 | Each | \$10,000 | \$10,000 | 40 | 40 | | | |
| HV-2 | 1 | Each | \$24,000 | \$24,000 | 80 | 80 | | | |
| HV-2 Air Cooled Condensing Unit | 1 | Each | \$15,000 | \$15,000 | 80 | 80 | | | |
| VAV Boxes | 22 | Each | \$7,500 | \$165,000 | 8 | 176 | | | |
| Sound Attenuators | 4 | Each | \$5,000 | \$20,000 | 4 | 16 | | | |
| Pumped HW Coils | 2 | Each | \$2,500 | \$5,000 | 4 | 8 | | | |
| Piping | | | | | | | | | |
| 2-1/2" Chilled Water | 50 | Linear Feet | \$49.97 | \$2,498 | 0.19 | 9.5 | | | |
| 2" Hot Water | 50 | Linear Feet | \$42.35 | \$2,118 | 0.22 | 11 | | | |
| 1-1/2" Hot Water | 80 | Linear Feet | \$35.67 | \$2,854 | 0.22 | 17.6 | | | |
| 3/4" Hot Water | 660 | Linear Feet | \$28.64 | \$18,905 | 0.25 | 165 | | | |
| 3/4" Refrigerant | 100 | Linear Feet | \$28.64 | \$2,864 | 0.25 | 25 | | | |
| Miscellaneous Work | | | | | | | | | |
| Concrete Pads | 1 | Lump Sum | \$0 | \$0 | 0 | 0 | \$10,000 | 40 | |
| Roof Work | 1 | Lump Sum | \$0 | \$0 | 0 | 0 | \$10,000 | 40 | |
| Crane Rental | 1 | Each | \$0 | \$0 | 0 | 24 | \$6,000 | 24 | |
| Demolition | | | | | | | | | |
| AHU-8 Demolition | 1 | Lump Sum | - | - | 120 | 120 | | | |
| AHU-8 Return Fan Demolition | 1 | Lump Sum | - | - | 40 | 40 | | | |
| HV-2 Demolition | 1 | Lump Sum | - | - | 120 | 120 | | | |
| Split Systems | 1 | Lump Sum | - | - | 40 | 40 | | | |
| Ceiling Demolition & Reinstallation - ACT | 4000 | Lump Sum | - | - | 0.05 | 200 | | | |
| Ceiling Demolition & Reinstallation - Secure | 4000 | Lump Sum | - | - | 0.1 | 400 | | | |
| Insulation & Jacketing | | | | | | | | | |
| General Insulation | 1 | Lump Sum | - | - | - | - | \$35,000 | 160 | |
| VAV Box Upgrades | 1 | Lump Sum | - | - | - | - | \$7,500 | 40 | |
| Temperature Controls | | | | | | | | | |
| AHU-8 | 1 | Each | - | - | - | - | \$20,000 | 80 | |
| HV-2 | 1 | Each | - | - | - | - | \$15,000 | 60 | |
| VAV Box Upgrades | 22 | Each | - | - | - | - | \$33,000 | 40 | |
| Testing, Adjusting, & Balancing | | | | | | | | | |
| AHU-8 | 1 | Each | - | - | - | - | \$0 | 40 | |
| HV-2 | 1 | Each | - | - | - | - | \$0 | 40 | |
| VAV Box Upgrades | 22 | Each | - | - | - | - | \$0 | 88 | |
| Electrical | | | | | | | | | |
| General Demolition | 1 | Lump Sum | - | - | - | - | \$0 | 80 | |
| General Work | 1 | Lump Sum | - | - | - | - | \$15,000 | 80 | |
| Sub Total | | | | \$298,239 | | 1692.1 | \$151,500 | 812 | |
| Mark-up on Materials @ 10% | | | | \$29,824 | | | | | |
| Mark-up on sub-contractors @ 7.5% | | | | | | | \$11,363 | | |
| Labor Costs @ \$100 per hour | | | | | | \$169,210 | | \$89,320 | |
| Totals for HVAC | | | | \$328,063 | | \$169,210 | \$162,863 | \$89,320 | \$749,456 |
| Contingency | | | | | | 35% | | | \$1,011,765 |

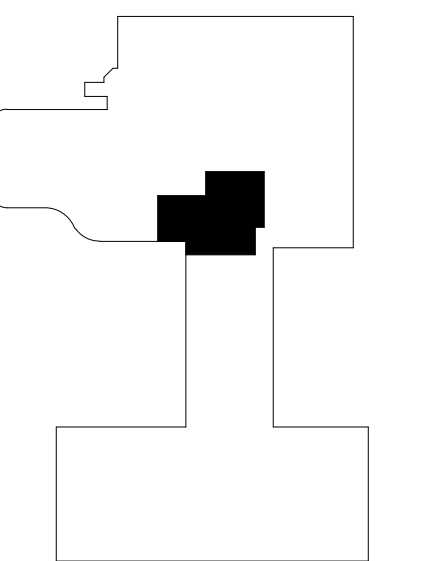


1 SECOND FLOOR ZONING PLAN
1/8" = 1'-0"

PROJECT TITLE
MARATHON COUNTY
JAIL ADMINISTRATION
AIR HANDLING UNIT
REPLACEMENT

1200 LAKE VIEW DRIVE
WAUSAU, WI 54403

KEYPLAN



SCHEMATIC DESIGN

DATE DESCRIPTION

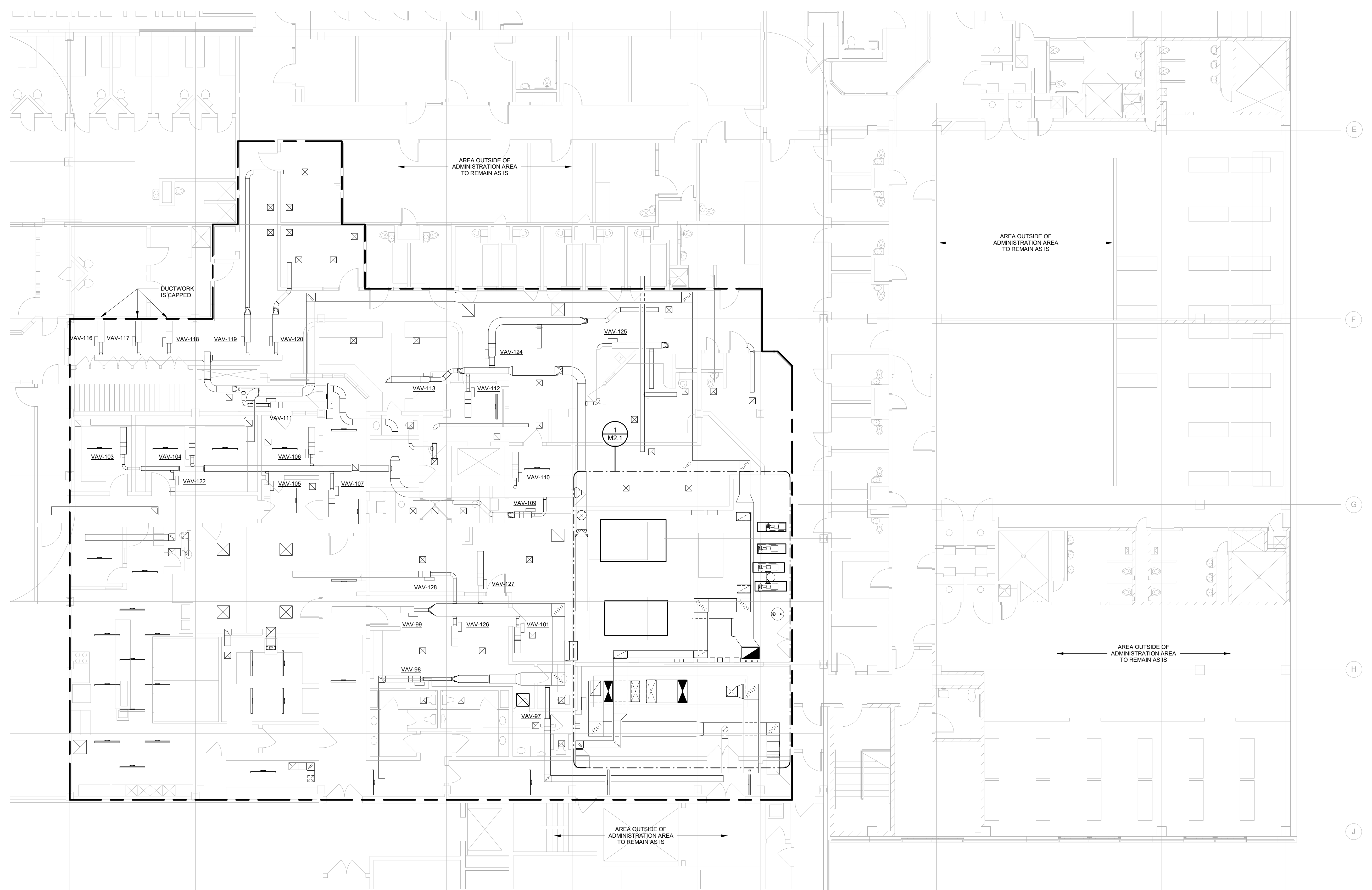
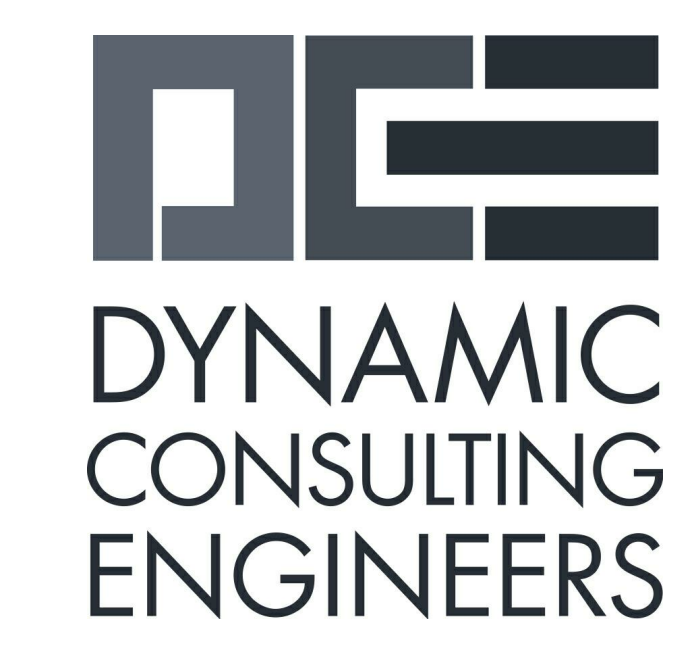
PROGRESS SET

DRAWINGS ARE IN PROGRESS &
NOT FOR CONSTRUCTION.
DRAWINGS ARE PROVIDED TO
SHOW DESIGN INTENT &
ARE NOT INTENDED FOR BIDDING
OR CONSTRUCTION

DCE PROJECT NUMBER 2107
ISSUANCE DATE 05.01.2021
PROJECT MANAGER DG

© Dynamic Consulting Engineers LLC

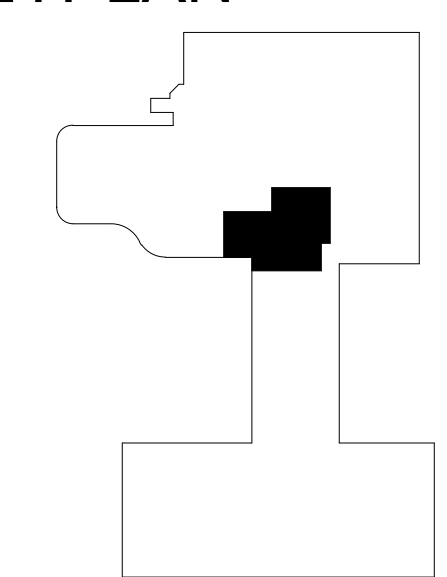
**SECOND FLOOR
ZONING PLAN**



PROJECT TITLE
MARATHON COUNTY
JAIL ADMINISTRATION
AIR HANDLING UNIT
REPLACEMENT

1200 LAKE VIEW DRIVE
WAUSAU, WI 54403

KEYPLAN



SCHEMATIC DESIGN

| # | DATE | DESCRIPTION |
|---|------|-------------|
| | | |

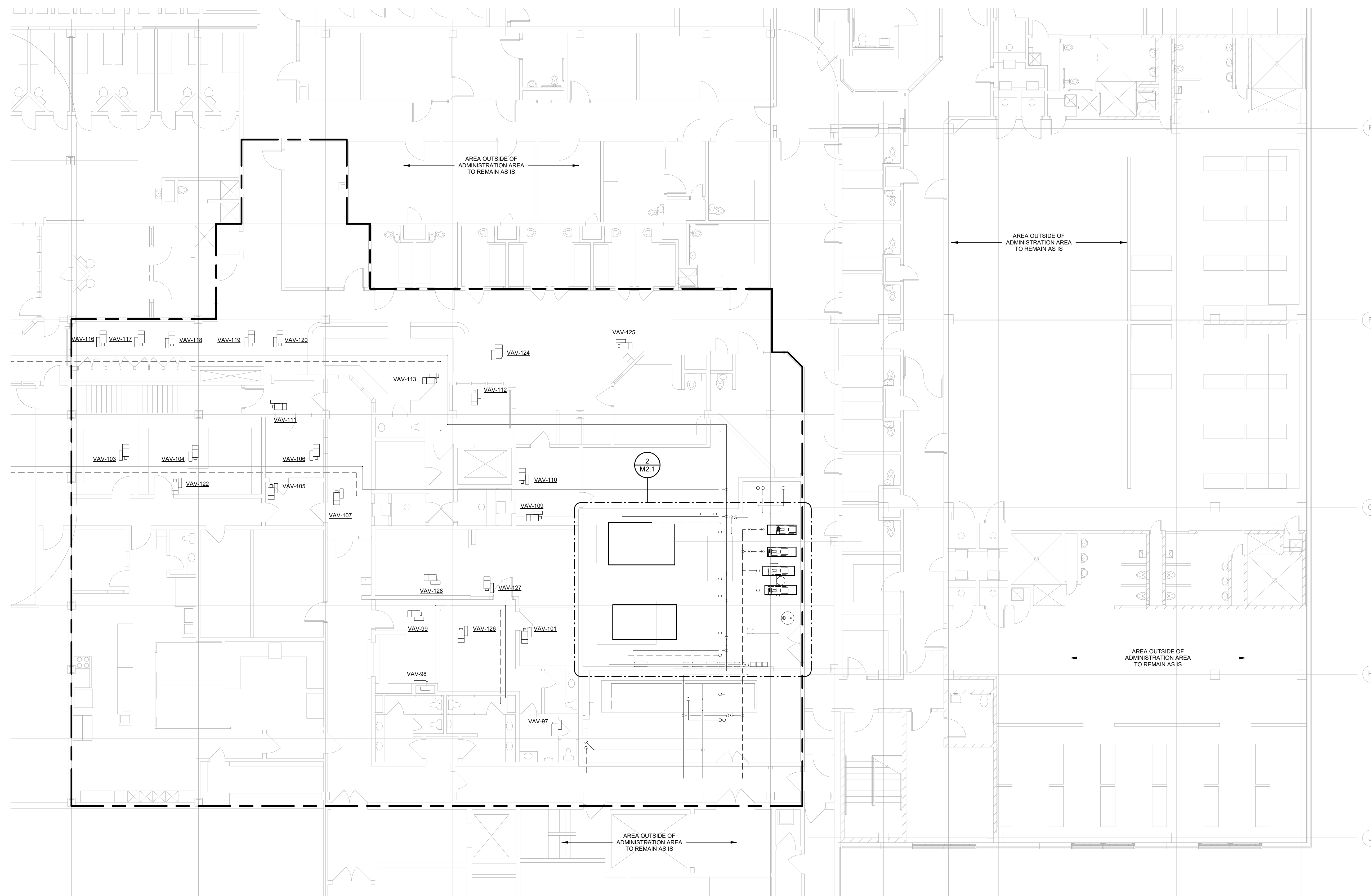
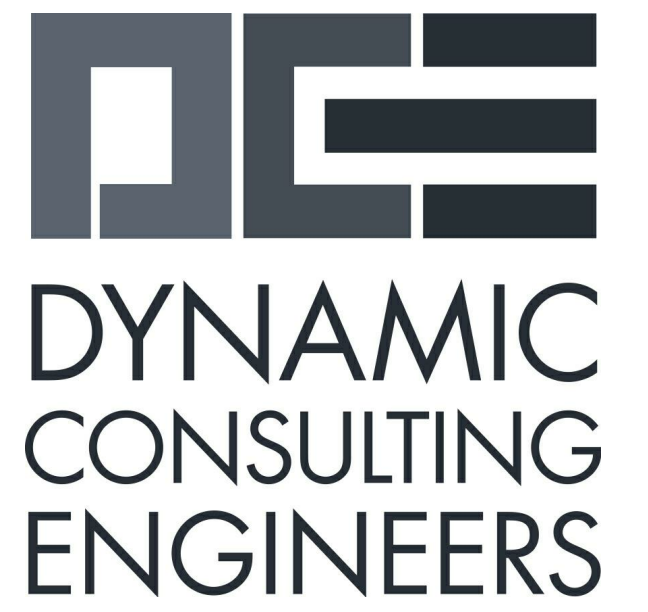
| | |
|--------------------|------------|
| DCE PROJECT NUMBER | 2107 |
| ISSUANCE DATE | 05.01.2021 |
| PROJECT MANAGER | DG |

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**SECOND FLOOR
DUCTWORK PLANS**

1 SECOND FLOOR NEW WORK DUCTWORK PLAN
1/8" = 1'-0"

M1.0

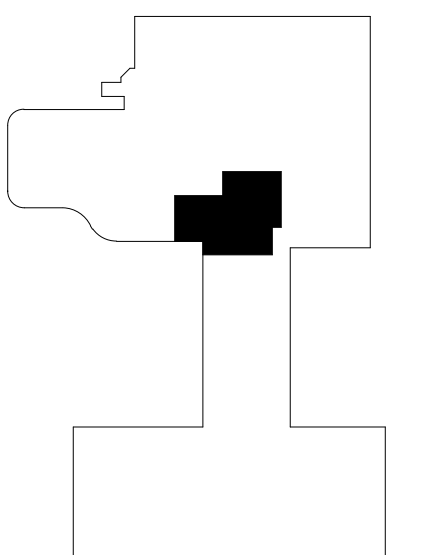


1 SECOND FLOOR NEW WORK HYDRONIC PLAN
1/8" = 1'-0"

PROJECT TITLE
MARATHON COUNTY
JAIL ADMINISTRATION
AIR HANDLING UNIT
REPLACEMENT

1200 LAKE VIEW DRIVE
WAUSAU, WI 54403

KEYPLAN



SCHEMATIC DESIGN

DATE DESCRIPTION

PROGRESS SET

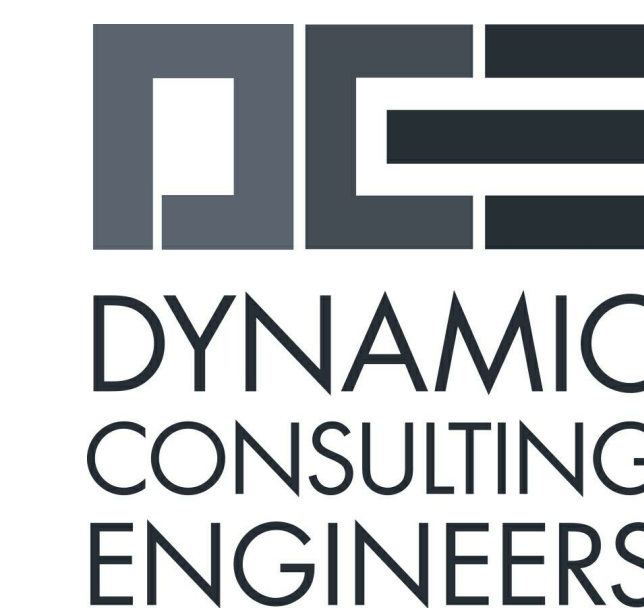
DRAWINGS ARE IN PROGRESS &
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DRAWINGS ARE PROVIDED TO
SHOW DESIGN INTENT &
ARE NOT INTENDED FOR BIDDING
OR CONSTRUCTION

DCE PROJECT NUMBER 2107
ISSUANCE DATE 05.01.2021
PROJECT MANAGER DG

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**SECOND FLOOR
HYDRONIC PLANS**

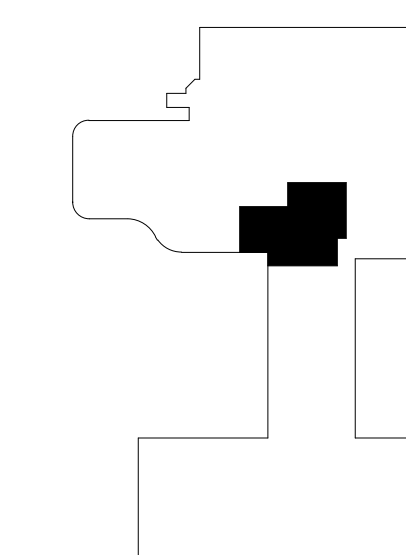
M1.1



PROJECT TITLE
 MARATHON COUNTY
 JAIL ADMINISTRATION
 AIR HANDLING UNIT
 REPLACEMENT

1200 LAKE VIEW DRIVE
 WAUSAU, WI 54403

KEYPLAN



SCHEMATIC DESIGN

| # | DATE | DESCRIPTION |
|---|------|-------------|
| | | |

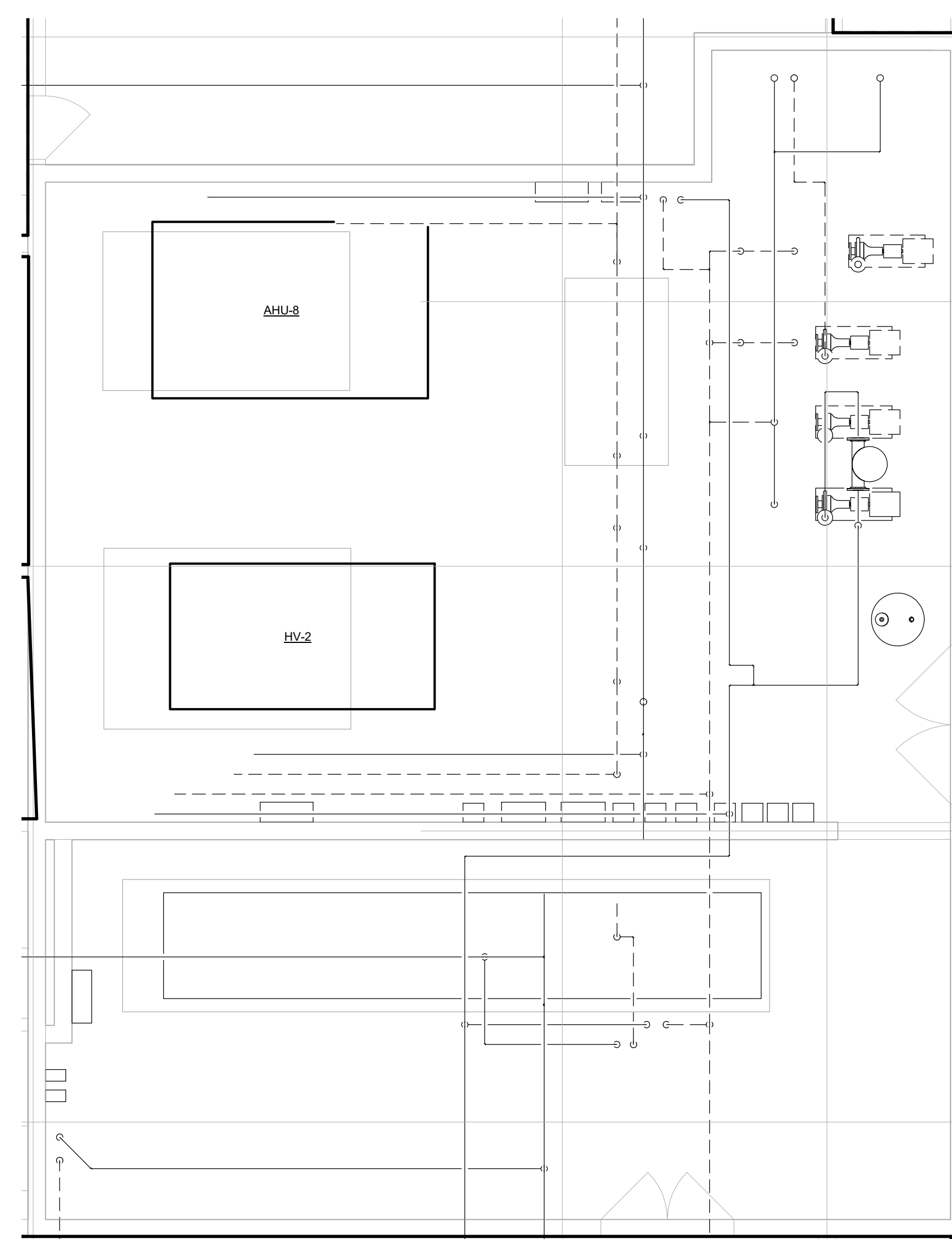
PROGRESS SET

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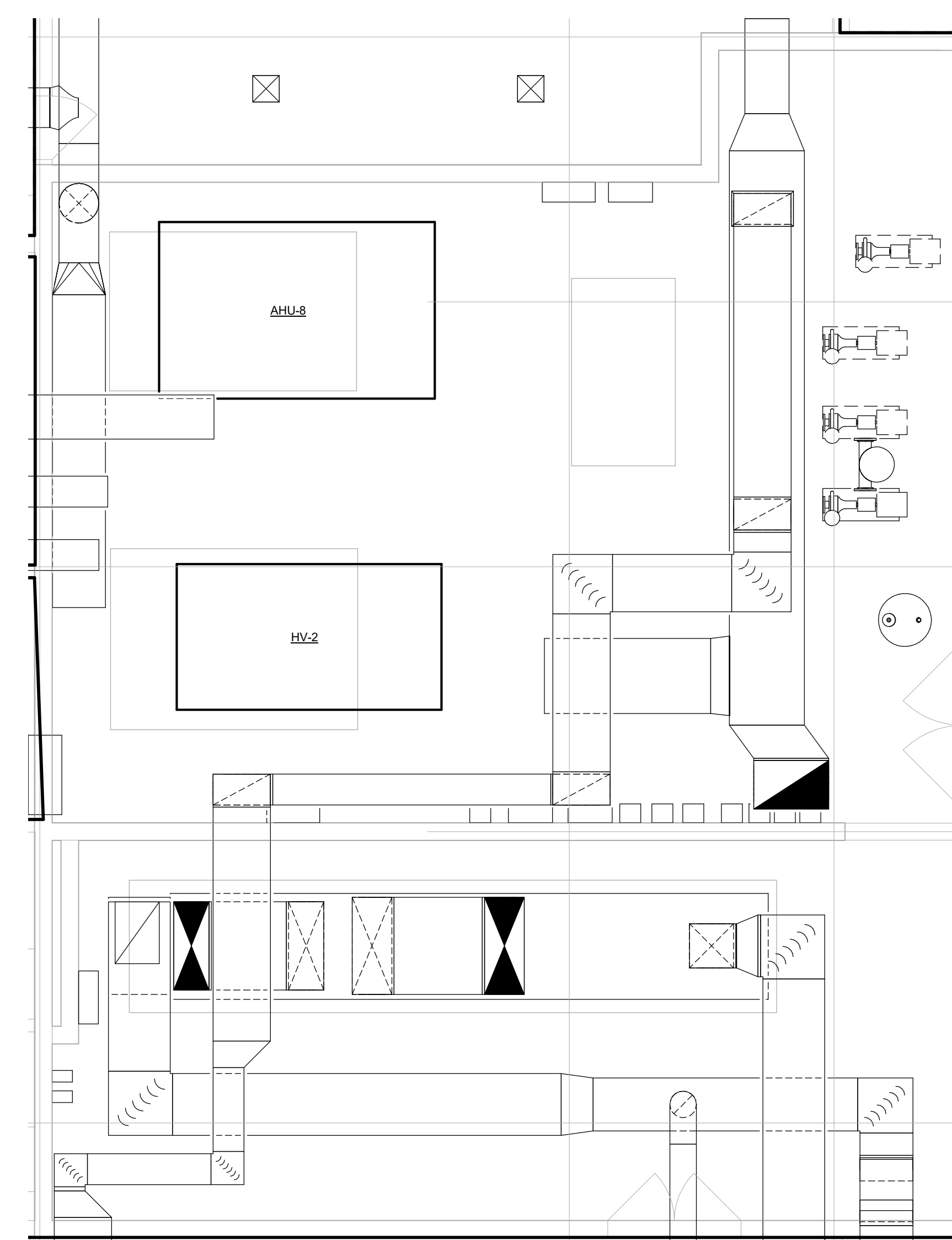
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|--------------------|------------|
| DCE PROJECT NUMBER | 2107 |
| ISSUANCE DATE | 05.01.2021 |
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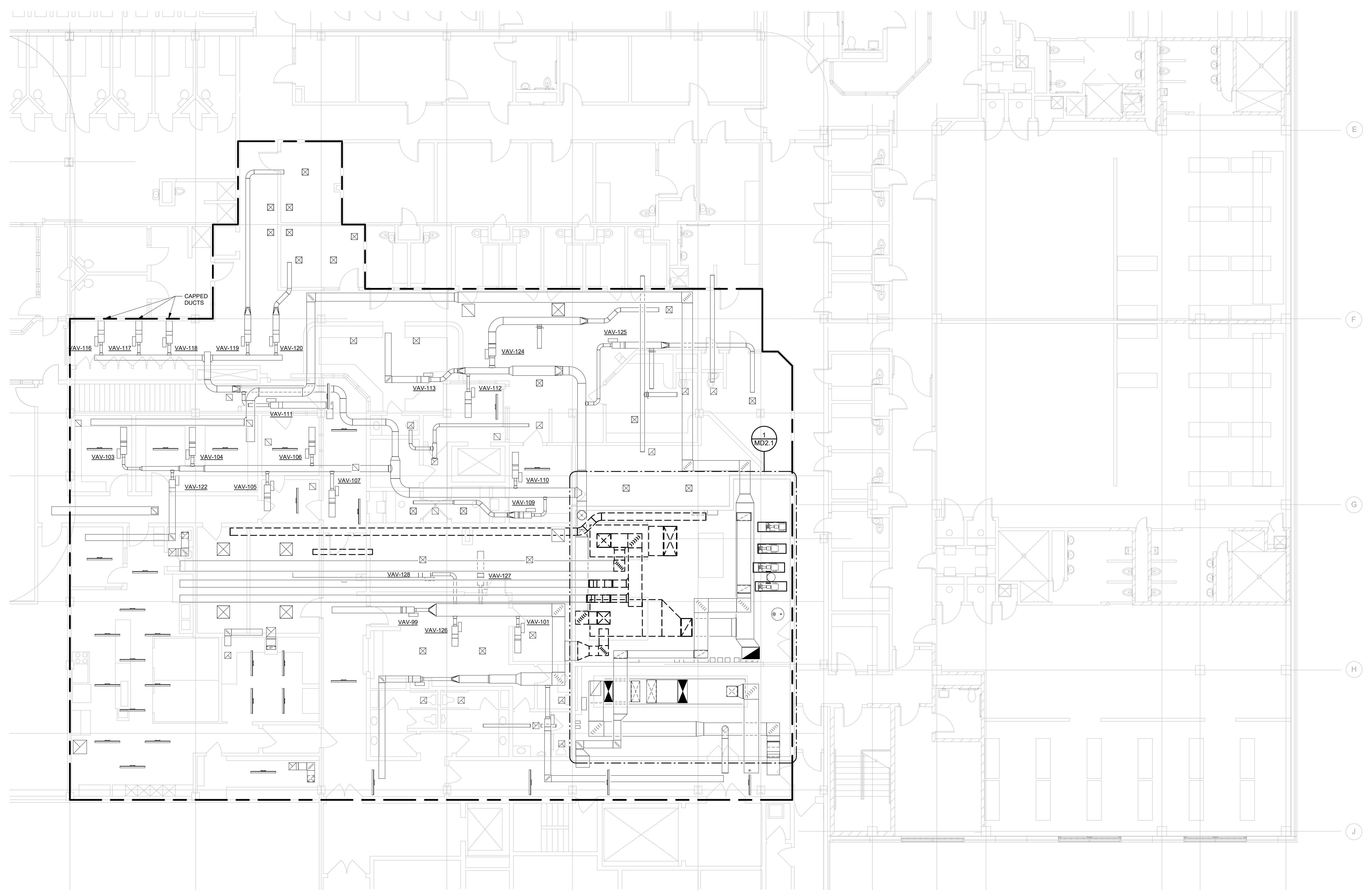
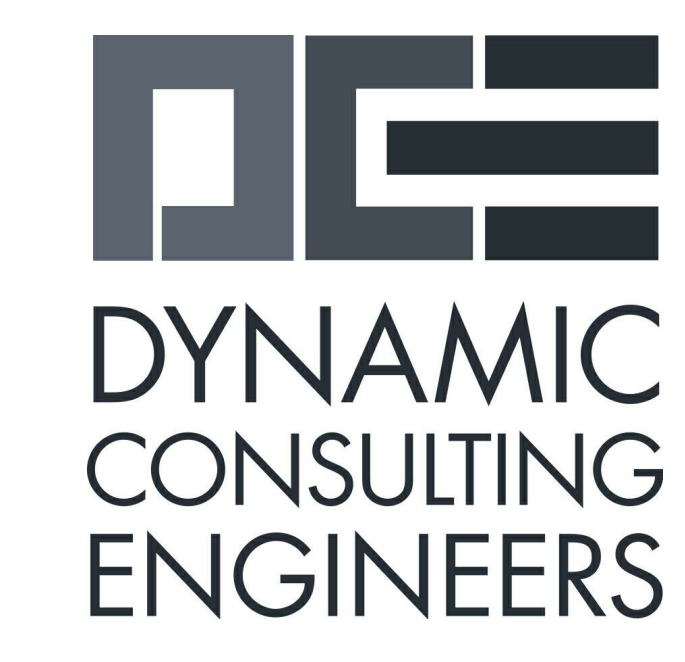
ENLARGED PLANS



2 ENLARGED MECHANICAL ROOM HYDRONIC PLAN
 1/4" = 1'-0"



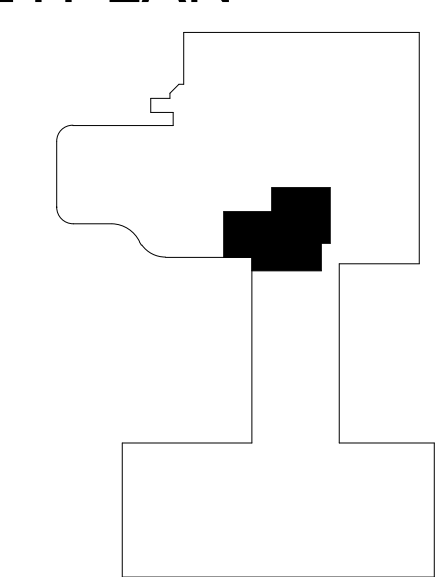
1 ENLARGED MECHANICAL ROOM DUCTWORK PLAN
 1/4" = 1'-0"



PROJECT TITLE
MARATHON COUNTY
JAIL ADMINISTRATION
AIR HANDLING UNIT
REPLACEMENT

1200 LAKE VIEW DRIVE
WAUSAU, WI 54403

KEYPLAN



SCHEMATIC DESIGN

| # | DATE | DESCRIPTION |
|---|------|-------------|
| | | |

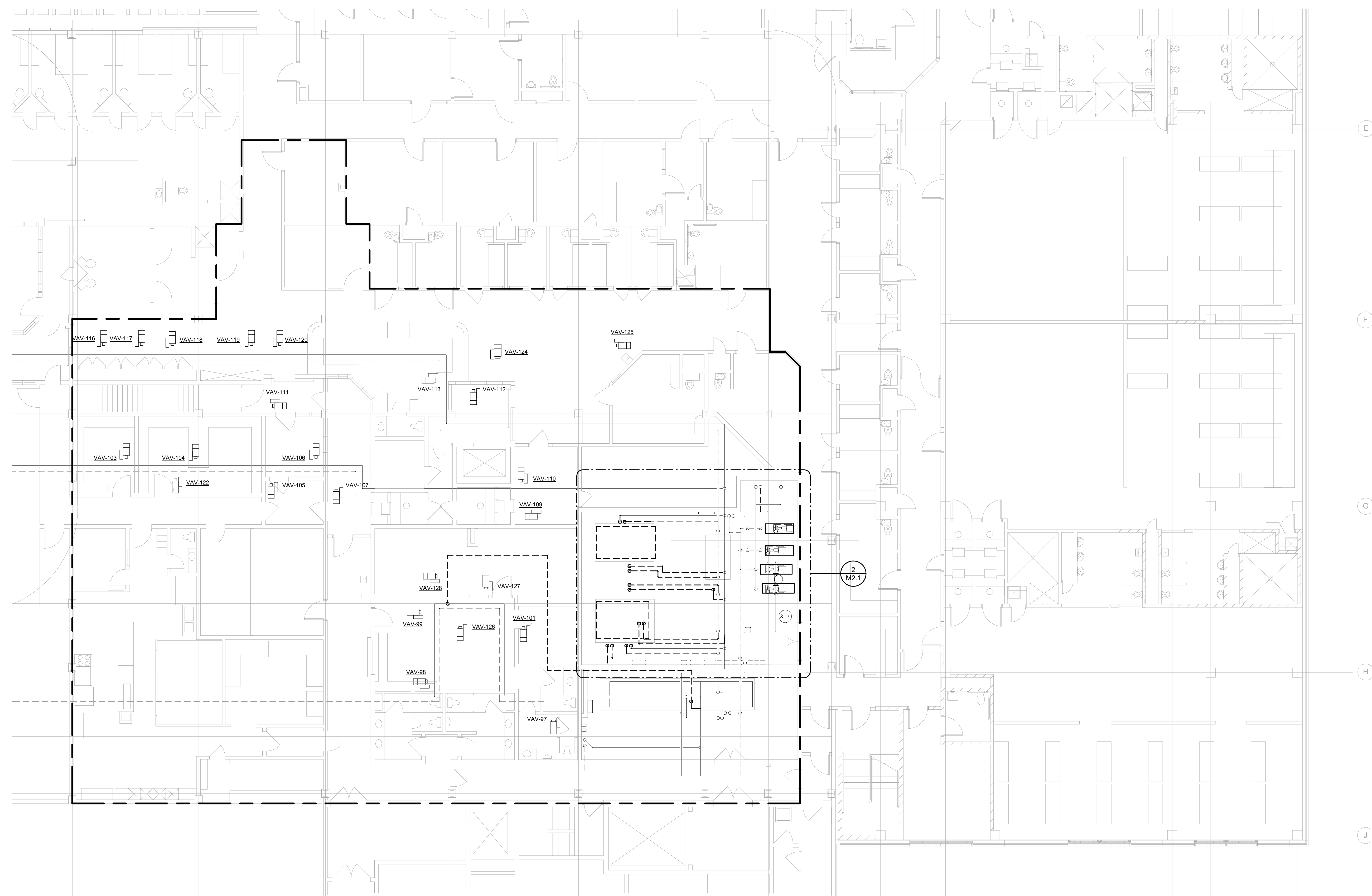
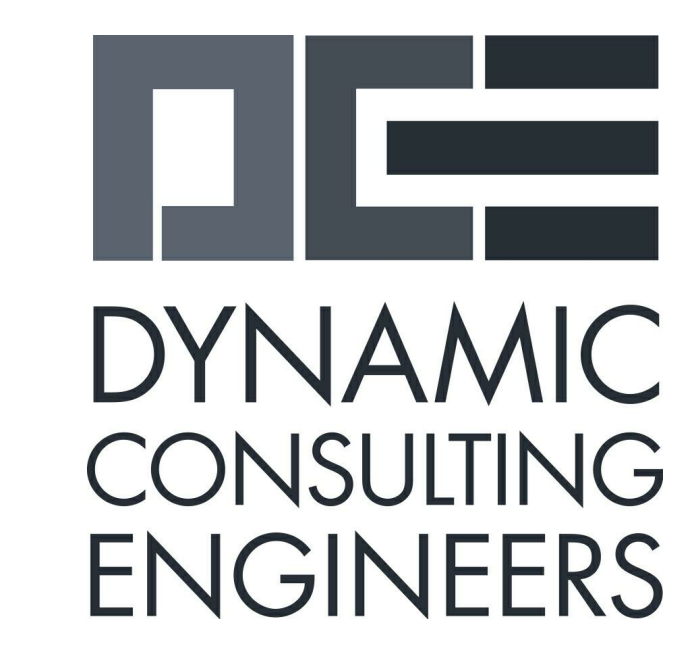
| | |
|--------------------|------------|
| DCE PROJECT NUMBER | 2107 |
| ISSUANCE DATE | 05.01.2021 |
| PROJECT MANAGER | DG |

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**SECOND FLOOR
DUCTWORK
DEMOLITION PLAN**

1 SECOND FLOOR DUCTWORK DEMOLITION PLAN
1/8" = 1'-0"

MD1.0

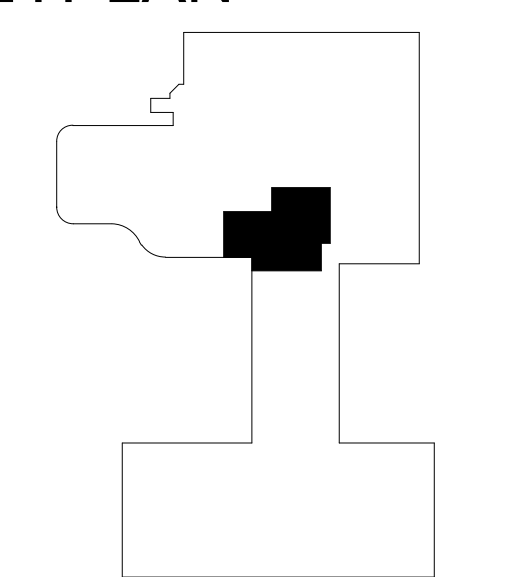


1 SECOND FLOOR HYDRONIC DEMOLITION PLAN
1/8" = 1'-0"

PROJECT TITLE
MARATHON COUNTY
JAIL ADMINISTRATION
AIR HANDLING UNIT
REPLACEMENT

1200 LAKE VIEW DRIVE
WAUSAU, WI 54403

KEYPLAN



SCHEMATIC DESIGN
DATE DESCRIPTION

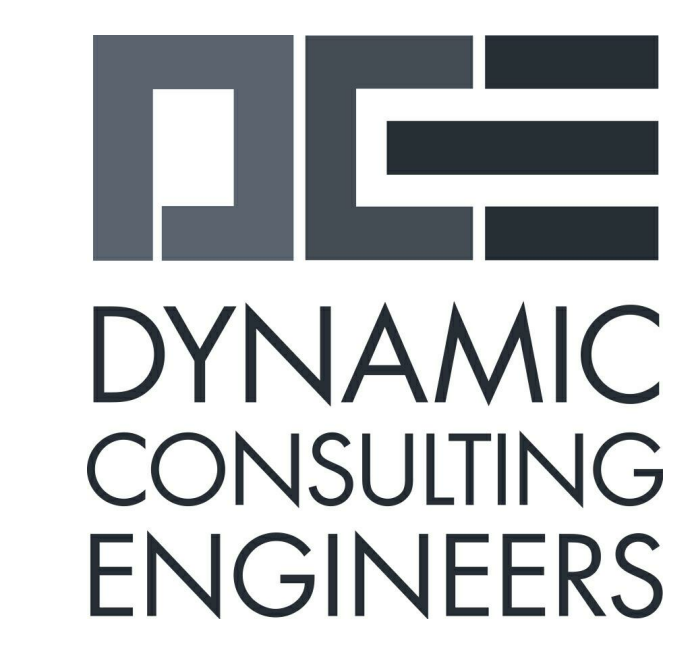
PROGRESS SET
DRAWINGS ARE IN PROGRESS &
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ARE NOT INTENDED FOR BIDDING
OR CONSTRUCTION

DCE PROJECT NUMBER 2107
ISSUANCE DATE 05.01.2021
PROJECT MANAGER DG

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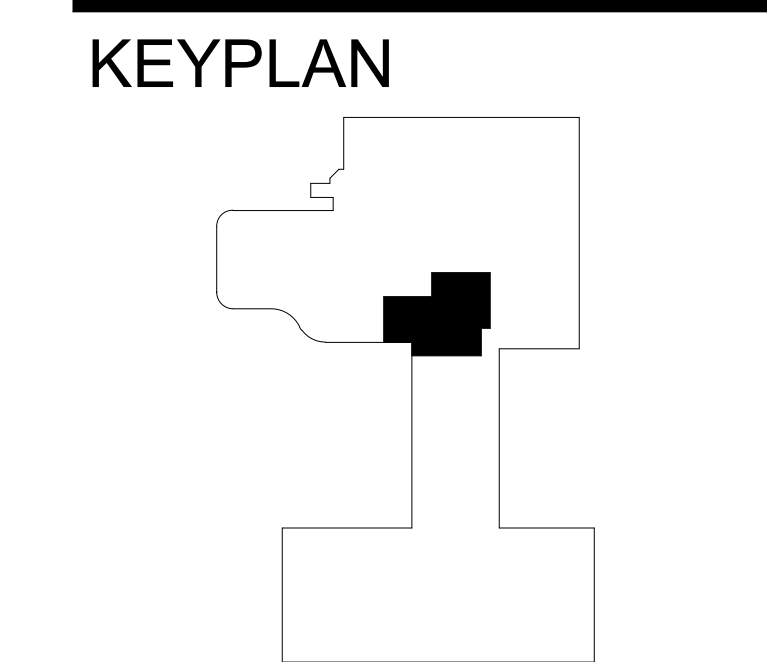
**SECOND FLOOR
HYDRONIC
DEMOLITION PLAN**

MD1.1



PROJECT TITLE
 MARATHON COUNTY
 JAIL ADMINISTRATION
 AIR HANDLING UNIT
 REPLACEMENT

1200 LAKE VIEW DRIVE
 WAUSAU, WI 54403



SCHEMATIC DESIGN

| # | DATE | DESCRIPTION |
|---|------|-------------|
| | | |

PROGRESS SET

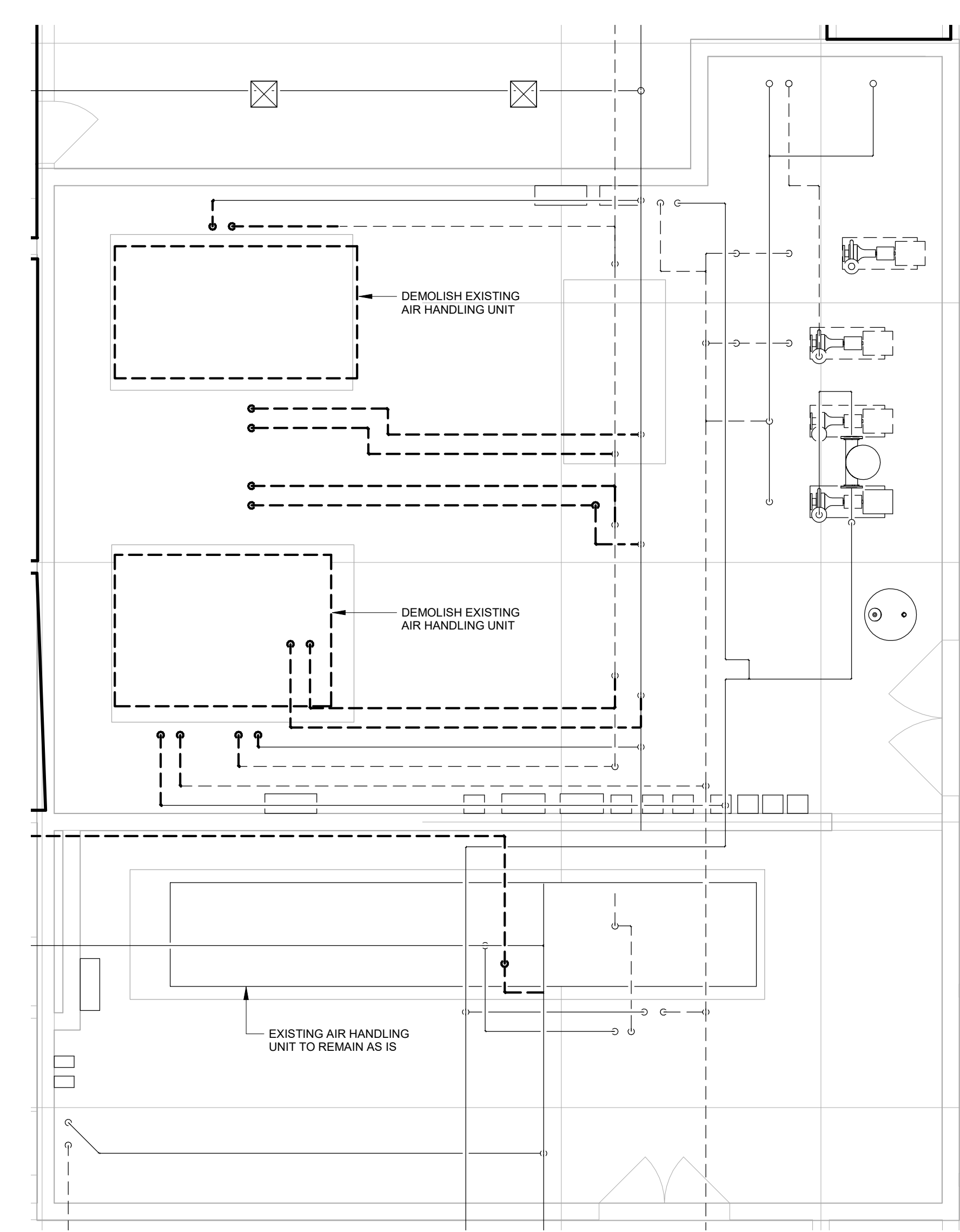
DRAWINGS ARE IN PROGRESS &
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|--------------------|------------|
| DCE PROJECT NUMBER | 2107 |
| ISSUANCE DATE | 05.01.2021 |
| PROJECT MANAGER | DG |

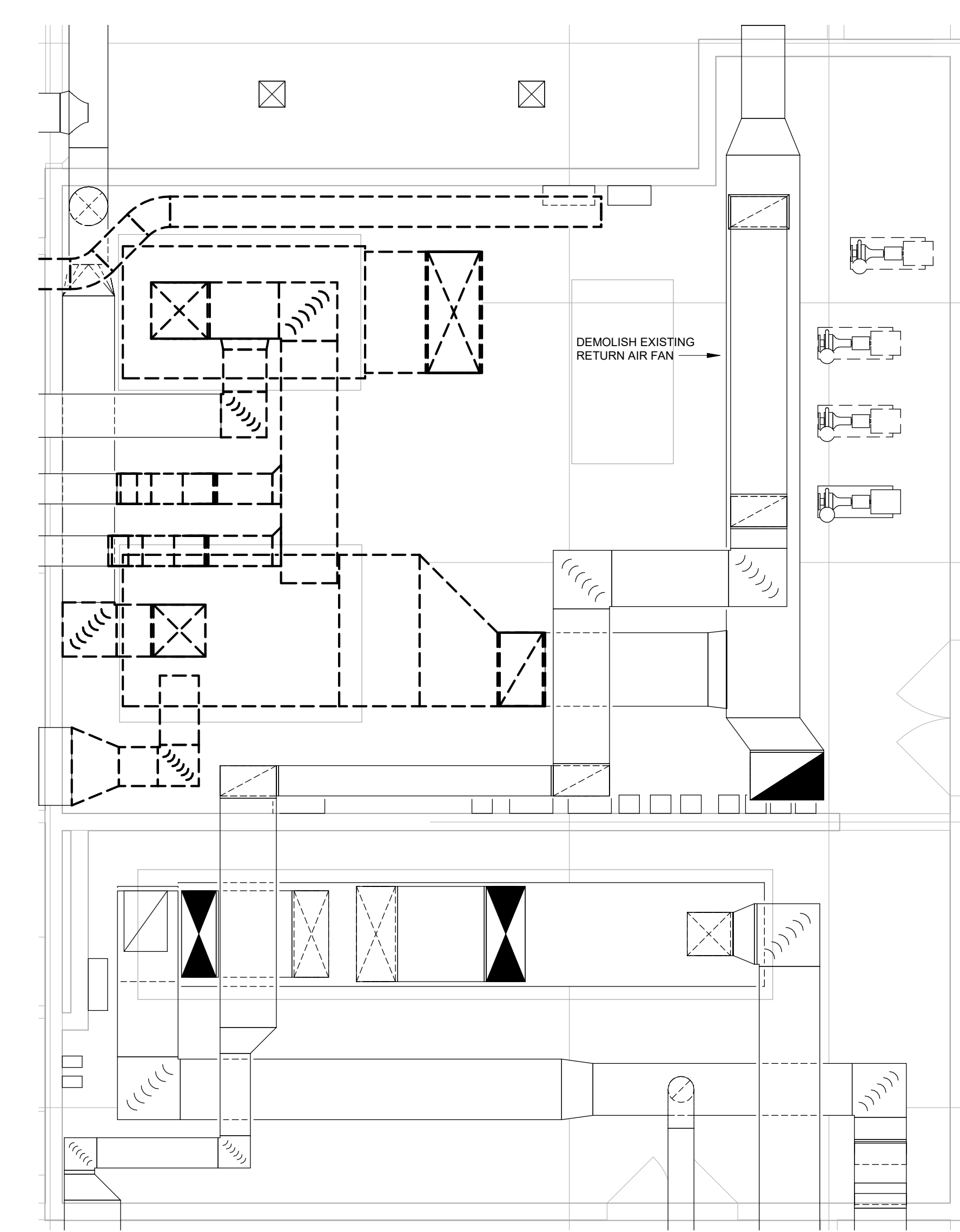
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**ENLARGED
 DEMOLITION PLANS**

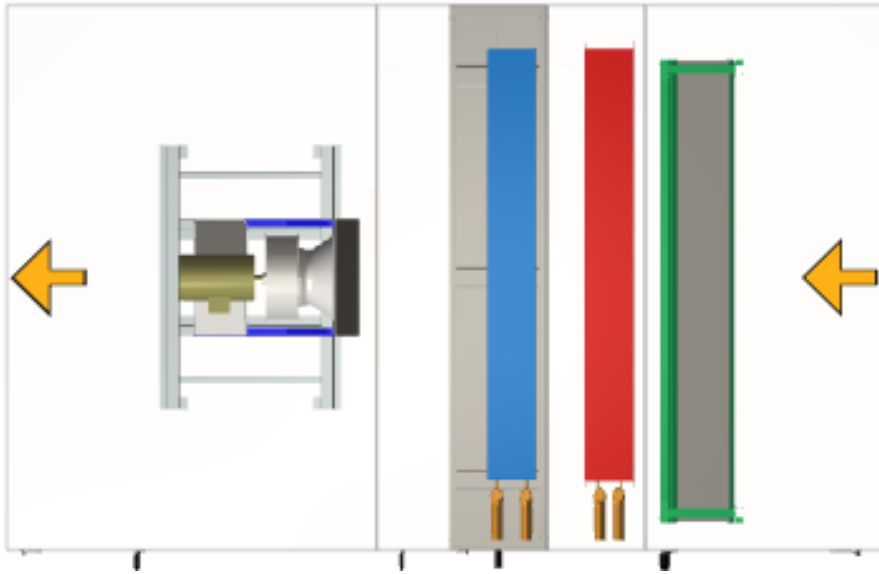
MD2.1



1 ENLARGED MECHANICAL ROOM HYDRONIC DEMOLITION PLAN
 1/4" = 1'-0"

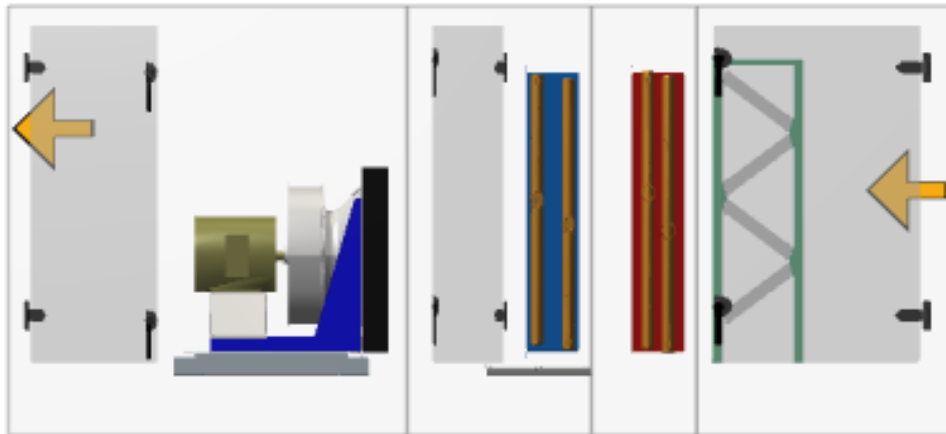


2 ENLARGED MECHANICAL ROOM DUCTWORK DEMOLITION PLAN
 1/4" = 1'-0"

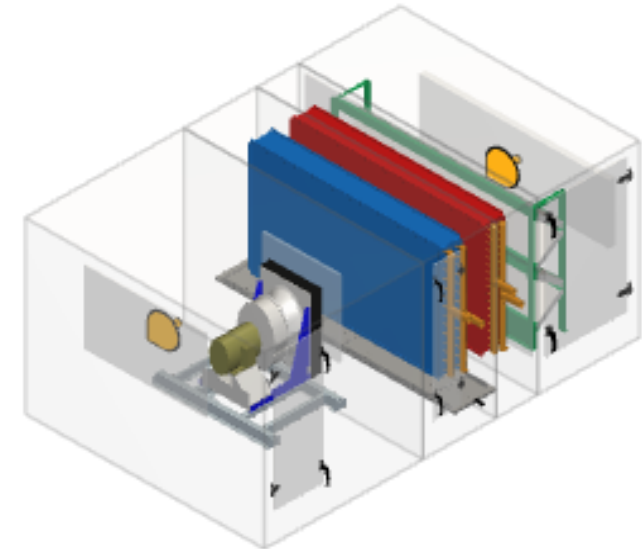


Width:
80.0 in

| Module | Length(in) | Weight(lb) |
|-----------------------|------------|------------|
| Air mixing section #1 | 34.000 | 343 |
| Heating coil #2 | 14.000 | 700 |
| Cooling coil #3 | 24.500 | 700 |
| Supply fan #4 | 53.023 | 1564 |



Height:
58.3 in

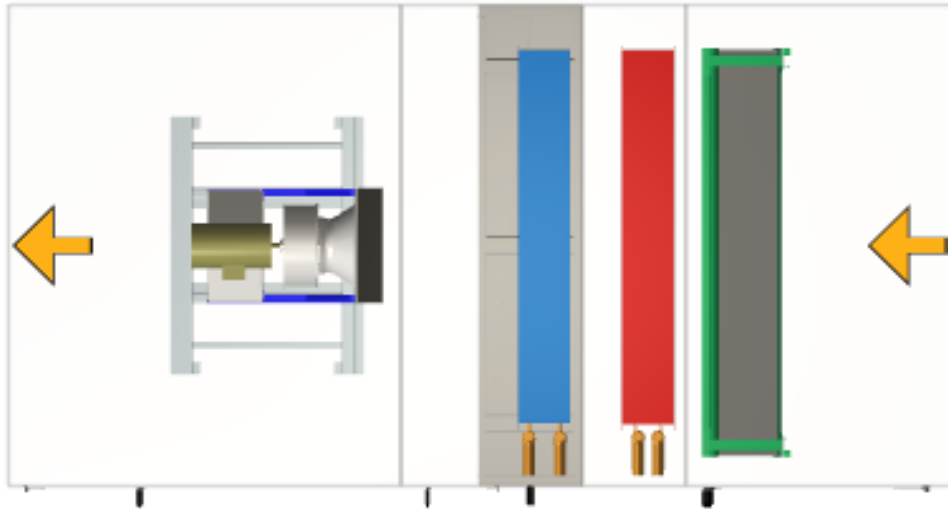


Length: 125.6 in

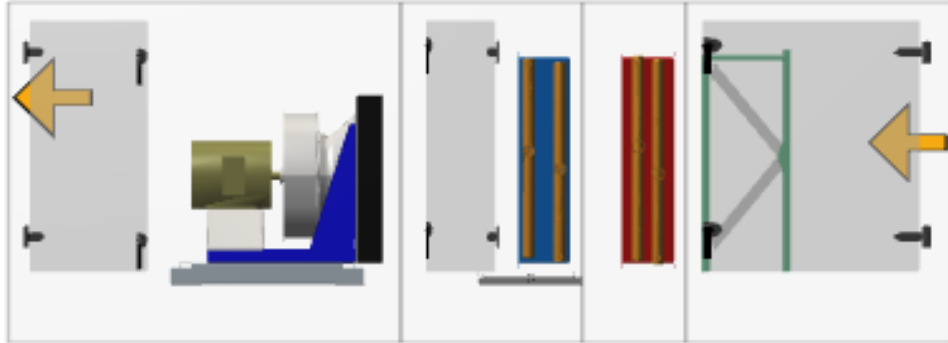
*****WARNING*** - This document contains preliminary "quick select" information including approximate overall unit dimensions and weight estimates not to be used in official contract documentation. A full unit performance run is required to provide more detail.**

| | | |
|---|---------------------------|-----------------------------------|
| Unit size: 21 | Job Name: Marathon County | Unit Casing: 2in Double Wall Foam |
| Product group: Indoor unit | Actual airflow: 8000 | Proposal Number: |
| Integral base frame: 8in. integral base frame | Sales Office: | Tags: AHU-8 |
| Paint: | | Installed weight: 3307 |





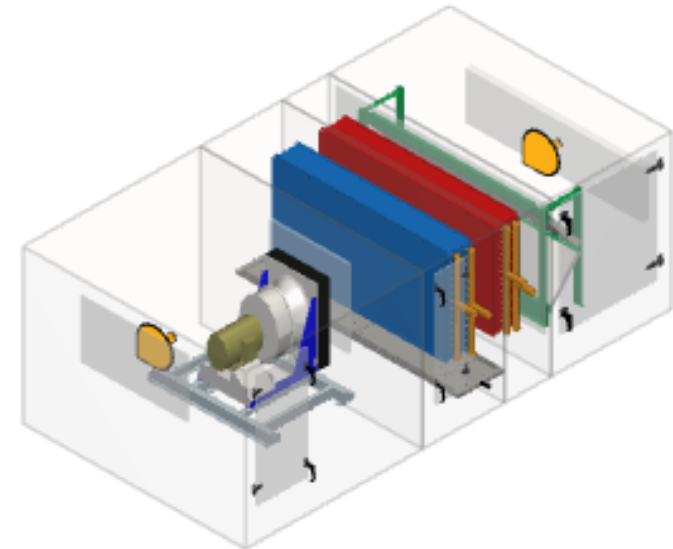
Width:
66.5 in



Height:
47.0 in

Length: 127.6 in

| Module | Length(in) | Weight(lb) |
|-----------------------|------------|------------|
| Air mixing section #1 | 36.000 | 279 |
| Heating coil #2 | 14.000 | 450 |
| Cooling coil #3 | 24.500 | 450 |
| Supply fan #4 | 53.023 | 718 |



*****WARNING*** - This document contains preliminary "quick select" information including approximate overall unit dimensions and weight estimates not to be used in official contract documentation. A full unit performance run is required to provide more detail.**

| | | |
|---|---------------------------|-----------------------------------|
| Unit size: 12 | Job Name: Marathon County | Unit Casing: 2in Double Wall Foam |
| Product group: Indoor unit | Actual airflow: 5000 | Proposal Number: |
| Integral base frame: 8in. integral base frame | Sales Office: | Tags: HV-2 |
| Paint: | | Installed weight: 1897 |





Capital Project Request Form

| | | | |
|-----------------------|--|----------------------------|--|
| Project | <i>Remodel and Renovation of 1000 Lake View Drive for Social Services move to Marathon County Lake View Campus as part of county master plan</i> | CIP Funds Requested | \$6,710,637.00 |
| Project Number | <i>(Do NOT fill in – for use by F&CM Department)</i> | | Request for Year 2021 |

General Instructions for completing this form:

- Enter requested information after placing the cursor (point and click) in the corresponding gray-shaded blank.
- For all but the most obvious items, more detailed instructions are available by typing the F1 key while the cursor placed on the corresponding blank.
- Each box will expand as necessary to include your text. Limits on text length are noted in the F1 instructions.
- Use the tab key to advance the cursor to the next blank; use shift/tab to move the cursor to the previous blank.
- *If this Charter form is not completed in its entirety, your request may not be ranked.*

| | | | |
|---|--|---|---|
| 1. REQUEST INFORMATION | | | |
| Project Title | <i>Remodel and Renovation of 1000 Lake View Drive for Social Services move to Marathon County Lake View Campus as part of county master plan</i> | | |
| Location | <i>1000 Lake View Drive Wausau 54403</i> | | |
| Description | <i>Remodel and Renovation of 1000 Lake View Drive for Social Services move to Marathon County Lake View Campus as part of county master plan</i> | | |
| Date of Request | <i>6/3/2021</i> | Project Type | <i>Construction</i> |
| Submitted By | <i>Troy Torgerson</i> | Phone | <i>715-261-6980</i> |
| Department | <i>Facilities and Capital Management</i> | Email | <i>Troy.torgerson@co.marathon.wi.us</i> |
| Has this request been approved by the appropriate standing committee or board. | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> | <i>Minutes of the meeting in which the funding request was approved must be submitted to F&CM Dept. prior to July 1st.</i> | |
| Has funding for this project been requested previously but not ranked high enough to be funded? | Y <input type="checkbox"/> N <input checked="" type="checkbox"/> | If so, how many times has the request been submitted previously? | |
| Is this request a continuation of a previously funded CIP project? | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> | If so, in which year was that project funded? | <i>2020 Design</i> |
| Will this project be closed out within three years of the fiscal year in which it was funded? If not, please explain why below. | | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | |
| Is this project necessary due to a federal, state, or local legal mandate? If yes, please identify the specific mandate below. | | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | |
| Will this project comply with recommendations or objectives addressed in an adopted plan (e.g. strategic plan), referendum, or study? If yes, please identify the specific plan, referendum, or study below. | | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | |



Capital Project Request Form



Capital Project Request Form

2. PROJECT DEFINITION AND SCOPE

| | | | |
|--|---|--|----------|
| Project Objective(s) | Remodel and Renovation of 1000 Lake View Drive for Social Services move to Marathon County Lake View Campus as part of county master plan | | |
| Alignment to Departmental Mission Statement | The department performs maintenance and custodial duties to maintain County facilities, equipment, machinery, and furnishings in good repair and in clean orderly, and safe condition for Marathon County employees and patrons. The department will preserve and extend the useful life of existing facilities, maintaining the appearance of buildings and grounds, assist in the efficient usage of space, provide emergency repairs and preventive maintenance of equipment and structures. | | |
| Departmental Priority (check a different priority for each project) | (High) | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 | (Low) |
| Related Other Projects | NCHC Addition and Remodel Project, Replacement of Steam Boilers to Hot Water Boilers at 1000/1100 Lake View Drive | | |
| Alternatives Considered | 1. Do nothing and leave Social Services and all other departments at current locations. 2. Look at A/B Building for new location | | |
| Why Alternatives Listed Above Were Rejected | 1. Existing buildings are being sold and depts. Moving to MC Lake View Campus. 2. Discussed and decided that LVC was better location than 1100 (A/B) building 3. | | |
| Target Start Date | 01/01/22 | Anticipated Completion Date | 12/31/22 |

Project Scope Statement List the major components of the project's scope of work below. Refer to documentation such as RFP's, proposals, functional specifications, etc. to set and limit the project scope.

| | | |
|--|---|--|
| <p>"In Scope" = everything the project will include to meet the requirements of the project objectives.</p> <p>"Not in Scope" = any responsibilities, activities, deliverables, or other areas that are NOT to be funded as part of this project, even though they may have some relation to it.</p> | <p>In Scope:</p> <ul style="list-style-type: none"> • Demolition • General Construction for remodel • FFE • IT • Moving Costs • Construction Administration from A/E | <p>Not in Scope:</p> <ul style="list-style-type: none"> • Design already complete • HVAC COSTS – completed in another CIP Project. • • • • • |
|--|---|--|



Capital Project Request Form

| | | |
|--|--|--|
| | | |
|--|--|--|

| 3. PROJECT RISK FACTORS | |
|-------------------------|--|
| Assumptions | Social Services will still be moving to the NCHC campus. |
| Dependencies | NCHC Departments currently in 1000 Lake View Drive will be moved out |
| Constraints | Construction will take place while MC departments remain in the facility |

| 4. PROJECT COST | | | | |
|--|-----------------------|--|---|-----------------------------|
| Estimated Cost Components | | Cost Allocation Per Fiscal Year | | |
| Preliminary Design or Study | \$0.00 | If project funds can be allocated over more than 1 year, please indicate the amount to be allocated for each year below: | | |
| Final Design and Engineering | 0.00 | | | |
| Land Acquisition | \$0.00 | Fiscal Year 2022 | Amount | \$0.00 |
| Construction | \$6,710,637.00 | Fiscal Year | Amount | \$0.00 |
| Equipment/Furnishings | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Other: | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Miscellaneous Costs | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Project Budget (total of estimated cost components) | \$6,710,637.00 | ←----- (sum of above should equal) -----! | | |
| Is this project to be funded entirely with CIP funds? | | | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| If not, list below any other (non-CIP) funding sources for this project | | | Funding Amount | |
| • | | | \$ | |
| • | | | \$ | |
| • | | | \$ | |
| Total CIP Funding Requested | | \$6,710,637.00 | | |



Capital Project Request Form

5. ASSET LIFE, RECURRING COSTS, AND RETURN ON INVESTMENT

| | | |
|---|------------------------------|---------------|
| If an existing asset (facility or equipment) is being renovated or replaced, what is the age of the existing asset in years? | | |
| Expected service life (in years) of the existing asset, based on applicable industry standards? | | |
| Estimated Service Life of Improvement (in years) | | |
| Future Estimated Recurring Costs | Annual Operating Costs | \$0.00 |
| | Annual Maintenance Costs | \$0.00 |
| | Other Non-Capital Costs | \$0.00 |
| | Total Recurring Costs | \$0.00 |
| Estimated Return on Investment (in years) | | |

6. OPERATING COST IMPACT

| | |
|---|---|
| Will this project lead to a reduction in personnel or maintenance costs? If yes, please explain below. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| | |
| Will this project lead to increased efficiency or productivity? If yes, please explain below. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| | |
| Will this project provide an additional revenue generating opportunity? If yes, please explain below. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| | |



Capital Project Request Form

| 7. ECONOMIC AND PUBLIC BENEFIT | |
|--|---|
| Does this project have the potential to promote economic development county-wide? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project have the potential to promote economic development within a specific area of the county? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Will this project result in an increase of long-term jobs within the county? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project enhance or increase recreational opportunities and/or green space? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project contribute toward improved transportation efficiency? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project impact the quality of life of the general county population? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project impact the quality of life of a specific demographic within the county? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project enhance or increase cultural or educational opportunities? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project contribute toward improving the wellness of Marathon County Citizens? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |



Capital Project Request Form

8. RELATED DOCUMENTS

List below any attached documentation including estimates, studies or plans, photographs, standing committee or board minutes, etc. that supports this project request.

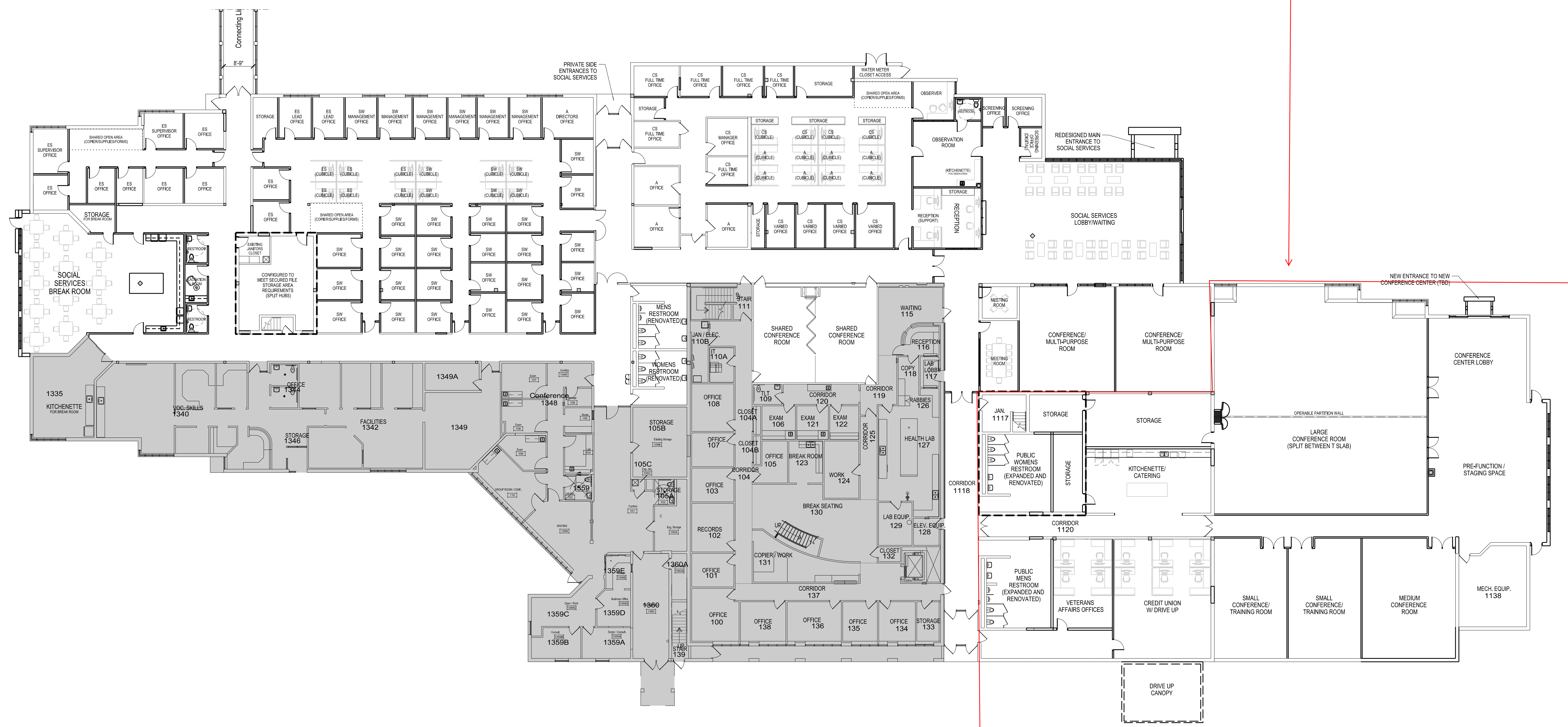
- Preliminary Drawings for the new department layout of Social Services
- Estimate from AYA
-

| Project Description | Area | | Low | | High | | Average |
|---------------------------------------|------------|----|------------------|----|------------------|----|------------------|
| Social Services | | | | | | | |
| New Construction | 2,362 gsf | \$ | 649,550 | \$ | 708,600 | \$ | 679,075 |
| Canopy | 320 gsf | \$ | 75,200 | \$ | 80,000 | \$ | 77,600 |
| Remodel | 26,633 gsf | \$ | 3,062,795 | \$ | 3,595,455 | \$ | 3,329,125 |
| SubTotal | | \$ | 3,787,545 | \$ | 4,384,055 | \$ | 4,085,800 |
| Contract Ammendments | | | | | | | |
| GC/GR/Winter/Permits | 6.5% | \$ | 246,190 | \$ | 284,964 | \$ | 265,577 |
| Contingencies / Insurance | 10.8% | \$ | 435,643 | \$ | 504,254 | \$ | 469,949 |
| Construction Fee | 1.85% | \$ | 82,684 | \$ | 95,706 | \$ | 89,195 |
| Bonds | 1.0% | \$ | 45,521 | \$ | 52,690 | \$ | 49,105 |
| Inflation (2022 Construction) | 4.0% | \$ | 183,903 | \$ | 212,867 | \$ | 198,385 |
| A/E Design Fees | 7.00% | \$ | 334,704 | \$ | 387,417 | \$ | 361,061 |
| Project Reimbursable Expenses | 2.5% | \$ | 8,368 | \$ | 9,685 | \$ | 9,027 |
| Signage Allowance | | \$ | 10,000 | \$ | 15,000 | \$ | 12,500 |
| Fixtures Furniture and Equipment | | \$ | 370,000 | \$ | 479,000 | \$ | 424,500 |
| Total Social Services Projects | | \$ | 5,504,558 | \$ | 6,425,637 | \$ | 5,965,098 |

MARATHON COUNTY AND NORTH CENTRAL HEALTH CARE SOCIAL SERVICES REMODEL

1000 LAKE VIEW DR
 WAUSAU, WI 54403

NOT INCLUDED IN THE SOCIAL SERVICES PRICING



SCALE: 1/16"=1'-0"

X:\71400\cad\71400shA101A.dgn

PLOTTED BY: FaraasM

ORIGINAL SIZE: 24" x 36"

ISSUANCES / REVISIONS

| NO: | DESCRIPTION: | DATE: |
|-----|--------------|-------|
| | | |
| | | |
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ANGUS-YOUNG ASSOCIATES, INC.
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PROJECT NUMBER

71400

APPROVED BY

JJS

REVIEWED BY

JJS

DRAWN BY

FM

PRELIMINARY PROGRAMMING LAYOUT SCHEME (ENLARGED)

A101A

PRELIMINARY - NOT FOR CONSTRUCTION



Capital Project Request Form

| | | | |
|-----------------------|--|----------------------------|-------------------------|
| Project | <i>Replace 1100 Lake View Drive Parking Lot and Seal Coat 1000 Lake View Drive Parking Lot</i> | CIP Funds Requested | <i>\$ 1,808,451</i> |
| Project Number | <i>(Do NOT fill in – for use by F&CM Department)</i> | | Request for Year |
| | | | 2021 |

General Instructions for completing this form:

- Enter requested information after placing the cursor (point and click) in the corresponding gray-shaded blank.
- For all but the most obvious items, more detailed instructions are available by typing the F1 key while the cursor placed on the corresponding blank.
- Each box will expand as necessary to include your text. Limits on text length are noted in the F1 instructions.
- Use the tab key to advance the cursor to the next blank; use shift/tab to move the cursor to the previous blank.
- *If this Charter form is not completed in its entirety, your request may not be ranked.*

| | | | |
|---|--|---|---|
| 1. REQUEST INFORMATION | | | |
| Project Title | <i>Replace 1100 Lake View Drive Parking Lot and Seal Coat 1000 Lake View Drive Parking Lot</i> | | |
| Location | <i>NCHC Campus at 1000 and 1100 Lake View Dr</i> | | |
| Description | <i>Replace 1100 Lake View Drive Parking Lot and Seal Coat 1000 Lake View Drive Parking Lot</i> | | |
| Date of Request | <i>6/3/2021</i> | Project Type | <i>Construction</i> |
| Submitted By | <i>Troy Torgerson</i> | Phone | <i>715-261-6980</i> |
| Department | <i>Facilities and Capital Management</i> | Email | <i>Troy.torgerson@co.marathon.wi.us</i> |
| Has this request been approved by the appropriate standing committee or board. | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> | <i>Minutes of the meeting in which the funding request was approved must be submitted to F&CM Dept. prior to July 1st.</i> | |
| Has funding for this project been requested previously but not ranked high enough to be funded? | Y <input type="checkbox"/> N <input checked="" type="checkbox"/> | If so, how many times has the request been submitted previously? | |
| Is this request a continuation of a previously funded CIP project? | Y <input type="checkbox"/> N <input checked="" type="checkbox"/> | If so, in which year was that project funded? | |
| Will this project be closed out within three years of the fiscal year in which it was funded? If not, please explain why below. | | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | |
| Is this project necessary due to a federal, state, or local legal mandate? If yes, please identify the specific mandate below. | | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | |
| Will this project comply with recommendations or objectives addressed in an adopted plan (e.g. strategic plan), referendum, or study? If yes, please identify the specific plan, referendum, or study below. | | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | |



Capital Project Request Form

2. PROJECT DEFINITION AND SCOPE

| | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---|---|----|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------|
| Project Objective(s) | Reorganize parking to create additional parking spaces - Replace and repair existing parking areas that have been overdue for repairs – damaged by construction traffic | | | | | | | | | | | | | | | | | | | | | | |
| Alignment to Departmental Mission Statement | The department performs maintenance and custodial duties to maintain County facilities, equipment, machinery, and furnishings in good repair and in clean orderly, and safe condition for Marathon County employees and patrons. The department will preserve and extend the useful life of existing facilities, maintaining the appearance of buildings and grounds, assist in the efficient usage of space, provide emergency repairs and preventive maintenance of equipment and structures. | | | | | | | | | | | | | | | | | | | | | | |
| Departmental Priority (check a different priority for each project) | (High) | <table border="0"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td> </tr> <tr> <td><input type="checkbox"/></td><td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> </table> | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (Low) |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | |
| Related Other Projects | | | | | | | | | | | | | | | | | | | | | | | |
| Alternatives Considered | 1. Do nothing. 2. | | | | | | | | | | | | | | | | | | | | | | |
| Why Alternatives Listed Above Were Rejected | 1. Existing parking spaces insufficient for number of employees on campus 2. Existing parking lots are beyond repair and overdue for replacement 3. | | | | | | | | | | | | | | | | | | | | | | |
| Target Start Date | 01/01/22 | Anticipated Completion Date | 12/31/22 | | | | | | | | | | | | | | | | | | | | |

Project Scope Statement List the major components of the project's scope of work below. Refer to documentation such as RFP's, proposals, functional specifications, etc. to set and limit the project scope.

| | | |
|--|---|--|
| <p>"In Scope" = everything the project will include to meet the requirements of the project objectives.</p> <p>"Not in Scope" = any responsibilities, activities, deliverables, or other areas that are NOT to be funded as part of this project, even though they may have some relation to it.</p> | <p>In Scope:</p> <ul style="list-style-type: none"> • Demolition • New construction • Striping • Curb and Gutter • Permits • Signage | <p>Not in Scope:</p> <ul style="list-style-type: none"> • • • • • • |
|--|---|--|

3. PROJECT RISK FACTORS

| | |
|---------------------|--|
| Assumptions | |
| Dependencies | |
| Constraints | |



Capital Project Request Form

| 4. PROJECT COST | | | | |
|--|--------------|---|---|-----------------------------|
| Estimated Cost Components | | Cost Allocation Per Fiscal Year | | |
| Preliminary Design or Study | \$0.00 | If project funds can be allocated over more than 1 year, please indicate the amount to be allocated for each year below: | | |
| Final Design and Engineering | 0.00 | | | |
| Land Acquisition | \$0.00 | Fiscal Year 2022 | Amount | \$0.00 |
| Construction | \$ 1,808,451 | Fiscal Year | Amount | \$0.00 |
| Equipment/Furnishings | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Other: | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Miscellaneous Costs | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Project Budget (total of estimated cost components) | \$ 1,808,451 | ◀----- (sum of above should equal) -----! | | |
| Is this project to be funded entirely with CIP funds? | | | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| If not, list below any other (non-CIP) funding sources for this project | | | Funding Amount | |
| • | | | \$ | |
| • | | | \$ | |
| • | | | \$ | |
| Total CIP Funding Requested | | | \$ | |

| 5. ASSET LIFE, RECURRING COSTS, AND RETURN ON INVESTMENT | | |
|---|------------------------------|---------------|
| If an existing asset (facility or equipment) is being renovated or replaced, what is the age of the existing asset in years? | | |
| Expected service life (in years) of the existing asset, based on applicable industry standards? | | |
| Estimated Service Life of Improvement (in years) | | |
| Future Estimated Recurring Costs | Annual Operating Costs | \$0.00 |
| | Annual Maintenance Costs | \$0.00 |
| | Other Non-Capital Costs | \$0.00 |
| | Total Recurring Costs | \$0.00 |
| Estimated Return on Investment (in years) | | |



Capital Project Request Form

| 6. OPERATING COST IMPACT | |
|--|---|
| Will this project lead to a reduction in personnel or maintenance costs? If yes, please explain below. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Will this project lead to increased efficiency or productivity? If yes, please explain below. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Will this project provide an additional revenue generating opportunity? If yes, please explain below. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |

| 7. ECONOMIC AND PUBLIC BENEFIT | |
|--|---|
| Does this project have the potential to promote economic development county-wide? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project have the potential to promote economic development within a specific area of the county? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Will this project result in an increase of long-term jobs within the county? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project enhance or increase recreational opportunities and/or green space? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project contribute toward improved transportation efficiency? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project impact the quality of life of the general county population? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project impact the quality of life of a specific demographic within the county? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project enhance or increase cultural or educational opportunities? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project contribute toward improving the wellness of Marathon County Citizens? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |

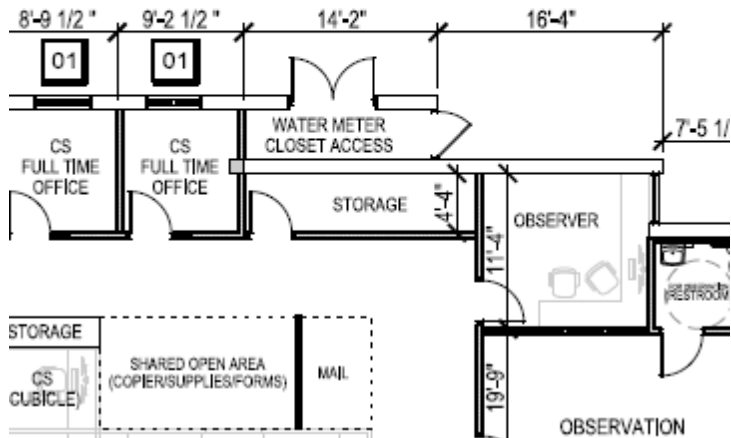


Capital Project Request Form

8. RELATED DOCUMENTS

List below any attached documentation including estimates, studies or plans, photographs, standing committee or board minutes, etc. that supports this project request.

- NCHC project status update
-
-



**MARATHON
 COUNTY AND
 NORTH CENTRAL
 HEALTH CARE
 SOCIAL SERVICES
 REMODEL**

1000 LAKE VIEW DR
 WAUSAU, WI 54403

ISSUANCES / REVISIONS

| NO: | DESCRIPTION: | DATE: |
|-----|--------------|-------|
| | | |
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Due to electronic distribution, this drawing not be printed to the scale indicated on the drawings. Do NOT use scale to determine dimensions or sizes.

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ANGUS-YOUNG ASSOCIATES, INC.
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PROJECT NUMBER

71400

APPROVED BY

JJS

REVIEWED BY

JJS

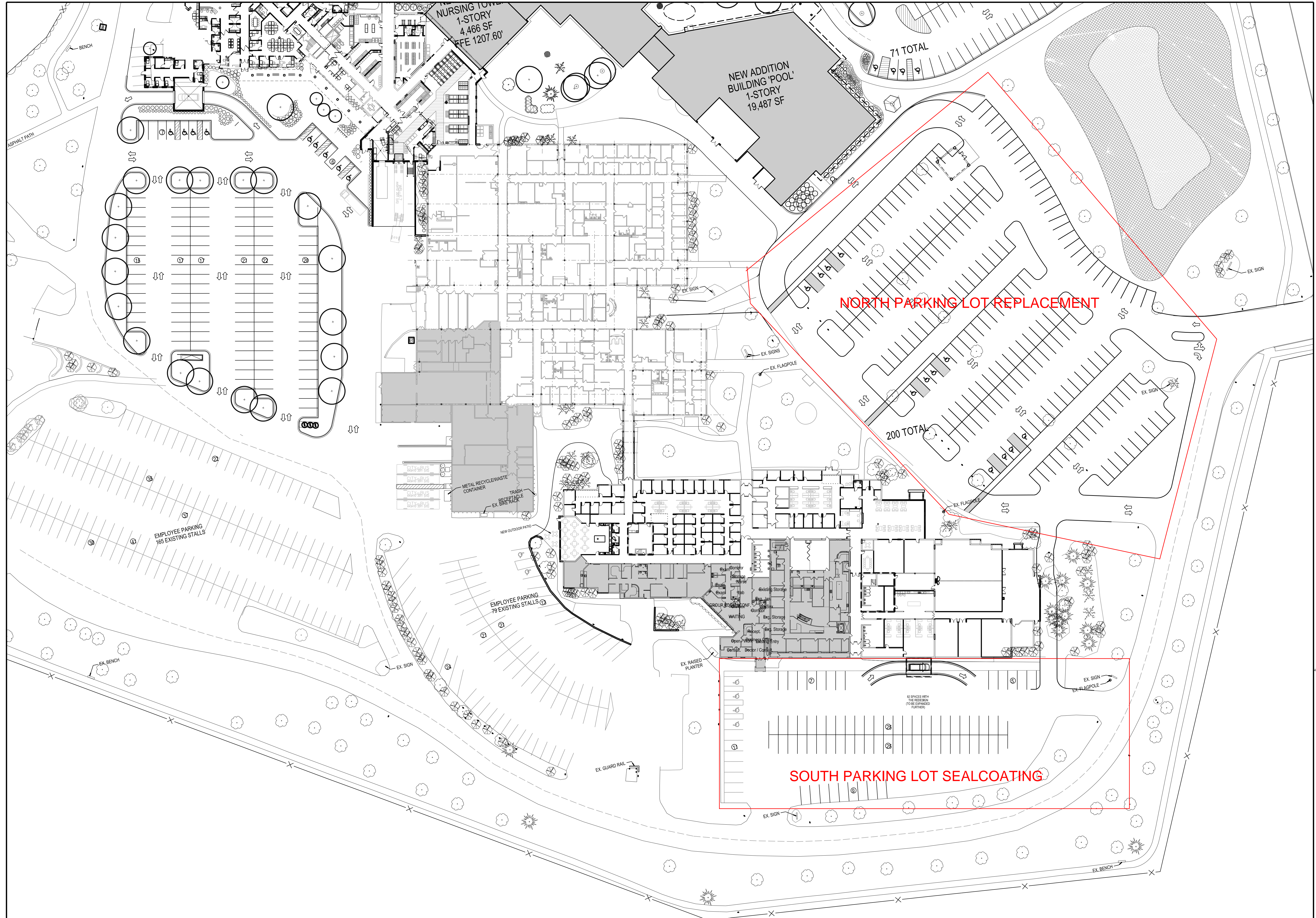
DRAWN BY

FM

**PRELIMINARY
 PROGRAMMING
 LAYOUT SCHEME
 (SITE CONTEXT)**

C100

PRELIMINARY - NOT FOR CONSTRUCTION



SCALE: 1/16"=1'-0"

X:\71400\cad\71400shC100.dgn

PLOTTED BY: Faraam

ORIGINAL SIZE: 24" x 36"

| Project Description | Area | | Low | | High | | Average |
|--------------------------------|-------------|----|------------------|----|------------------|----|------------------|
| Site Work | | | | | | | |
| North Parking Lot Replacement | 123,190 gsf | \$ | 985,520 | \$ | 1,231,900 | \$ | 1,108,710 |
| Sealcoating South Parking Lot | 38,070 gsf | \$ | 38,070 | \$ | 76,140 | \$ | 57,105 |
| SubTotal | | \$ | 1,023,590 | \$ | 1,308,040 | \$ | 1,165,815 |
| Contract Ammendments | | | | | | | |
| GC/GR/Winter/Permits | 6.5% | \$ | 66,533 | \$ | 85,023 | \$ | 75,778 |
| Contingencies / Insurance | 10.8% | \$ | 117,733 | \$ | 150,451 | \$ | 134,092 |
| Construction Fee | 1.85% | \$ | 22,345 | \$ | 28,555 | \$ | 25,450 |
| Bonds | 1.0% | \$ | 12,302 | \$ | 15,721 | \$ | 14,011 |
| Inflation | 4.0% | \$ | 49,700 | \$ | 63,512 | \$ | 56,606 |
| A/E Design Fees | 7.00% | \$ | 90,454 | \$ | 115,591 | \$ | 103,023 |
| Project Reimbursable Expenses | 10% | \$ | 9,045 | \$ | 11,559 | \$ | 10,302 |
| Signage Allowance | | \$ | 20,000 | \$ | 30,000 | \$ | 25,000 |
| Total Sitework Projects | | \$ | 1,411,704 | \$ | 1,808,451 | \$ | 1,610,077 |





Capital Project Request Form

| | | | |
|-----------------------|--|----------------------------|--|
| Project | <i>Remodel of old aquatic therapy pool to Marathon County Conference Center 1000 Lake View Drive</i> | CIP Funds Requested | \$ 3,866,510.00 |
| Project Number | <i>(Do NOT fill in – for use by F&CM Department)</i> | | Request for Year 2021 |

General Instructions for completing this form:

- Enter requested information after placing the cursor (point and click) in the corresponding gray-shaded blank.
- For all but the most obvious items, more detailed instructions are available by typing the F1 key while the cursor placed on the corresponding blank.
- Each box will expand as necessary to include your text. Limits on text length are noted in the F1 instructions.
- Use the tab key to advance the cursor to the next blank; use shift/tab to move the cursor to the previous blank.
- *If this Charter form is not completed in its entirety, your request may not be ranked.*

| | | | |
|---|---|---|--|
| 1. REQUEST INFORMATION | | | |
| Project Title | Remodel of old aquatic therapy pool to Marathon County Conference Center 1000 Lake View Drive | | |
| Location | 1000 Lake View Dr | | |
| Description | Construction for remodel of old aquatic therapy pool to Marathon County Conference Center | | |
| Date of Request | 6/3/2021 | Project Type | Construction |
| Submitted By | Troy Torgerson | Phone | 715-261-6980 |
| Department | Facilities and Capital Management | Email | Troy.torgerson@co.marathon.wi.us |
| Has this request been approved by the appropriate standing committee or board. | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> | <i>Minutes of the meeting in which the funding request was approved must be submitted to F&CM Dept. prior to July 1st.</i> | |
| Has funding for this project been requested previously but not ranked high enough to be funded? | Y <input type="checkbox"/> N <input checked="" type="checkbox"/> | If so, how many times has the request been submitted previously? | |
| Is this request a continuation of a previously funded CIP project? | Y <input type="checkbox"/> N <input checked="" type="checkbox"/> | If so, in which year was that project funded? | |
| Will this project be closed out within three years of the fiscal year in which it was funded? If not, please explain why below. | | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Is this project necessary due to a federal, state, or local legal mandate? If yes, please identify the specific mandate below. | | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| Will this project comply with recommendations or objectives addressed in an adopted plan (e.g. strategic plan), referendum, or study? If yes, please identify the specific plan, referendum, or study below. | | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |



Capital Project Request Form

2. PROJECT DEFINITION AND SCOPE

| | | | |
|--|---|--|----------|
| Project Objective(s) | Remodel existing old pool area to conference rooms, replacing conference rooms lost in sale of 212 River Drive and remodel of 1000 Lake View Drive. New Computer Lab; Credit Union Office | | |
| Alignment to Departmental Mission Statement | The department performs maintenance and custodial duties to maintain County facilities, equipment, machinery, and furnishings in good repair and in clean orderly, and safe condition for Marathon County employees and patrons. The department will preserve and extend the useful life of existing facilities, maintaining the appearance of buildings and grounds, assist in the efficient usage of space, provide emergency repairs and preventive maintenance of equipment and structures. | | |
| Departmental Priority (check a different priority for each project) | (High) | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 | (Low) |
| Related Other Projects | NCHC Addition and Remodel, 1000/1100 Lake View Drive Steam Removal, | | |
| Alternatives Considered | 1. Do nothing – existing River Drive Buildings Still used for large conference rooms. 2. | | |
| Why Alternatives Listed Above Were Rejected | 1. Existing buildings are being sold and depts. Per the county master plan and Moving to MC Lake View Campus. 2. 3. | | |
| Target Start Date | 01/01/22 | Anticipated Completion Date | 12/31/22 |

Project Scope Statement List the major components of the project's scope of work below. Refer to documentation such as RFP's, proposals, functional specifications, etc. to set and limit the project scope.

| | | |
|--|--|---|
| <p>"In Scope" = everything the project will include to meet the requirements of the project objectives.</p> <p>"Not in Scope" = any responsibilities, activities, deliverables, or other areas that are NOT to be funded as part of this project, even though they may have some relation to it.</p> | <p>In Scope:</p> <ul style="list-style-type: none"> • Demolition of existing interior • General Construction for remodel • FFE • IT | <p>Not in Scope:</p> <ul style="list-style-type: none"> • HVAC included in separate project • • • • • • |
|--|--|---|

3. PROJECT RISK FACTORS

| | |
|---------------------|--|
| Assumptions | Marathon County will sell River Drive and Thomas Street Facilities |
| Dependencies | Construction cost market settling down from rapid inflation |
| Constraints | Sale of the buildings on River Drive and Thomas |



Capital Project Request Form

| 4. PROJECT COST | | | | |
|--|------------------------|---|--------|---|
| Estimated Cost Components | | Cost Allocation Per Fiscal Year | | |
| Preliminary Design or Study | \$0.00 | If project funds can be allocated over more than 1 year, please indicate the amount to be allocated for each year below: | | |
| Final Design and Engineering | | | | |
| Land Acquisition | \$0.00 | Fiscal Year 2021 | Amount | \$0.00 |
| Construction | \$ 3,866,510.00 | Fiscal Year | Amount | \$0.00 |
| Equipment/Furnishings | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Other: | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Miscellaneous Costs | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Project Budget (total of estimated cost components) | \$ 3,866,510.00 | ←----- (sum of above should equal) -----! | | |
| Is this project to be funded entirely with CIP funds? | | | | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| If not, list below any other (non-CIP) funding sources for this project | | | | Funding Amount |
| • | | | | \$ |
| • | | | | \$ |
| • | | | | \$ |
| Total CIP Funding Requested | | | | \$ |

| 5. ASSET LIFE, RECURRING COSTS, AND RETURN ON INVESTMENT | | |
|---|------------------------------|---------------|
| If an existing asset (facility or equipment) is being renovated or replaced, what is the age of the existing asset in years? | | |
| Expected service life (in years) of the existing asset, based on applicable industry standards? | | |
| Estimated Service Life of Improvement (in years) | | |
| Future Estimated Recurring Costs | Annual Operating Costs | \$0.00 |
| | Annual Maintenance Costs | \$0.00 |
| | Other Non-Capital Costs | \$0.00 |
| | Total Recurring Costs | \$0.00 |
| Estimated Return on Investment (in years) | | |



Capital Project Request Form

| 6. OPERATING COST IMPACT | |
|--|---|
| Will this project lead to a reduction in personnel or maintenance costs? If yes, please explain below. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Will this project lead to increased efficiency or productivity? If yes, please explain below. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Will this project provide an additional revenue generating opportunity? If yes, please explain below. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |

| 7. ECONOMIC AND PUBLIC BENEFIT | |
|--|---|
| Does this project have the potential to promote economic development county-wide? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project have the potential to promote economic development within a specific area of the county? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Will this project result in an increase of long-term jobs within the county? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project enhance or increase recreational opportunities and/or green space? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project contribute toward improved transportation efficiency? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project impact the quality of life of the general county population? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project impact the quality of life of a specific demographic within the county? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project enhance or increase cultural or educational opportunities? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Does this project contribute toward improving the wellness of Marathon County Citizens? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |



Capital Project Request Form

8. RELATED DOCUMENTS

List below any attached documentation including estimates, studies or plans, photographs, standing committee or board minutes, etc. that supports this project request.

- AYA Estimate
- Project Schematic Design Drawings
-

| Project Description | Area | | Low | | High | | Average |
|--|------------|----|------------------|----|------------------|----|------------------|
| Conference Center | | | | | | | |
| New Construction | 1,741 gsf | \$ | 478,775 | \$ | 522,300 | \$ | 500,538 |
| Canopy | 290 gsf | \$ | 68,150 | \$ | 72,500 | \$ | 70,325 |
| Remodel | 12,998 gsf | \$ | 1,884,710 | \$ | 2,144,670 | \$ | 2,014,690 |
| SubTotal | | \$ | 2,431,635 | \$ | 2,739,470 | \$ | 2,585,553 |
| Contract Ammendments | | | | | | | |
| GC/GR/Winter/Permits | 6.5% | \$ | 158,056 | \$ | 178,066 | \$ | 168,061 |
| Contingencies / Insurance | 10.8% | \$ | 279,687 | \$ | 315,094 | \$ | 297,390 |
| Construction Fee | 1.85% | \$ | 53,083 | \$ | 59,804 | \$ | 56,444 |
| Bonds | 1.0% | \$ | 29,225 | \$ | 32,924 | \$ | 31,074 |
| Inflation (2022 Construction) | 4.0% | \$ | 118,067 | \$ | 133,014 | \$ | 125,541 |
| A/E Design Fees | 7.00% | \$ | 214,883 | \$ | 242,086 | \$ | 228,484 |
| Project Reimbursable Expenses | 2.5% | \$ | 5,372 | \$ | 6,052 | \$ | 5,712 |
| Signage Allowance | | \$ | 25,000 | \$ | 30,000 | \$ | 35,000 |
| Fixtures Furniture and Equipment | | \$ | 85,000 | \$ | 130,000 | \$ | 107,500 |
| Total Conference Center Project | | \$ | 3,400,008 | \$ | 3,866,510 | \$ | 3,640,760 |





Capital Project Request Form

| | | | |
|-----------------------|---|----------------------------|--|
| Project | <i>HVAC Construction for Steam Removal at NCHC Campus Phase 3</i> | CIP Funds Requested | \$ 9,662,175.00 |
| Project Number | <i>(Do NOT fill in – for use by F&CM Department)</i> | | Request for Year 2021 |

General Instructions for completing this form:

- Enter requested information after placing the cursor (point and click) in the corresponding gray-shaded blank.
- For all but the most obvious items, more detailed instructions are available by typing the F1 key while the cursor placed on the corresponding blank.
- Each box will expand as necessary to include your text. Limits on text length are noted in the F1 instructions.
- Use the tab key to advance the cursor to the next blank; use shift/tab to move the cursor to the previous blank.
- *If this Charter form is not completed in its entirety, your request may not be ranked.*

| | | | |
|---|---|---|----------------------------------|
| 1. REQUEST INFORMATION | | | |
| Project Title | HVAC Construction for Steam Removal at NCHC Campus Phase 3 | | |
| Location | NCHC Campus, 1000 AND 1100 LAKEVIEW DRIVE BUILDINGS | | |
| Description | Phase 3 of a multi-year project leading to the replacement of a 50 plus year old steam boiler central plant at NCHC. It will allow us to replace inefficient and aging steam heating. | | |
| Date of Request | 5/12/21 | Project Type | Repair/Replacement |
| Submitted By | Troy Torgerson | Phone | 715-261-6980 |
| Department | Facilities and Capital Management | Email | Troy.torgerson@co.marathon.wi.us |
| Has this request been approved by the appropriate standing committee or board. | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> | <i>Minutes of the meeting in which the funding request was approved must be submitted to F&CM Dept. prior to July 1st.</i> | |
| Has funding for this project been requested previously but not ranked high enough to be funded? | Y <input type="checkbox"/> N <input checked="" type="checkbox"/> | If so, how many times has the request been submitted previously? | |
| Is this request a continuation of a previously funded CIP project? | Y <input checked="" type="checkbox"/> N <input type="checkbox"/> | If so, in which year was that project funded? | 2020 |
| Will this project be closed out within three years of the fiscal year in which it was funded? If not, please explain why below. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | | |
| Is this project necessary due to a federal, state, or local legal mandate? If yes, please identify the specific mandate below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | | |
| Will this project comply with recommendations or objectives addressed in an adopted plan (e.g. strategic plan), referendum, or study? If yes, please identify the specific plan, referendum, or study below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | | |



Capital Project Request Form

| 2. PROJECT DEFINITION AND SCOPE | | | |
|---|---|---|---------|
| Project Objective(s) | To replace existing steam boilers installed in 1971 that are well past their useful life with more efficient hot water boilers and equipment. | | |
| Alignment to Departmental Mission Statement | The department performs maintenance and custodial duties to maintain County facilities, equipment, machinery, and furnishings in good repair and in clean orderly, and safe condition for Marathon County employees and patrons. The department will preserve and extend the useful life of existing facilities, maintaining the appearance of buildings and grounds, assist in the efficient usage of space, provide emergency repairs and preventive maintenance of equipment and structures. | | |
| Departmental Priority (check a different priority for each project) | (High) | 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> | (Low) |
| Related Other Projects | Campus Remodel, LVPP Boiler Replacement, Other County Depts. moving to campus. | | |
| Alternatives Considered | 1. Do nothing – continue to use the existing boilers that new parts are no longer available. 2. Replace with Steam Boilers. 3. | | |
| Why Alternatives Listed Above Were Rejected | 1. Steam is an old technology and isn't used anymore. 2. Trouble getting them serviced and purchasing parts at ALL – they are now used and only when other steam boilers are demolished – and finding them at a reasonable price WHEN parts can be found. 3. Safety. Over pressurized boilers. Multiple times in last year we have had to work in extreme conditions from heat and pressure from the boilers and being over pressured. | | |
| Target Start Date | 01/01/22 | Anticipated Completion Date | 10/1/22 |
| Project Scope Statement List the major components of the project's scope of work below. Refer to documentation such as RFP's, proposals, functional specifications, etc. to set and limit the project scope. | | | |



Capital Project Request Form

| | | |
|--|---|--|
| <p>“In Scope” = everything the project will include to meet the requirements of the project objectives.</p> <p>“Not in Scope” = any responsibilities, activities, deliverables, or other areas that are NOT to be funded as part of this project, even though they may have some relation to it.</p> | <p><u>In Scope:</u></p> <ul style="list-style-type: none"> • All general construction required for the installation. • New Boiler equipment, piping, controls installed • Building Automation System • All utilities, permitting, from state and local officials. • Demolition and disposal of existing boilers. • All new VAV replacing all pneumatic controls with DDC • Ceiling and Lighting to be reused as much as possible – replaced if necessary. • Asbestos Removal | <p><u>Not in Scope:</u></p> <ul style="list-style-type: none"> • • • • • • • |
|--|---|--|

| 3. PROJECT RISK FACTORS | |
|-------------------------|--|
| Assumptions | Existing boiler will make it through another heating season. |
| Dependencies | Approval of continuing project that is aging out and needs to be replaced. |
| Constraints | Buildings to remain occupied and in use during construction |



Capital Project Request Form

| 4. PROJECT COST | | | | |
|---|------------------------|--|---|-----------------------------|
| Estimated Cost Components | | Cost Allocation Per Fiscal Year | | |
| Preliminary Design or Study | \$0.00 | If project funds can be allocated over more than 1 year, please indicate the amount to be allocated for each year below: | | |
| Final Design and Engineering | \$0.00 | | | |
| Land Acquisition | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Construction | \$ 9,662,175.00 | Fiscal Year | Amount | \$0.00 |
| Equipment/Furnishings | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Other: | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Miscellaneous Costs | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Project Budget (total of estimated cost components) | \$9,662,175.00 | ◀----- (sum of above should equal) -----! | | |
| Is this project to be funded entirely with CIP funds? | | | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| If not, list below any other (non-CIP) funding sources for this project | | | Funding Amount | |
| • | | | \$ | |
| • | | | \$ | |
| • | | | \$ | |
| Total CIP Funding Requested | | \$ 9,662,175.00 | | |

| 5. ASSET LIFE, RECURRING COSTS, AND RETURN ON INVESTMENT | | |
|--|------------------------------|---------------|
| If an existing asset (facility or equipment) is being renovated or replaced, what is the age of the existing asset in years? | 50+ | |
| Expected service life (in years) of the existing asset, based on applicable industry standards? | 30 | |
| Estimated Service Life of Improvement (in years) | 30 | |
| Future Estimated Recurring Costs | Annual Operating Costs | \$0.00 |
| | Annual Maintenance Costs | \$0.00 |
| | Other Non-Capital Costs | \$0.00 |
| | Total Recurring Costs | \$0.00 |
| Estimated Return on Investment (in years) | | |



Capital Project Request Form

| 6. OPERATING COST IMPACT | |
|--|---|
| Will this project lead to a reduction in personnel or maintenance costs? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| | |
| Will this project lead to increased efficiency or productivity? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| | |
| Will this project provide an additional revenue generating opportunity? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| | |

| 7. ECONOMIC AND PUBLIC BENEFIT | |
|---|---|
| Does this project have the potential to promote economic development for Marathon county? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| | |
| | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| | |
| Will this project result in an increase of long-term jobs within the county? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| | |
| Does this project enhance or increase recreational opportunities and/or green space? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| | |
| Does this project contribute toward improved transportation efficiency? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| | |
| Does this project impact the quality of life for Marathon County? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| | |
| | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| | |
| Does this project enhance or increase cultural or educational opportunities? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| | |
| Does this project contribute toward improving the wellness of Marathon County Citizens? If yes, please explain below. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| | |



Capital Project Request Form

Page
6 of 6

8. RELATED DOCUMENTS

List below any attached documentation including estimates, studies or plans, photographs, standing committee or board minutes, etc. that supports this project request.

- See attached Floor Plans for 1000 Lake View Drive and 1100 Lake View Drive.
- See Attached Photos
-



OPINION OF PROBABLE CONSTRUCTION COST

ALTERNATE BID FOR BOILER UPGRADES & OFFICE RENOVATIONS

PROJECT NAME:
PROJECT NUMBER:
DATE:

MARATHON COUNTY | NCHC BOILER REPLACEMENTS
2105
June 7, 2021

| Equipment | Quantity | Unit | Cost Material | Total Material | Man Hours | Man Hours | Sub Contracts Materials | Man Hours | Grand Total |
|---|----------|-------------|------------------|-------------------|--------------|--------------|----------------------------|-----------|----------------|
| HVAC Equipment | | | | | | | | | |
| 1000 Building | | | | | | | | | |
| Hot Water Boiler & Condensate Neutralizer | 2 | Each | \$60,000 | \$120,000 | 80 | 160 | | | |
| Pumps | 2 | Each | \$0 | \$0 | 8 | 16 | | | |
| Water Filter | 1 | Each | \$0 | \$0 | 8 | 8 | | | |
| Expansion Tank | 1 | Each | \$0 | \$0 | 4 | 4 | | | |
| Air Separator | 1 | Each | \$0 | \$0 | 4 | 4 | | | |
| Valves | 1 | Lump Sum | \$0 | \$0 | 40 | 40 | | | |
| AC-1 (Theater) - Replacement with AHS-2 | 1 | Lump Sum | \$58,000 | \$58,000 | 1250 | 1250 | | | |
| AC-1 RA Fan (Theater) - Replacement with AHS-2 | 1 | Lump Sum | \$8,000 | \$8,000 | 40 | 40 | | | |
| AC-2 Coil (Office) - No Coil Just Demo Humidifier | 1 | Lump Sum | \$23,000 | \$23,000 | 400 | 400 | | | |
| AC-3 Coil (West Offices) - No Coil Just Demo Humidifier | 1 | Lump Sum | \$111,750 | \$111,750 | 1800 | 1800 | | | |
| AC-4 Coil (Pool Unit) | 1 | Lump Sum | \$75,000 | \$75,000 | 1500 | 1500 | | | |
| HV-1 Coil (Locker Rooms) | 1 | Lump Sum | \$28,000 | \$28,000 | 1000 | 1000 | | | |
| Additional Office Renovations | 49,350 | SF | \$40 | \$1,974,000 | 0 | 0 | | | |
| 1100 Building | | | | | | | | | |
| Hot Water Boiler & Condensate Neutralizer | 2 | Each | \$75,000 | \$150,000 | 80 | 160 | | | |
| Pumps | 2 | Each | \$0 | \$0 | 8 | 16 | | | |
| Water Filter | 1 | Each | \$0 | \$0 | 8 | 8 | | | |
| Expansion Tank | 1 | Each | \$0 | \$0 | 4 | 4 | | | |
| Air Separator | 1 | Each | \$0 | \$0 | 4 | 4 | | | |
| Valves | 1 | Lump Sum | \$0 | \$0 | 40 | 40 | | | |
| Unit Heater | 1 | Lump Sum | \$2,500 | \$2,500 | 8 | 8 | | | |
| AHS-1 Coil & Reconfiguration of AHU (Whole Building) | 1 | Lump Sum | \$20,000 | \$20,000 | 400 | 400 | | | |
| AHS-2 (Kitchen) - Demo & Relocate | 1 | Lump Sum | \$0 | \$0 | 200 | 200 | | | |
| AHS-4 RTU (Copy Room) - 10T | 1 | Lump Sum | \$15,000 | \$15,000 | 80 | 80 | | | |
| Additional Office Renovations | 70,000 | SF | \$40 | \$2,800,000 | 0 | 0 | | | |
| ALC Venting | | | | | | | | | |
| 1000 Building | 4 | Each | \$2,500 | \$10,000 | 8 | 32 | | | |
| 1100 Building | 4 | Each | \$2,500 | \$15,000 | 8 | 32 | | | |
| Piping | | | | | | | | | |
| 1000 Building | | | | | | | | | |
| 5" Mains | 100 | Linear Feet | \$101.32 | \$10,132 | 0.35 | 35 | | | |
| 4" Mains | 300 | Linear Feet | \$101.32 | \$30,395 | 0.35 | 105 | | | |
| 3" Mains | 1000 | Linear Feet | \$75.96 | \$75,960 | 0.28 | 280 | | | |
| 2-1/2" Mains | 200 | Linear Feet | \$49.97 | \$9,994 | 0.19 | 38 | | | |
| 3/4" Branch | 510 | Linear Feet | \$28.64 | \$14,609 | 0.08 | 41 | | | |
| 2" Branch (Gas Piping) | 150 | Linear Feet | \$42.37 | \$6,356 | 0.19 | 29 | | | |
| 1100 Building | | | | | | | | | |
| 5" Mains | 400 | Linear Feet | \$101.32 | \$40,526 | 0.35 | 140 | | | |
| 4" Mains | 300 | Linear Feet | \$101.32 | \$30,395 | 0.35 | 105 | | | |
| 3" Mains | 300 | Linear Feet | \$75.96 | \$22,788 | 0.28 | 84 | | | |
| 2" Mains | 100 | Linear Feet | \$49.97 | \$4,997 | 0.19 | 19 | | | |
| 3/4" Branch | 200 | Linear Feet | \$28.64 | \$5,729 | 0.08 | 16 | | | |
| 2" Branch (Gas Piping) | 50 | Linear Feet | \$42.37 | \$2,119 | 0.19 | 10 | | | |
| Demolition | | | | | | | | | |
| 1000 Building | | | | | | | | | |
| AC-1 (Theater) - Replacement with AHS-2 | 1 | Lump Sum | \$0 | \$0 | 320 | 320 | | | |
| AC-1 RA Fan Theater) - Replacement with AHS-2 | 1 | Lump Sum | \$0 | \$0 | 40 | 40 | | | |
| AC-2 Coil (Office) - No Coil Just Demo Humidifier | 1 | Lump Sum | \$0 | \$0 | 16 | 16 | | | |
| AC-3 Coil (West Offices) - No Coil Just Demo Humidifier | 1 | Lump Sum | \$0 | \$0 | 16 | 16 | | | |
| AC-4 Coil (Pool Unit) | 1 | Lump Sum | \$0 | \$0 | 40 | 40 | | | |
| HV-1 Coil (Locker Rooms) | 1 | Lump Sum | \$0 | \$0 | 40 | 40 | | | |
| Heat Exchanger Demolition | 3 | Each | - | - | 8 | 24 | | | |
| Condensate Pump Demolition | 6 | Each | - | - | 4 | 24 | | | |
| Pump Demolition | 6 | Each | - | - | 4 | 24 | | | |
| Pump Accessories Demolition | 6 | Each | - | - | 4 | 24 | | | |
| Water Heater Demolition | 1 | Each | - | - | 16 | 16 | | | |
| Steam Humidifiers | 3 | Each | - | - | 4 | 12 | | | |
| Pipe Demolition | 1700 | Linear Feet | - | - | 0.25 | 425 | | | |
| Ceiling Demolition | 1700 | Lump Sum | - | - | 0.1 | 170 | | | |
| 1100 Building | | | | | | | | | |
| AHS-1 Coil & Reconfiguration of AHU (Whole Building) | 1 | Lump Sum | \$0 | \$0 | 240 | 240 | | | |
| AHS-2 (Kitchen) - Demo & Relocate | 1 | Lump Sum | \$0 | \$0 | 200 | 200 | | | |
| AHS-4 AHU (Copy Room) - 10T | 1 | Lump Sum | \$0 | \$0 | 80 | 80 | | | |
| Kitchen Exhaust | 1 | Lump Sum | \$0 | \$0 | 80 | 80 | | | |
| Heat Exchanger Demolition | 1 | Lump Sum | - | - | 8 | 8 | | | |
| Boiler Demolition | 3 | Lump Sum | - | - | 120 | 360 | | | |
| Boiler Accessories Demolition | 2 | Lump Sum | - | - | 32 | 64 | | | |
| Fuel Oil Piping Demolition | 1 | Lump Sum | - | - | 8 | 8 | | | |
| Condensate Pump Demolition | 2 | Lump Sum | - | - | 8 | 16 | | | |

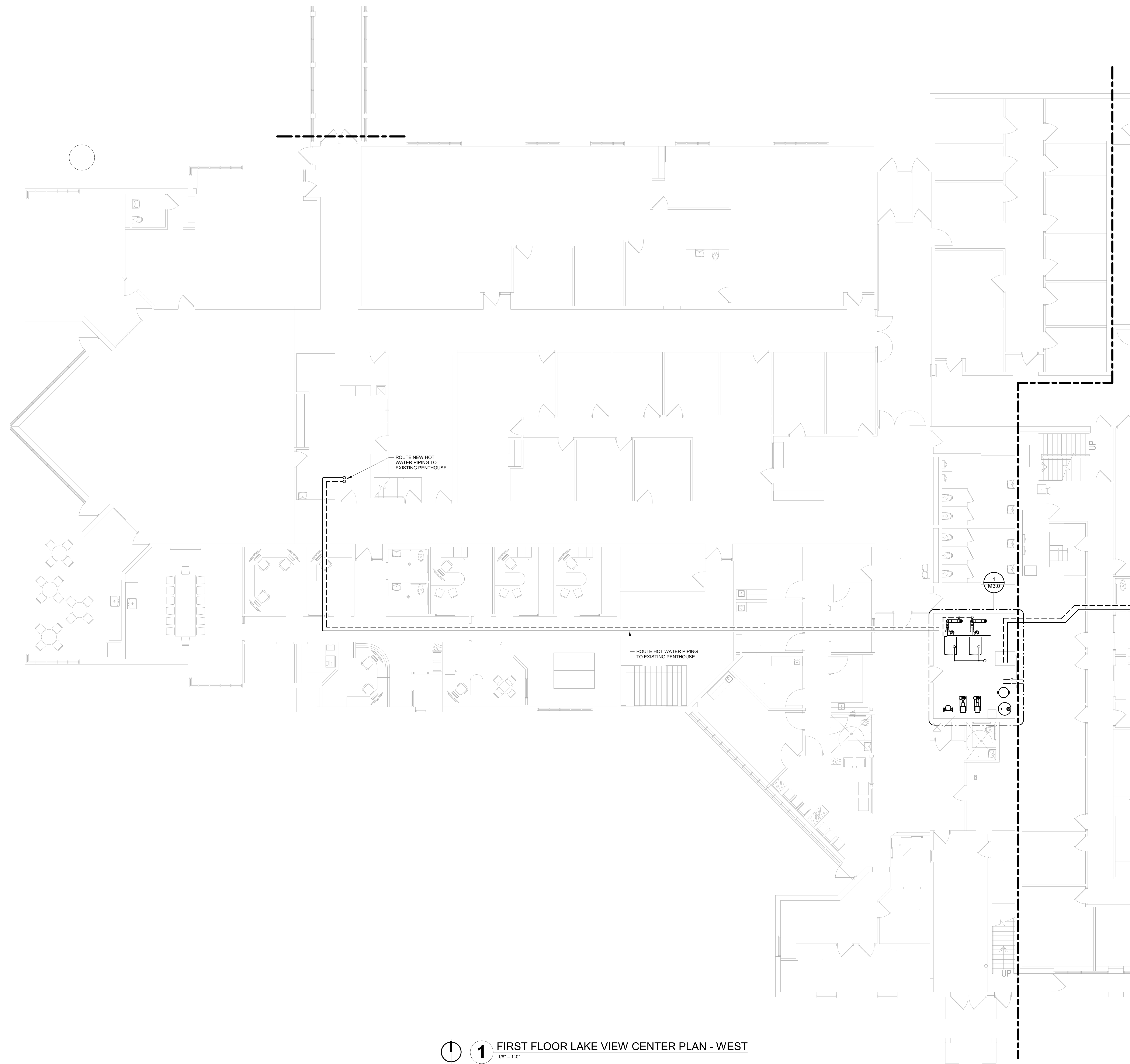
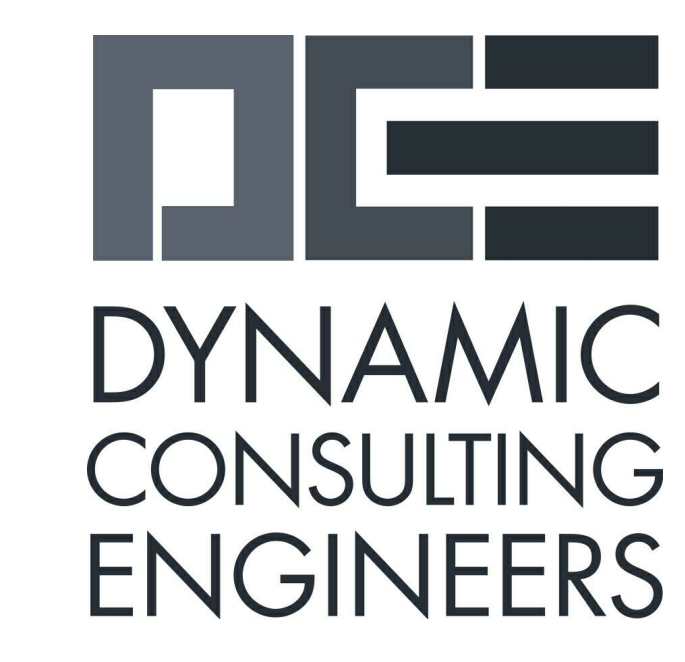


OPINION OF PROBABLE CONSTRUCTION COST
ALTERNATE BID FOR BOILER UPGRADES & OFFICE RENOVATIONS

PROJECT NAME:
PROJECT NUMBER:
DATE:

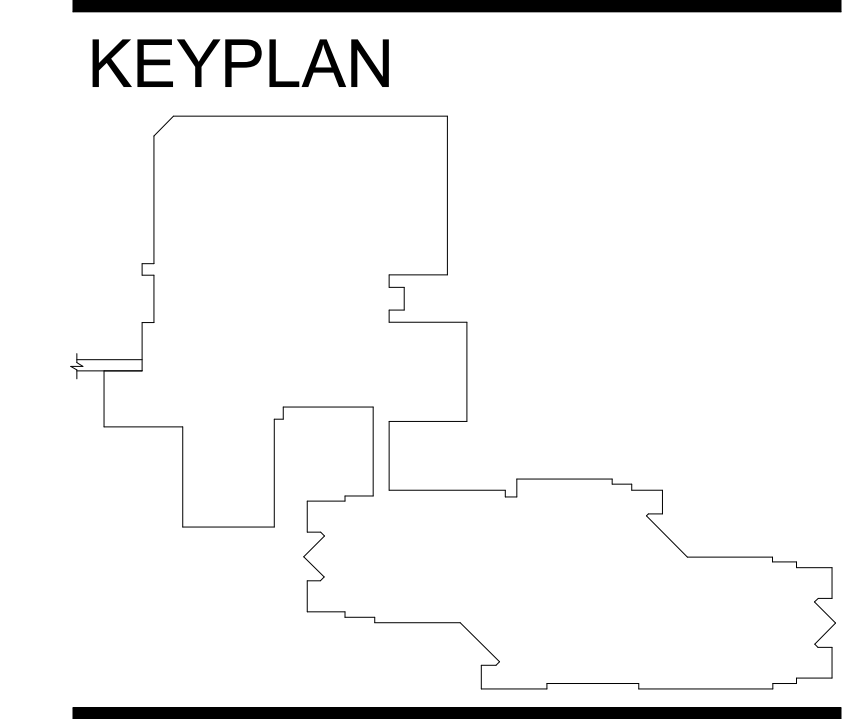
MARATHON COUNTY | NCHC BOILER REPLACEMENTS
2105
June 7, 2021

| Equipment | Quantity | Unit | Cost Material | Total Material | Man Hours | Man Hours | Sub Contracts Materials | Man Hours | Grand Total |
|--|----------|-------------|------------------|-------------------|--------------|--------------|----------------------------|-----------|---------------------|
| Pump Demolition | 2 | Lump Sum | - | - | 8 | 16 | | | |
| Pump Accessories Demolition | 2 | Lump Sum | - | - | 8 | 16 | | | |
| Steam Humidifiers | 1 | Lump Sum | - | - | 4 | 4 | | | |
| Pipe Demolition | 1690 | Lump Sum | - | - | 0.65 | 1098.5 | | | |
| Pipe Demolition to LVPP | 1300 | Lump Sum | - | - | 0.25 | 325 | | | |
| Ceiling Demolition | 1700 | Lump Sum | - | - | 0.1 | 170 | | | |
| Insulation | | | | | | | | | |
| 1000 Building | | | | | | | \$45,000 | 200 | |
| 1100 Building | | | | | | | \$45,000 | 200 | |
| Temperature Controls | | | | | | | | | |
| 1000 Building | | | | | | | | | |
| General Work | 1 | Lump Sum | - | - | - | - | \$75,000 | 200 | |
| VAV Box Upgrades | 0 | Each | - | - | - | - | \$0 | 0 | |
| Control Valve Upgrades | 8 | Each | \$0 | \$0 | 4 | 32 | \$4,000 | 32 | |
| Motor Operated Damper Upgrades | 8 | Each | \$0 | \$0 | 4 | 32 | \$16,000 | 32 | |
| 1100 Building | | | | | | | | | |
| General Work | 1 | Lump Sum | - | - | - | - | \$75,000 | 200 | |
| VAV Box Upgrades | 0 | Each | - | - | - | - | \$0 | 0 | |
| Control Valve Upgrades | 0 | Each | - | - | - | - | \$0 | 0 | |
| Motor Operated Damper Upgrades | 0 | Each | - | - | - | - | \$0 | 0 | |
| Testing, Adjusting, & Balancing | | | | | | | | | |
| 1000 Building | 1 | Lump Sum | - | - | - | - | \$0 | 240 | |
| 1100 Building | 1 | Lump Sum | - | - | - | - | \$0 | 240 | |
| Electrical | | | | | | | | | |
| 1000 Building | | | | | | | | | |
| General Demolition | 1 | Lump Sum | - | - | - | - | \$0 | 120 | |
| General Work | 1 | Lump Sum | - | - | - | - | \$20,000 | 120 | |
| 1100 Building | | | | | | | | | |
| General Demolition | 1 | Lump Sum | - | - | - | - | \$0 | 120 | |
| General Work | 1 | Lump Sum | - | - | - | - | \$20,000 | 120 | |
| Plumbing | | | | | | | | | |
| General Demolition | 1 | Lump Sum | - | - | - | - | \$0 | 80 | |
| Water Heater & Venting | 1 | Lump Sum | - | - | - | - | \$8,000 | 40 | |
| Piping | 1 | Lump Sum | - | - | - | - | | | |
| 3" Mains | 250 | Linear Feet | \$75.96 | \$18,990 | 0.28 | 70 | | | |
| 2" Mains | 150 | Linear Feet | \$49.97 | \$7,495 | 0.19 | 28.5 | | | |
| 3/4" Branch | 0 | Linear Feet | \$28.64 | \$0 | 0.08 | 0 | | | |
| Pipe Insulation | 400 | Linear Feet | - | - | - | - | \$20,000 | 120 | |
| Miscellaneous Work | | | | | | | | | |
| 1000 Building | | | | | | | | | |
| Concrete Pads | 1 | Lump Sum | \$0 | \$0 | 0 | 0 | \$10,000 | 40 | |
| Roof Openings | 1 | Lump Sum | \$0 | \$0 | 0 | 0 | \$10,000 | 40 | |
| Crane Rental | 1 | Each | \$0 | \$0 | 0 | 40 | \$18,000 | 24 | |
| Ceiling Replacement | 5400 | Square Foot | \$0 | \$0 | 0 | 0 | \$54,000 | 240 | |
| Water Treatment | 1 | Lump Sum | \$0 | \$0 | 0 | 0 | \$10,000 | 40 | |
| 1100 Building | | | | | | | | | |
| Concrete Pads | 1 | Lump Sum | \$0 | \$0 | 0 | 0 | \$10,000 | 40 | |
| Roof Openings | 1 | Lump Sum | \$0 | \$0 | 0 | 0 | \$10,000 | 40 | |
| Crane Rental | 1 | Each | \$0 | \$0 | 0 | 40 | \$18,000 | 24 | |
| Ceiling Replacement | 2000 | Square Foot | \$0 | \$0 | 0 | 0 | \$20,000 | 120 | |
| Water Treatment | 1 | Lump Sum | \$0 | \$0 | 0 | 0 | \$10,000 | 40 | |
| Sub Total | | | | \$5,690,733 | | 12225.8 | \$498,000 | 2712 | |
| Mark-up on Materials @ 10% | | | | \$569,073 | | | | | |
| Mark-up on sub-contractors @ 7.5% | | | | | | | \$37,350 | | |
| Labor Costs @ \$100 per hour | | | | | | \$1,222,580 | | \$271,200 | |
| Totals for HVAC | | | | \$6,259,807 | | \$1,222,580 | \$535,350 | \$271,200 | \$8,288,937 |
| Additional Construction Cost for Tenant Improvement Work | | | | | | | | | \$6,185,725 |
| Additional Design Fees for Tenant Improvement Work | | | | | | 8.0% | | | \$494,858 |
| Totals for HVAC | | | | | | | | | \$8,783,795 |
| Contingency | | | | | | 25% | | | \$10,979,744 |



PROJECT TITLE
 MARATHON COUNTY
 NORTH CENTRAL
 HEALTHCARE CENTER
 BOILER CONVERSION

1000 LAKE VIEW DRIVE &
 1100 LAKE VIEW DRIVE
 WAUSAU, WI 54403



SCHEMATIC DESIGN

| # | DATE | DESCRIPTION |
|---|------|-------------|
| | | |

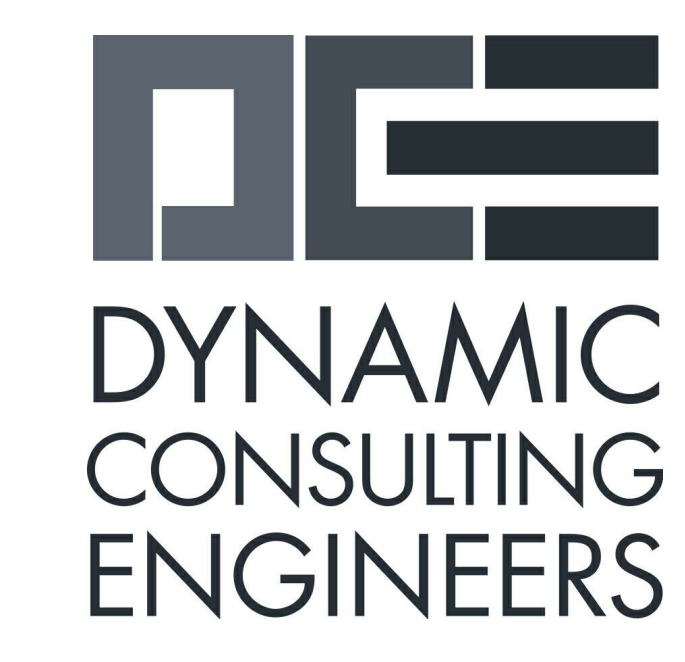
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| DCE PROJECT NUMBER | 2105 |
| ISSUANCE DATE | 05.01.2021 |
| PROJECT MANAGER | DG |

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**FIRST FLOOR NEW
 WORK PLAN**

1 FIRST FLOOR LAKE VIEW CENTER PLAN - WEST
 1/8" = 1'-0"

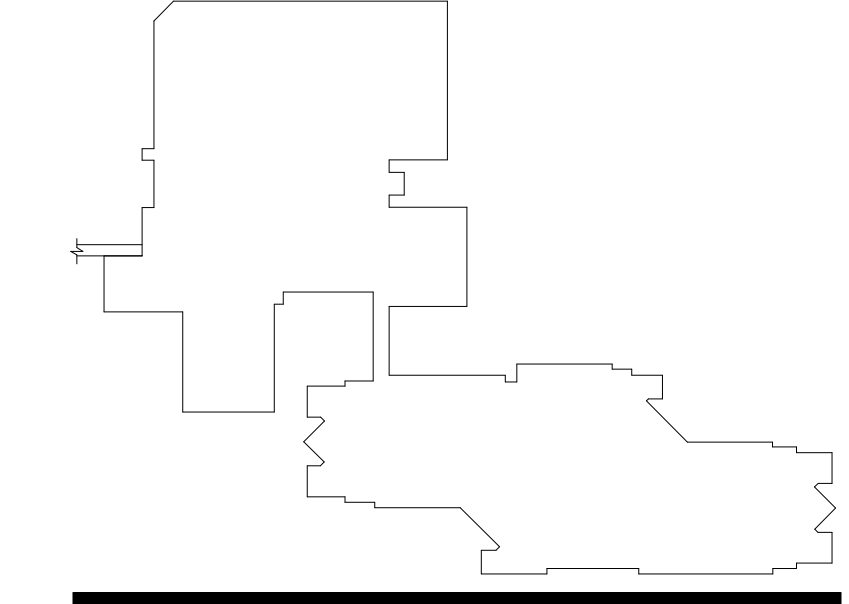
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PROJECT TITLE
 MARATHON COUNTY
 NORTH CENTRAL
 HEALTHCARE CENTER
 BOILER CONVERSION

1000 LAKE VIEW DRIVE &
 1100 LAKE VIEW DRIVE
 WAUSAU, WI 54403

KEYPLAN



SCHEMATIC DESIGN

| # | DATE | DESCRIPTION |
|---|------|-------------|
| | | |

PROGRESS SET

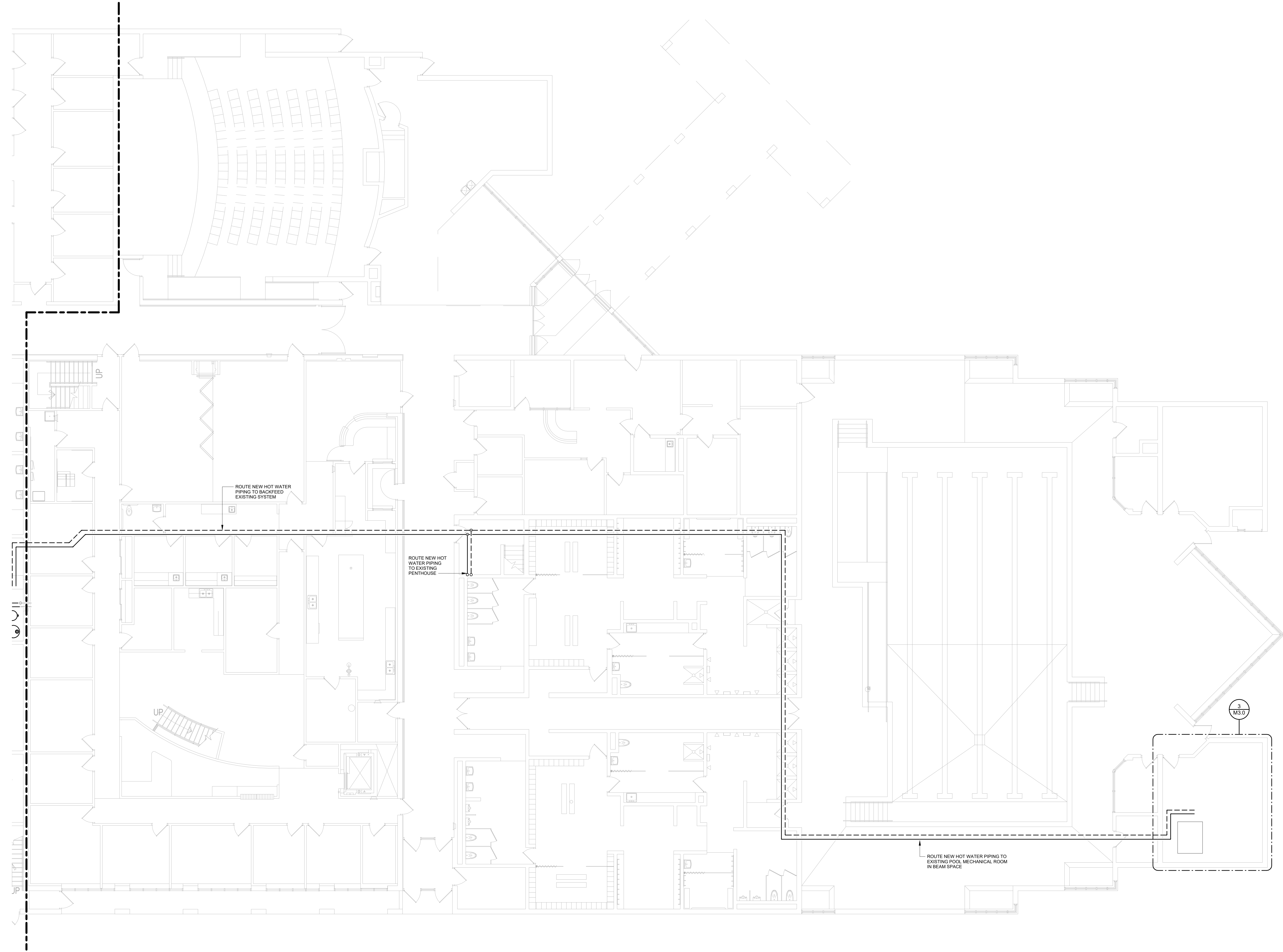
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 OR CONSTRUCTION

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|--------------------|------------|
| DCE PROJECT NUMBER | 2105 |
| ISSUANCE DATE | 05.01.2021 |
| PROJECT MANAGER | DG |

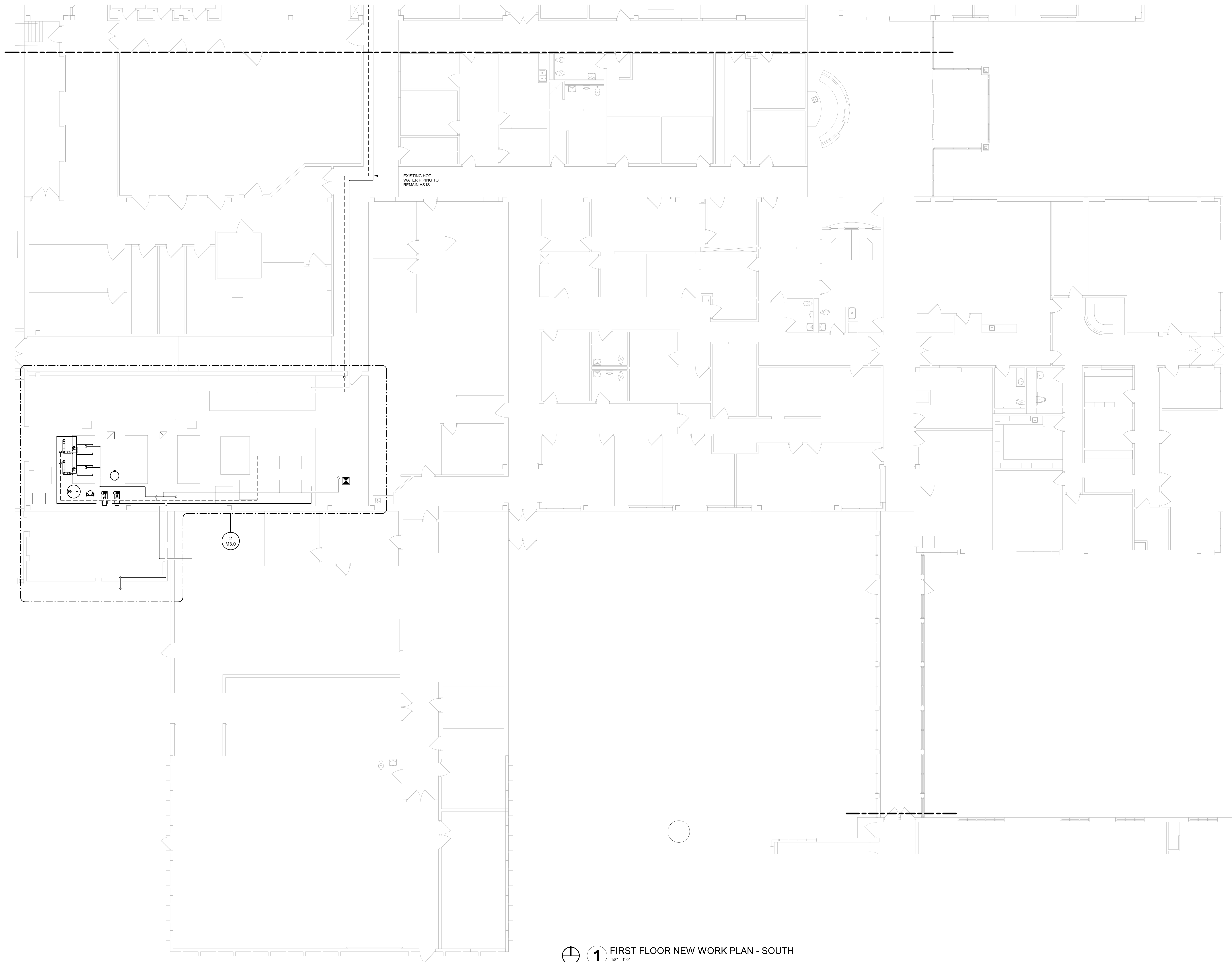
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**FIRST FLOOR NEW
 WORK PLAN**

M1.2



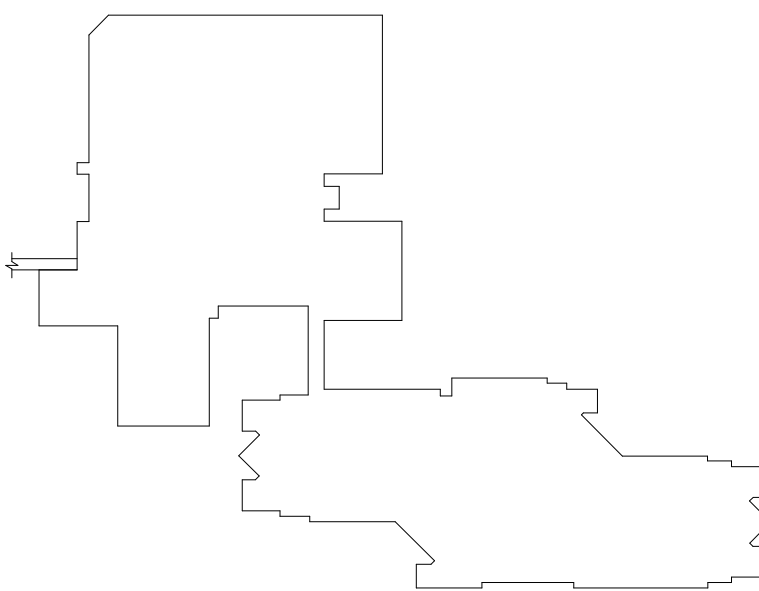
1 FIRST FLOOR LAKE VIEW CENTER PLAN - EAST
 1/8" = 1'-0"



PROJECT TITLE
 MARATHON COUNTY
 NORTH CENTRAL
 HEALTHCARE CENTER
 BOILER CONVERSION

1000 LAKE VIEW DRIVE &
 1100 LAKE VIEW DRIVE
 WAUSAU, WI 54403

KEYPLAN



SCHEMATIC DESIGN

| # | DATE | DESCRIPTION |
|---|------|-------------|
| | | |

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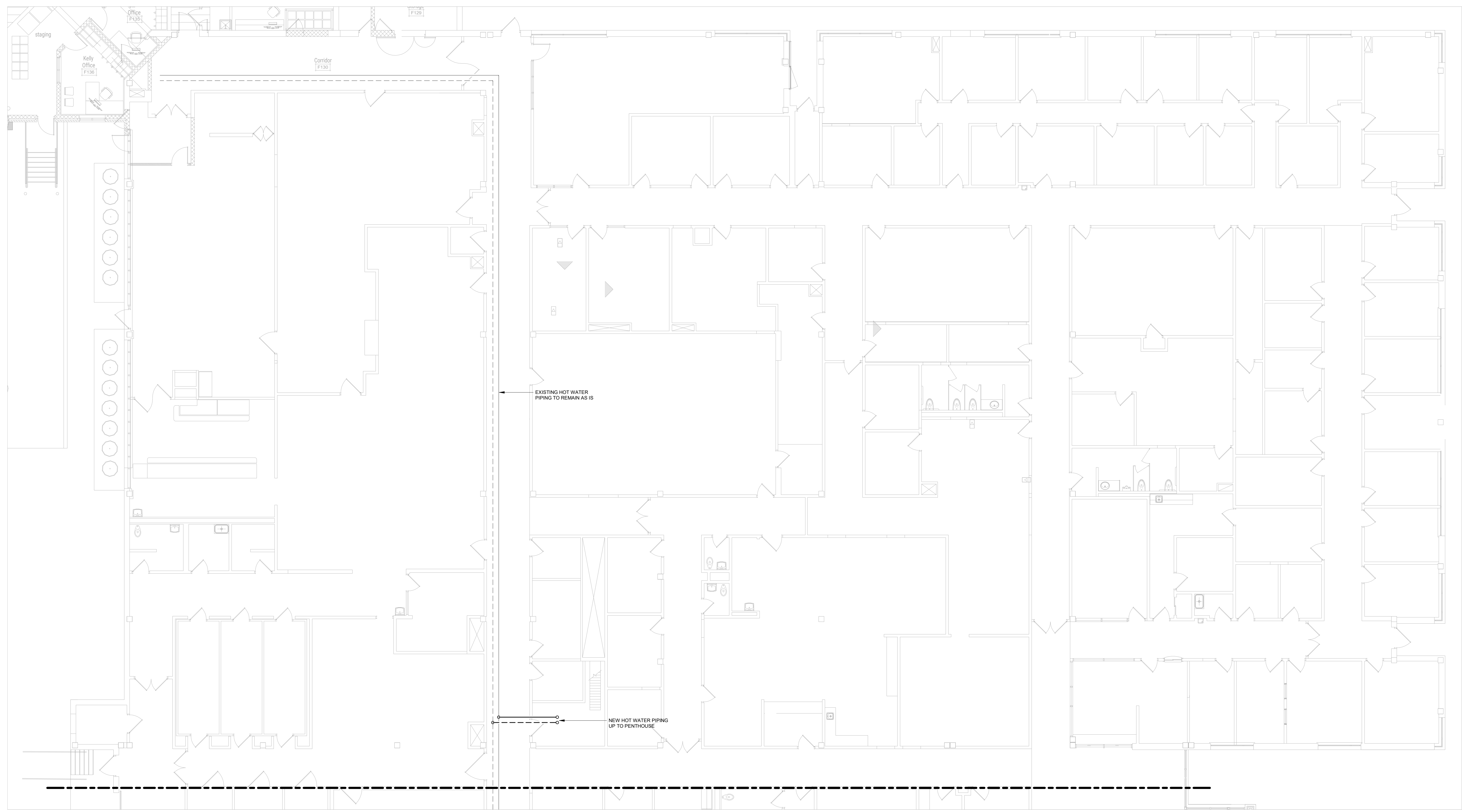
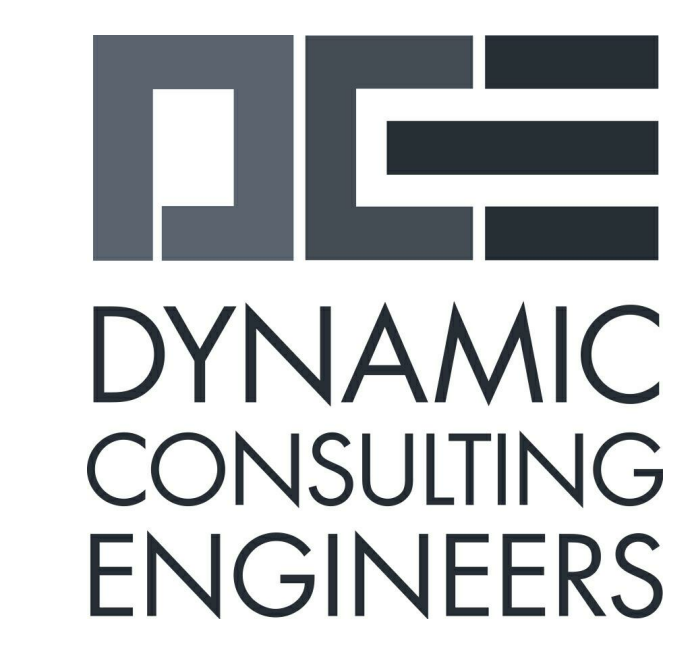
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| DCE PROJECT NUMBER | 2105 |
| ISSUANCE DATE | 05.01.2021 |
| PROJECT MANAGER | DG |

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**FIRST FLOOR NEW
 WORK PLAN**

1 FIRST FLOOR NEW WORK PLAN - SOUTH
 1/8" = 1'-0"

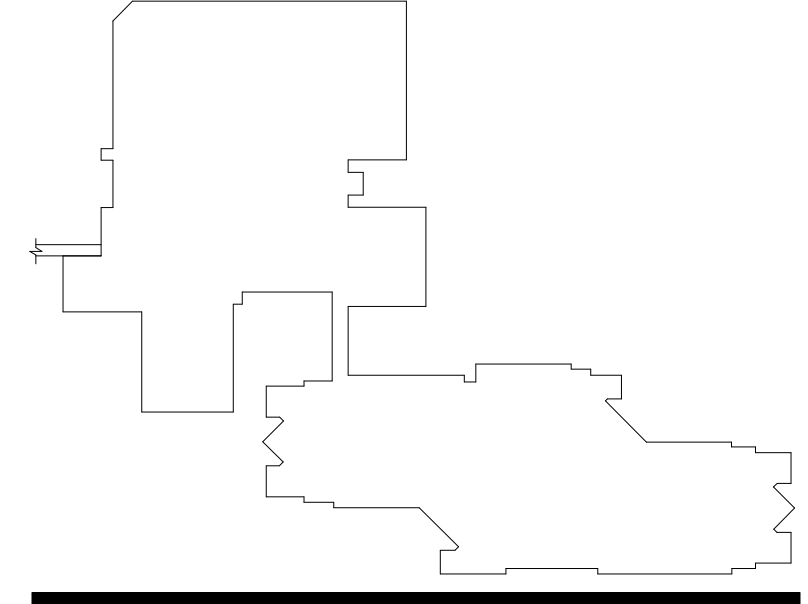
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PROJECT TITLE
MARATHON COUNTY
NORTH CENTRAL
HEALTHCARE CENTER
BOILER CONVERSION

1000 LAKE VIEW DRIVE &
1100 LAKE VIEW DRIVE
WAUSAU, WI 54403

KEYPLAN



SCHEMATIC DESIGN

| # | DATE | DESCRIPTION |
|---|------|-------------|
| | | |

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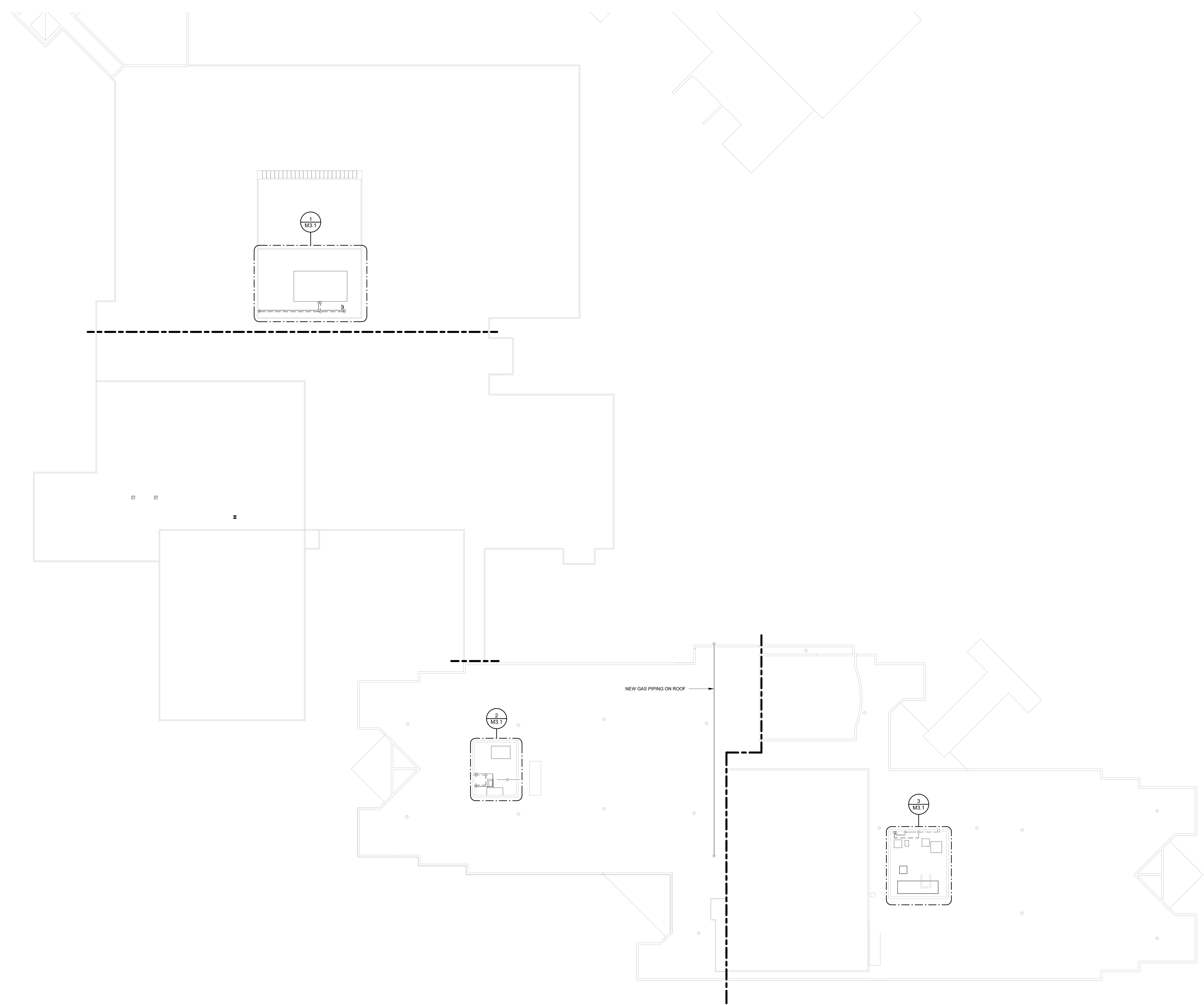
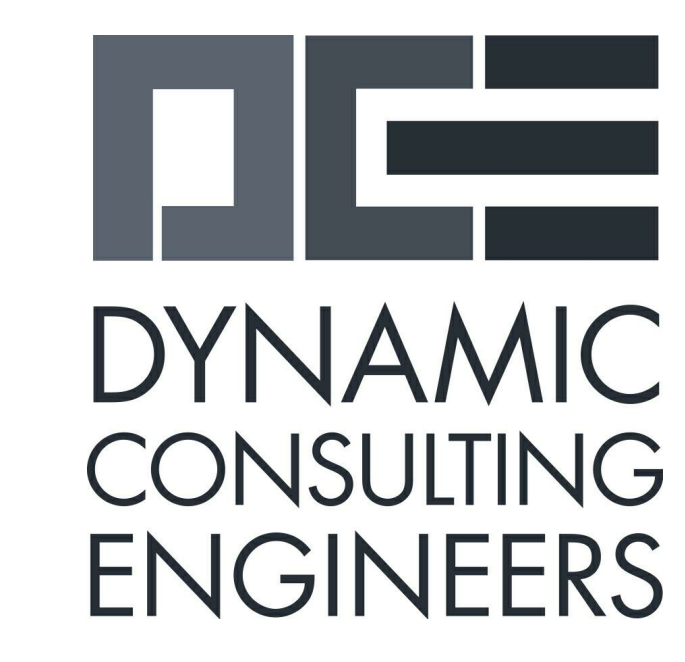
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| DCE PROJECT NUMBER | 2105 |
| ISSUANCE DATE | 05.01.2021 |
| PROJECT MANAGER | DG |

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**FIRST FLOOR NEW
WORK PLAN**

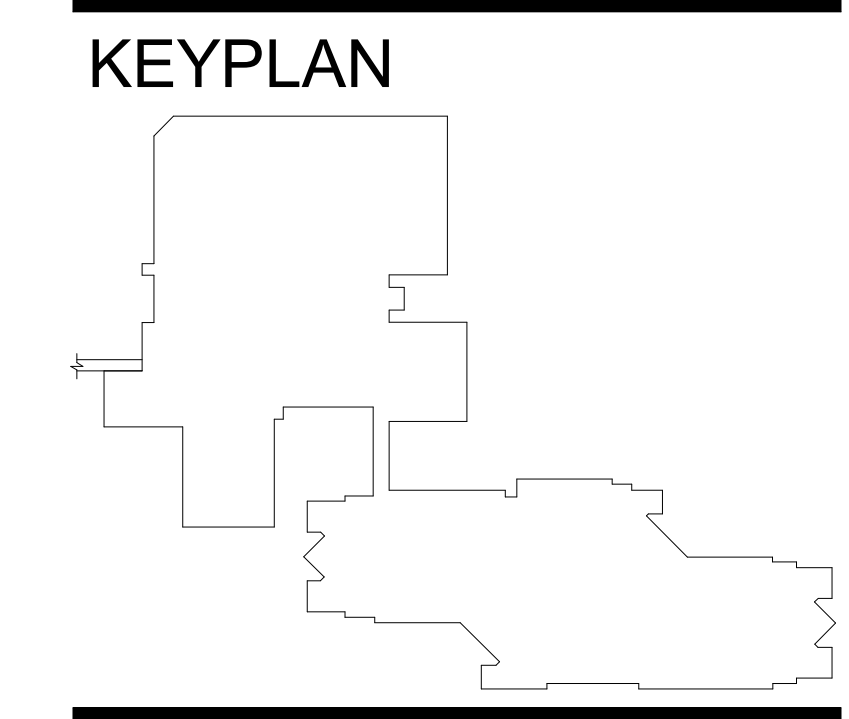
1 FIRST FLOOR NEW WORK PLAN - NORTH
1/8" = 1'-0"

M1.4



PROJECT TITLE
 MARATHON COUNTY
 NORTH CENTRAL
 HEALTHCARE CENTER
 BOILER CONVERSION

1000 LAKE VIEW DRIVE &
 1100 LAKE VIEW DRIVE
 WAUSAU, WI 54403



SCHEMATIC DESIGN

| # | DATE | DESCRIPTION |
|---|------|-------------|
| | | |

PROGRESS SET

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 OR CONSTRUCTION

DCE PROJECT NUMBER 2105
 ISSUANCE DATE 05.01.2021
 PROJECT MANAGER DG

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OVERALL ROOF PLAN

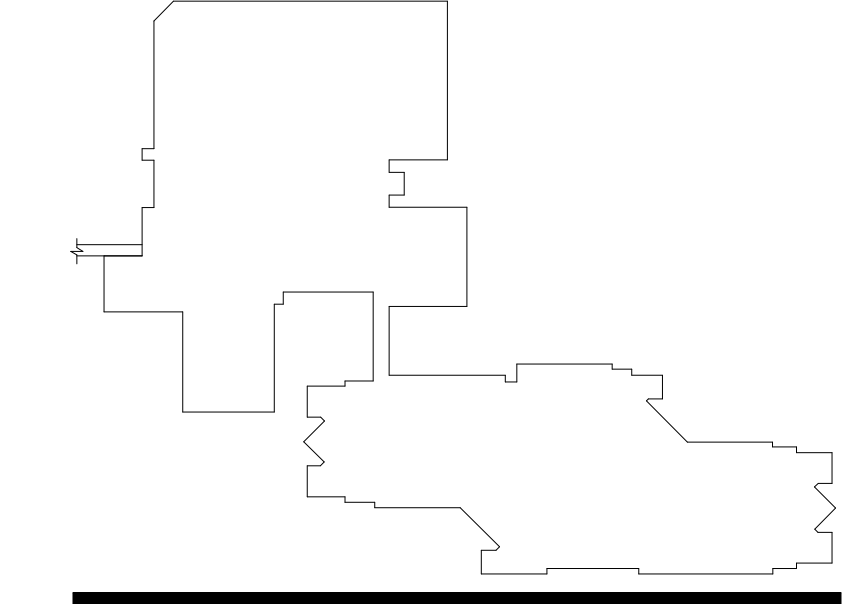
1 OVERALL ROOF PLAN
 3/64" = 1'-0"

M2.0

PROJECT TITLE
 MARATHON COUNTY
 NORTH CENTRAL
 HEALTHCARE CENTER
 BOILER CONVERSION

1000 LAKE VIEW DRIVE &
 1100 LAKE VIEW DRIVE
 WAUSAU, WI 54403

KEYPLAN

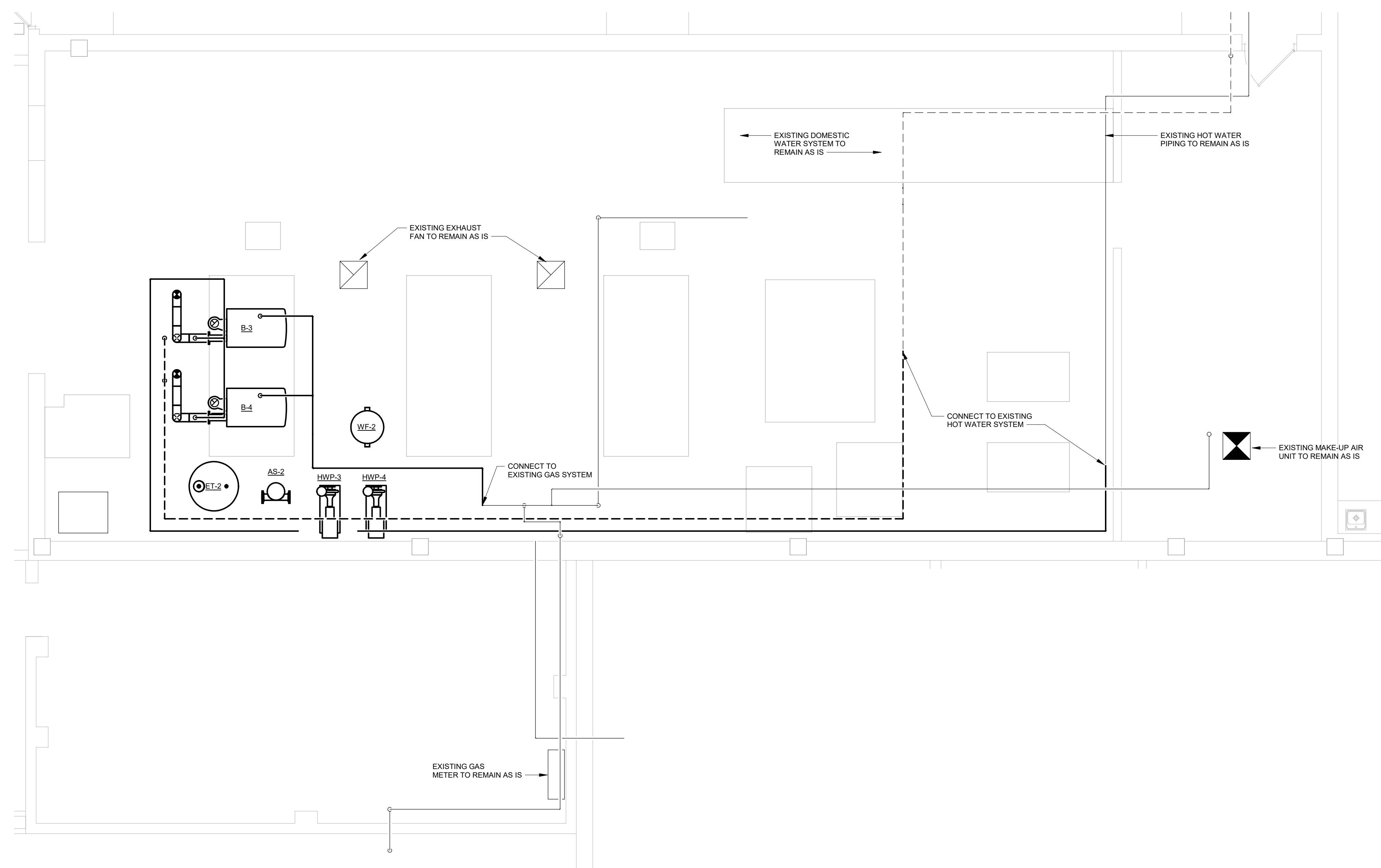


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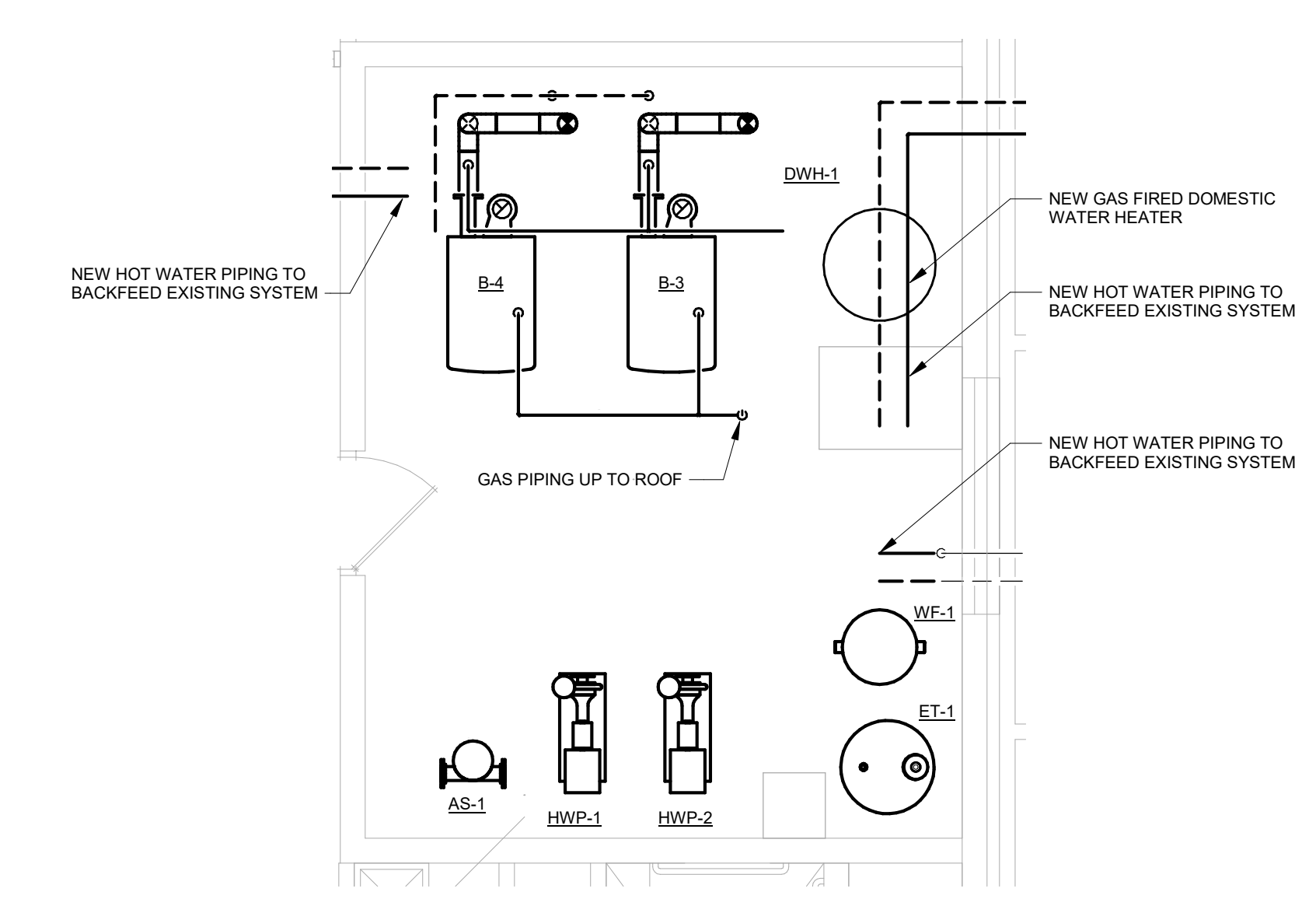
| # | DATE | DESCRIPTION |
|---|------|-------------|
| | | |

PROGRESS SET
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 ARE NOT INTENDED FOR BIDDING
 OR CONSTRUCTION

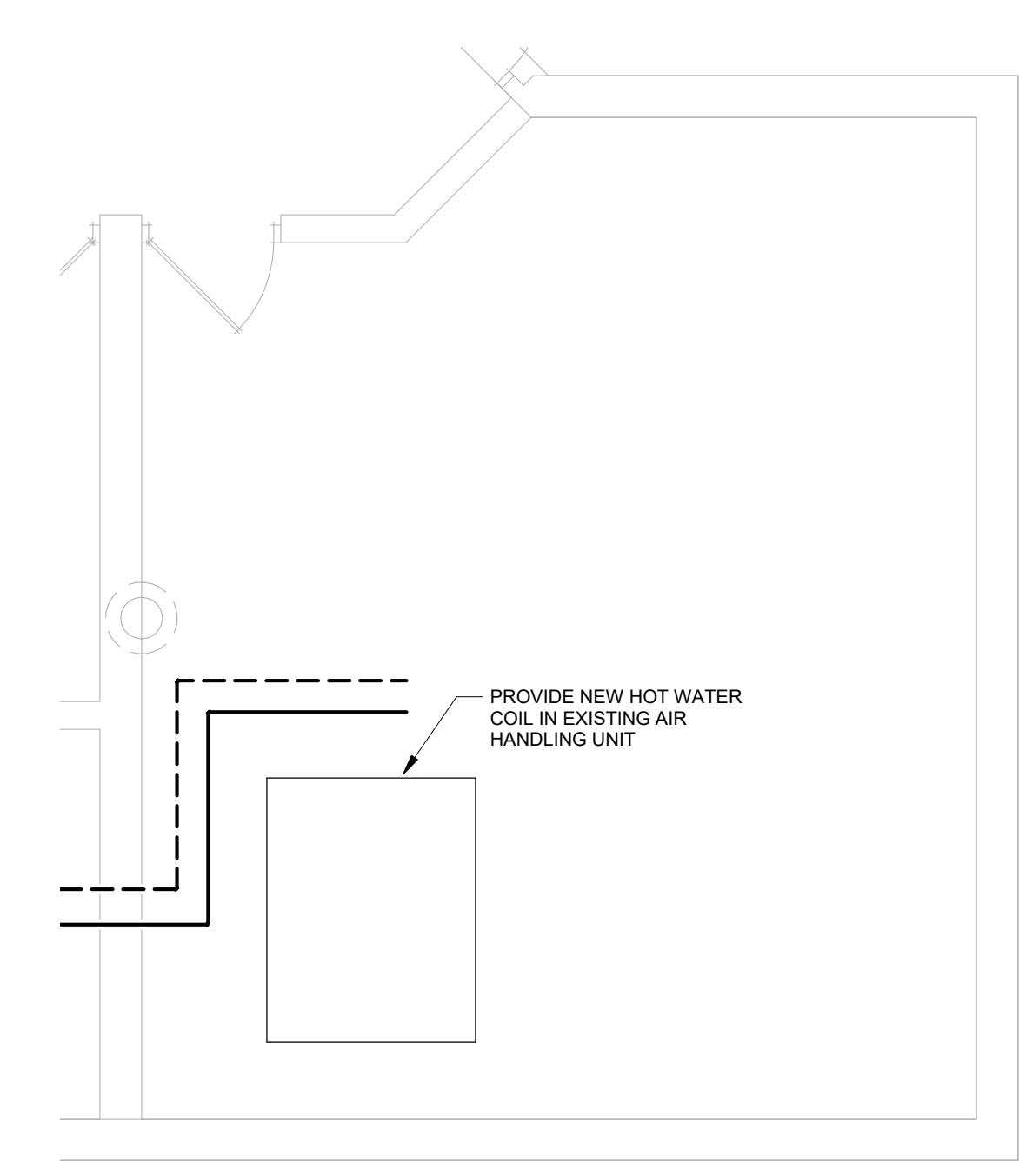
DCE PROJECT NUMBER 2105
 ISSUANCE DATE 05.01.2021
 PROJECT MANAGER DG



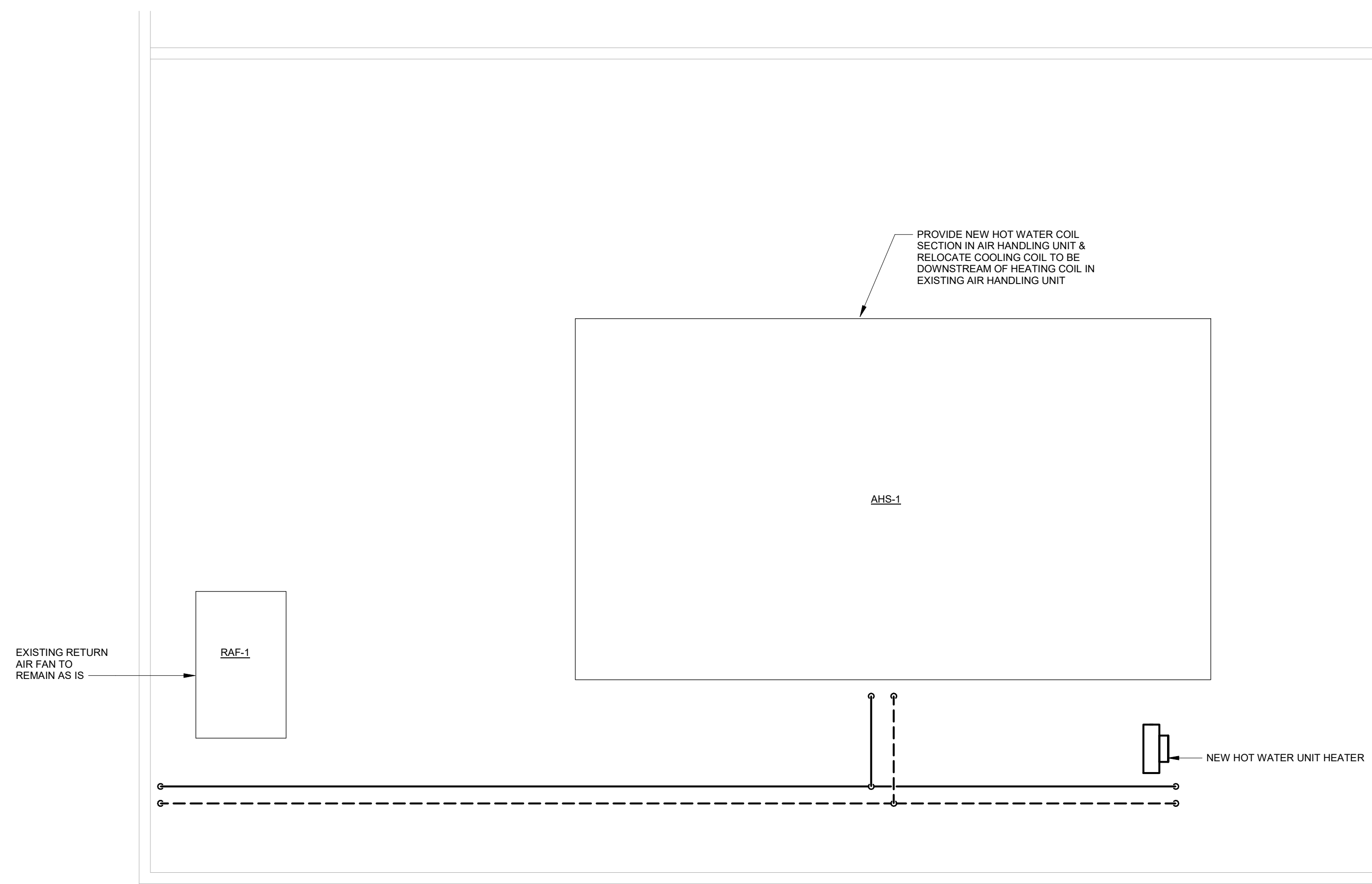
2 ENLARGED EXISTING BOILER ROOM NEW WORK PLAN
 1/4" = 1'-0"



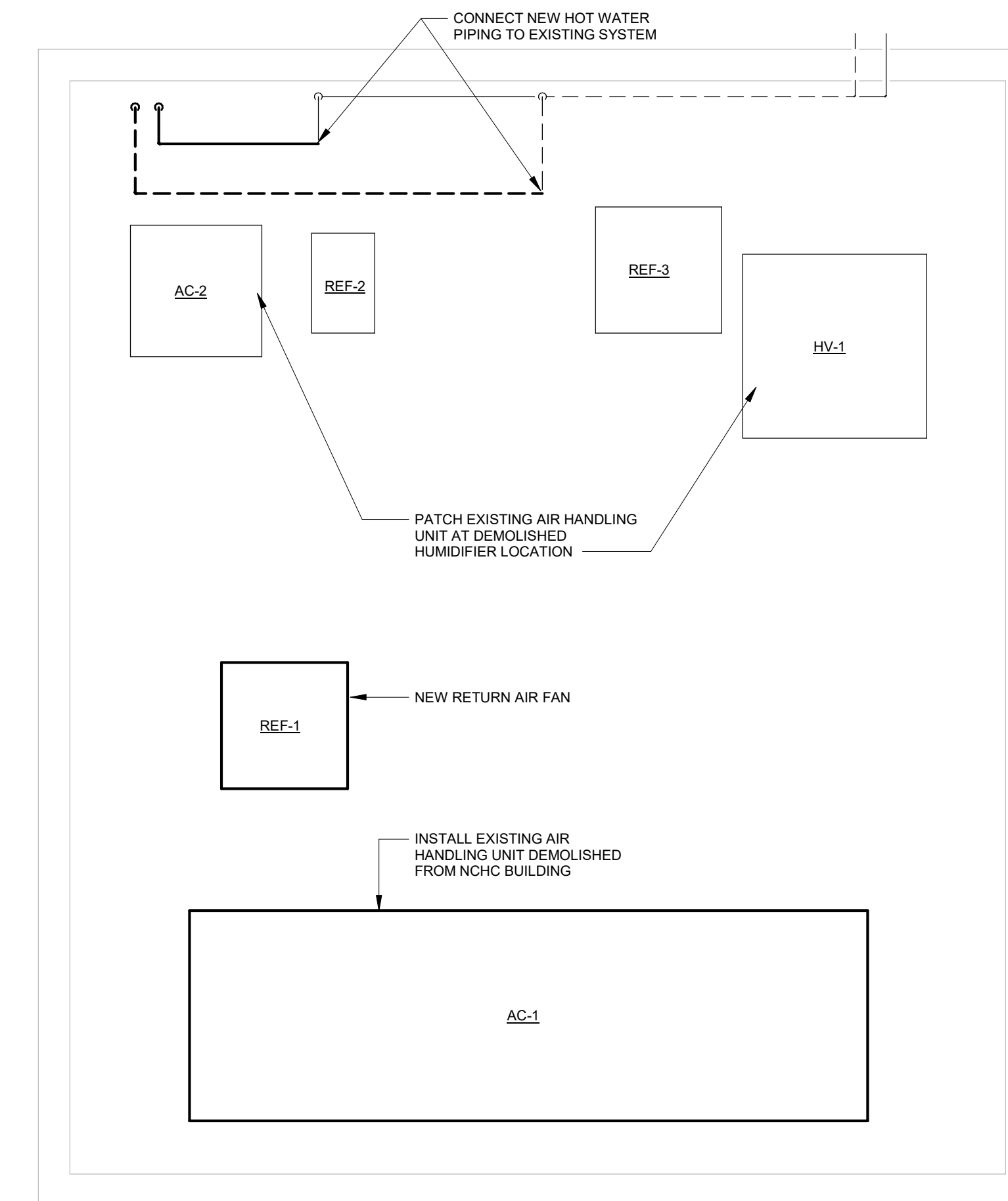
1 ENLARGED NEW BOILER ROOM PLAN
 1/4" = 1'-0"



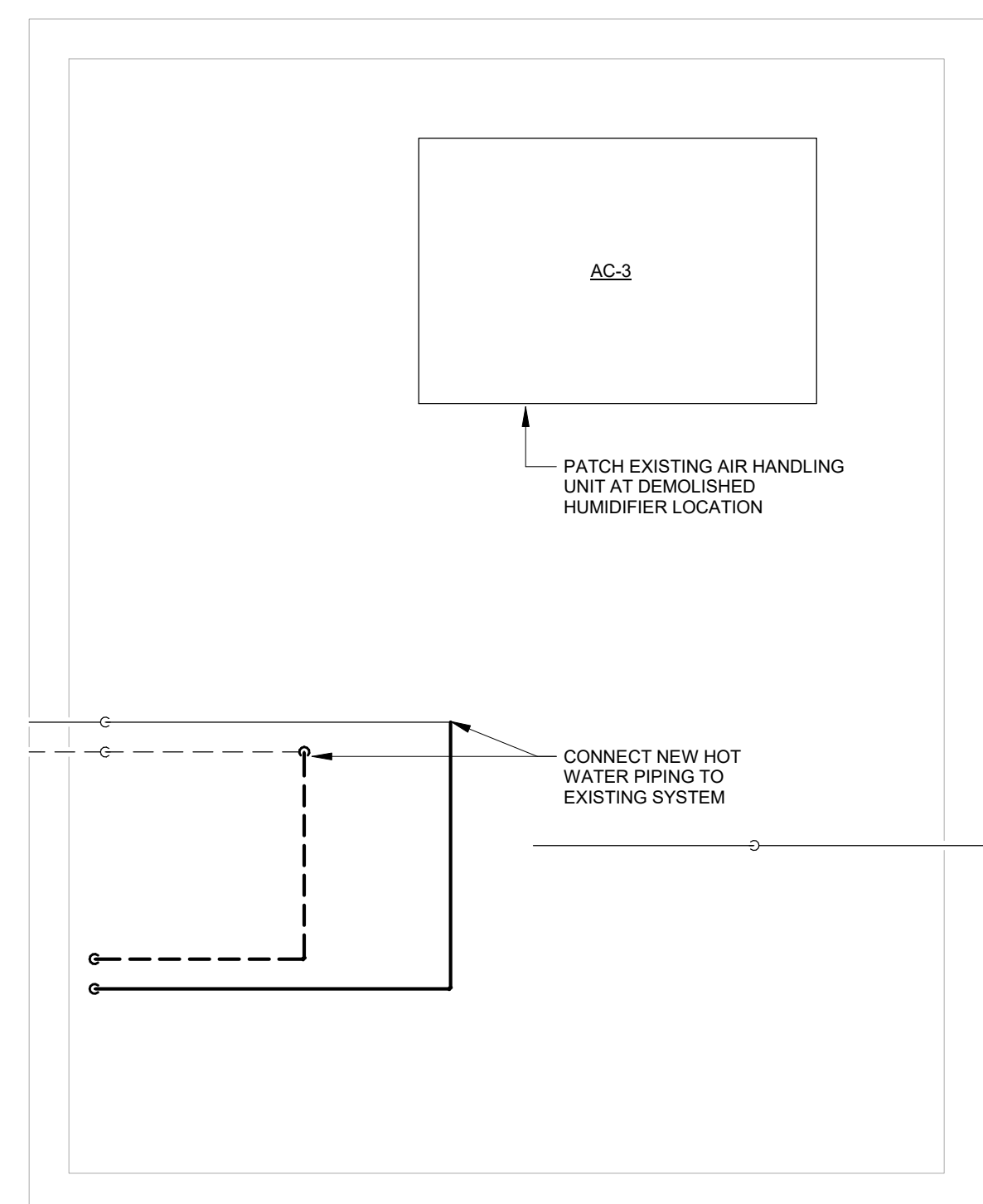
3 ENLARGED POOL MECHANICAL ROOM PLAN
 1/4" = 1'-0"



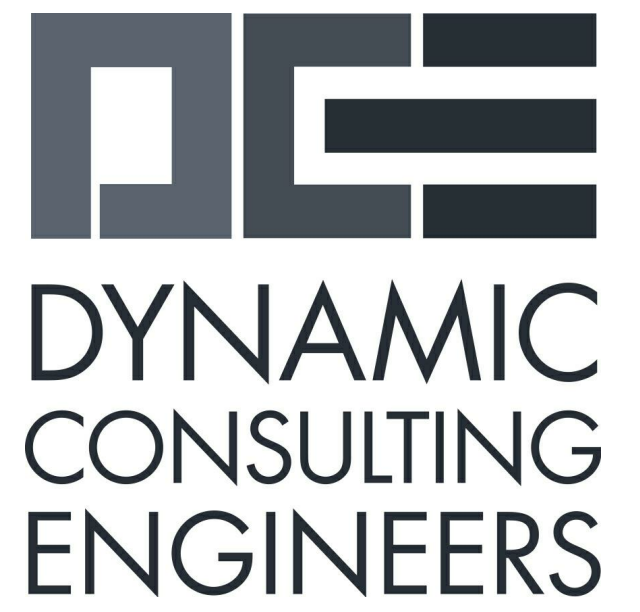
1 ENLARGED NORTH MECHANICAL PENTHOUSE
1/4" = 1'-0"



3 ENLARGED EAST PENTHOUSE NEW WORK PLAN
1/4" = 1'-0"



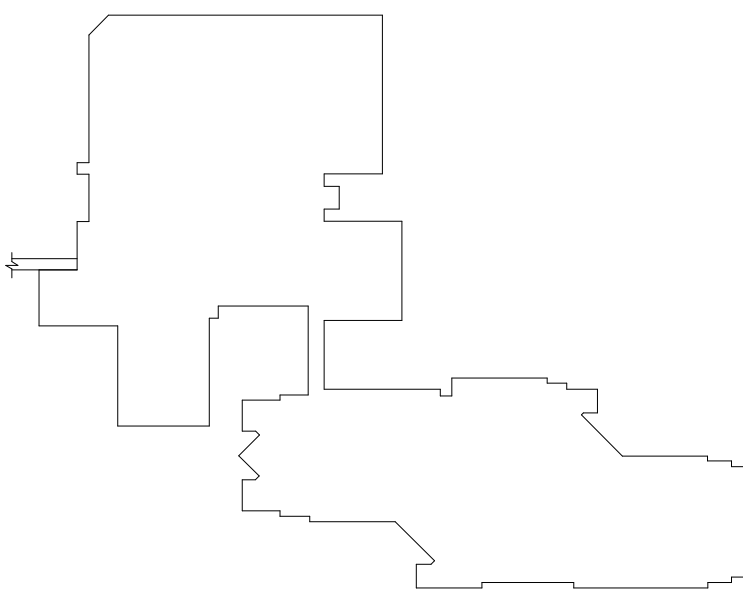
2 ENLARGED WEST PENTHOUSE NEW WORK PLAN
1/4" = 1'-0"



PROJECT TITLE
MARATHON COUNTY
NORTH CENTRAL
HEALTHCARE CENTER
BOILER CONVERSION

1000 LAKE VIEW DRIVE &
1100 LAKE VIEW DRIVE
WAUSAU, WI 54403

KEYPLAN



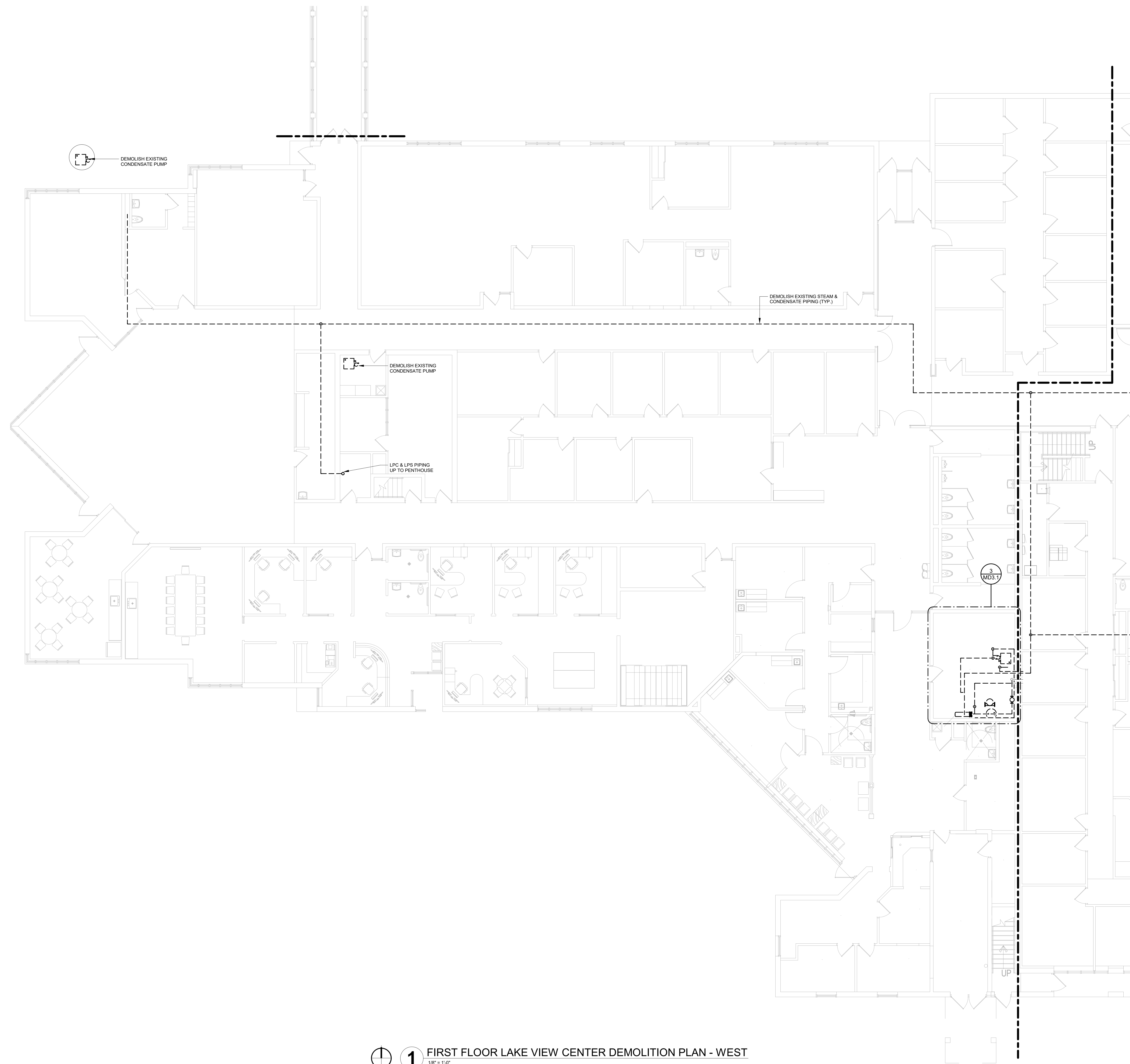
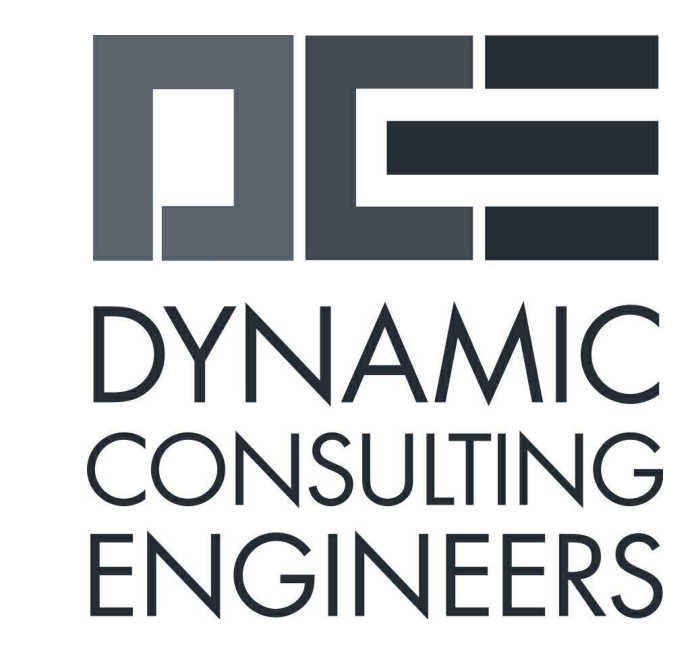
SCHEMATIC DESIGN

| # | DATE | DESCRIPTION |
|---|------|-------------|
|---|------|-------------|

PROGRESS SET

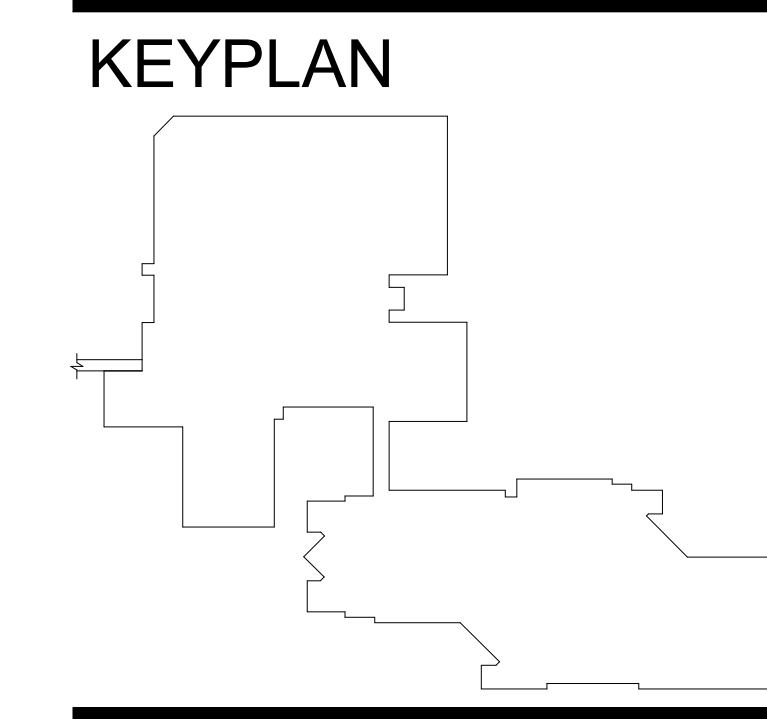
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NOT FOR CONSTRUCTION.
DRAWINGS ARE PROVIDED TO
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ARE NOT INTENDED FOR BIDDING
OR CONSTRUCTION

| | |
|--------------------|------------|
| DCE PROJECT NUMBER | 2105 |
| ISSUANCE DATE | 05.01.2021 |
| PROJECT MANAGER | DG |



PROJECT TITLE
 MARATHON COUNTY
 NORTH CENTRAL
 HEALTHCARE CENTER
 BOILER CONVERSION

1000 LAKE VIEW DRIVE &
 1100 LAKE VIEW DRIVE
 WAUSAU, WI 54403



SCHEMATIC DESIGN

| # | DATE | DESCRIPTION |
|---|------|-------------|
| | | |

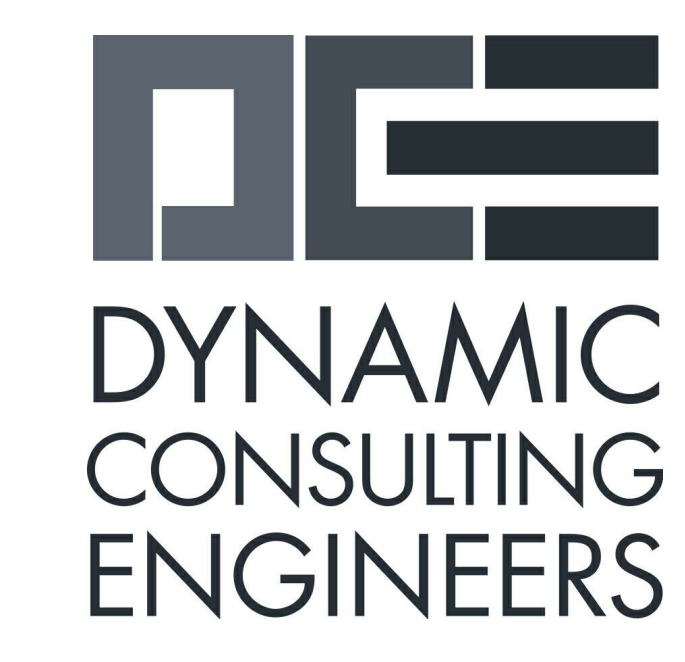
| | |
|--------------------|------------|
| DCE PROJECT NUMBER | 2105 |
| ISSUANCE DATE | 05.01.2021 |
| PROJECT MANAGER | DG |

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**FIRST FLOOR
 DEMOLITION PLAN**

MD1.1

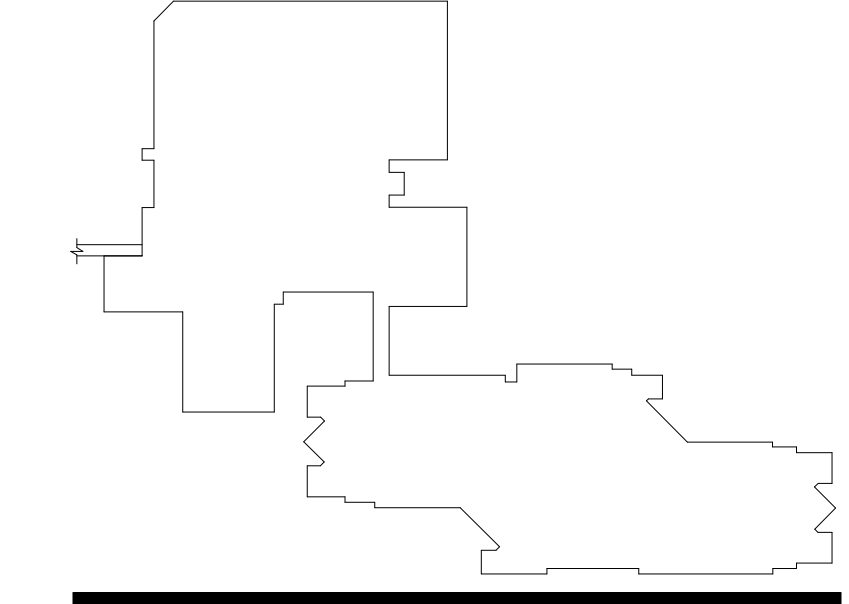
1 FIRST FLOOR LAKE VIEW CENTER DEMOLITION PLAN - WEST
 1/8" = 1'-0"



PROJECT TITLE
 MARATHON COUNTY
 NORTH CENTRAL
 HEALTHCARE CENTER
 BOILER CONVERSION

1000 LAKE VIEW DRIVE &
 1100 LAKE VIEW DRIVE
 WAUSAU, WI 54403

KEYPLAN



SCHEMATIC DESIGN

| # | DATE | DESCRIPTION |
|---|------|-------------|
| | | |

PROGRESS SET

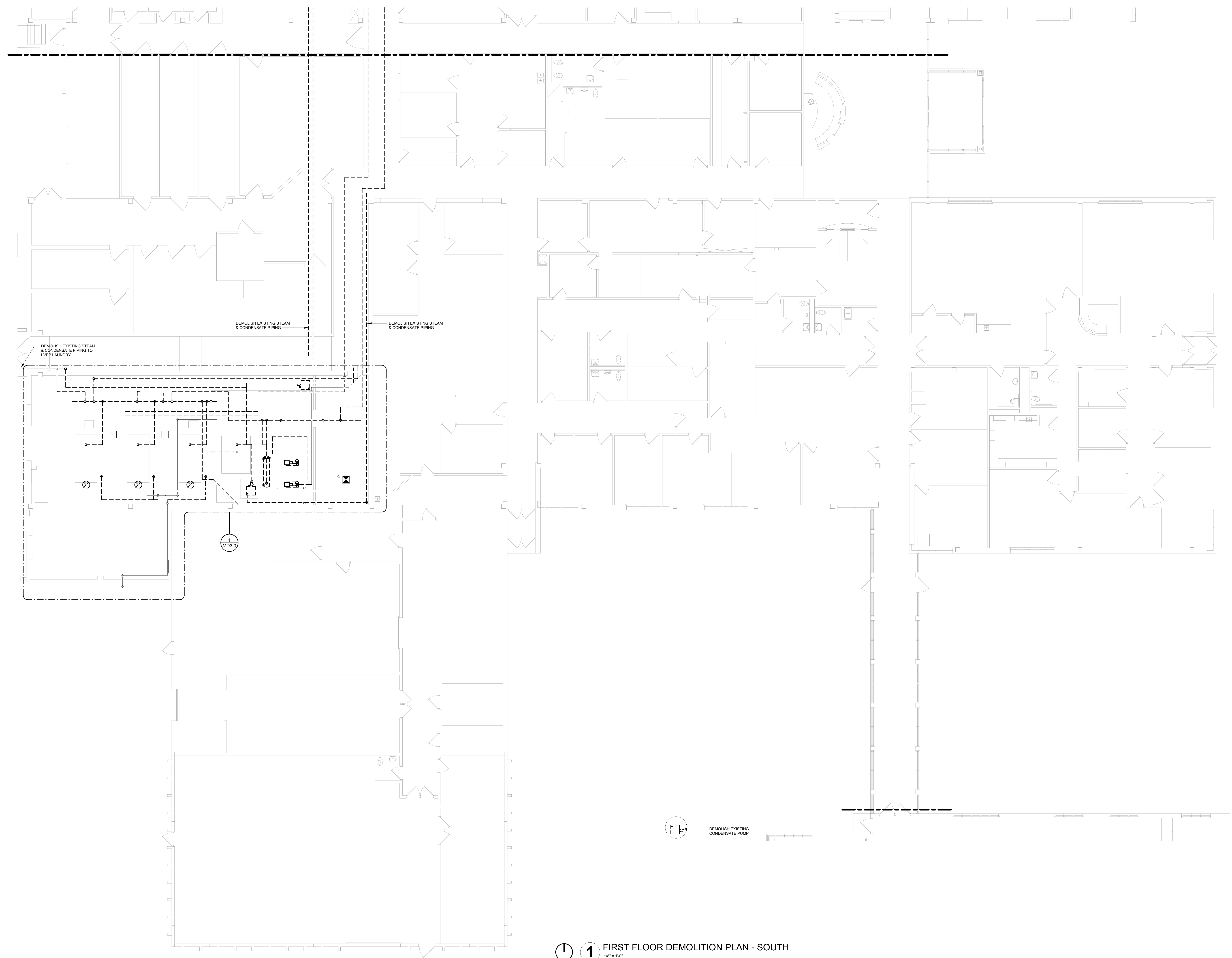
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 OR CONSTRUCTION

| | |
|--------------------|------------|
| DCE PROJECT NUMBER | 2105 |
| ISSUANCE DATE | 05.01.2021 |
| PROJECT MANAGER | DG |

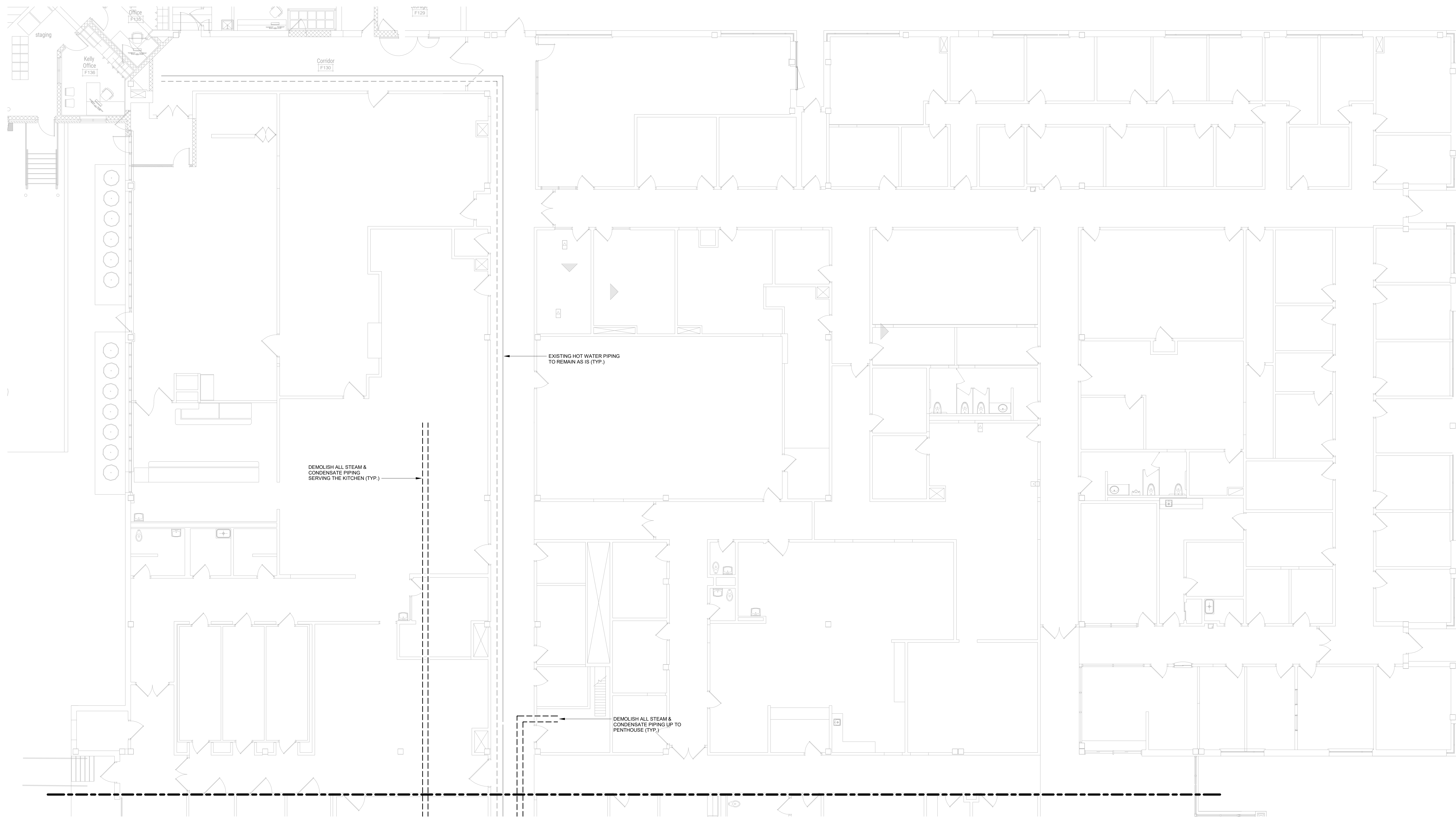
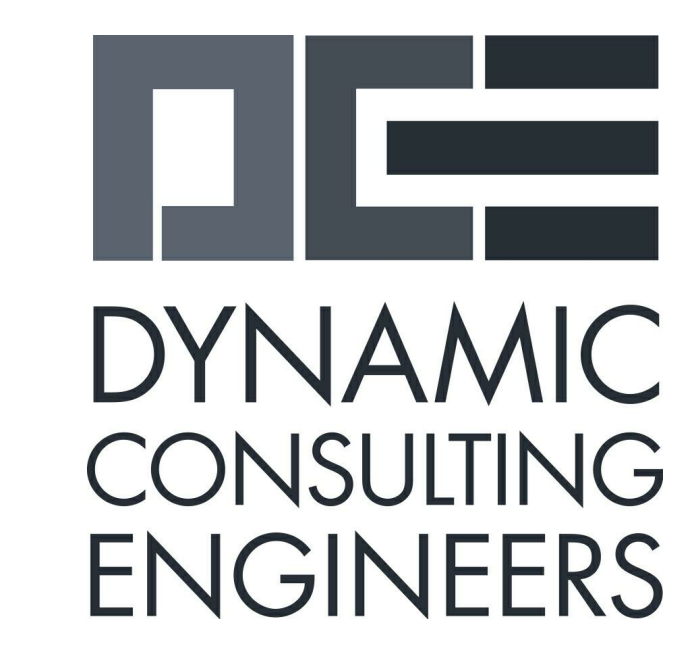
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**FIRST FLOOR
 DEMOLITION PLAN**

MD1.3



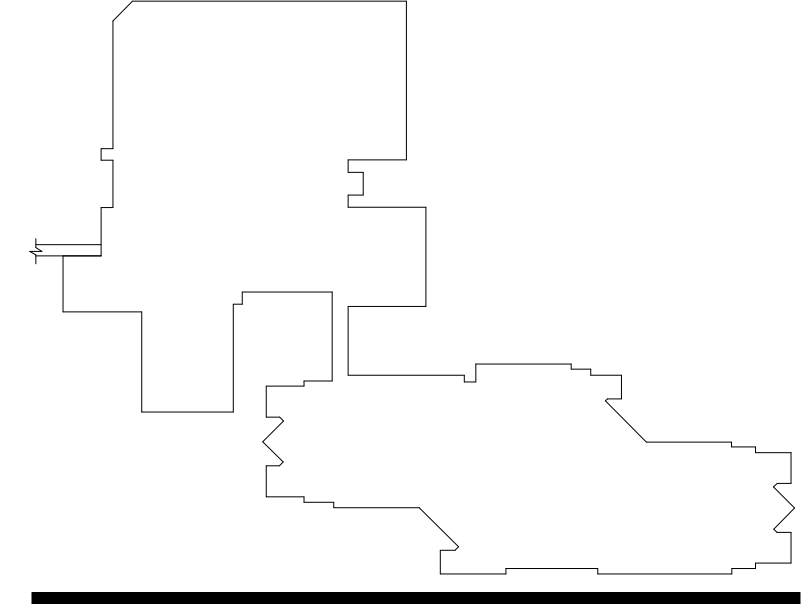
1 FIRST FLOOR DEMOLITION PLAN - SOUTH
 1/8" = 1'-0"



PROJECT TITLE
MARATHON COUNTY
NORTH CENTRAL
HEALTHCARE CENTER
BOILER CONVERSION

1000 LAKE VIEW DRIVE &
1100 LAKE VIEW DRIVE
WAUSAU, WI 54403

KEYPLAN



SCHEMATIC DESIGN

| # | DATE | DESCRIPTION |
|---|------|-------------|
| | | |

PROGRESS SET

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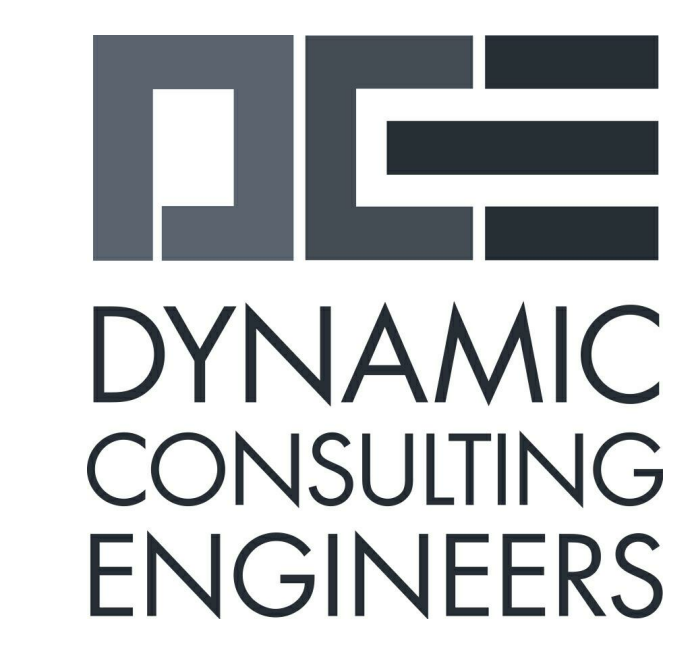
| | |
|--------------------|------------|
| DCE PROJECT NUMBER | 2105 |
| ISSUANCE DATE | 05.01.2021 |
| PROJECT MANAGER | DG |

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**FIRST FLOOR
DEMOLITION PLAN**

1 FIRST FLOOR DEMOLITION PLAN - NORTH
1/8" = 1'-0"

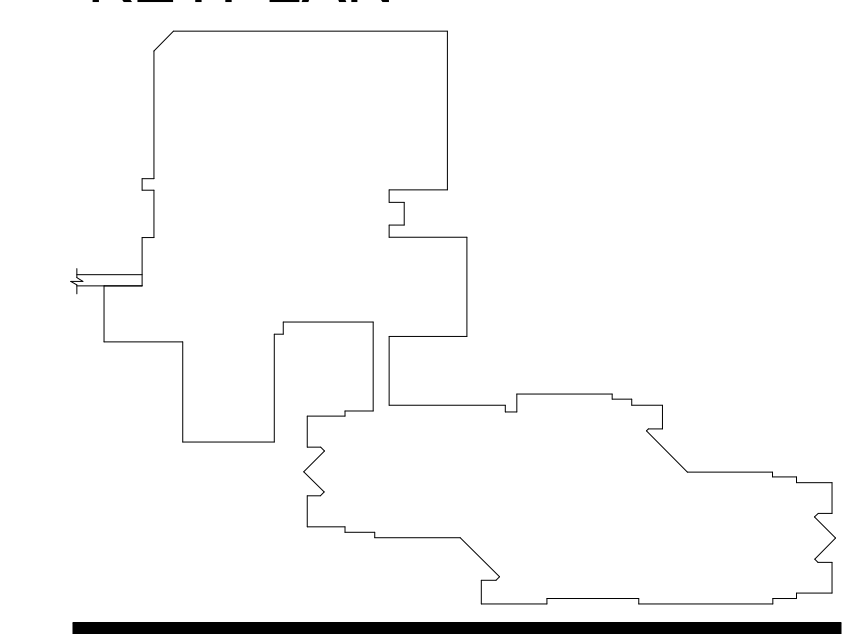
MD1.4



PROJECT TITLE
 MARATHON COUNTY
 NORTH CENTRAL
 HEALTHCARE CENTER
 BOILER CONVERSION

1000 LAKE VIEW DRIVE &
 1100 LAKE VIEW DRIVE
 WAUSAU, WI 54403

KEYPLAN



SCHEMATIC DESIGN

| # | DATE | DESCRIPTION |
|---|------|-------------|
| | | |

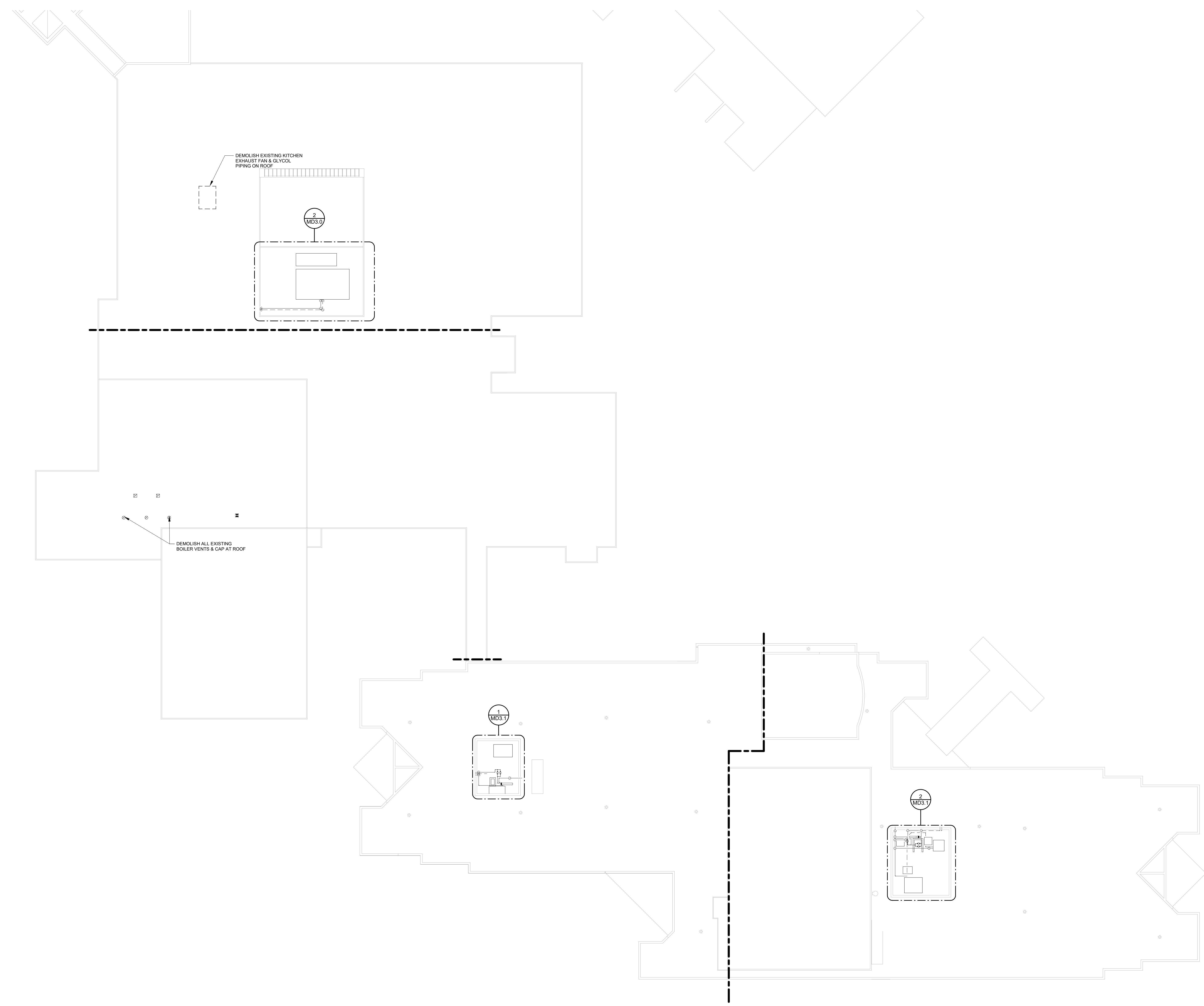
PROGRESS SET

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| | |
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| DCE PROJECT NUMBER | 2105 |
| ISSUANCE DATE | 05.01.2021 |
| PROJECT MANAGER | DG |

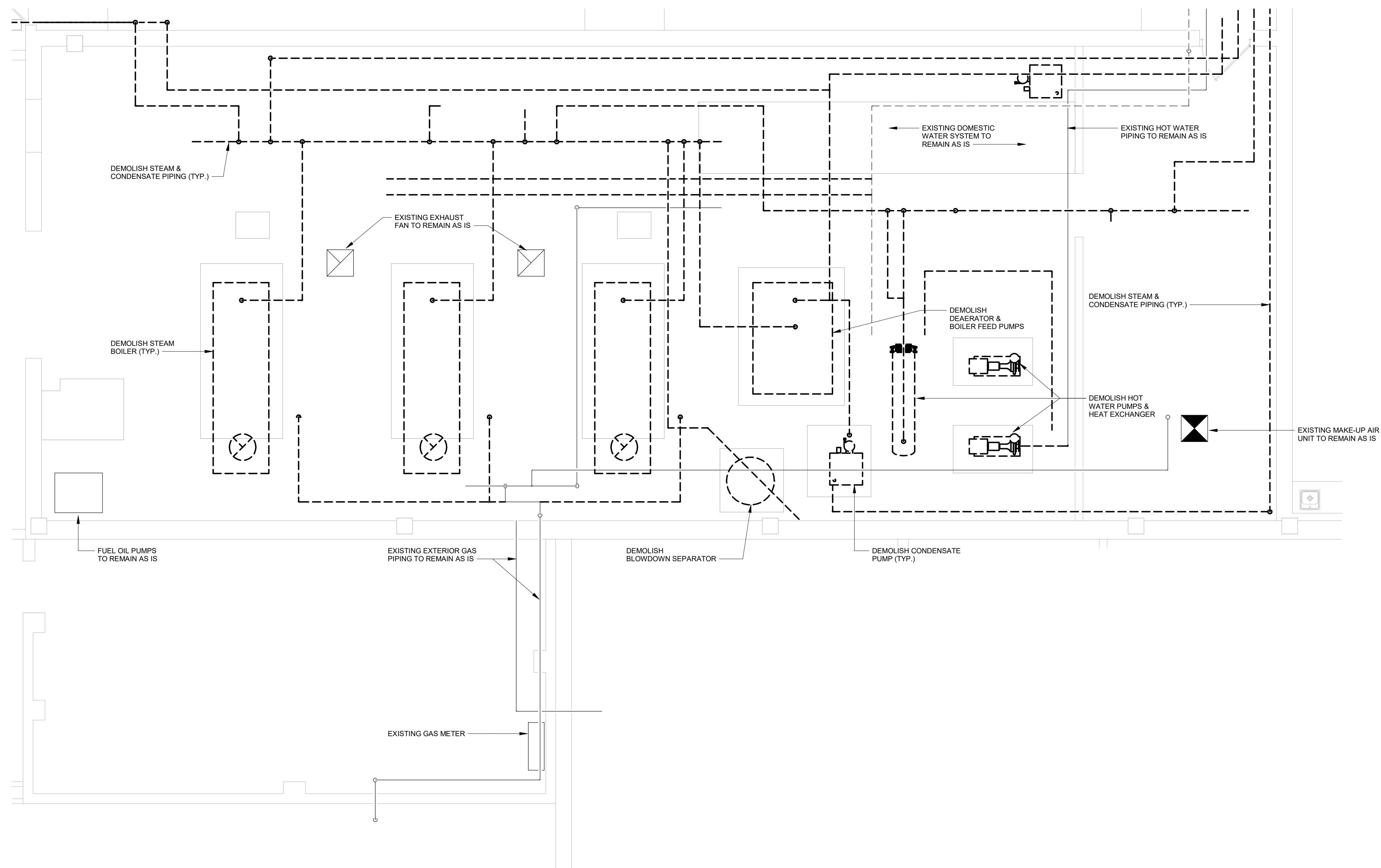
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ROOF PLAN

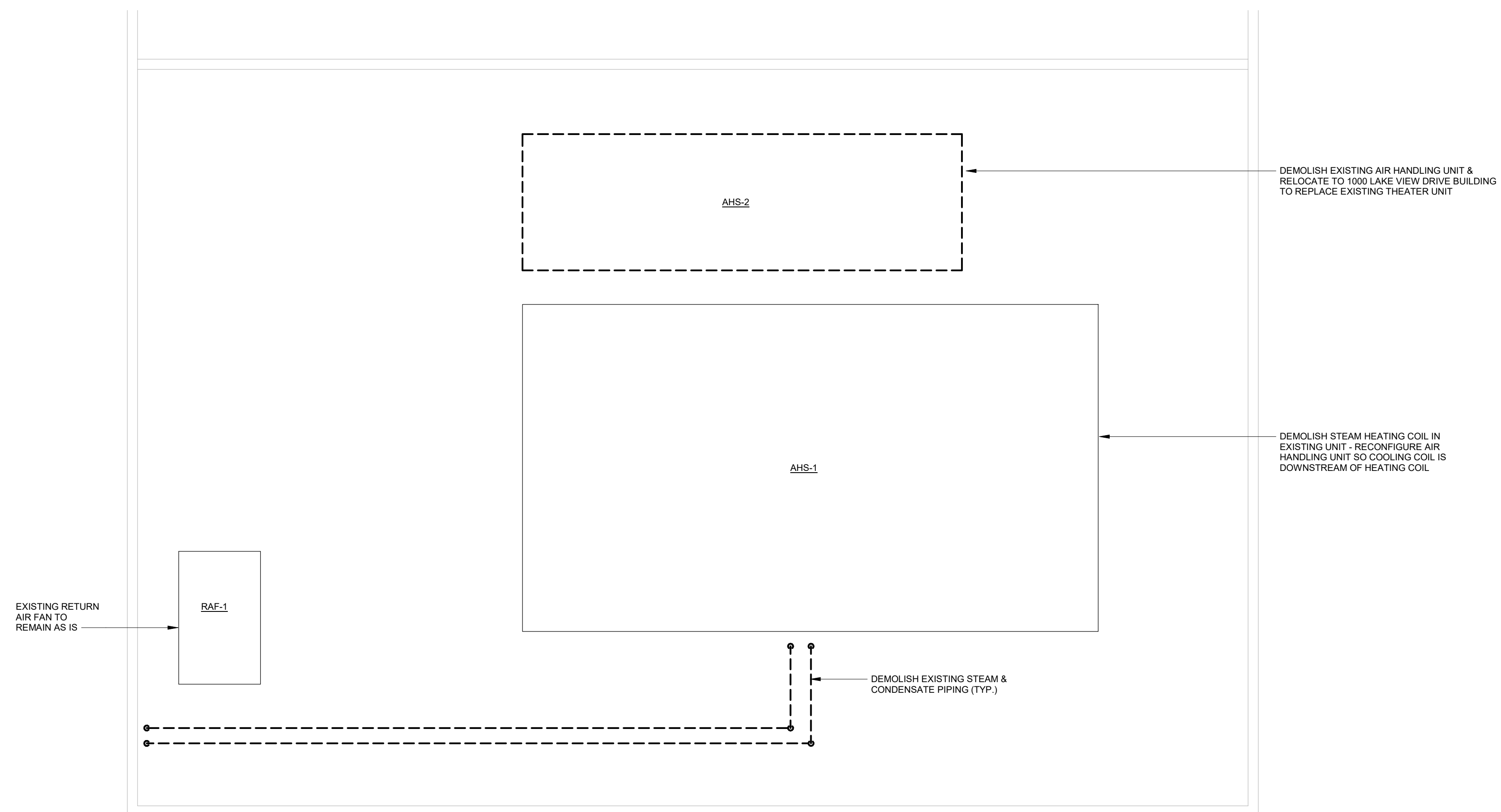


1 OVERALL ROOF DEMOLITION PLAN
 3/64" = 1'-0"

MD2.0



1 ENLARGED EXISTING BOILER ROOM DEMOLITION PLAN
1/4" = 1'-0"

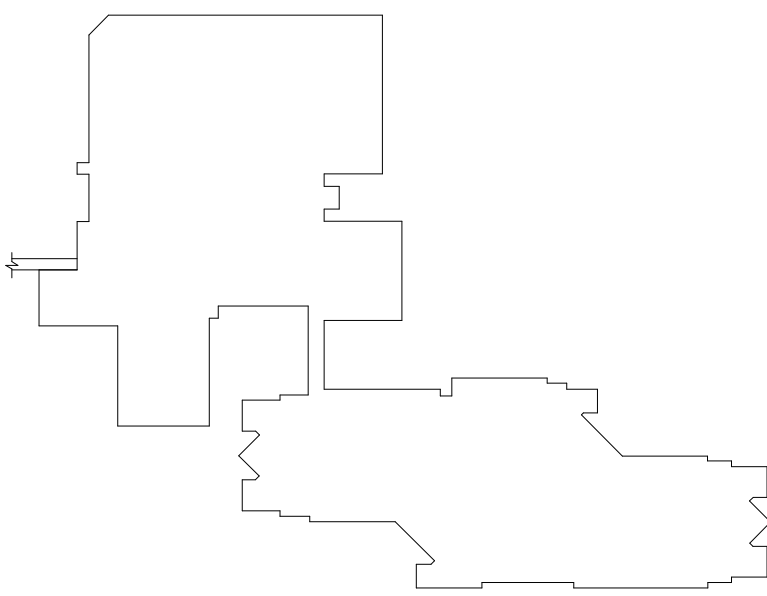


2 ENLARGED NORTH PENTHOUSE DEMOLITION PLAN
1/4" = 1'-0"

PROJECT TITLE
MARATHON COUNTY
NORTH CENTRAL
HEALTHCARE CENTER
BOILER CONVERSION

1000 LAKE VIEW DRIVE &
1100 LAKE VIEW DRIVE
WAUSAU, WI 54403

KEYPLAN



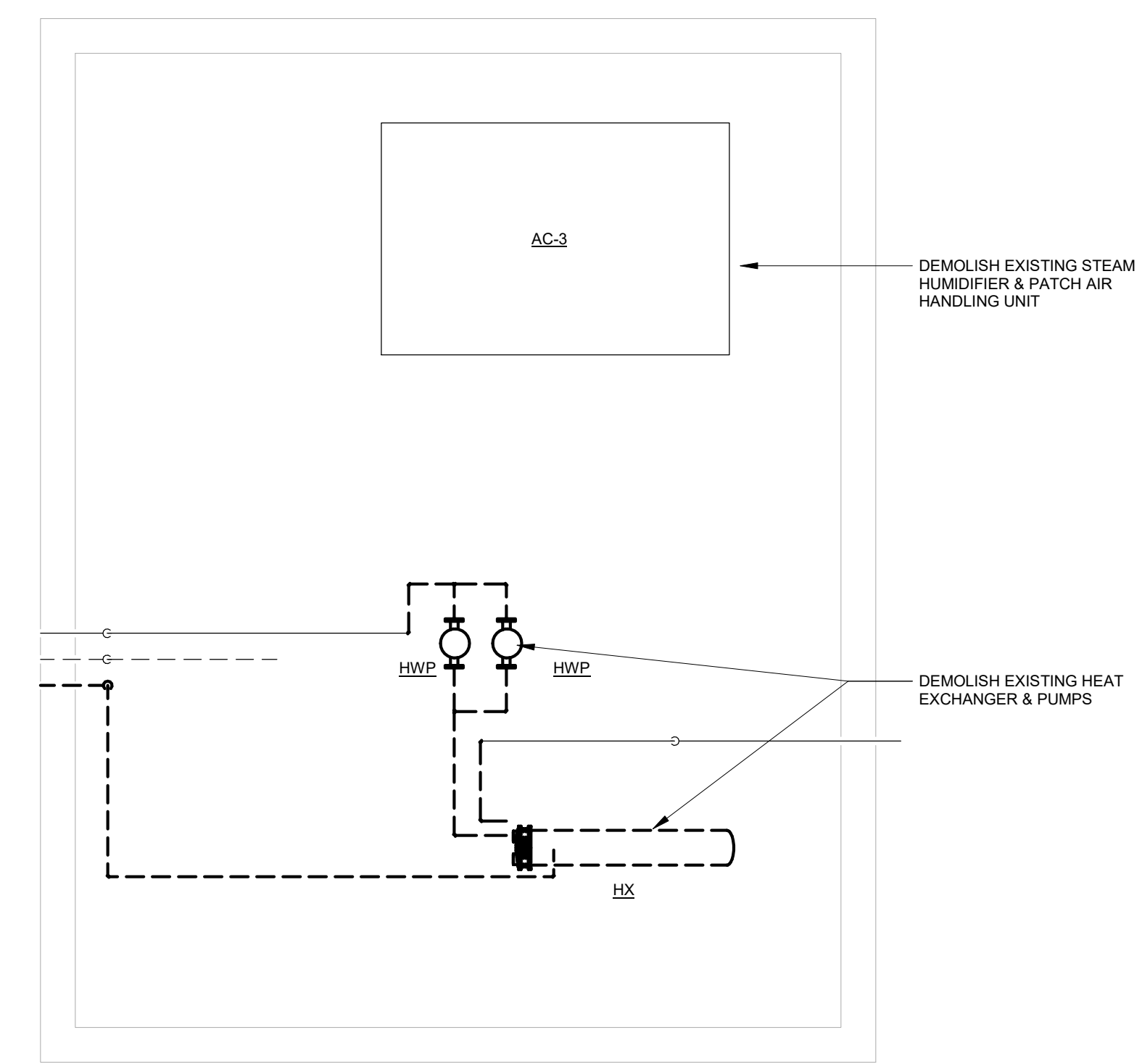
SCHEMATIC DESIGN

| # | DATE | DESCRIPTION |
|---|------|-------------|
|---|------|-------------|

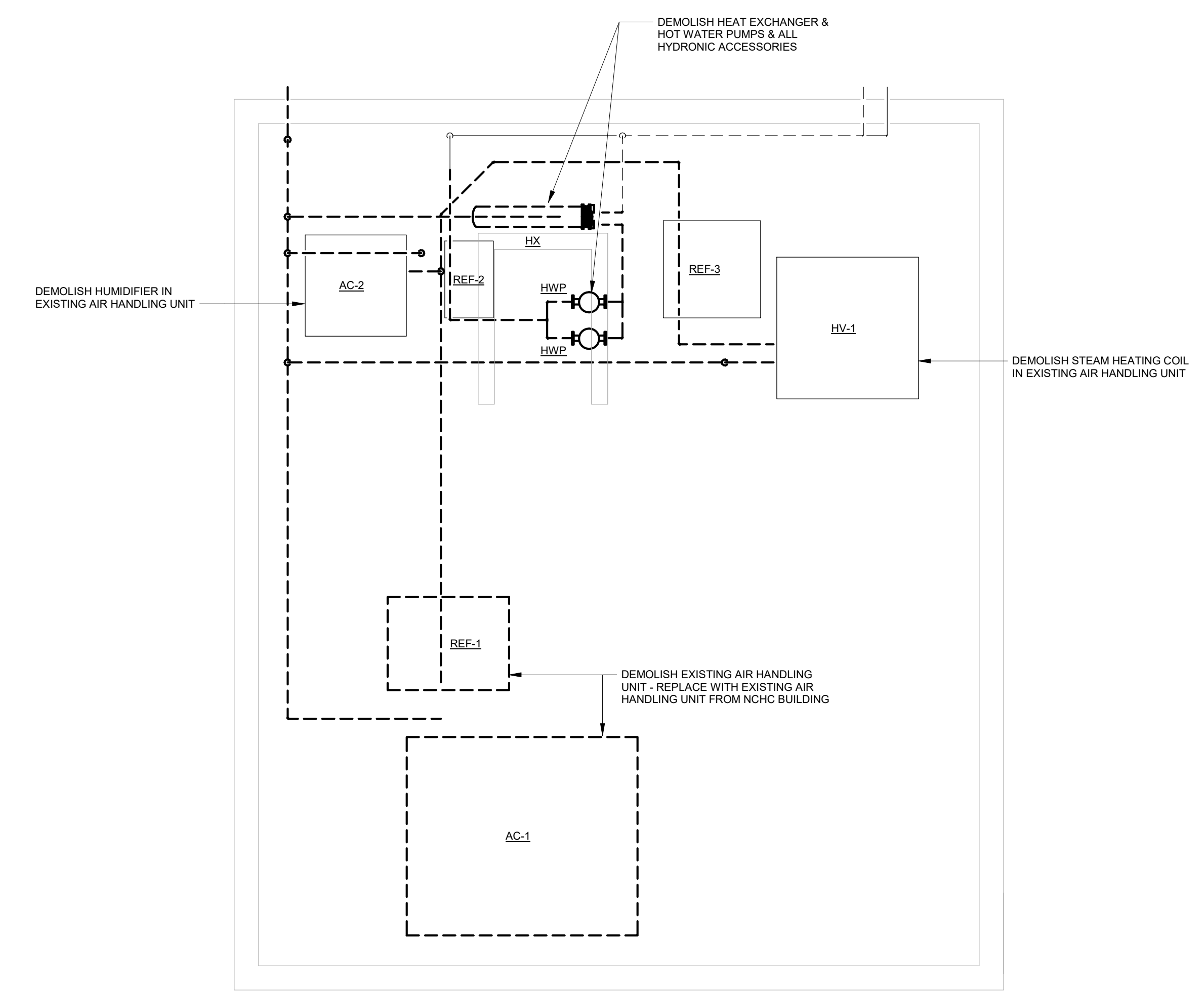
PROGRESS SET

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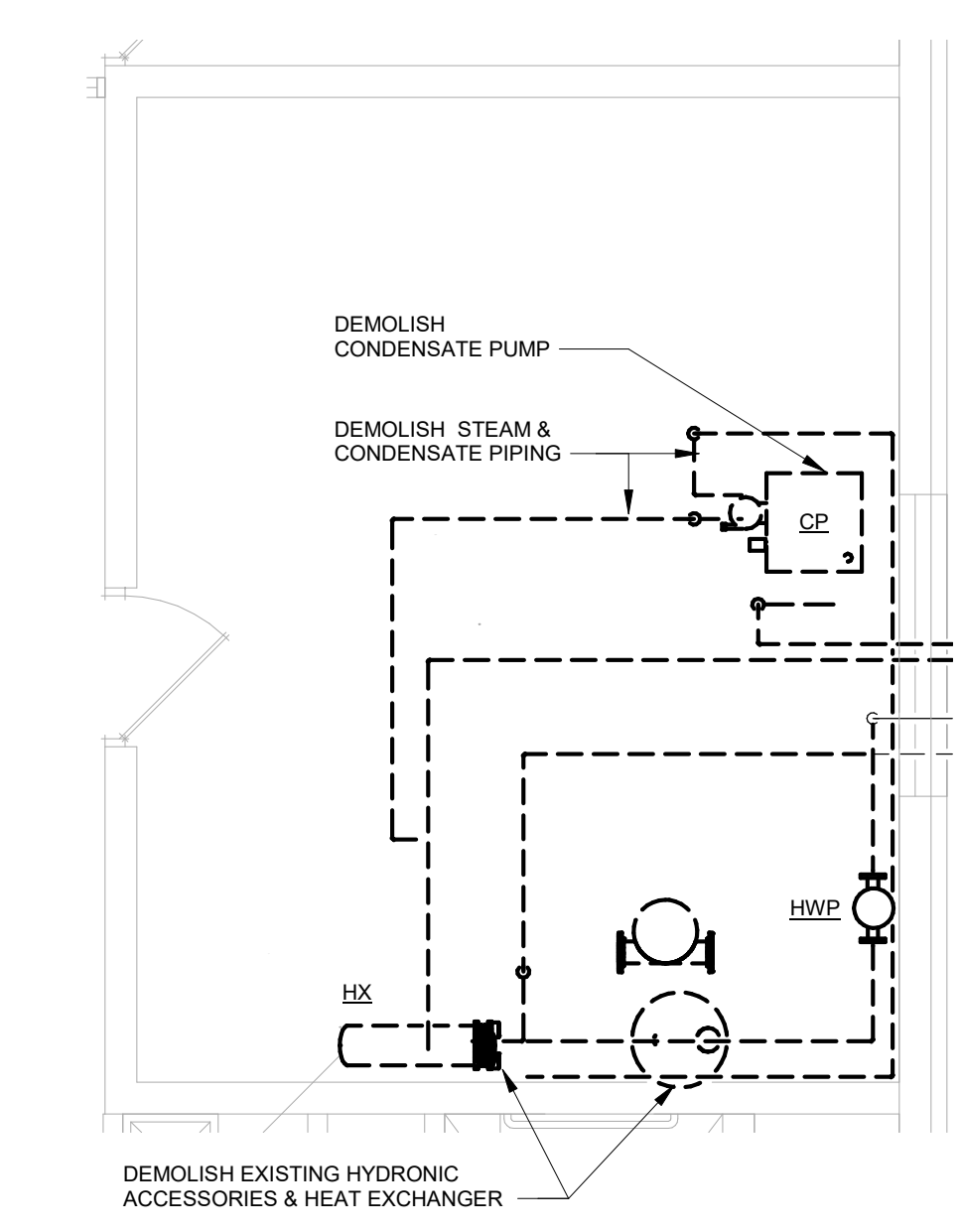
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|--------------------|------------|
| DCE PROJECT NUMBER | 2105 |
| ISSUANCE DATE | 05.01.2021 |
| PROJECT MANAGER | DG |



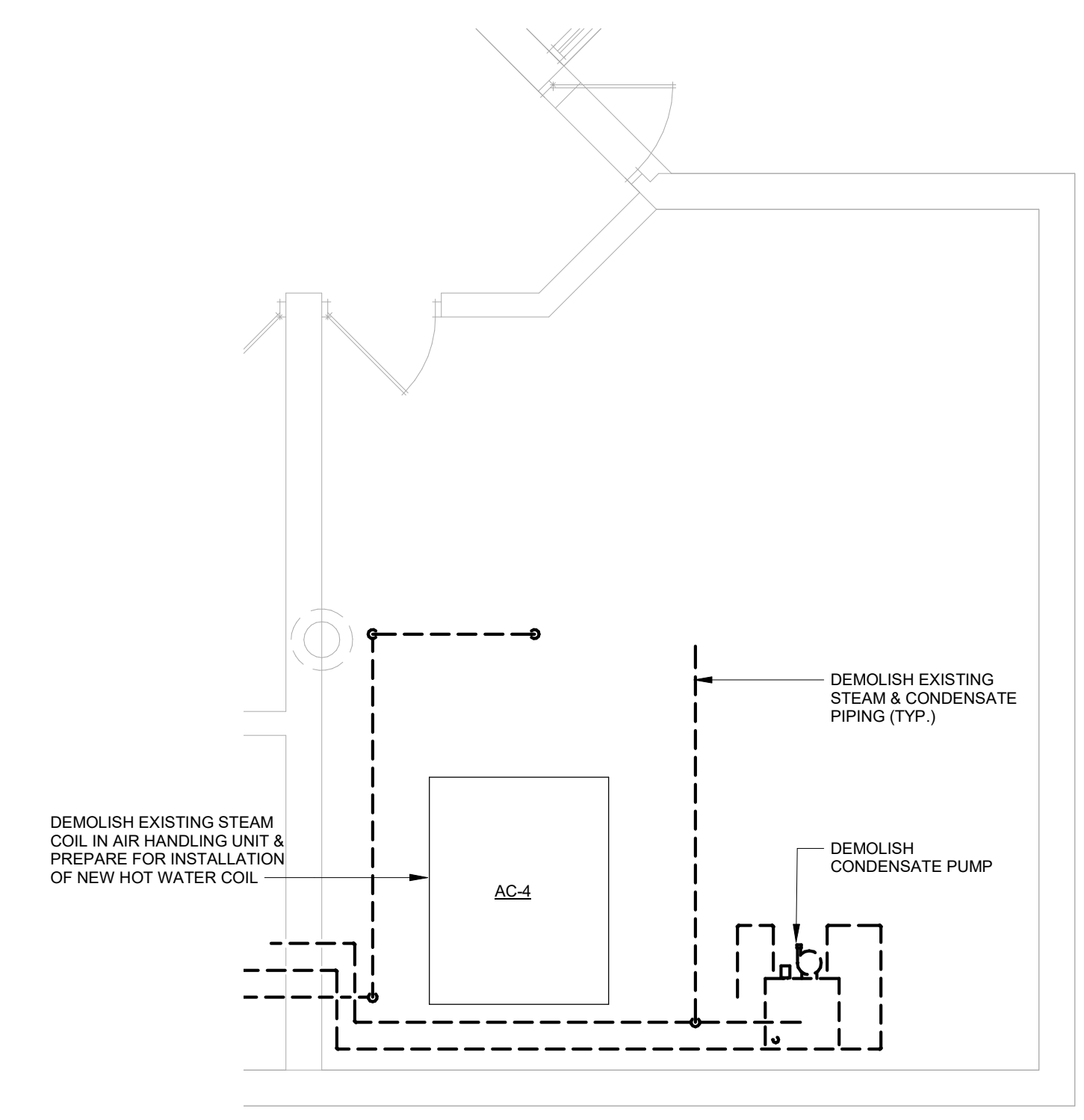
1 ENLARGED WEST PENTHOUSE DEMOLITION PLAN
1/4" = 1'-0"



2 ENLARGED EAST PENTHOUSE DEMOLITION PLAN
1/4" = 1'-0"



3 ENLARGED MECHANICAL ROOM DEMOLITION PLAN
1/4" = 1'-0"

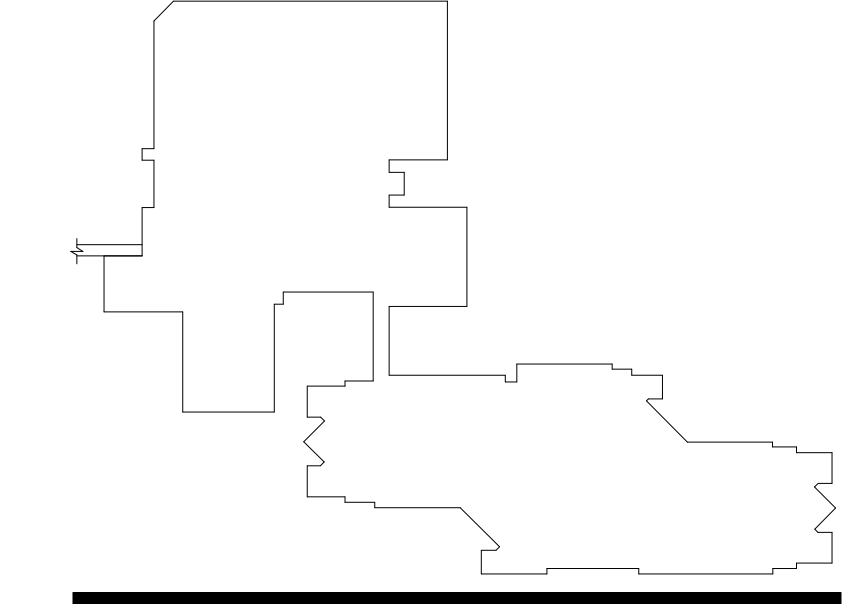


4 ENLARGED POOL MECHANICAL ROOM DEMOLITION PLAN
1/4" = 1'-0"

PROJECT TITLE
MARATHON COUNTY
NORTH CENTRAL
HEALTHCARE CENTER
BOILER CONVERSION

1000 LAKE VIEW DRIVE &
1100 LAKE VIEW DRIVE
WAUSAU, WI 54403

KEYPLAN



SCHEMATIC DESIGN

| # | DATE | DESCRIPTION |
|---|------|-------------|
| | | |

PROGRESS SET

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OR CONSTRUCTION

| | |
|--------------------|------------|
| DCE PROJECT NUMBER | 2105 |
| ISSUANCE DATE | 05.01.2021 |
| PROJECT MANAGER | DG |

From: [Tom Torgerson](#)
To: [Tom Torgerson](#)
Subject: Boiler #2
Date: Monday, June 14, 2021 11:15:03 AM



STATE OF WISCONSIN
No. B11106



KEWEEAW BOILER CORPORATION



READ INSTRUCTION MANUAL BEFORE START UP

| | | | |
|--------------------------|-------------|-------------|--------|
| MODEL | 250 | HORSEPOWER | |
| WORKING PRESSURE - STEAM | 150 LB | WATER | 150 LB |
| HEATING SURFACE | 1450 | SQ. FT. | |
| HEATING RANGE | 8.13-124.63 | GCH. DR. | |
| SPSI | MIN. NAT. | 5KS | |
| FIRING RATE | 104.63 | PSI | |
| CAPACITY | 10000 | LB. PER HR. | |

CATALOG
#33250-6

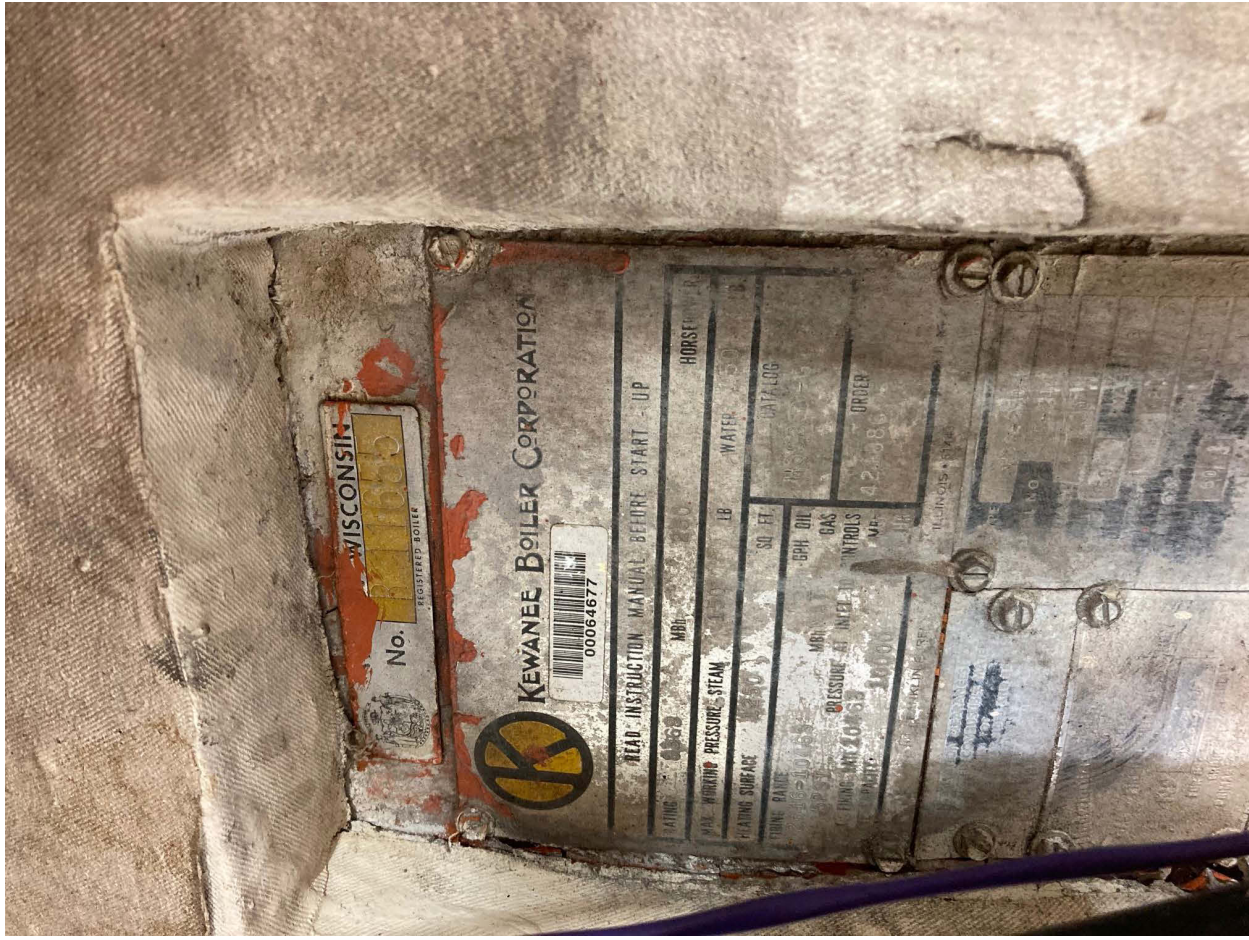
ORDER
421385

109 FRANKLIN STREET, KEWEEAW, ILLINOIS 61443

INSTALLATION CLEARANCES TO
CHECKED COMBUSTIBLE MATERIALS
8 INCHES AT TOP, 6 INCHES AT
FRONT, 18 INCHES AT SIDES AND REAR
EXCEPT AS NOTED OTHERWISE
OR TO BE NONCOMBUSTIBLE

SERIAL NO. 118-21130
VOLTAGE 480
CYCLE 60
PHASE 3
AMPERES 12
CONTROLS-VOLTAGE 115
CYCLE 60
PHASE

Wabco Laboratories
UNITED STATES
RED-BOILER ASSEMBLY
M250



WISCONSIN
No. 00064677
REGISTERED BOILER



KEWANEE BOILER CORPORATION

READ INSTRUCTION MANUAL BEFORE START - UP

RATING: 600 HORSEPOWER
MAX. WORKING PRESSURE: STEAM 150 LB. WATER 150 PSI
PLATING SURFACE: 100 SQ. FT.
THICK. RANGE: 1/2" TO 1/4"
BPH OIL: 100
MB: 100
GAS: 100
PRESSURE AT INLET TO CONTROLS: 42.58
PART: 10000

HEAD INSTRUCTION MANUAL BEFORE START - UP
DATA LOG
ORDER



STATE OF WISCONSIN
No. B-111306



KEWANEE BOILER CORPORATION

READ INSTRUCTION MANUAL BEFORE START-UP

| | |
|-------------------------------|-------------------|
| HORSEPOWER | 150 LB. |
| WORKING PRESSURE-STEAM | 150 LB. |
| WATER | 150 LB. |
| CAPACITY | 135230-G. |
| RATING SURFACE | 135 |
| SUPPLY WATER | 150 LB. |
| RANGE | 10-163 |
| MIN. NAT. GAS | 150 LB. |
| SPST | 10-163 |
| PRESSURE AT INLET TO CONTROLS | 10-163 |
| DRIP RATE | 10-163 |
| CAPACITY | 10000 LB. PER HR. |
| ORDER | 421386 |

500 FRANKLIN STREET, KEWANEE, ILL. 60143

INSTALLATION REQUIREMENTS TO PREVENT COMBUSTIBLE DUSTING
SEE INSTRUCTIONS FOR DUSTING
PREVENTION AND CONTROL
FOR DETAILS REFER TO THE
BOOKLET BEING DISCLOSED

CONTROL PANEL

| | |
|--------------------------|----------|
| SERIAL NO. | 10-22430 |
| VOLTAGE | 115 |
| CYCLE | 1/2 |
| PHASE | 3 |
| AMPERES | 15 |
| CONTROLS-VOLTAGE | 115 |
| CYCLE | 1/2 |
| PHASE | 3 |
| INTEGRAL SAFETY CONTROLS | YES |



Troy Torgerson, LEED® AP
Facility Planner
Marathon County
(P) 715-261-6980
Sent from my iPhone



Capital Improvement Plan (CIP) Project Request Form

| | | | |
|---|---|--------------|--------------------------------|
| Date of Request | 6/17/21 | | |
| Department | Facilities and Capital management | | |
| Contact Person | Terry Kaiser | | |
| Phone | 715-261-6980 | Email | Terry.kaiser@co.marathon.wi.us |
| Project Title | | | |
| Location | | | |
| Is the project new, a repair/replacement or a continuation of an existing project? | New <input checked="" type="checkbox"/> Repair/Repl <input type="checkbox"/> Continuation <input type="checkbox"/> (see below) | | |

If continuation, fill in below:

Planning % complete Design/engineering % complete Construction/installation % complete

| | |
|---|---|
| Has this request been approved by the appropriate Standing Committee or Board? | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
|---|---|

| | | | | | | | | | | | | |
|--|--------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------|
| Departmental Priority (check a different priority for each project) | (High) | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | (Low) |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

| | |
|------------------------------------|--|
| Description Summary / Scope | |
|------------------------------------|--|

Relation to Other Projects (if applicable):

| |
|--|
| |
|--|

Alternatives Considered:

| |
|----------------|
| 1. 2. 3. |
|----------------|

Reasons Alternatives Rejected:

| |
|----------|
| 1. 2. |
|----------|



Capital Project Request Form

PROJECT PURPOSE(S) - Check all that apply and please explain below:

- This project is required to meet legal, mandated or contractual obligations?
- This project will result in the protection of life and/or property and maintain/improve public health and safety?
- This project will result in reductions in expenditures (save money)?
- This project will result in a positive return for Marathon County?
- This project repairs/replaces an important existing physically deteriorated or functionally obsolete county facility, system, service or equipment?
- This project provides a new service, facility, system or equipment?
- This project would generate sufficient revenues to be essentially self-supporting in its operations?
- This project would make existing facilities or personnel more efficient or increase their use with minimal or no operating cost increase?
- This project will benefit and/or be utilized by other Marathon County departments?
- This project is consistent with an overall County plan, policy, or goal; and is necessary to complete a project that has begun or under construction?

Please explain all checked boxes below:



Capital Project Request Form

PROJECT COST

| Estimated Cost Components | | Cost Allocation Per Fiscal Year | | |
|---|--------|--|------------------------------|-----------------------------|
| Preliminary Design / Study | \$0.00 | If project funds can be allocated over more than 1 year, please indicate the amount to be allocated for each year below: | | |
| Final Design and Engineering | \$0.00 | | | |
| Land Acquisition | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Construction / Installation | | Fiscal Year | Amount | \$0.00 |
| Equipment/Furnishings | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Other: Contingency | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Miscellaneous Costs | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Project Budget (total of estimated cost components) | | ←----- (sum of above should equal) -----! | | |
| Is this project to be funded entirely with CIP funds? | | | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Total CIP Funding Requested | | | | |

| If not funded entirely with CIP funds, list below any other (non-CIP) funding sources for this project | Funding Amount |
|--|----------------|
| • | \$ |
| • | \$ |
| • | \$ |

ASSET LIFE, RECURRING COSTS AND RETURN ON INVESTMENT

| | | |
|--|---------------------------------|--------|
| If an existing asset (facility or equipment) is being renovated or replaced, what is the age of the existing asset in years? | | |
| Expected service life (in years) of the existing asset, based on applicable industry standards? | | |
| Estimated Service Life of Improvement (in years) | | |
| Existing Estimated Costs | Annual Operating Costs | \$0.00 |
| | Repair / Maintenance Costs | \$0.00 |
| | Other Non-Capital Costs | \$0.00 |
| | Existing Operating Costs | \$0.00 |
| Future Estimated Costs | Annual Operating Costs | \$0.00 |
| | Annual Maintenance Costs | \$0.00 |
| | Other Non-Capital Costs | \$0.00 |
| | Future Operating Costs | \$0.00 |
| Estimated Return on Investment (in years) | | \$ |



Capital Project Request Form

Explain any other annual benefits to implementing this project:

5 YEAR FORECASTED PROJECTS (if you want a project considered please put on this list)

| Program Year | Project | Description of Project | Estimated Cost |
|--------------|---------|---|----------------|
| 2023 | | Courthouse Envelope Phase 2 Sherriff's Admin | |
| 2024 | | Courthouse South Roof Replacement | |
| 2025 | | Sheriff Dispatch Roof Replacement | |
| 2023 | | TRC building Envelope – OHD – doors - roof | |
| 2023 | | Library Cooling HVAC Replacement | |
| 2023 | | MC Facilities 1000 Lake View Maintenance Garage | |
| 2022 | | NCHC Laundry conversion to its own Steam Generation | |
| 2023 | | Juvenile Parking Lot Replacement | |
| 2023 | | Courthouse Fire Alarm System Upgrade | |
| 2025 | | Heather Street Deck and Front ADA Ramp replacement | |
| 20 | | | |
| 20 | | | |
| 20 | | | |
| 20 | | | |
| 20 | | | |



Rolling Stock Request Form

| 1. DEPARTMENT AND CONTACT INFORMATION | | | |
|---------------------------------------|--------------|-------------------------------|--------------------------------|
| Department | | Facilities Capital Management | |
| Submitted By | Terry Kaiser | Phone | 715-848-4374 |
| Date | June 7, 2021 | Email | terry.kaiser@co.marathon.wi.us |

| 2. VEHICLE/EQUIPMENT REQUESTED | | | | |
|--------------------------------|------------|--|--------------------------|-----------|
| Priority | # of Units | Description of Vehicle/Equipment (year, make, model) | Alternate Funding Source | Cost |
| 1 | 1 | 1 Ton 4WD dump body with plow and Box transfer | | 82,000.00 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| 3. DO ALL OF THE REPLACED VEHICLES MEET THE ROLLING STOCK CRITERIA? | | |
|---|-----------------------------|----------------------------|
| <input type="checkbox"/> YES | <input type="checkbox"/> NO | If not, indicate why below |
| | | |

| 4. FOR EACH VEHICLE/EQUIPMENT LISTED ABOVE INDICATE WHAT VEHICLE/EQUIPMENT IT WILL REPLACE | | | | |
|--|---|---|--------------------------------|---|
| Priority | Description of Requested Vehicle/Equipment (listed above) | Description of Vehicle/Equipment to be Replaced | Year of Vehicle to be Replaced | Meter/Mileage of Vehicle to be Replaced |
| 1 | 1 Ton dump body with plow | Ford F350 4WD with plow | 2006 | 30000 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |



Capital Improvement Plan (CIP) Project Request Form

| | | | |
|---|--|--------------|------------------------------------|
| Date of Request | 6-2-21 | | |
| Department | Facilities and Capital Management | | |
| Contact Person | Craig Christians | | |
| Phone | 715-261-6987 | Email | craig.christians@co.marathon.wi.us |
| Project Title | NCHC A&B Roof Asbestos Removal | | |
| Location | 1100 Lake View Drive | | |
| Is the project new, a repair/replacement or a continuation of an existing project? | New <input type="checkbox"/> Repair/Repl <input checked="" type="checkbox"/> Continuation <input checked="" type="checkbox"/> (see below) | | |

If continuation, fill in below:

Planning % complete Design/engineering % complete Construction/installation % complete

| | | |
|---|------------------------------|--|
| Has this request been approved by the appropriate Standing Committee or Board? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
|---|------------------------------|--|

| | | | | | | | | | | | | |
|--|--------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------|
| Departmental Priority <small>(check a different priority for each project)</small> | (High) | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | (Low) |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

| | |
|------------------------------------|---|
| Description Summary / Scope | This project will include removal of the asbestos roofing materials on the A&B wings. By removing the asbestos new insulation will need to be installed prior to the new roof membrane that will be placed per the 2021 CIP project 21BM-08C. By doing this we won't have to have a ballasted roof. |
|------------------------------------|---|

Relation to Other Projects (if applicable):

With the new boiler plant being done in 2022 it is anticipated that new roof penetrations will have to go in and with the kitchen going away existing penetrations can be covered up. Instead of patching an already outdated roof it makes more sense to install a clean new warranted roof that will be more energy efficient.

Alternatives Considered:

1. Do nothing and leave the asbestos. (Cover it up)
- 2.
- 3.

Reasons Alternatives Rejected:

1. Hazardous asbestos would remain in place.
- 2.
- 3.



Capital Project Request Form

PROJECT PURPOSE(S) - Check all that apply and please explain below:

- This project is required to meet legal, mandated or contractual obligations?
- This project will result in the protection of life and/or property and maintain/improve public health and safety?
- This project will result in reductions in expenditures (save money)?
- This project will result in a positive return for Marathon County?
- This project repairs/replaces an important existing physically deteriorated or functionally obsolete county facility, system, service or equipment?
- This project provides a new service, facility, system or equipment?
- This project would generate sufficient revenues to be essentially self-supporting in its operations?
- This project would make existing facilities or personnel more efficient or increase their use with minimal or no operating cost increase?
- This project will benefit and/or be utilized by other Marathon County departments?
- This project is consistent with an overall County plan, policy, or goal; and is necessary to complete a project that has begun or under construction?

Please explain all checked boxes below:

This project will remove known hazardous asbestos from the building envelope. This will also allow us to replace the roof insulation and make it more efficient. The roofing and insulation is over 20 years old which is getting past its useful life.



Capital Project Request Form

PROJECT COST

| Estimated Cost Components | | Cost Allocation Per Fiscal Year | | |
|---|---------------------|--|--------|---|
| Preliminary Design / Study | \$0.00 | If project funds can be allocated over more than 1 year, please indicate the amount to be allocated for each year below: | | |
| Final Design and Engineering | \$0.00 | | | |
| Land Acquisition | \$0.00 | | | |
| Construction / Installation | \$764,865.00 | Fiscal Year | Amount | \$0.00 |
| Equipment/Furnishings | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Other: Contingency | \$76,486.00 | Fiscal Year | Amount | \$0.00 |
| Miscellaneous Costs | \$ | Fiscal Year | Amount | \$0.00 |
| Project Budget (total of estimated cost components) | \$841,351.00 | ←----- (sum of above should equal) -----! | | |
| Is this project to be funded entirely with CIP funds? | | | | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| Total CIP Funding Requested | | \$841,351.00 | | |

| If not funded entirely with CIP funds, list below any other (non-CIP) funding sources for this project | Funding Amount |
|--|----------------|
| • | \$ |
| • | \$ |
| • | \$ |

ASSET LIFE, RECURRING COSTS AND RETURN ON INVESTMENT

| | |
|--|---------------|
| If an existing asset (facility or equipment) is being renovated or replaced, what is the age of the existing asset in years? | 25 |
| Expected service life (in years) of the existing asset, based on applicable industry standards? | 20 |
| Estimated Service Life of Improvement (in years) | 20 |
| Existing Estimated Costs | |
| Annual Operating Costs | \$0.00 |
| Repair / Maintenance Costs | \$0.00 |
| Other Non-Capital Costs | \$0.00 |
| Existing Operating Costs | \$0.00 |
| Future Estimated Costs | |
| Annual Operating Costs | \$0.00 |
| Annual Maintenance Costs | \$0.00 |
| Other Non-Capital Costs | \$0.00 |
| Future Operating Costs | \$0.00 |
| Estimated Return on Investment (in years) | \$ |



Capital Project Request Form

Explain any other annual benefits to implementing this project:

5 YEAR FORECASTED PROJECTS (if you want a project considered please put on this list)

| Program Year | Project | Description of Project | Estimated Cost |
|--------------|---------|------------------------|----------------|
| 20 | | | |
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Prepared for
North Central Health Care
OF
Wausau, WI

Prepared by:
Kirk Haigh

Much More Than a Great Roof.

For your roofing project you deserve...

- Service that is dependable, professional, and responsive to your needs.
- A company that has been in business since 1985.
- A project that is done in a timely way and carefully cleaned up when done.
- Excellent workmanship with attention to detail from your initial call through project completion.
- Firm, competitive pricing with no hidden charges and doesn't change without your authorization.
- A contractor that is fully insured and bonded.

We give you roofing systems that meet your specific need.

- ^ FiberTite and Sika Sarnafil membranes for exceptional durability - white, reinforced, and heat-welded.
- ^ DECRA stone coated metal roofing for a long track record of durability and beauty.
- ^ GAF Elk asphalt shingles backed by the Golden Pledge warranty for lasting protection and good looks.
- ^ Marathon Metals standing seam metal roofing for functional aesthetic appeal.
- ^ Johns Manville and GenFlex EPDM rubber for low cost protection.

VISIT US AT

KULPROOF.COM

OR VISIT OUR SHOWROOM 2.5 MILES EAST OF STRATFORD ON HIGHWAY 153

The Kulp's team.



Our home.

ID: 1429967

JOHN D KULP

Certification, License, or Registration Name
Dwelling Contractor Qualifier Certification

Expires
09/25/19



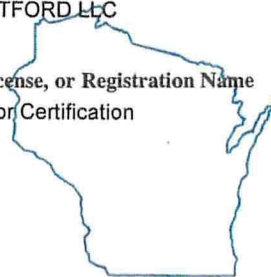
Wisconsin Department of Safety and Professional Services
Signature: *John D Kulp*

ID: 674597

KULPS OF STRATFORD LLC

Certification, License, or Registration Name
Dwelling Contractor Certification

Expires
10/05/18



Wisconsin Department of Safety and Professional Services
Signature: *John Kulp*

Our current state certifications.



LLC



Exceeding expectations since 1985

P O Box 147, Stratford, WI 54484

Phone: 715.687.3368

Fax: 715.687.3264

KULPROOF.COM

1.800.285.2917

Mailing Address: P O Box 147, Stratford, WI 54484

Shipping Address: C4098 Pauline Ln, Stratford, WI 54484

Email Address: sales@kulproof.com

June 10, 2021

North Central Health Care
Wausau Campus
1100 Lake View Dr
Wausau, WI 54403

SCOPE OF WORK

Kulp's of Stratford, LLC proposes to perform labor and supply all necessary materials for the completion of the project as follows:

Description of project(s) to be completed: We will replace the ballasted section of roof indicated on the attached photo. This will include removing the existing membrane, ballast and insulation. We will install 60mil EPDM or 45mil Fibertite, 4in of Isocyanurate insulation and tapered insulation. This will be an adhered system.

Permits

Kulp's of Stratford performs work in a large geographic area that includes hundreds of municipalities. As permit requirements and costs are constantly changing it works well when building owners obtain necessary permits. If you would like aid in obtaining a permit, or would like the costs included in your proposal, please let us know and we would be happy to assist you.

Insurance

Kulp's of Stratford, LLC shall provide workers compensation and liability insurance as detailed on our certificate of insurance. Kulp's maximum liability is the limits of this insurance. A certificate of insurance will be issued upon request.

Safety

1. Safety is of primary importance to Kulp's Of Stratford.
2. We will set up required safety equipment at site needed to comply with OSHA construction guidelines including barricades, safety lines, rubbish chutes, etc.
3. Written HazCom programs and MSDS sheets will be on project site at all times.
4. All materials and equipment hoisted to the rooftop and secured against wind and water damage.

Fully Adhered 60mil EPDM

~~\$ 670,616.00~~

Fully Adhered 45mil Fibertite

\$ 794,865.00 - (\$380,000.00)

6/10/2021

11:52:02 AM

= \$414,865.00
 + ADDRESS REMOVAL \$350,000.00
 \$764,865.00 + 10% = \$841,351.00
 For 2021 CIP 2187-08C
 Page 1

SEE NEXT PAGE FOR SPECIFICATIONS AND CLARIFICATIONS

Specification and Clarifications

Reflashing Walls

1. Rock will be removed.
2. New edge metal will be installed.
3. Existing membrane will be removed.
4. Existing insulation will be removed.
5. 4in of Isocyanurate insulation and tapered insulation will be adhered.
6. 60 mil EPDM black rubber membrane adhered to insulation.
7. 45mil Fibertite (off-white) membrane adhered to insulation.
8. Membrane will be terminated utilizing termination bar. (where applicable)
9. Seams and details will be done according to manufacturer's specifications.
10. All drains will be reconditioned.
11. Contractor's two year warranty will be issued upon completion for our workmanship.



Kulp's of Stratford, LLC proposes to furnish labor and materials to install ROOFING SYSTEM in accordance with the above specifications for the sum above.

↳ This price is premised on using AIA contract language in contract from General Contractor.

↳ In order to secure a place in Kulp's schedule, we will need to have a signed contract from our client one month prior to commencing with the project.

↳ At the time of contract signing we will need a construction schedule clearly indicating the date range during which our portion of the project is to be completed. Changes to that schedule less than 30 days before the originally scheduled start date may cause a disruption to Kulp's schedule and make it impossible for Kulp's to fully meet the revised expectations. Timely communication is of the essence in order to avoid scheduling conflicts.

↳ We do not guarantee that our work will either eliminate current or prevent future insect or animal infestation in or around the structure.

↳ Industry Standard Cash Terms for all systems: 50% deposit and balance at substantial completion of our scope of work unless otherwise arranged. Projects greater than \$20,000 may require additional monthly progress billings.

↳ Any amount in default of the payment schedule above will bear an interest rate of 1.5% per month.

↳ Kulp's reserves the right to call client back within a year of proposal date. This will not violate No-Call List.

↳ Snow and ice removal is not included in this proposal and will be an extra charge if performed by Kulp's.

↳ Providing your fax number or email address constitutes an express invitation to send you fax or email advertisements about future Kulp's programs.

↳ This proposal may be withdrawn if not accepted within 15 days.

Acceptance

OPTIONS THAT ARE NOT CHOSEN ARE BLACKED OUT ABOVE AND FINAL ORIGINAL AGREEMENT AMOUNT WRITTEN IN THE BLANK BELOW. The above specifications, prices, and conditions (including conditions on back of proposal) are accepted. You are authorized to do the work as specified. Payment will be made as follows

\$ _____ FINAL ORIGINAL AGREEMENT

\$ _____ Paid With Order (Downpayment) Check Number _____

\$ _____ Due Upon Substantial Completion

Submitted By x *Kirk Haigh* _____ x _____ .
Kulp's Of Stratford, LLC Date

Accepted By x _____ x _____ .
Owner Date

Accepted By x _____ x _____ .
Owner Date

BRACK Thermal Systems, Inc.

ASBESTOS ABATEMENT
2419 Spooner Avenue, Altoona, WI 54720
(715) 839-9461 Fax (715) 839-0612
matt@brackthermal.com

May 31, 2021

Craig Christians
Marathon County Facilities Management
1000 Lakeview Drive
Wausau, WI 54403

Dear Mr. Christians:

We submit for your consideration the following budgetary pricing: Brack Thermal Systems, Inc. shall furnish all the necessary labor, materials, equipment, and insurance (as per enclosed certificates) to perform the removal of the following materials:

1. Approximately 58,816 square feet of asbestos containing built-up asphalt roofing and insulation.

The work is to take place on NCHC A& B Roof located at the above address. This includes the asbestos removal permit for the WI DHS permit.

The owner will hire a company to remove the river rock off the roof and rubber membrane along with the styrofoam insulation down to the built-up asbestos roof. We will require the roofing company to raise and lower materials and waste from the penthouse roof with their lift or crane. We will work with the roofing contractor that you choose and schedule the project.

This price is figured on the completion of removal of approximately 2,000 square feet of roofing per day. We will have to spend extra time removing the built-up roofing around the exhaust fans and the pyramid roofs.

The following apply:

1. According to DNR and OSHA regulations, Brack Thermal Systems, Inc. shall protect the interior environment of the building and the exterior environment around the building from asbestos contamination, including proper disposal of all asbestos-containing materials removed.
2. Brack Thermal Systems, Inc. shall furnish all notifications to and from the DNR and DHS as required, prior to, during, and following the completion of the project.
3. Brack Thermal Systems, Inc. shall furnish client with employee's WI certifications, physician's approval to wear a respirator, respirator protection plan, dump manifest, and air monitoring results upon completion of the project.
4. Client will be responsible to see that the area(s) are totally vacated except for Brack Thermal System, Inc.'s employees for the duration of the project.

BRACK Thermal Systems, Inc.

ASBESTOS ABATEMENT

2419 Spooner Avenue, Altoona, WI 54720

(715) 839-9461 Fax (715) 839-0612

matt@brackthermal.com

5. Client is responsible to provide water and electricity for the project.
6. Client shall remove all movable objects from the above-mentioned areas, including chairs, desks, tables, bookshelves, etc. Should client choose to leave any of the above in the work area, Brack Thermal Systems, Inc. will not be responsible for the removal of any flooring material under the objects, nor will Brack Thermal Systems, Inc. be responsible for damages to anything left in the work area.
7. Should additional asbestos be found (including asbestos which the client did not tell us to remove during our walk-through, concealed asbestos, or asbestos not listed on our proposal) and the client wants it removed or encapsulated, Brack Thermal Systems, Inc. shall do so on a time and material basis only upon written order from the client.
8. This proposal may be withdrawn after 30 days.

The above work shall be carried out under high standards of quality and workmanship. The above work shall be completed for \$350,000.00 (THREE HUNDRED FIFTY THOUSAND DOLLARS). Payment is due net 10. Any payment made past 30 days shall be subject to 1.5% interest per month. Any alteration or deviation from the above-mentioned specifications that involves extra cost will become an extra charge over and above the price as listed above. The above price includes all applicable sales tax.

Craig Christians
Marathon County Facilities Management

Date



Capital Improvement Plan (CIP) Project Request Form

| | | | |
|---|---|--------------|------------------------------------|
| Date of Request | 05/24/2021 | | |
| Department | Facilities and Capital Management | | |
| Contact Person | Craig Christians | | |
| Phone | 715-581-9596 | Email | craig.christians@co.marathon.wi.us |
| Project Title | NCHC Mount View Exterior Painting | | |
| Location | Northcentral Health Care Center, Mount View | | |
| Is the project new, a repair/replacement or a continuation of an existing project? | New <input type="checkbox"/> Repair/Repl <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> (see below) | | |

If continuation, fill in below:

Planning % complete Design/engineering % complete Construction/installation % complete

| | |
|---|---|
| Has this request been approved by the appropriate Standing Committee or Board? | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
|---|---|

| | | | | | | | | | | | | |
|--|--------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|-------|
| Departmental Priority <small>(check a different priority for each project)</small> | (High) | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | (Low) |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

| | |
|------------------------------------|---|
| Description Summary / Scope | The scope of this project is to repaint the exterior of Mount View Center. This will include washing the exterior, recaulking all construction joints and applying (2) coats of Loxon XP paint to the exterior. |
|------------------------------------|---|

Relation to Other Projects (if applicable):

| |
|--|
| The new NCHC Tower and Mount View interior remodel. This will give us the opportunity to paint the exterior of Mount View to match the colors of the rest of the facility. |
|--|

Alternatives Considered:

| |
|--|
| <ol style="list-style-type: none"> 1. Nothing 2. 3. |
|--|

Reasons Alternatives Rejected:

| |
|--|
| <ol style="list-style-type: none"> 1. 2. 3. |
|--|



Capital Project Request Form

PROJECT PURPOSE(S) - Check all that apply and please explain below:

- This project is required to meet legal, mandated or contractual obligations?
- This project will result in the protection of life and/or property and maintain/improve public health and safety?
- This project will result in reductions in expenditures (save money)?
- This project will result in a positive return for Marathon County?
- This project repairs/replaces an important existing physically deteriorated or functionally obsolete county facility, system, service or equipment?
- This project provides a new service, facility, system or equipment?
- This project would generate sufficient revenues to be essentially self-supporting in its operations?
- This project would make existing facilities or personnel more efficient or increase their use with minimal or no operating cost increase?
- This project will benefit and/or be utilized by other Marathon County departments?
- This project is consistent with an overall County plan, policy, or goal; and is necessary to complete a project that has begun or under construction?

Please explain all checked boxes below:

By cleaning, caulking and painting the exterior of the building it will extend the life of the exterior structure. It has been over 20 years since the envelope has been sealed up. It also gives the facility the opportunity to make the exterior of the Mount View the same colors as the rest of the new facilities.



Capital Project Request Form

PROJECT COST

| Estimated Cost Components | | Cost Allocation Per Fiscal Year | | |
|---|---------------------|--|---|-----------------------------|
| Preliminary Design / Study | \$0.00 | If project funds can be allocated over more than 1 year, please indicate the amount to be allocated for each year below: | | |
| Final Design and Engineering | \$0.00 | | | |
| Land Acquisition | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Construction / Installation | \$355300.00 | Fiscal Year | Amount | \$0.00 |
| Equipment/Furnishings | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Other: Contingency | \$36,230.00 | Fiscal Year | Amount | \$0.00 |
| Miscellaneous Costs | \$7,000.00 | Fiscal Year | Amount | \$0.00 |
| Project Budget (total of estimated cost components) | \$398,530.00 | ←----- (sum of above should equal) -----! | | |
| Is this project to be funded entirely with CIP funds? | | | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Total CIP Funding Requested | | \$398,530.00 | | |

| If not funded entirely with CIP funds, list below any other (non-CIP) funding sources for this project | Funding Amount |
|--|----------------|
| • | \$ |
| • | \$ |
| • | \$ |

ASSET LIFE, RECURRING COSTS AND RETURN ON INVESTMENT

| | |
|--|---------------|
| If an existing asset (facility or equipment) is being renovated or replaced, what is the age of the existing asset in years? | 20+ |
| Expected service life (in years) of the existing asset, based on applicable industry standards? | |
| Estimated Service Life of Improvement (in years) | 20 |
| Existing Estimated Costs | |
| Annual Operating Costs | \$0.00 |
| Repair / Maintenance Costs | \$0.00 |
| Other Non-Capital Costs | \$0.00 |
| Existing Operating Costs | \$0.00 |
| Future Estimated Costs | |
| Annual Operating Costs | \$0.00 |
| Annual Maintenance Costs | \$0.00 |
| Other Non-Capital Costs | \$0.00 |
| Future Operating Costs | \$0.00 |
| Estimated Return on Investment (in years) | \$ |



Capital Project Request Form

Explain any other annual benefits to implementing this project:

5 YEAR FORECASTED PROJECTS (if you want a project considered please put on this list)

| Program Year | Project | Description of Project | Estimated Cost |
|--------------|---------|------------------------|----------------|
| 20 | | | |
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OMNI GLASS & PAINT, LLC.

3530 OMNI DRIVE * OSHKOSH, WISCONSIN 54904 * COMPANY ID #1100807

PHONES: OSHKOSH (920) 233-3333 FAX: (920) 236-7890

GREEN BAY (920) 434-7772

SCHOFIELD (715) 355-8938

PAINT PROPOSAL #PT21-446

Date: May 21, 2021

To: NCHC

Attn: Craig

Project: Mount View Exterior painting-Budget
Wausau, WI

This proposal supercedes any previously given, either written or verbal, and is valid for 45 days only, unless extended at our option.

1. Subject to provision contained on this or any attached sheets making up this proposal OMNI GLASS & PAINT, INC. proposes to furnish materials and/or labor described below, for sums stated:

Base Bid Labor, Materials and Equipment to complete the following:

To complete work listed below per walk through with Craig for 2022 budget to include:

- Power wash exterior block to be painted
- Apply 2 coats of Loxon XP to exterior block
- Remove and recaulk all joints
- Prep and pant hm doors and frames, steel at loading dock

○ For the **BUDGETARY** sum of.....\$355,300.00

Note; Paitn and material prices have been rising due to the current state of the ecenomy and raw materials. I have tried to cover this for the 2022 year however I cannot for certain be sure there wont be more price changes.

Thank you for the oppportunity to quote this project.

If you have any questions, please feel free to contact me at your convenience.

Kris Dennis, Project Manager

PH: 920-233-3333

Cell: 920-420-7028

Saved as:

IMPORTANT – PLEASE READ

- | |
|--|
| <ul style="list-style-type: none"> • Terms are Net 10 Days from date of invoice • Past due accounts are subject to interest at the rate of 1-1/2% per month (18% annually) • Retainages (when allowed) are due immediately upon payment from owner • All materials used are under warranty by the manufacturer. Warranties may vary by manufacturer. Omni Glass & Paint, Inc. does not warranty materials • Quotation excludes any overtime unless otherwise noted • All workmanship is warranted for one year from date of installation • It is understood that if you use your own contract form, the conditions of this quotation fully apply, unless specifically written out and mutually agreed upon • Backcharges for any services not specifically agreed to in writing, and/or backcharges of any other nature for delays to the project caused by conditions beyond our control will not be honored and is not part of this quotations • Seller reserves the right to stop work or delivery whenever an account is in arrears, without recourse by affected parties |
|--|



Capital Improvement Plan (CIP) Project Request Form

| | | | |
|---|---|---|--|
| Date of Request | 05/11/2021 | | |
| Department | (select department) | | |
| Contact Person | Craig Christians | | |
| Phone | 715-261-6987 | Email | craig.christians@co.marathon.wi.us |
| Project Title | NCHC Professional Plaza HVAC Control Upgrades | | |
| Location | NCHC Professional Plaza 1200 Lakeview Drive | | |
| Is the project new, a repair/replacement or a continuation of an existing project? | New <input type="checkbox"/> | Repair/Repl <input checked="" type="checkbox"/> | Continuation <input type="checkbox"/> (see below) |

If continuation, fill in below:

Planning % complete Design/engineering % complete Construction/installation % complete

| | | |
|---|------------------------------|--|
| Has this request been approved by the appropriate Standing Committee or Board? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
|---|------------------------------|--|

| | | | | | | | | | | | | |
|--|--------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------|
| Departmental Priority (check a different priority for each project) | (High) | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | (Low) |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

| | |
|------------------------------------|---|
| Description Summary / Scope | This project's scope is to update the building's existing out dated HVAC controls to new Johnson Control FX controls to match what is in the buildings at the rest of the campus and County buildings. This project will also replace (42) VAV boxes and include testing and balancing. |
|------------------------------------|---|

Relation to Other Projects (if applicable):

| |
|--|
| This project's scope is to update the building's existing out dated HVAC controls to new Johnson Control FX controls to match what is in the buildings at the rest of the campus and County buildings. |
|--|

Alternatives Considered:

| |
|---|
| <ol style="list-style-type: none"> 1. Do nothing 2. 3. |
|---|

Reasons Alternatives Rejected:

| |
|--|
| <ol style="list-style-type: none"> 1. 2. 3. |
|--|



Capital Project Request Form

PROJECT PURPOSE(S) - Check all that apply and please explain below:

- This project is required to meet legal, mandated or contractual obligations?
- This project will result in the protection of life and/or property and maintain/improve public health and safety?
- This project will result in reductions in expenditures (save money)?
- This project will result in a positive return for Marathon County?
- This project repairs/replaces an important existing physically deteriorated or functionally obsolete county facility, system, service or equipment?
- This project provides a new service, facility, system or equipment?
- This project would generate sufficient revenues to be essentially self-supporting in its operations?
- This project would make existing facilities or personnel more efficient or increase their use with minimal or no operating cost increase?
- This project will benefit and/or be utilized by other Marathon County departments?
- This project is consistent with an overall County plan, policy, or goal; and is necessary to complete a project that has begun or under construction?

Please explain all checked boxes below:

This project will replace the aging and dated HVAC controls in the Plaza making all buildings on the NCHC Campus being ran off of the same system.



Capital Project Request Form

PROJECT COST

| Estimated Cost Components | | Cost Allocation Per Fiscal Year | | |
|---|---------------------|--|---|-----------------------------|
| Preliminary Design / Study | \$0.00 | If project funds can be allocated over more than 1 year, please indicate the amount to be allocated for each year below: | | |
| Final Design and Engineering | \$0.00 | | | |
| Land Acquisition | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Construction / Installation | \$751,989.00 | Fiscal Year | Amount | \$0.00 |
| Equipment/Furnishings | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Other: Contingency | \$60,199.00 | Fiscal Year | Amount | \$0.00 |
| Miscellaneous Costs | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Project Budget (total of estimated cost components) | \$812,188.00 | ←----- (sum of above should equal) -----! | | |
| Is this project to be funded entirely with CIP funds? | | | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Total CIP Funding Requested | | \$812,188.00 | | |

| If not funded entirely with CIP funds, list below any other (non-CIP) funding sources for this project | Funding Amount |
|--|----------------|
| • | \$ |
| • | \$ |
| • | \$ |

ASSET LIFE, RECURRING COSTS AND RETURN ON INVESTMENT

| | |
|--|---------------|
| If an existing asset (facility or equipment) is being renovated or replaced, what is the age of the existing asset in years? | 30 |
| Expected service life (in years) of the existing asset, based on applicable industry standards? | 20 |
| Estimated Service Life of Improvement (in years) | 20 |
| Existing Estimated Costs | |
| Annual Operating Costs | \$0.00 |
| Repair / Maintenance Costs | \$0.00 |
| Other Non-Capital Costs | \$0.00 |
| Existing Operating Costs | \$0.00 |
| Future Estimated Costs | |
| Annual Operating Costs | \$0.00 |
| Annual Maintenance Costs | \$0.00 |
| Other Non-Capital Costs | \$0.00 |
| Future Operating Costs | \$0.00 |
| Estimated Return on Investment (in years) | \$ |



Capital Project Request Form

Explain any other annual benefits to implementing this project:

5 YEAR FORECASTED PROJECTS (if you want a project considered please put on this list)

| Program Year | Project | Description of Project | Estimated Cost |
|--------------|---------|------------------------|----------------|
| 20 | | | |
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TROY
Add TO LVC HVAC
PROJECT

AUGUST WINTER & SONS, INC.
MECHANICAL CONTRACTOR & FABRICATOR

www.augustwinter.com

2323 N. Roemer Road
Appleton, WI 54911
PO Box 1896
Appleton, WI 54912-1896
P: (920) 739-8881
F: (920) 739-2230

5613 Schofield Ave.
Schofield, WI 54476
P: (715) 355-7555
F: (715) 355-9048

Date: May 8, 2020
Attn: Terry Kaiser

RE: Marathon County North Central Healthcare Campus Buildings

This proposal is for the conversion from JCI Metasys to JCI FX for the Central Healthcare Campus Buildings. AWS will replace the existing site NAE's with new JCI FX Jace's. The new JCI FX Jace's will be utilizing the Niagara 4 software from Tridium. Niagara 4 has several advantages over the outdated AX, including enhanced security, utilizing HTML5 and removing the need for JAVA. Thank you for the opportunity to provide a proposal on the above stated project. The following is a price to provide materials and installation of controls, and a brief explanation of the work to be performed.

NAE-1, NAE-2, NAE-3, NAE-6 and NAE-7

- o New JCI FX N4 Jace for each NAE
 - o Provide a new N4 Jace to replace existing NAE's
 - o Provide install labor for new N4 Jace
 - o Provide system graphics for new N4 Jace
 - o Confirm system operation after upgrade

Budget price for above scope of work: \$68,524.00

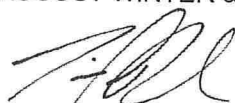
Specifically excluded:

- o Liability for existing control panels and control sensors
- o Sales and use tax
- o Overtime

This proposal will be protected for 30 days. It is also subject to the August Winter & Sons Conditions of Proposal, a copy of which is available upon request. This proposal is subject to approval of credit by August Winter & Sons, Inc. credit department. Payments by credit card may incur additional fees.

August Winter & Sons, Inc. is a full-service, design/build, mechanical contractor providing fabrication and/or installation of specialty items such as piping, plumbing, HVAC systems and custom tanks. We appreciate the opportunity of quoting this work. If you have any questions or further information is required, please feel free to contact us.

Sincerely,
AUGUST WINTER & SONS, INC.



Travis Runke



AUGUST WINTER & SONS, INC.

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April 27, 2021

Marathon County
Attn: Steve Belanger

Proposal No. TRUN-00215

RE: 2021 Control and Mechanical Budget Proposals

Work/Project Description:

We propose to furnish labor, material, and tools to complete the budget breakouts listed below.

Our proposal includes the following breakouts:

AHU 16 in Garage Area

- Replace pneumatic controls with new DDC controls
- Panel location to be reused with new panel installed
- Provide and install new DDC controller, DAT, ZNT, damper actuators, electronic valve, fan S/S/S, filter status and freeze stat
- Mechanical install of new electronic valve
- Extend sites existing BACnet to new panel
- Provide new graphics for new controls
- Customer training

We offer the above for the budget sum of **\$11,613.00**

① **BACnet Communication Rework for Courthouse**

- Labor and material to bring existing BACnet communication up to proper install methods *COURT ROOMS*

We offer the above for the budget sum of **\$8,329.00**

Lakeview Professional Plaza Building DDC Control Upgrade

- Replace existing controls with JCI FX controls for the following
 - AC units qty 7
- Panel location to be reused with new panel installed
- Provide and install new DDC controller, DAT, ZNT, damper actuators, electronic valve, fan S/S/S, filter status and freeze stat
- Mechanical install of new electronic valve if needed
- Extend sites existing BACnet to new panel
- Provide new graphics for new controls
- Customer training

We offer the above for the budget sum of **\$91,429.00**

Lakeview Professional Plaza Building DDC Control Upgrade

- First Floor VAV's qty 18
 - Replace existing VAV boxes with new
 - Replace existing valve with new
- Provide and install new JCI FX controls for controller with actuator, ZNT, valve control
- Extend sites existing BACnet to new panel
- Provide new graphics for new controls
- Customer training

We offer the above for the budget sum of **\$76,500.00**

Lakeview Professional Plaza Building DDC Control Upgrade

- Second Floor VAV's qty 37
 - Replace existing VAV boxes with new
 - Replace existing valve with new
- Provide and install new JCI FX controls for controller with actuator, ZNT, valve control
- Extend sites existing BACnet to new panel
- Provide new graphics for new controls
- Customer training

We offer the above for the budget sum of **\$157,250.00**

Lakeview Professional Plaza Building DDC Control Upgrade

- Third Floor VAV's qty 30
 - Replace existing VAV boxes with new
 - Replace existing valve with new
- Provide and install new JCI FX controls for controller with actuator, ZNT, valve control
- Extend sites existing BACnet to new panel
- Provide new graphics for new controls
- Customer training

We offer the above for the budget sum of **\$127,500.00**

AHU 14/RF 14 Replacement DX Unit

- Replace existing DX unit with new
- New line set pipping as required
- Electrical disconnect and reconnection of DX units

We offer the above for the budget sum of **\$29,000.00**

①


 **\$29,000.00**



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May 27, 2021

Marathon County
Attn: Steve Belanger

Proposal No. TRUN-00215

RE: 2021 Control and Mechanical Budget Proposals

Work/Project Description:

We propose to furnish labor, material, and tools to complete the budget breakouts listed below.

Our proposal includes the following breakouts:

Lakeview Professional Plaza Building VFD Replacement with Bypass

- Replace existing starters with new VFD's with bypass qty 12
 - Provide and install new VFD's for one 15 HP, one 5 HP, one 2 HP, two 10 HP, three 7.5 HP and four 3 HP motors for the existing AC units
- Lock existing venturi veins open
- Provide new graphics for new controls
- Customer training

We offer the above for the budget sum of **\$51,786.00**

Lakeview Professional Plaza Building VFD Replacement without Bypass

- Replace existing starters with new VFD's without bypass qty 12
 - Provide and install new VFD's for one 15 HP, one 5 HP, one 2 HP, two 10 HP, three 7.5 HP and four 3 HP motors for the existing AC units
- Lock existing venturi veins open
- Provide new graphics for new controls
- Customer training

We offer the above for the budget sum of **\$47,870.00**

We exclude the following items:

- Overtime
- Electrical above 50 volts
- Ethernet to required panel by owner
- Liability for existing control panels and control sensors
- All dampers, damper actuators, fire/smoke dampers and pumps by others
- Starters, disconnects, combo starter-disconnects by others
- Any items not specifically detailed in this quotation are excluded

This proposal will be protected for 30 days. It is also subject to the August Winter & Sons Conditions of Proposal, a copy of which is available upon request. Payments by credit card may incur additional fees.

August Winter & Sons, Inc. is a full-service design/build, mechanical contractor providing fabrication and/or installation of specialty items such as piping, plumbing, HVAC systems and custom tanks. We appreciate the opportunity of quoting this work. If you have any questions or further information is required, please feel free to contact us.

Sincerely,
AUGUST WINTER & SONS, INC.



Travis Runke



Capital Improvement Plan (CIP) Project Request Form

| | | | |
|---|---|--------------|------------------------------------|
| Date of Request | 5-27-2021 | | |
| Department | Facilities and Capital Management | | |
| Contact Person | Craig Christians | | |
| Phone | 715261-6987 | Email | craig.christians@co.marathon.wi.us |
| Project Title | NCHC Professional Plaza Parking Lot and Sanitary Sewer Repairs | | |
| Location | NCHC Professional Plaza 1200 Lakeview Drive | | |
| Is the project new, a repair/replacement or a continuation of an existing project? | New <input type="checkbox"/> Repair/Repl <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> (see below) | | |

If continuation, fill in below:

Planning % complete Design/engineering % complete Construction/installation % complete

| | | |
|---|------------------------------|--|
| Has this request been approved by the appropriate Standing Committee or Board? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
|---|------------------------------|--|

| | | | | | | | | | | | | |
|--|--------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------|
| Departmental Priority (check a different priority for each project) | (High) | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | (Low) |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

| | |
|------------------------------------|---|
| Description Summary / Scope | The scope of this project is to repave the south most and north parking lots by the Professional Plaza. The sanitary sewer line going under the laundry has collapsed and we would reroute a new line to fix this problem. Lastly the wooden stairs going down the hill by the south parking lot will be replaced with a concrete set meeting current code. |
|------------------------------------|---|

Relation to Other Projects (if applicable):

Alternatives Considered:

1. Nothing
- 2.
- 3.

Reasons Alternatives Rejected:

- 1.
- 2.
- 3.



Capital Project Request Form

PROJECT PURPOSE(S) - Check all that apply and please explain below:

- This project is required to meet legal, mandated or contractual obligations?
- This project will result in the protection of life and/or property and maintain/improve public health and safety?
- This project will result in reductions in expenditures (save money)?
- This project will result in a positive return for Marathon County?
- This project repairs/replaces an important existing physically deteriorated or functionally obsolete county facility, system, service or equipment?
- This project provides a new service, facility, system or equipment?
- This project would generate sufficient revenues to be essentially self-supporting in its operations?
- This project would make existing facilities or personnel more efficient or increase their use with minimal or no operating cost increase?
- This project will benefit and/or be utilized by other Marathon County departments?
- This project is consistent with an overall County plan, policy, or goal; and is necessary to complete a project that has begun or under construction?

Please explain all checked boxes below:

The current parking lot asphalt has deteriorated and is breaking up into chunks creating walking hazards. The stairs going to the south parking lot don't meet code and have cracks in the wood that peoples shoes can get caught in. These are all safety related and if someone would get hurt it could cost the County money in compensation. The sanitary sewer line for the plaza runs from a manhole in the north parking lot and goes under the laundry. This line is a very old clay pipe which has collapsed and caused sewer to back up in the Plaza. We propose to install a new line from the north parking lot and reroute it around the laundry building. This will eliminate potentially costly sewage back-ups in the plaza.



Capital Project Request Form

PROJECT COST

| Estimated Cost Components | | Cost Allocation Per Fiscal Year | | |
|---|---------------------|--|---|-----------------------------|
| Preliminary Design / Study | \$0.00 | If project funds can be allocated over more than 1 year, please indicate the amount to be allocated for each year below: | | |
| Final Design and Engineering | \$10,000.00 | | | |
| Land Acquisition | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Construction / Installation | \$148,099.00 | Fiscal Year | Amount | \$0.00 |
| Equipment/Furnishings | \$0.00 | Fiscal Year | Amount | \$0.00 |
| Other: Contingency | \$10,000.00 | Fiscal Year | Amount | \$0.00 |
| Miscellaneous Costs | \$10,000.00 | Fiscal Year | Amount | \$0.00 |
| Project Budget (total of estimated cost components) | \$178,099.00 | ←----- (sum of above should equal) -----! | | |
| Is this project to be funded entirely with CIP funds? | | | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| Total CIP Funding Requested | | \$178,099.00 | | |

| If not funded entirely with CIP funds, list below any other (non-CIP) funding sources for this project | Funding Amount |
|--|----------------|
| • | \$ |
| • | \$ |
| • | \$ |

ASSET LIFE, RECURRING COSTS AND RETURN ON INVESTMENT

| | |
|--|---------------|
| If an existing asset (facility or equipment) is being renovated or replaced, what is the age of the existing asset in years? | 30+ |
| Expected service life (in years) of the existing asset, based on applicable industry standards? | 20 |
| Estimated Service Life of Improvement (in years) | |
| Existing Estimated Costs | |
| Annual Operating Costs | \$0.00 |
| Repair / Maintenance Costs | \$0.00 |
| Other Non-Capital Costs | \$0.00 |
| Existing Operating Costs | \$0.00 |
| Future Estimated Costs | |
| Annual Operating Costs | \$0.00 |
| Annual Maintenance Costs | \$0.00 |
| Other Non-Capital Costs | \$0.00 |
| Future Operating Costs | \$0.00 |
| Estimated Return on Investment (in years) | \$ |



Capital Project Request Form

Explain any other annual benefits to implementing this project:

5 YEAR FORECASTED PROJECTS (if you want a project considered please put on this list)

| Program Year | Project | Description of Project | Estimated Cost |
|--------------|---------|------------------------|----------------|
| 20 | | | |
| 20 | | | |
| 20 | | | |
| 20 | | | |
| 20 | | | |
| 20 | | | |
| 20 | | | |
| 20 | | | |
| 20 | | | |
| 20 | | | |
| 20 | | | |
| 20 | | | |
| 20 | | | |
| 20 | | | |
| 20 | | | |











NCHC Parking Lot
Pre-Bid Opinion

| Division A - Wastewater Sewers | | | Pre-Design Opinion | | |
|--|---|--------------------|--------------------|----------------------|---------------------|
| ITEM | DESCRIPTION | UNITS | QTY. | UNIT PRICE | TOTAL PRICE |
| | CCTV Existing sewers | Lump Sum | 1 | 2,000 | 2,000 |
| | Furnish & Install 8 inch PVC sanitary sewer | Lin. feet | 280 | 50 | 14,000 |
| | Furnish & Install 8X6 wye w/sch. 40 hub | Ea. | 1 | 160 | 160 |
| | Furnish & Install 6 in. sch. 40 sewer lateral | Lin. feet | 80 | 30 | 2,400 |
| | Furnish & Install 48 in. precast manhole | Vert. foot | 20.00 | 400 | 8,000 |
| | Furnish & Install manhole frame & cover | Ea. | 2 | 700 | 1,400 |
| | Adjust manhole frame to final grade | Ea. | 2 | 200 | 400 |
| | F&I tracer wire | lin ft | 100 | 0.05 | 5 |
| | Remove/Abandon existing mh | Lump Sum | 3.00 | 1,200 | 3,600 |
| | Abandon Existing sewers inplace | lin ft | 380.00 | 5 | 1,900 |
| Division A -Wastewater Sewer Subtotal | | | | | 33,865 |
| Division D - Site Work | | Pre-Design Opinion | | | |
| ITEM | DESCRIPTION | UNITS | QTY. | UNIT PRICE | TOTAL PRICE |
| | Sewer Reroute Demo - clear/grub, street lights, misc. | Lump Sum | 1 | 8,000 | 8,000 |
| | Sawcut Existing asphalt | Lin. feet | 87 | 4 | 348 |
| | Remove existing asphalt - south parking lot | Sq. yds | 1800 | 1.50 | 2,700 |
| | Remove existing asphalt - north parking lot | Sq. yds | 1000 | 1.50 | 1,500 |
| | Remove existing asphalt - sewer reroute | sq. yds | 1200 | 1.50 | 1,800 |
| | F&I 8" CABC sewer reroute | Cu. yds. | 500 | 22 | 11,000 |
| | Furnish & Maintain Traffic control | lump sum | 1 | 500 | 500 |
| | Furnish & Install 1.5" Bit. Binder course | Tons | 345 | 85 | 29,325 |
| | Pavement Sweeping and tack coat | Lump Sum | 1 | 1,000 | 1,000 |
| | Furnish & Install 1.5" Bit. Wear surface | Tons | 345 | 85 | 29,325 |
| | Topsoil, seed, fertilize, mulch | Sq. yds. | 1000 | 3 | 3,000 |
| Division D - Site Work Subtotal | | | | | \$88,498.00 |
| Total Base Bld Divisions A and D | | | | | \$122,363.00 |
| | | | | 10% Contingency | \$12,236.30 |
| | | | | Engineering | \$10,000 |
| | | | | TOTAL PROJECT | \$144,599 |

CONCRETE SLABS + RAISING → \$23,500.00 → \$168,099.00
+ misc. \$10,000.00

TOTAL \$178,099.00

2022 Rollin Stock Requests and Order Status

| | | |
|---------|-----------|--|
| FCM | \$40,000 | Rolling Stock.-Order in Jan 2022 for delivery in July 2022 |
| PR&F | \$173,460 | Rolling Stock Fund s/b @ \$173,460 Order in 2021 for delivery in 2022. Payment on delivery |
| Sheriff | \$333,696 | Rolling Stock Fund s/b @ \$333,696. Received the information pending Order in 2021 to receive in 2022. Payment on Delivery approximately 10 squads |
| HWY | \$957,600 | Rolling Stock Fund s/b @ \$957,600.-Order in 2021 to receive in 2022. Payment on Delivery |

| | | |
|---|----------------------------|-----------------------|
|  | Rolling Stock Request Form | Page 1 of 1 |
|---|----------------------------|-----------------------|

| 1. DEPARTMENT AND CONTACT INFORMATION | | | |
|---------------------------------------|----------------------------|--------------|--------------------------------|
| Department | Parks, Recreation Forestry | | |
| Submitted By | Jamie Polley | Phone | 715-261-1554 |
| Date | April 27, 2021 | Email | jamie.polley@co.marathon.wi.us |

| 2. VEHICLE/EQUIPMENT REQUESTED | | | | |
|--------------------------------|------------|--|--------------------------|------------|
| Priority | # of Units | Description of Vehicle/Equipment (year, make, model) | Alternate Funding Source | Cost |
| 1 | 1 | Hi-Ranger Aerial Lift (truck & lift) | 100,000 City | 100,000.00 |
| 2 | 1 | 43,000# Dump Truck w/ plow and sander | 77,500 City | 77,500.00 |
| 3 | 1 | F-350 I Ton Crew Cab | 17,200 City | 17,200.00 |
| 4 | 1 | Road Boss Grader | 1950 City | 1,950.00 |
| 5 | 1 | Low Profile Flatbed | 6,325 City | 6,325.00 |
| 6 | 1 | 1/2 Ton 4WD | 14,625 City | 14,625.00 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| 3. DO ALL OF THE REPLACED VEHICLES MEET THE ROLLING STOCK CRITERIA? |
|---|
| <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If not, indicate why below |
| |

| 4. FOR EACH VEHICLE/EQUIPMENT LISTED ABOVE INDICATE WHAT VEHICLE/EQUIPMENT IT WILL REPLACE | | | | |
|--|---|---|--------------------------------|---|
| Priority | Description of Requested Vehicle/Equipment (listed above) | Description of Vehicle/Equipment to be Replaced | Year of Vehicle to be Replaced | Meter/Mileage of Vehicle to be Replaced |
| 1 | Hi-Ranger Aerial Lift | #4 Hi-Ranger Aerial Lift | 2009 | 5,299 hours |
| 2 | Dump Truck - plow & sander | #2 Dump Truck- plow & sander | 2008 | 80,351 miles |
| 3 | F-350 I Ton Crew Cab | #29 F-350 I Ton Crew Cab | 2008 | 57,580 miles |
| 4 | Road Boss Grader | Road Boss Grader | 2005 | n/a |
| 5 | Low Profile Flatbed | T-29 Gooseneck Trailer | 1997 | n/a |
| 6 | 1/2 Ton 4WD | #25 Chevy Impala | 2010 | 51,832 miles |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

2022 EQUIPMENT REPLACEMENT

| UNIT FOR TRADE | YEAR ACQUIRED | SECTION ROAD | MANUFACTURE & MODEL | REPLACEMENT DESCRIPTION | Estimated trade value | ESTIMATED REPLACEMENT COST |
|---|---------------|--------------------|---------------------|---|-----------------------|----------------------------|
| Single axle patrol truck chassis #154 | 2009 | County Section #43 | International 7400 | Tandem axle chassis, rev oneway plow, single wing, 11'underbody, 9"spreader, wedge tank 800?? gallon brine tank with slurry system pump(left & center boom) | \$5,000.00 | \$125,000.00 |
| Dump body & hydraulics #154 | | | | Dump body /hydraulics | 0 | \$75,000.00 |
| Snow Equipment for truck #154 | | | | Snow equipment Single wing | 0 | \$30,000.00 |
| In shop set up #154 | | | | In shop set up cost | 0 | \$65,000.00 |
| Quad-axle patrol truck chassis #161 | 2008 | County Section #38 | International 7600 | Quad axle chassis, rev oneway plow, single wing, 11'underbody, 9"spreader, wedge tank 1400?? gallon brine tank with slurry system pump(left & center boom) | \$15,000.00 | \$125,000.00 |
| | | | | | | 132 - to #20 |
| Dumpbody & hydraulics #161(with wedge tank & slurry system) | | | | Dump body /hydraulics | 0 | \$90,000.00 |
| Snow Equipment for truck #161 | | | | Snow equipment Double wing | 0 | \$30,000.00 |
| In shop set up #161 | | | | In shop set up cost | 0 | \$65,000.00 |
| Supervisor pickup - Kris | 2015 | | Ford F-150 | Extended cab pickup | \$4000.00 | \$30,000.00 |
| Shoulder machine #252 | 1989 | | Blawknex RW100 | | \$5000.00 | \$250,000.00 |
| Compact track loader #234 | 2011 | | Bobcat T630 | | \$10,000.00 | \$65,000.00 |
| Disc bine???? | 2013 | | Vemeer 7040 | | \$500.00 | \$11,000.00 |
| | | | | | 0 | 0 |
| | | | | | 0 | 0 |
| #223 Auction | 1995 | | Case 4230 tractor | 80 HP Tractor | \$4,000.00 | 0 |
| | | | | | 0 | 0 |
| | | | | | 0 | 0 |
| | | | | | 0 | 0 |
| | | | | | 0 | 0 |
| | | | | | 0 | 0 |
| | | | | | \$43,500.00 | \$961,000.00 |

Spares #113, #126, #128, #133,

CIP Budget \$957,600

Move truck #155 to State section 29