

Periodical Estimate for Partial Payment No. **1**
 For the Period **10/04/2022** through **11/20/2022**



Airport Name **Princeton Municipal Airport**
 Location **Princeton, Minnesota**
 Project Name **Replace Airport Rotating Beacon and Beacon Tower and Foundation**

AIP Project # **3-27-0081-020-2022**
 KLJ Project # **2105-02001**

Owner	Contractor	Engineer
City of Princeton	Design Electric, Inc.	KLJ
705 2nd Street North	4807 Heatherwood Road	300 23rd Ave E, Suite 100
Princeton, MN 55371	St. Cloud, MN 56301	West Fargo, ND 58078

Cost **\$81,097.00** (Unit price per Contract and Change Orders)

	AIP	Non-AIP	Total
Total Work Done to Date	\$ -	\$ -	\$ -
Material on Hand	14,051.38	-	14,051.38
Subtotal	14,051.38	-	14,051.38
Retainage 10%	1,405.14	-	1,405.14
Subtotal (less retained percentage)	12,646.24	-	12,646.24
Amount Previously Paid	-	-	-
Total Amount Due This Estimate	\$ 12,646.24	\$ -	\$ -

Summary of Previous Payments			
	AIP	Non-AIP	Total
Estimate No. 1	\$ -	\$ -	\$ -
Estimate No. 2			-
Estimate No. 3			-
Estimate No. 4			-
Estimate No. 5			-
Total	\$ -	\$ -	\$ -

I hereby certify that I have prepared this Periodical Estimate and that to the best of my knowledge and belief it is a true and correct statement of work performed and materials supplied by the Contractor. All work and materials included in the estimate have been performed and supplied in full in accordance with the terms and conditions of the corresponding construction contract documents and authorized changes thereto.

1/4/2023
 Date

12-22-22
 Date

1.8.2023
 Date

John Glenn
 KLJ

X [Signature]
 Design Electric, Inc.

[Signature]
 City of Princeton

Airport Name Princeton Municipal Airport
 Location Princeton, Minnesota
 AIP Project # 3-27-0081-020-2022
 Contractor Design Electric, Inc.

Periodical Estimate No. 1

KLJ Project # 2105-02001

Item #	Spec #	Item	Quantities			Unit	Unit Price	Total Price	
			Planned	Current	Total				
SCHEDULE 1 REPLACE AIRPORT ROTATING BEACON & BEACON TOWER AND FOUNDATION									
1	C-105	Mobilization	1		-	L.S.	\$ 6,706.86	\$ -	
2	C-105	Contractor Staging/Storage Area	1		-	L.S.	\$ 1,840.00	-	
3	L-101	L-801(A) Class 2 Rotating Beacon, In place	1		-	Each	\$ 15,829.73	-	
4	L-103	50' Tip-Down Beacon Tower and Foundation	1		-	Each	35,688.48	-	
5	L-108	No. 8 AWG Cu, RHW, Installed in Trench, Duct Bank or Conduit	1,750		-	L.F.	2.23	-	
6	L-108	No. 8 AWG, Insulated, Stranded Equipment Ground, Installed in Trench, Duct Bank or Conduit	440		-	L.S.	1.35	-	
7	L-110	Non-Encased Electrical Conduit, 2" PVC	330		-	L.F.	5.22	-	
8	L-110	Non-Encased Electrical Conduit, 2" PVC, Schedule 80, Bored	110		-	L.F.	20.77	-	
9	L-115	Electrical Junction Structure L-867B Base Can with Solid Cover	3		-	Each	1,149.71	-	
10	Plan Notes	Existing Equipment Removal	1		-	L.S.	9,079.00	-	
TOTAL SCHEDULE 1 CONSTRUCTION								\$	-
TOTAL WORK DONE TO DATE								\$	-



ADB SAFEGATE Americas LLC
 977 Gahanna Parkway
 Columbus, OH 43230

Tel: + 1 (614) 861 1304
 Fax: + 1 (614) 864 2069
 DUNS: 82-994-8392

Please remit to:
 ADB SAFEGATE Americas LLC
 P.O. Box 29160
 New York, NY 10087-9160

Invoice 90123330

Bill-To Party **1002724**
 DESIGN ELECTRIC
 4807 Heatherwood Road
 PO Box 1252
 ST. CLOUD MN 56302-1252

Ship-To Party: **2002611**
 Design Electric Contractors Inc.
 4807 Heatherwood Rd
 St. Cloud MN 56301-9539

Header Information
 Document No: 90123330
 Invoice Date: October 04, 2022
 Ref Sales Order: 46440
 Customer PO: 16-261.10ADB PNM
 Airport Code: PNM-PRINCETON MUNI
 ADB Contact: Sandy Quackenbush

Shipping Information
 Terms of Payment: Net 30 days
 Terms of Delivery: EXW - PLANT
 Tracking ID/PRO No: CHR Y9HRXX4V9DB29M4

 We gladly accept:
 VISA, MASTERCARD

Pay Item	Contract Item	Inv. Item	SO Item	PartNo./Description	Order Qty	Shp/Inv Qty	Unit Price	Value
L-801	11	1	11	L801A(L) BEACON, 120VAC, 60HZ, CLASS II Contract No.:40000197	1	1 EA	9,660.44	9,660.44
L-801	12	2	12	L801802TTLED120 TELL-TALE RELAY OPT LED BEACON 120V Contract No.:40000197	1	1 EA	533.03	533.03
L-801	13	3	13	9200-0047 LED L801A, REPLACEMENT LAMP WHITE Contract No.:40000197	1	1 EA	807.91	807.91
L-801	14	4	14	9200-0048 LED L801A, REPLACEMENT LAMP GREEN Contract No.:40000197	1	1 EA	454.88	454.88
Tower	23	5	23	RTO-CR27-002 L-810(L) DUAL OB LT W/IR, 120-240VAC Contract No.:40000197	1	1 EA	551.60	551.60

Sales Amount	\$12,007.86
Sales Tax	\$915.80
Total Amount due (USD)	\$12,923.46



ADB SAFEGATE Americas LLC
977 Gahanna Parkway
Columbus, OH 43230

Invoice

90123330

DESTINATION CONTROL STATEMENT:

These items are controlled by the U.S. government and authorized for export only to the country of ultimate destination for use by the ultimate consignee or end-user(s) herein identified. They may not be resold, transferred, or otherwise disposed of, to any other country or to any person other than the authorized ultimate consignee or end-user(s), either in their original form or after being incorporated into other items, without first obtaining approval from the U.S. government or as otherwise authorized by U.S. law and regulations.

**** Include Invoice Number and Customer Number with Payment ****
Thank you for your Order and Business !

For billing questions: Voice: 614-861-1304 Fax: 614-864-2069

VENDOR # _____
DUE DATE 10-25
JOB # 16261.10ADB
Princeton Airport Beacon
ACCOUNT # 5220 Repl.
GROSS AMT. _____
LESS: _____
DISCOUNT _____
NET PAID 12,923.46



ADB SAFEGATE Americas LLC
 977 Gahanna Parkway
 Columbus, OH 43230

Tel: + 1 (614) 861 1304
 Fax: + 1 (614) 864 2069
 DUNS: 82-994-8392

Please remit to:
 ADB SAFEGATE Americas LLC
 P.O. Box 29160
 New York, NY 10087-9160

Invoice 90124065

Bill-To Party 1002724
 DESIGN ELECTRIC
 4807 Heatherwood Road
 PO Box 1252
 ST. CLOUD MN 56302-1252

Ship-To Party: 2002611
 Design Electric Contractors Inc.
 4807 Heatherwood Rd
 St. Cloud MN 56301-9539

Header Information
 Document No: 90124065
 Invoice Date: October 19, 2022
 Ref Sales Order: 46440
 Customer PO: 16-261.10ADB PNM
 Airport Code: PNM-PRINCETON MUNI
 ADB Contact: Sandy Quackenbush

Shipping Information
 Terms of Payment: Net 30 days
 Terms of Delivery: EXW - PLANT
 Tracking ID/PRO No: PACK LIST K35003

 We gladly accept:
 VISA, MASTERCARD

Pay Item	Contract Item	Inv. Item	SO Item	PartNo./Description	Order Qty	Ship/Inv Qty	Unit Price	Value
Tower	22	1	22	460A12-6DNW-C-T-12 ANCHOR BOLTS FOR 45-55' TIP DOWN BEACON Contract No.:40000197	1	1 EA	1,048.01	1,048.01

Sales Amount	\$1,048.01
Sales Tax	\$79.91
Total Amount due (USD)	\$1,127.92

DESTINATION CONTROL STATEMENT:
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VENDOR # _____
 INVOICE DATE 10/19/22
 JOB # 162261.10ADB
 Princeton Airport Beacon Repl

**** Include Invoice Number and Customer Number with Payment ****
Thank you for your Order and Business !

For billing questions: Voice: 614-861-1304 Fax: 614-864-2069

ACCOUNT # 5220
 GROSS AMT. _____
 LESS: _____
 DISCOUNT _____
 NET PAID _____



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/21/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Dawson Insurance, a Marsh & McLennan Agency LLC company 505 Broadway North, Suite 100 Fargo ND 58102	CONTACT NAME: Jen Rudnicki PHONE (A/C, No, Ext): 701-237-3311 FAX (A/C, No): 701-232-4442 E-MAIL ADDRESS: jen.rudnicki@marshmma.com														
INSURED Design Electric, Inc PO Box 1252 Saint Cloud MN 56302	DESIGNELECT <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> <tr> <td>INSURER A : Western National Assurance Company</td> <td>24465</td> </tr> <tr> <td>INSURER B : SFM</td> <td>11347</td> </tr> <tr> <td>INSURER C : Ironshore Specialty Insurance Company</td> <td>25445</td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Western National Assurance Company	24465	INSURER B : SFM	11347	INSURER C : Ironshore Specialty Insurance Company	25445	INSURER D :		INSURER E :		INSURER F :	
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INSURER D :															
INSURER E :															
INSURER F :															

COVERAGES CERTIFICATE NUMBER: 688071000 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSP	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> 500 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	Y		CPP1252939	12/31/2022	12/31/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			CPP1251344	12/31/2022	12/31/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			UMB1042753	12/31/2022	12/31/2023	EACH OCCURRENCE \$ 6,000,000 AGGREGATE \$ 6,000,000 \$
B	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	34231314	12/31/2022	12/31/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER Minnesota E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	Pollution Liability			TBD	12/31/2022	12/31/2023	\$2,000,000
A	Inland Marine			CPP1252940	12/31/2022	12/31/2023	\$180,000
A	Inland Marine			CPP1252940	12/31/2022	12/31/2023	\$2,037,700

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Inland Marine Installation coverage includes sub limits of \$350,000/In Transit and \$350,000/Stored Materials.
 When required in a written contract, Additional Insured applies on the General Liability policy for operations and completed operations and on a primary/non-contributory basis for Contractors (per form WNGL139), and for Lessors of Leased Equipment (per for CGMU0009), and for Managers or Lessors of Premises (per form CGMU0009).
 Princeton Municipal Airport
 Princeton, Minnesota
 Replace Airport Rotating Beacon and Beacon Tower and Foundation
 KLJ #2105-02001
 Additional insured status applies to the City of Princeton, KLJ Engineering LLC and others required by written contract.

CERTIFICATE HOLDER City of Princeton, MN 705 2nd Street North Princeton MN 55371	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
--	--

Michele McPherson

From: John Glesne <John.Glesne@kljeng.com>
Sent: Wednesday, January 4, 2023 1:46 PM
To: Michele McPherson
Subject: PNM - Beacon - Pay Estimate #1
Attachments: 2105-02001-PNM-Beacon-PayEstimate1.pdf

Hi Michele,

I finally received the supporting documentation for the partial pay request for material on hand that Design Electric had initiated a few weeks ago. With that, please see the attached pay estimate for signature and processing through MnDOT.

If you wouldn't mind scanning back the first page with your signature for our records as well, that would be great.

Thanks!

John Glesne



701-271-5026 **Direct**
218-205-4722 **Cell**
300 23rd Ave E, Suite 100
West Fargo, ND 58078
kljeng.com