



SOLAR TESTING LABORATORIES, INC.

1125 Valley Belt Road
Brooklyn Heights, OH 44131

Phone 216-741-7007

Fax 216-741-7011

www.stloho.com

February 8, 2019

Kevin Trepal, P.E.
Assistant City Engineer
Richard L. Bowen + Associates
13000 Shaker Boulevard
Cleveland, OH 44120

Dear Mr. Trepal:

**Subject: Dodd Road Embankment Protection
LAK-Dodd Road-0032
Willoughby Hills, Lake County, Ohio
STL Proposal No. P19-02-006T3**

We at Solar Testing Laboratories, Inc. are pleased to submit our proposal to provide testing and inspection services at the subject project. Transmitted herewith is our unit price list for your review and consideration.

If you have questions or require additional information, please do not hesitate to contact us. We appreciate this opportunity and look forward to working with you.

Sincerely,

SOLAR TESTING LABORATORIES, INC.

Ms. Michele L. Palmateer
Director of Business Development

Attachments

Dodd Road Embankment Protection – Willoughby Hills, Ohio
 STL Proposal No. P19-02-006T3
Testing and Inspection Services

Field Services

Proof Roll Inspection

Subgrade Inspection

Drilled Shaft Inspection (if engineer required)

Geotechnical Engineer, Regular Time.....\$ 95.00/hour

Soil Compaction

Field Technician, Regular Time.....\$ 48.00/hour

Nuclear Moisture/Density Gauge.....\$ 50.00/day

Concrete

Field Technician, Regular Time.....\$ 48.00/hour

Cylinder Pickup.....\$ 110.00/trip

Vehicle Transportation Charge

Portal to portal to and from our Brooklyn Heights facility.....\$ 0.60/mile

Laboratory Testing Services

Soils

Moisture/Density Relationship Test, Standard Proctor (ASTM D698).....\$ 125.00/each

Moisture/Density Relationship Test, Modified Proctor (ASTM D1557).....\$ 140.00/each

A 2-day minimum is required for moisture/density testing (proctors). A \$25 charge will be incurred for rush requests. If 1-point proctors are requested in the field, a charge of \$75 each will be incurred.

Concrete

Compressive Strength Test (Concrete Cylinder Break)\$ 13.50/each

Requests for cylinder compressive strengths at 1 and 3 days will be charged at \$15 each.

Spares will be held for 56 days unless provisions have been made in advance and will be charged at the indicated rates due to handling and cure storage.

Safety and curing on the site are normally the responsibility of the contractor, unless other arrangements are made in advance. A heated curing box can be provided upon request at \$50 per week.

Dodd Road Embankment Protection – Willoughby Hills, Ohio
STL Proposal No. P19-02-006T3
Testing and Inspection Services

Terms and Conditions

A 4-hour minimum charge will be incurred for all hourly inspections. This minimum consists of time from 8 a.m. to 12 noon or 12:30 p.m. to 4:30 p.m. Overlapping periods shall constitute an 8-hour day. Time prior to 8 a.m. and/or after 4:30 p.m. will be subject to overtime charges.

Weekday overtime and Saturdays will be charged at 1.5 times the regular hourly rate; Sundays and holidays will be charged at double time.

Cancellations are subject to the 4-hour minimum charge and nuclear gauge charge for scheduled compaction testing.

The client is responsible for providing STL access to all testing areas.

If parking is not available to our technicians, parking charges will be billed as a direct reimbursable.

Scheduling must be handled through our Scheduling Department, and a minimum 24-hours' notice to proceed must be given.

Any items not quoted herein will be charged at our standard unit prices and can be formally quoted upon request.



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PROJECT CONFIRMATION/SERVICE AGREEMENT

STL Proposal No. P19-02-006T3

Date February 8, 2019

Thank you for choosing the services of Solar Testing Laboratories, Inc. (STL) for your testing and/or inspection needs. In order to facilitate the processing of your project in our system, we need to confirm some important information. **Please complete the following and return as soon as possible so as not to delay our services:**

PROJECT INFORMATION

PROJECT NAME: _____

CITY/STATE/ZIP: _____

BUILDING PERMIT NO. (IF APPLICABLE): _____

OWNER: _____

CONTRACTOR: _____

PROJECT MGR: _____ JOB PHONE/FAX: _____

REQUESTED SERVICES: _____

SPECIAL INSTRUCTIONS: _____

BILLING INFORMATION

It is understood that the client is the company/individual who will be paying for the services provided. ***This cannot be changed in our system once billed.***

CLIENT: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

ATTENTION: _____

PHONE: _____ FAX: _____

PO NUMBER: _____

SPECIAL BILLING INSTRUCTIONS: _____

PROJECT CONFIRMATION/SERVICE AGREEMENT

REPORT DISTRIBUTION

STL is promoting report distribution by email when possible. Report distribution up to three (3) mailed copies can be provided at no charge. Additional copies will be charged at \$2 each, unless negotiated otherwise in advance. It is the responsibility of the client to provide the names of those to be included on the distribution at the time of the project start. Authorization from anyone other than the client to be included on the distribution will not be accepted by STL.

	ORIGINAL	COPY 1	COPY 2
Name			
Company			
Street			
P.O. Box			
City			
State / Zip			
Phone			
Fax			
Email			

	COPY 3	COPY 4	COPY 5
Name			
Company			
Street			
P.O. Box			
City			
State / Zip			
Phone			
Fax			
Email			

Attach additional pages if necessary.

CLIENT'S CONFIRMATION

I hereby certify that the above information is correct to the best of my knowledge, and I accept responsibility of payment for the services of Solar Testing Laboratories, Inc.

By _____ Date _____

Printed Name/Title _____

Company _____