

ADVERTISING AUTHORITY

This form must be completed and approved by the City Finance Office prior to presenting items to the City Council and/or Committees of the City Council. This covers all items which require formal bids, currently anything over \$25,000 (except emergency and repair costs)

I. PROJECT NO.: ST09-1764 CIP No. 50750
 II. PROJECT NAME: 5th Street Pedestrian Crossing at Rapid City Regional Hospital
 III. Project/Item(s) Description: Project to construct a pedestrian crossing with island. Project will require driveway modifications to allow the island to be constructed.

IV. BID LETTING DATE: September 15, 2009

V. ESTIMATED COST OF PROJECT/ITEM(S) \$ 145,000.00

VI. BASIS OF PAYMENT Assessed ☐ Non-Assessed ☒
 Single Payment ☐ Partial Payment ☒

VII. APPROPRIATION DATA

Amount	\$145,000				
Fund Name	Street Improvements				
Department	8910				
Line Item	4370				
Fund	505				

VIII. (If applicable) Grant No.: _____
 Funding Source: _____
 Estimated Completion Date: _____
 Estimated Grant Receipt Date: _____

IX. DEPARTMENT/DIVISION:

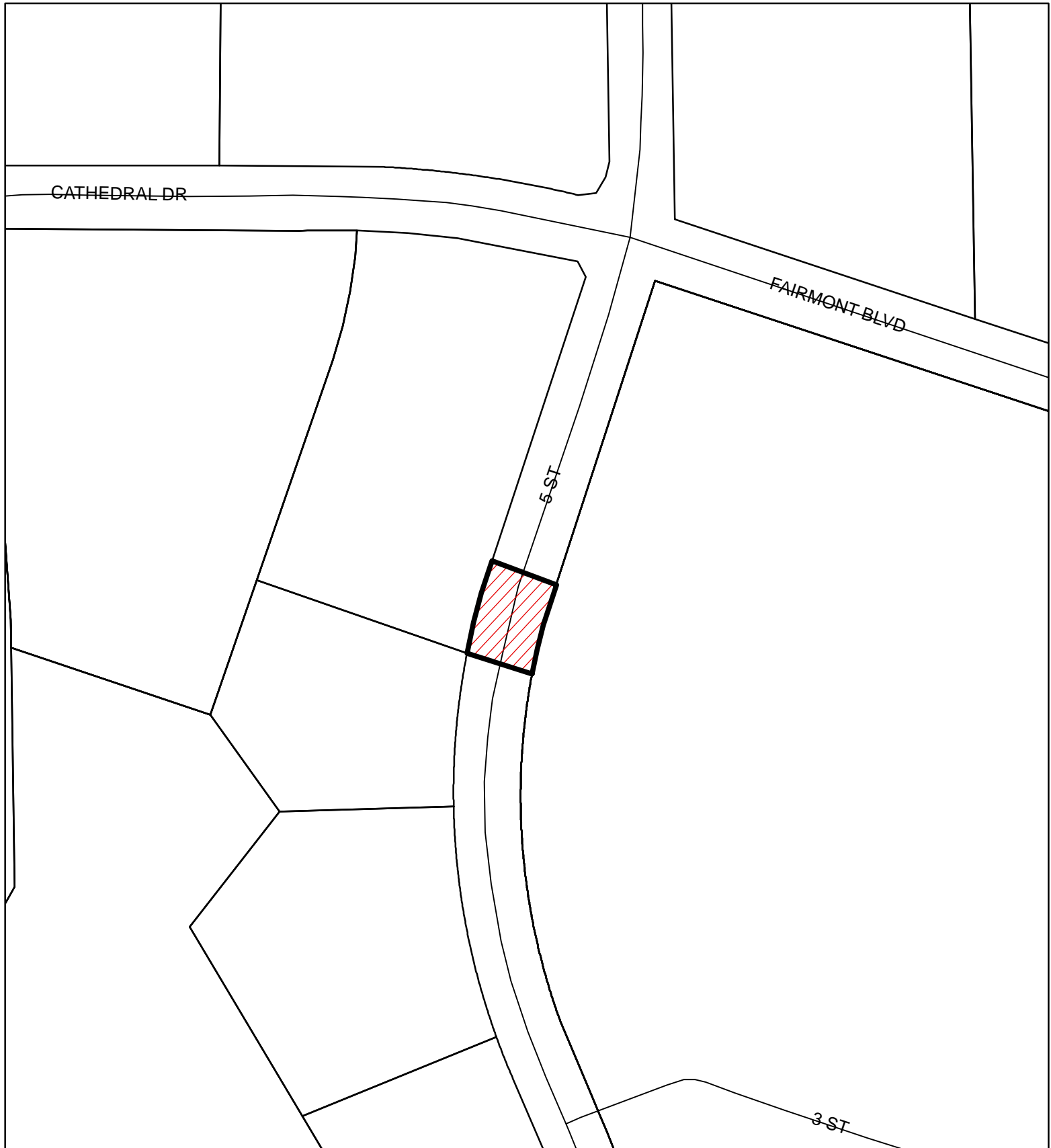
Project Manager: *Robert R. [Signature]* Date 8/4/09
 DIVISION MANAGER Signature *[Signature]* Date 8-4-09
 DEPARTMENT DIRECTOR Signature *[Signature]* Date 8-4-09

FINANCE OFFICE USE ONLY			Approved		Carbon Copy
Appropriation Cash Flow	Date	Initial	Yes		Investment Desk
					Public Works
					Engineering
					Project Manager

EXHIBIT "A"

PW081109-08

SCALE 1" = 100'



**5th STREET CROSSING AT
RAPID CITY REGIONAL HOSPITAL
PROJECT NO. ST08-1764 CIP # 50750**