## Request to Increase Departmental Budget Dollars

**Instructions:** 

Resolution#

Effective October 1, 2015 (Resolution #15-2922), the City Administrator and Council President must pre-approve all increases of departmental budget dollars prior to expenditure of funds or submission to council. After the City Administrator and Council President give approval, the request must go to council approval prior to the expenditure of funds.

	o the City Administrator and Council President. sting the Mayor and Council to amend the budg	
Department Head	Chad Christian	
Department	Engineering	
Budget Category	Hamnuca Bida	
Date Submitted	/ 	APAT) 6/11/1
If Personnel Accounts, Approval fro	om Human Resources Director is required.	
Reason for Increase:  Repair	)	Signature & Date
Amounts of Funds Needed	Account Number & Name	
\$ 9260-00 \$	400-3020-5129 R35	PHI
Approval by City Administrator	Mobeel L Theysun Signature	(e/11/) 8 Date
Approval by Council President		
	Signature	Date
Budget Adjustment Posted:	Finance Department Use Only:	
Resolution #	Signature	Date

\*\*\*\*\* THIS COMPLETED DOCUMENT MUST BE ATTACHED TO AGENDA REQUEST IN LEGISTAR \*\*\*\*\*

Signature

## FOLEY HISTORICAL COMMISSION

CITY OF FOLEY 200 NORTH ALSTON ST. FOLEY, ALABAMA 36535

## APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

1.	Name of Applicant: CITY OF FOLEY				
	Mailing Address: P.O.BOX 1750				
	Telephone: 251-943-1545 Email: YKUrtts @cityofforey.				
	Relationship of applicant to property: Owner ( ) Occupant ( )				
2.	Address of Property: III EAST ROSE AVE				
3.	National Register ( ) Contributing ( ) Non-Contributing ( ) Circa  Local Downtown ( ) Circa				
4.	Nature of Proposed Work/Application (Check All That Apply):  ( )Use of Property ( )Fence ( )Landscaping  ( )Repairs or Alterations ( )Awning ( )Color Change  ( )Sign Erection or Placement ( )Demolition ( )Other  ( )New Construction ( )Moving a Building				
5.	Please describe your proposed work as simply and accurately as possible (use extra sheet, if necessary). See Criteria for Submission for information that must accompany this application.				
	REMOVE ASPHALT SHINGLES ON BUILDINGS EAST				
	WING. MAKE WOOD FRAMING, DECKING REPAIRS				
	AND INSTALL NEW ZOGA 5-V METAL ROOF TO				
	CURRENT BULLOWG CODE. (SEE ATTACHED PROPOSAL)				
	If you will be painting, please list the three colors you have chosen from a Historical color palette and enclose color chips with your application.  NEW BARGE RAFTER:				
	PAINTED TO MATCH				
_	BUILDING - (RED)				
	, the undersigned, have complied with the Criteria for Submission. I understand that if the information submitted is not complete, this application will not be considered.				
	n / 1/- tt				

Date

Signature of Applicant

## Koop Doctors

805 River Route • Magnolla Springs, Alabama 36555 • (251) 233-8682 • (251) 943-8682 • Residential & Commercial Roofing

805 River Route • Magnolla Springs, Alabama 36555 • (251	) 233-8682 • (251) 943-8682 •	Residential & Commercial Rooting				
PROPOSAL SUBMITTED TO	PHONE	DATE				
STREET OF FOLKY	JOB NAME	1-18-18				
•	Red Buildi	n e				
CITY, STATE AND ZIP CODE	JOB LODATION	8				
ADMITTAN						
ARCHITECT DATE OF PLANS		JOB PHONE				
We hereby submit specifications and estimates for:						
Remove exsisting shingles & felt						
Repair decking & bary rafter						
Install wind a watershield						
Install new eve metal						
= 1 1 1 1 = 5-V	(6-1)	<u> </u>				
Install 26 gauge 5-V metal (Galvalume) Clean & haul away all job related debris						
						25 yr, material warranty 2 yr, workmanship warranty
2 un wackmanship warranty						
or die orgeniamente comina						
•						
		•				
Me Dronoge harshy to furnish metadal and labor and	raniata in a sacrain ran with above					
OHE Propose hereby to furnish material and labor, co	ripiete in accordance with above :	specifications, for				
		0.04.0				
the sum of:	dollars (\$	9,260,00)				
		•				
Payment to be made as follows:						
AB						
All material is guaranteed to be as specified. All work is to be completed in a workmanilke manner according to standard practices. Any alteration or deviation	Azatha danad					
from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All Signature						
agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully	Note: This proposal may be withdrawn by					
covered by Workman's Componsation Insurance.	If not accepted within	days.				
Acceptance of Proposal - The above prices,		,				
specifications and conditions are setisfactory and are hereby accepted. You are authorized Signature						
to do the work as specified. Payment will be made as outlined above.  Date of Acceptance						
	Signature					
UNDERWOOD PRI	ITING CO., FOLEY, AL					