PROPOSAL

CROSS CONSTRUCTION SERVICES, INC.
25221 WESLEY CHAPEL BLVD.
LUTZ, FLORIDA 33559
PHONE: (813) 907-1013
FAX: (813) 907-0297

Proposal Submitted To: **City of New Port Richey**	*Phone:* **727-**	*Date:* **April 28, 2025**
Address: **6132 Pine Hill Rd.**	*Project Name:* **Per Contract# BEI37 Pre-Demolition Asbestos Survey**	
City, State, and Zip Code: **New Port Richey, FL 34668**	*Project Location:* **7631 US Highway 19**	*City, State, and Zip Code:* **New Port Richey, FL 34652**
Attn: **Derek Silver**	*Email:* **silverd@CityofNewPortRichey.org**	

We Hereby Submit Specifications and Estimates For:

We propose to furnish all skilled labor, material, equipment, license, insurance, and permits necessary for the complete demolition of the above referenced project.

ITEM #	DESCRIPTION	QUANTITY	UNIT PRICE	TOTAL COST
A001	Pre-Demolition Asbestos Survey	32,814 SF	$.40	$13,125.60
			TOTAL PRICE:	**$13,125.60**

We Propose Hereby to Furnish Material and Labor Complete in Accordance with Above Specifications for the Sum of:

Thirteen Thousand One Hundred Twenty-FiveDollars and 60/00 ---------- $13,125.60

Payment to be Made as Follows:

PER CONTRACT BEI37

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

Tyler Lillibridge

Authorized Signature: Tyler Lillibridge – Vice President Tyler.L@myccsfl.com

Note: Unit Rates per contract BEC24

ACCEPTANCE OF PROPOSAL:
The above prices, specifications, and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above. Signature serves as written contract.

ACCEPTED BY: _____
Authorized Signature

Date of Acceptance: _____

Please return one signed original to Cross Construction Services, Inc.