



# MADISON *Indiana*

## Board of Public Works and Safety Agenda

**MEETING DATE:** Monday, July 15, 2024, at 11:30 AM

**MEETING PLACE:** Madison City Hall- Council Chambers

- A. Calling of roll and notice of absentees.
- B. Approval of minutes
- C. Claims
- D. Adjustments
- E. New business
  - Water Utilities SRF 67 & 68
  - Resolution 2024-33B: DonutNV
  - Resolution 2024-34B: Pakalana Poke
  - Resolution 2024-35B: HOS Coffee (still awaiting confirmation from HOS)
  - PACE Grant Amendments: 108 E. Third, 1003 East St.
  - PACE Applications: 604 Mulberry, 118 W. Fifth, 301 Jefferson, 221 E. Second, 820 W. Main, 811.5 E. Second, 811 E. Second
  - PACE Finals: 417 W. Second, 815-817 W. Second, 110 E. Main
- F. Unfinished business
  - PACE Funding Request for 524 Jefferson St./Madison Christian Health
  - Resolution 2024-31B: Soup Stew Chili and Brew
- G. Mayor's comments
- H. Public comments
- I. Next Meeting: Monday, August 5, 2024
- J. Motion to adjourn.



# MADISON Indiana

## Board of Public Works and Safety Minutes

**MEETING DATE:** July 1, 2024, at 11:30 AM

**MEETING PLACE:** City Hall- Council Chambers

The Board of Public Works and Safety, City of Madison, Indiana, met at 11:30 AM in the Council Chamber, City Hall.

**Calling of roll and notice of absentees:** Courtney, Eaglin, and Carlow were present (3-0).

**Approval of Minutes:** Eaglin moved to approve the June 17, 2024, minutes, seconded by Carlow. All in favor, motion carried (3-0).

**Claims:** Carlow moved to approve the claims as submitted, seconded by Eaglin. All in favor, motion carried (3-0).

**Adjustments:** None.

### New business:

**Resolution 2024-31B: Resolution for Soup Stew Chili and Brew:** Tabled until the next meeting, as requested by the applicant.

**Resolution 2024-32B: Resolution Establishing Parking Regulations for Transient Merchants:** Under the City of Madison ordinances Chapter 70: Traffic Regulations and Chapter 71: Parking Regulations, the Board of Public Works and Safety shall have the authority to restrict traffic and/or control parking on any city street, alley, thoroughfare, or other public place, respectively, when it is deemed to be in the public interest. The growth and popularity of mobile vendors, also known as Transient Merchants, and more commonly known as mobile food trucks, has prompted the need to affirm existing regulations that minimize environmental disturbance of public spaces and promote the health, safety, and public welfare of the city of Madison citizens and visitors. Section 70.21 Parking and Traffic Regulations (Ord. 1998-10, dated 8-18-98) states that a person who: (A) Parks a motor vehicle, a motorcycle, or a motorized bicycle in a manner other than in substantial compliance with the general parking scheme as indicated by lines or other markings on the surface of the parking area, including but not limited to, parking in a "No Parking Zone" or other area clearly not intended for parking, parking in a crosswalk, parking on a sidewalk, or parking in such a manner as to occupy all or parts of substantially more than one parking space commits a violation of this subchapter, which shall be enforced by any police officer of the city. It has become necessary for the Board of Public Works and Safety to take action regarding mobile food trucks and where they are located to ensure that the parking regulations are adhered to and to provide safety and consistent traffic flow for the citizens of Madison and visitors. The Board of Public Works and Safety establishes restrictions on the location of Transient Merchants and mobile food trucks and henceforth, the operator of such shall apply for a permit from the Board of Public Works and Safety to locate on any public street within the boundary of Broadway Street to the west, Jefferson Street to the east, Third Street to the North and Second Street to the south including any street, lot, alley, or other public space within this border. The permit is in addition to the license and regulations as currently required by the city ordinances governing Peddlers, Solicitors, and Transient Merchants. This requirement does not apply to transient merchants or food trucks located in the footprint of a street(s) closed or otherwise restricted as approved by the Board of Public Works and Safety. This resolution shall become immediately effective upon its adoption by the Board of Public Works and Safety, signature of the Mayor, enrollment in the book of Resolutions, and publication of notice as required by law. Any Resolution in conflict with this Resolution is hereby repealed. **Motion:** Eaglin made a motion to approve Resolution 2024-32B, seconded by Carlow. **Roll Call Vote:** Eaglin – Y, Courtney – Y, Carlow – Y. All in favor, motion carried (3-0).

**Public Comment re. Resolution 2024-32B:** Jody Stevenson of 409 W. Main Street stated that the competition between food trucks and other businesses should not factor into this resolution. Isa and Chuck Center from Pakalana's Poke Wagon asked the board questions for clarification on the resolution. Scott Pyles of 2323 Allen Street expressed concerns about the resolution and that it requires further discussion between the board and the food truck owners. Koko Heath, a local business owner, asked the board questions for clarification on the resolution. Zach Lee, 139 Hillcrest Drive, stated his concerns and opinions regarding the resolution. Lindsay Bloos, 415 Poplar Street, commented on the positives of food trucks in communities. Tyler Mingione, a local business owner, expressed her thoughts on the resolution. Austin Sims from 741 West Main Street recommended a representative of Main Street to attend the New Projects Committee meetings, providing a new perspective to the committee. Matt Chandler, 111 East Second Street, asked the board questions for clarification on the resolution. Erica McIntyre asked the board questions for clarification on the resolution.

**PACE Finals: 811 E. First St., 705 E. Main St., 907 W. Main St.:** 811 E. First Street was a rehabilitation project. Work included door restoration, trim work, chimney work, and paint. They are asking for the full disbursement of \$7,500.00. 705 E. Main Street was a rehabilitation project. Work included tuckpointing and painting. They are asking for the disbursement of \$6,752.50. 907 W. Main Street was a dilapidated structure project. Work included tuckpointing, windows, front door, and paint. They are asking for the full disbursement of \$12,834.12. **Motion:** Courtney moved to approve the PACE Finals, seconded by Carlow. All in favor, motion carried (3-0).

**Unfinished Business:**

**PACE Funding Request for 524 Jefferson St./Madison Christian Health:** Remains tabled.

**Paul Bruhn Grant Application for 408 E. 4<sup>th</sup> St.:** Remains tabled.

**Mayor's comments:** This week is Regatta week, and there are festivities almost every day. The coaches of the 1999 Madison Consolidated High School state baseball champions team will be the grand marshals of the parade on Friday, July 5, 2024. Crystal Beach has had 16,000 visitors in the first three weeks since its opening.

**Public comment:** None.

**Next meeting:** Monday, July 15, 2024, at 11:30 AM.

**Adjourn:** Eaglin moved to adjourn, seconded by Carlow. All in favor, motion carried (3-0).

Attested:

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**Shirley Rynearson, Clerk-Treasurer**

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**Mayor Bob Courtney**

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**Karl Eaglin**

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**David Carlow**

## Official Resignation

MI

MFD Inspections

To: Madison Fire Chief

Reply Reply all Forward

Sun 6/30/2024 5:55 PM

Chief Washer,

This email is to serve as my official resignation as Deputy Chief for the City Of Madison Fire Department and follows our verbal conversation from June 3, 2024 when I submitted my notice verbally.

I have appreciated the opportunity to serve these last 3 1/2 years as a Division Chief then as Deputy Chief. It has been an honor to represent the Madison Fire Department in service to Madison, Jefferson County, and the members of Madison Fire Department.

I regret the need to step down but my responsibilities with my full time employment have increased significantly over the 15 months and time is not available to dutifully fulfill my responsibilities to the Madison Fire Department.

I will remain a member of Clifty Six Fire & Rescue and will resume my role there as a firefighter.

Status of my normal duties:

1. Annual air pack inspections completed.
2. Annual Ladder Testing completed
3. Annual Pump testing scheduled for July 11&12. All companies are aware of scheduled time to attend.
4. Fit Test Machine is scheduled to be picked up from City Hall on July 1, and scheduled to return back to City Hall on or around July 8th. This was originally scheduled to be picked up on June 10th, but a series of errors at OHD allowed the order to get dropped twice. They are expediting the calibration at No Charge due to their errors.
5. My commission has been dropped off at the City Garage and the keys placed in the drop box. As we had discussed it is in need of a new battery.
6. All keys I have been issued along with handheld radios have been delivered to HQ and placed in office.
7. My four gas meter (gm003)has been issued to engine 1. Their meter has a failed O2 sensor. I tried changing sensor and it still would not pass calibration. This meter (gm0005)will need further work.
8. I have a tablet that was issued to me for MFD purposes. I will return that after the annual pump testing is completed. Or I can hold on to it if you need my assistance to help complete fit testing once the machine is back.

Thanks for the opportunity,

Jeremy Cornelius

[812-801-1994](tel:812-801-1994)



**UTILITY MANAGER BPW REPORT:**

**July 15, 2024**

**Water Project – SRF Disbursement Requests 67 and 68**

1. SRF Request No. 67 – Commonwealth Engineers
  - Three (3) Invoices dated 06/27/2024.
  - a. Invoice 59984 in the amount of \$21,761.07 for Construction & Post-Construction
  - b. Invoice 59985 in the amount of \$89,914.05 for RPR Inspection
  - c. Invoice 59986 in the amount of \$207.43 for American Iron and Steel Compliance Fees
  - d. Total Amount of \$111,882.55 – Amount of SRF Disbursement No. 67 = \$111,883
  
2. SRF Request No. 68 - Dave O'Mara Contracting – Water Treatment Plants {Division "A"}
  - Dated 07/08/2024; Total Amount of Invoice = 93,732.50
  - Total Retainage Amount = \$4,686.63 (\$4,687 rounded)
  - Pay App. Amount Due = \$89,045.87
  - Amount of SRF Disbursement No. 68 = \$89,046

## SRF Disbursement Request Form

### Participant Information

Name:	City of Madison Municipal Water Works	SRF Loan Number:	DW22093903
DUNS #:	08-620-0326	Cage Code:	SHXEO
Request Number:	67		
Mailing Address:	101 West Main Street		
City:	Madison	State:	IN
ZIP Code:	47250		
Contact Person:	Shirley Rynearson, Clerk Treasurer	Contact Phone Number:	812-265-8316
Authorized Representative:	Bob Courtney, Mayor	Authorized Representative Phone Number:	812-265-8300

If requesting reimbursement to the Participant by wire transfer, please provide the following information:

Bank Name:	German American	Bank Routing	083904563
Account Name:	City of Madison Water & Sewer	Account Number:	1506676

### Loan Information

Description of work for which claim is being made (services, fees, type of work, etc.):	Project W19120 – Water Utility Improvements Engineering Design (Construction Design, Resident Project Representative, Regulatory Assistance, Soil Borings, Erosion Control, Records Drawings, Am. Iron & Steel Compliance, Construction)		
Is any part of this claim funded by an alternate funding source?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
If yes, please identify the source and amount of the claim funded by the alternate source (OCRA, SAP, Local			\$
Is any part of this claim funded by the Indiana Brownfields Program?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Has the Participant paid the request and is now seeking reimbursement?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Is any part of this claim a result of a change order? If yes, please attach the SRF change order approval letter.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Are there Green Project Reserve components involved in this request? If yes, please describe:	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Are there any Lead Line replacement components in this request?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	

### Loan Financial Information

Original Loan Amount:	\$	12,000,000	
Total Amount of Previous Disbursements:	\$	11,693,280	
Balance Available After this Disbursement:	\$	194,837	
Amount to Contractor for this Request:	\$	111883	
Is any part of this request a partial or final release of retainage to the contractor?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Contractor Name:	COMMONWEALTH ENGINEERS	DUNS #:	079578639
Mailing address:	7256 COMPANY DRIVE		
City:	INDIANAPOLIS	State:	IN
ZIP Code:	46237		

### Wiring Information:

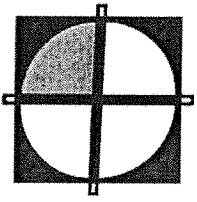
Bank Name:		Bank Routing Number:	
Account Name:		Account Number:	
Retainage Amount for this Request:	\$	0	
Participant requests that the retainage amount be held by SRF:			<input checked="" type="checkbox"/>
Participant requests that the retainage amount be sent to the Participant via check to the mailing address listed above:			<input type="checkbox"/>
Participant requests that the retainage amount be sent to the following bank:			<input type="checkbox"/>
Bank Name:		Bank Routing Number:	
Account Name:		Account Number:	
Total Amount of this Request:	\$	111883	

The undersigned hereby certifies this request for disbursement is, to the best of my knowledge and belief, true and accurate and made in accordance with the conditions of the project agreement(s), that the certified payrolls received in connection with any enclosed construction invoices are in compliance with the **Davis Bacon Act/ US Department of Labor requirements of 29 CFR 5.5(a)(1)**, and are in compliance with SRF incentive programs.

Authorized Representative Signature:		Date:	7/15/2024
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### For Internal Use Only:

Approved By:		Date:		GPR Amount:	\$	Lead Amount:	\$
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**COMMONWEALTH™**  
**ENGINEERS, INC.**  
 A wealth of resources to master a common goal.

City of Madison  
 Attn: Brian Jackson, Utilities Manager  
 101 West Main Street  
 Madison, IN 47250

Invoice number 59984  
 Date 06/27/2024  
 Project W19120 Madison - Water Utility  
 Improvements

For Basic Engineering Services rendered through May 31, 2024

Amendment# 1 signed 07/19/2021 - Limited NTP dated 08/16/2021

Amendment #3 signed 05/20/2024

Limited NTP 2 dated 03/07/2022

Limited NTP 3 dated 01/17/2023

Description	Contract Amount	% Work To Date	Previous Billed	Amount Billed	This Inv Billed
<b>PRELIMINARY DESIGN</b>	495,000.00	100.00	495,000.00	495,000.00	0.00
<b>FINAL DESIGN</b>	330,000.00	100.00	330,000.00	330,000.00	0.00
<b>BIDDING AND NEGOTIATING</b>	35,000.00	100.00	35,000.00	35,000.00	0.00
<b>Total</b>	<b>860,000.00</b>	<b>100.00</b>	<b>860,000.00</b>	<b>860,000.00</b>	<b>0.00</b>

**Additional Construction**

Professional Fees

	Hours	Billed Amount
Designer IV	15.00	2,874.00
Engineering Intern II	93.00	13,553.92
Clerical III	2.00	264.77
Clerical II	1.50	150.83
Reproduction Processor	0.50	46.09
Senior Process Engineer	3.25	858.63
<b>Professional Fees subtotal</b>	<b>115.25</b>	<b>17,748.24</b>

Reimbursable Expenses

	Units	Billed Amount
Miles	926.00	713.48
Legal Advertising		20.19
<b>Reimbursable Expenses subtotal</b>		<b>733.67</b>
<b>Additional Construction subtotal</b>		<b>18,481.91</b>

**Post Construction**

Professional Fees

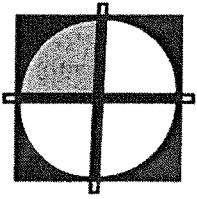
	Hours	Billed Amount
Engineering Intern II	22.50	3,279.16
Professional Fees subtotal	22.50	3,279.16
Post Construction subtotal		3,279.16

Invoice total **21,761.07**

**Invoice Summary**

Description	Contract Amount	Prior Billed	Total Billed	Remaining	Current Billed
<b>PRELIMINARY DESIGN</b>	495,000.00	495,000.00	495,000.00	0.00	0.00
<b>FINAL DESIGN</b>	330,000.00	330,000.00	330,000.00	0.00	0.00
<b>BIDDING AND NEGOTIATING</b>	35,000.00	35,000.00	35,000.00	0.00	0.00
<b>CONSTRUCTION</b>	175,000.00	173,984.39	173,984.39	1,015.61	0.00
<b>ADDITIONAL CONSTRUCTION</b>	20,000.00	0.00	18,481.91	1,518.09	18,481.91
<b>POST CONSTRUCTION</b>	10,000.00	1,300.33	4,579.49	5,420.51	3,279.16
<b>Total</b>	1,065,000.00	1,035,284.72	1,057,045.79	7,954.21	21,761.07





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City of Madison  
 Attn: Brian Jackson, Utilities Manager  
 101 West Main Street  
 Madison, IN 47250

Invoice number 59985  
 Date 06/27/2024  
 Project W19120 Madison - Water Utility  
 Improvements

For Basic Engineering Services rendered through May 31, 2024

Amendment# 1 signed 07/19/2021 - Limited NTP dated 08/16/2021

Limited NTP 3 dated 01/17/2023

Amendment #2 signed 11/20/23

Amendment #3 signed 05/20/24

**Additional Resident Project Representative**

Professional Fees

	Hours	Billed Amount
Resident Project Representative II	552.00	66,554.64
Construction Manager	13.50	2,727.28
Professional Fees subtotal	565.50	69,281.92

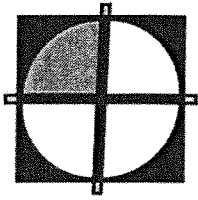
Reimbursable Expenses

	Units	Billed Amount
Subsistence		3,358.78
Miles	6,000.00	4,623.35
Lodging & Travel		12,650.00
Reimbursable Expenses subtotal		20,632.13
Additional Resident Project Representative subtotal		89,914.05

Invoice total **89,914.05**

**Invoice Summary**

Description	Contract Amount	Prior Billed	Total Billed	Remaining	Current Billed
<b>RESIDENT PROJECT REPRESENTATIVE</b>	300,000.00	298,850.00	298,850.00	1,150.00	0.00
<b>ADDITIONAL RESIDENT PROJECT REPRESENTATIVE</b>	137,982.51	46,982.51	136,896.56	1,085.95	89,914.05
Total	437,982.51	345,832.51	435,746.56	2,235.95	89,914.05



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City of Madison  
 Attn: Brian Jackson, Utilities Manager  
 101 West Main Street  
 Madison, IN 47250

Invoice number 59986  
 Date 06/27/2024

Project W19120 Madison - Water Utility  
 Improvements

For Basic Engineering Services rendered through May 31, 2024

Amendment# 1 signed 07/19/2021 - Limited NTP dated 08/16/2021

Limited NTP 2 dated 03/07/2022

Limited NTP 3 dated 01/17/2023

Amendment #2 signed 11/20/23

Amendment #3 signed 05/20/24

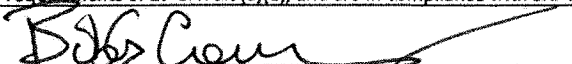
**American Iron & Steel Compliance**  
 Professional Fees

	Hours	Billed Amount
Reproduction Processor	2.25	207.43
Professional Fees subtotal	2.25	207.43
American Iron & Steel Compliance subtotal		207.43
	<b>Invoice total</b>	<b>207.43</b>

**Invoice Summary**

Description	Contract Amount	Prior Billed	Total Billed	Remaining	Current Billed
SOIL BORINGS	17,459.53	17,459.53	17,459.53	0.00	0.00
RECORD DRAWINGS	12,500.00	10,443.89	10,443.89	2,056.11	0.00
EROSION CONTROL	3,057.96	3,057.96	3,057.96	0.00	0.00
WATER MODEL UPDATE	6,817.45	6,817.45	6,817.45	0.00	0.00
LAND SURVEYING	50,000.00	50,000.00	50,000.00	0.00	0.00
FINANCIAL / LEGAL ASSISTANCE	10,000.00	3,741.45	3,741.45	6,258.55	0.00
START UP ASSISTANCE	10,000.00	10,000.00	10,000.00	0.00	0.00
AMERICAN IRON & STEEL COMPLIANCE	5,000.00	3,960.85	4,168.28	831.72	207.43
FISCAL SUSTAINABILITY PLAN	0.00	0.00	0.00	0.00	0.00
REGULATORY	5,891.15	5,891.15	5,891.15	0.00	0.00
<b>Total</b>	<b>120,726.09</b>	<b>111,372.28</b>	<b>111,579.71</b>	<b>9,146.38</b>	<b>207.43</b>

## SRF Disbursement Request Form

Participant Information							
Name:	City of Madison Municipal Water Works	SRF Loan Number:	DW22093903				
DUNS #:	08-620-0326	Cage Code:	SHXEO	Request Number:	68		
Mailing Address:	101 West Main Street						
City:	Madison	State:	IN	ZIP Code:	47250		
Contact Person:	Shirley Rynearson, Clerk Treasurer		Contact Phone Number:	812-265-8316			
Authorized Representative:	Bob Courtney, Mayor		Authorized Representative Phone Number:	812-265-8300			
If requesting reimbursement to the Participant by wire transfer, please provide the following information:							
Bank Name:	German American		Bank Routing	083904563			
Account Name:	City of Madison Water & Sewer		Account Number:	1506676			
Loan Information							
Description of work for which claim is being made (services, fees, type of work, etc.):			Project W19120 – Water Utility Supply and Water Treatment Plant Improvements				
Is any part of this claim funded by an alternate funding source?							<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
If yes, please identify the source and amount of the claim funded by the alternate source (OCRA, SAP, Local							\$
Is any part of this claim funded by the Indiana Brownfields Program?							<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Has the Participant paid the request and is now seeking reimbursement?							<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Is any part of this claim a result of a change order? If yes, please attach the SRF change order approval letter.							<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Are there Green Project Reserve components involved in this request? If yes, please describe:							<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Are there any Lead Line replacement components in this request?							<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Loan Financial Information							
Original Loan Amount:					\$	12,000,000	
Total Amount of Previous Disbursements:					\$	11,805,163	
Balance Available After this Disbursement:					\$	105,791	
Amount to Contractor for this Request:					\$	89046	
Is any part of this request a partial or final release of retainage to the contractor?							<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Contractor Name:	DAVE O'MARA CONTRACTOR, INC.		DUNS #:	067899278			
Mailing address:	1100 EASET O & M AVENUE, P.O. BOX 1139						
City:	NORTH VERNON	State:	IN	ZIP Code:	47265		
Wiring Information:							
Bank Name:			Bank Routing Number:				
Account Name:			Account Number:				
Retainage Amount for this Request:					\$	4687	
Participant requests that the retainage amount be held by SRF:							<input checked="" type="checkbox"/>
Participant requests that the retainage amount be sent to the Participant via check to the mailing address listed above:							<input type="checkbox"/>
Participant requests that the retainage amount be sent to the following bank:							<input type="checkbox"/>
Bank Name:			Bank Routing Number:				
Account Name:			Account Number:				
Total Amount of this Request:					\$	89046	
The undersigned hereby certifies this request for disbursement is, to the best of my knowledge and belief, true and accurate and made in accordance with the conditions of the project agreement(s), that the certified payrolls received in connection with any enclosed construction invoices are in compliance with the Davis Bacon Act/ US Department of Labor requirements of 29 CFR 5.5(a)(1), and are in compliance with SRF incentive programs.							
Authorized Representative Signature:				Date:	7/15/2024		
For Internal Use Only:							
Approved By:			Date:			GPR Amount:	\$
					Lead Amount:	\$	

**Contractor's Application for Payment No.**

Application Period: 6.08.24 to 7.05.24		7.08.24
To (Owner): City Of Madison Div A	From (Contractor): Dave Ontara Contracting	Via (Engineer): Commonwealth
Project: Water Utility Improvements	Contract: 1	
Owner's Contract No.: Div A- Supply & Treatment Improvements	Contractor's Project No.: 22-03760	Engineer's Project No.:

**Application For Payment  
Change Order Summary**

Approved Change Orders		
Number	Additions	Deductions
1	\$19,320.69	
2		
TOTALS	\$19,320.69	
NET CHANGE BY CHANGE ORDERS		\$19,320.69

1. ORIGINAL CONTRACT PRICE.....
2. Net change by Change Orders.....
3. Current Contract Price (Line 1 ± 2).....
4. TOTAL COMPLETED AND STORED TO DATE (Column F total on Progress Estimates).....
5. RETAINAGE:
  - a. 5% X \$3,726,875.69 Work Comple
  - b. 5% X \$187,802.44 Stored Materi
  - c. Total Retainage (Line 5.a + Line 5.b).....
6. AMOUNT ELIGIBLE TO DATE (Line 4 - Line 5.c).....
7. LESS PREVIOUS PAYMENTS (Line 6 from prior Applica
8. AMOUNT DUE THIS APPLICATION.....
9. BALANCE TO FINISH, PLUS RETAINAGE (Column G total on Progress Estimates + Line 5.c above).....

**Contractor's Certification**

The undersigned Contractor certifies, to the best of its knowledge, the following:

(1) All previous progress payments received from Owner on account of Work done under the Contract have been applied on account to discharge Contractor's legitimate obligations incurred in connection with the Work covered by prior Applications for Payment;


(2) Title to all Work, materials and equipment incorporated in said Work, or otherwise listed in or covered by this Application for Payment, will pass to Owner at time of payment free and clear of all Liens, security interests, and encumbrances (except such as are covered by a bond acceptable to Owner indemnifying Owner against any such Liens, security interest, or encumbrances); and

(3) All the Work covered by this Application for Payment is in accordance with the Contract Documents and is not defective.

Contractor Signature: *[Signature]*

By: *[Signature]*

Date: 7/10/24



Payment of: \$ 89,04  
(Line 9 or other - attach)

is recommended by: *[Signature]*  
(Engineer)

Payment of: \$ 89,04  
(Line 8 or other - attach)

is approved by: *[Signature]*  
(Owner)

Approved by: \_\_\_\_\_  
Funding or Financing Entity (if appli

Progress Estimate - Unit Price Work

Cont

For (Contract): Madison Div A						Application Number: 16			
Application Period: 6.08.24 to 7.05.24						Application Date: 7.06.24			
A				B	C	D	E	F	
Bid Item No	Item Description	Contract Information				Estimated Quantity Installed	Value of Work Installed to Date	Materials Presently Stored (not in C)	Total Completed and Stored to Date (D + E)
		Item Quantity	Units	Unit Price	Total Value of Item (\$)				
1	West End Supply & Treatment								
1a	Mobilization			\$2,089,000.00					
1b	Equipment	1	LS	\$104,450.00	\$104,450.00	0.95	\$99,227.50		\$99,227.50
1c	Valves & Piping	1	LS	\$222,750.00	\$222,750.00	0.45	\$100,237.50	\$75,644.50	\$175,882.00
1d	Electrical/ HVAC	1	LS	\$1,269,000.00	\$1,269,000.00	0.65	\$824,850.00	\$32,157.94	\$857,007.94
2	JPG Supply & Treatment								
2a	Mobilization			\$565,000.00				\$30,000.00	\$424,240.00
2b	Equipment	1	LS	\$28,250.00	\$28,250.00	1	\$28,250.00		\$28,250.00
2c	Valves & Piping	1	LS	\$292,500.00	\$292,500.00	1	\$292,500.00		\$292,500.00
2d	Electrical/ HVAC	1	LS	\$109,250.00	\$109,250.00	1	\$109,250.00		\$109,250.00
3	Hilltop Booster Station								
3a	Mobilization			\$1,069,000.00					\$135,000.00
3b	Equipment	1	LS	\$53,450.00	\$53,450.00	1	\$53,450.00		\$53,450.00
3c	Valves & Piping	1	LS	\$2,500.00	\$2,500.00	1	\$2,500.00		\$2,500.00
3d	Electrical & HVAC	1	LS	\$213,050.00	\$213,050.00	1	\$213,050.00		\$213,050.00
4	SCADA	1	LS	\$800,000.00	\$800,000.00	1	\$800,000.00		\$800,000.00
5	MA 3 West End Pump Rewinding	1	LS	\$700,000.00	\$700,000.00	0.9	\$630,000.00	\$50,000.00	\$680,000.00
6	West End ATS & Remote Starter	1	LS	\$25,000.00	\$25,000.00	1	\$25,000.00		\$25,000.00
<b>Totals</b>					<b>\$4,543,000.00</b>		<b>\$3,707,555.00</b>	<b>\$187,802.44</b>	<b>\$3,895,357.44</b>

**Progress Estimate - Lump Sum Work**

**C**

For (Contract): 1		Application Number: 16			
Application Period: 6.08.24 to 7.05.24		Application Date: 7.08.24			
Deminimus List		Work Completed		E	Total C and Stor: (C + I)
A	B	C	D		
Specification Section No.	Description	Scheduled Value (\$)	From Previous Application (C+D)	This Period	Materials Presently Stored (not in C or D)
<b>CO #1</b>					
1	West End Pump	\$949.20	\$949.20		
2	12" PRV Valve	\$3,355.70	\$3,355.70		
3	Jpg Asphalt Drive	\$15,015.79		\$15,015.79	
<b>CO #2</b>					
<b>CO#3</b>					
1	JPG Pump #7 Base				
2	Duke Charges Hilltop				
<b>Totals</b>					
		\$19,320.69	\$4,304.90	\$15,015.79	
<b>\$19,320</b>					

# Stored Material Summary

Con

For (Contract):		1		Application Number:					
Application Period:		6.08.24 to 7.05.24		Application Date: 7.08.24					
Bid Item No.	Supplier Invoice No.	Submittal No. (with Specification Section No.)	Storage Location	C	D		E	Subtotal Amount Completed and Stored to Date (D + E)	Incorpe Date (Month/Year)
					Date Placed into Storage (Month/Year)	Amount (\$)			
1d	26941	3760-004	Majestic	Bl Anderson ABB- VFD's	2/2023	\$63,168.00		\$63,168.00	3/2024
1d	1194-1	3760-ADD #1	Koch	Koch Mechanical	4/2023	\$6,645.00		\$6,645.00	12/2023
2d	1194-1	3760-ADD#1	Koch	Koch Mechanical	4/2023	\$3,615.00		\$3,615.00	10/2023
3d	1194-1	3760-Add#1	Koch	Koch Mechanical	4/2023	\$1,245.00		\$1,245.00	10/2023
3c	233076-00	Ds-04 Valves	Site	Flosource	5/2023	\$10,978.00		\$10,978.00	10/2023
1d	1194-2	3760ADD #1	Koch	Koch Mechanical	5/2023	\$13,290.00		\$13,290.00	3/2024
3d	1194-2	3760 ADD#1	Koch	Koch Mechanical	5/2023	\$7,230.00		\$7,230.00	10/2023
2d	1194-2	3760 Add#1	Koch	Koch Mechanical	5/2023	\$2,490.00		\$2,490.00	10/2023
1d	1194-3	3760 Add #1	Koch	Koch Mechanical	6/2023	\$19,935.00		\$19,935.00	3/2024
3d	1194-3	3760 Add#1	Koch	Koch Mechanical	6/2023	\$10,845.00		\$10,845.00	10/2023
2d	1194-3	3760 Add.	Koch	Koch mechanical	6/2023	\$3,735.00		\$3,735.00	10/2023
2c	233076-04	Ds-04 Valves	Site	Flosource	6/2023	\$23,793.00		\$23,793.00	8/2023
3c	233076-03	DS-04 Valves	Site	Flosource	6/2023	\$27,445.00		\$27,445.00	2/2024
1c	233076-02	DS-04	Site	Flosource	6/2023	\$10,758.00		\$10,758.00	10/2023
3c	233076-01	DS-04	Site	Flosource	6/2023	\$11,559.00		\$11,559.00	10/2023
1c	315759	Ds-04 Pipe	Site	Ferguson	6/2023	\$21,906.60		\$21,906.60	10/2023
3c	318244	DS-04 Pipe	Site	Ferguson	6/2023	\$8,375.60		\$8,375.60	9/2023
2c	318244	DS-04	Site	Ferguson	6/2023	\$38,292.85		\$38,292.85	8/2023
4	7125	Add#1	Regal	Toric	7/2023	\$157,560.30		\$157,560.30	3/2024
2c	52827	Misc met	Site	Munich	7/2023	\$3,935.00		\$3,935.00	10/2023
1b	18163B14810	CL2	Regal	HPT	7/2023	\$75,644.50		\$75,644.50	
1b	18163B15021	Scrubbers	Regal	HPT	7/2023	\$71,000.00		\$71,000.00	11/2023
1c	318244	pipe	Site	Ferguson	7/2023	\$46,668.45		\$46,668.45	11/2023
1c	315759	Pipe & Fts	Site	Ferguson	7/2023	\$21,906.60		\$21,906.60	12/2023
1c	316299	Hatch	Regal	Ferguson	7/2023	\$1,863.41		\$1,863.41	
1c	326037	Pipe & Fies	Site	Ferguson	7/2023	\$7,921.54		\$7,921.54	10/2023
1c	326925	Pipe & Fies	Site	Ferguson	7/2023	\$5,346.51		\$5,346.51	
1d	1194-4	3760 Add#1	Koch	Koch Mechanical	7/2023	\$53,500.00		\$53,500.00	6/2024
3d	1194-4	3760 Add#1	Koch	Koch Mechanical	7/2023	\$29,000.00		\$29,000.00	10/2023
2d	1194-4	3760Add#1	Koch	Koch Mechanical	7/2023	\$10,000.00		\$10,000.00	10/2023
2b	18163B14810	CL2	Regal	HPT	7/2023	\$75,644.50		\$75,644.50	9/2023
2b	18163B15021	Scrubbers	Regal	HPT	7/2023	\$71,000.00		\$71,000.00	10/2023
1c	332264	Fittings	Site	Ferguson	8/2023	\$14,905.35		\$14,905.35	11/2023
1c	3182441	fittings	Site	Ferguson	8/2023	\$3,162.13		\$3,162.13	
1c	331949	Fittings	Site	Ferguson	8/2023	\$21,785.89		\$21,785.89	
1d	5545	Electrical	Majestic	Majestic	8/2023	\$63,168.00		\$63,168.00	11/2023
Totals						\$1,019,318.23		\$1,019,318.23	

# Stored Material Summary

Con

For (Contract):		1		Application Number:						
Application Period:		6.08.24 to 7.05.24		Application Date: 7.08.24						
Bid Item No.	A Supplier Invoice No.	B Submittal No. (with Specification Section No.)	C Storage Location		D Stored Previously		E Amount Stored this Month (\$)	Subtotal Amount Completed and Stored to Date (D + E)	Incorp Date (Mon Year)	
					Date Placed into Storage (Month/Year)	Amount (\$)				
4	7336		regal	toric						
1d	5558		JPG	Majestic	10/2023		\$380,368.82	\$380,368.82	3/2024	
3d	5558		JPG	Majestic	10/2023		\$120,000.00	\$120,000.00	11/2023	
					10/2023		\$180,000.00	\$180,000.00	3/2024	
<b>Totals</b>								\$680,368.82	\$680,368.82	



# APPLICATION AND CERTIFICATE FOR PAYMENT

Invoice #: 3760-16

To Owner: CITY OF MADISON  
101 WEST MAIN STREET

Project: 22-03760 MADISON DIV A WATER  
IMPROVEMENTS

Application No.: 16

MADISON, IN 47250

Period To: 7/5/24

From Contractor: Dave O'Mara Contractor, Inc. Via Architect  
PO Box 1139  
North Vernon, IN 47265

Project No: 3760

Contract For: *Water Utility Improvements Div A - Supply - Treatment*

Contract Date: 1/17/23

## CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract.  
Continuation Sheet is attached.

1. Original Contract Sum .....	\$4,543,000.00
2. Net Change By Change Order .....	\$19,320.69
3. Contract Sum To Date .....	\$4,562,320.69
4. Total Completed and Stored To Date .....	\$3,914,678.13
5. Retainage:	
a. 5.00% of Completed Work	\$186,343.86
b. 5.00% of Stored Material	\$9,390.13
Total Retainage .....	\$195,733.99
6. Total Earned Less Retainage .....	\$3,718,944.14
7. Less Previous Certificates For Payments .....	\$3,629,898.28
8. Current Payment Due .....	\$89,045.86
9. Balance To Finish, Plus Retainage .....	\$843,376.55

The undersigned Contractor certifies that to the best of t information, and belief, the work covered by this Applica completed in accordance with the Contract Documents. paid by the Contractor for Work for which previous Certi issued and payments received from the Owner, and that herein is now due.

CONTRACTOR: Dave O'Mara Contractor, Inc.

By: *[Signature]* Date: 7/5/24



State of: IN  
Subscribed and sworn to before me this 10  
Notary Public: *[Signature]*  
My Commission expires: 8/21/24

## ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site c comprising the above application, the Architect certifies to the C Architect's knowledge, information, and belief, the Work has pro the quality of the Work is in accordance with the Contract Docu is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED \$ 89,045.86

*(Attach explanation if amount certified differs from the amount applied. Init Continuation Sheet that are changed to conform with the amount certified.)*

ARCHITECT:

By: \_\_\_\_\_ Date: \_\_\_\_\_

This Certificate is not negotiable. The AMOUNT CERTIFI Contractor named herein. Issuance, payment, and accep prejudice to any rights of the Owner or Contractor under t

CHANGE ORDER SUMMARY	Additions	Deductions
Total changes approved in previous months by Owner	\$19,320.69	\$0.00
Total Approved this Month	\$0.00	\$0.00
<b>TOTALS</b>	<b>\$19,320.69</b>	<b>\$0.00</b>
Net Changes By Change Order	<b>\$19,320.69</b>	

# CONTINUATION SHEET

Application and Certification for Payment, containing Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.  
Use Column I on Contracts where variable retainage for line items may apply.

Applicati

Applicatio

Architect's Proj

Invoice # : 3760-16

Contract : 22-03760 MADISON DIV A WATER IMPROVEMENTS

A Item No.	B Description of Work	C Scheduled Value	D Work Completed		F Materials Presently Stored  (Not in D or E)	G Total Completed and Stored To Date  (D+E+F)	H %
			From Previous Application (D+E)	This Period In Place			
001	MOBILIZATION	104,450.00	99,227.50	0.00	0.00	99,227.50	95
002	EQUIPMENT	222,750.00	89,100.00	11,137.50	75,644.50	175,882.00	79
003	VALVES & PIPING	1,269,000.00	761,400.00	63,450.00	32,157.94	857,007.94	67
004	ELECTRICAL/HVAC	492,800.00	295,680.00	98,560.00	30,000.00	424,240.00	86
005	MOBILIZATION	28,250.00	26,837.50	1,412.50	0.00	28,250.00	100
006	EQUIPMENT	292,500.00	292,500.00	0.00	0.00	292,500.00	100
007	VALVES & PIPING	109,250.00	109,250.00	0.00	0.00	109,250.00	100
008	ELECTRICAL/HVAC	135,000.00	135,000.00	0.00	0.00	135,000.00	100
009	MOB HILLTOP	53,450.00	50,777.50	2,672.50	0.00	53,450.00	100
010	EQUIPMENT	2,500.00	2,500.00	0.00	0.00	2,500.00	100
011	VALVES & PIPING	213,050.00	213,050.00	0.00	0.00	213,050.00	100
012	ELECTRICAL/HVAC	800,000.00	800,000.00	0.00	0.00	800,000.00	100
013	SCADA	700,000.00	630,000.00	0.00	50,000.00	680,000.00	97
014	MA 3 WEST END PUMP REWIND	25,000.00	25,000.00	0.00	0.00	25,000.00	100
015	WEST END ATS & RMV STARTER	95,000.00	0.00	0.00	0.00	0.00	0
1000	WEST END BOOSTER PUMP REWIND	949.20	949.20	0.00	0.00	949.20	100
1001	12" PRV MTL COST INCREASE	3,355.70	3,355.70	0.00	0.00	3,355.70	100
1002	JPG PAVED ACCESS ROAD & RAMP	15,015.79	15,015.79	0.00	0.00	15,015.79	100
3000	WCD #1 REPLACE JPG #7 PUMP	0.00	0.00	0.00	0.00	0.00	0
3001	DUKE BILL	0.00	0.00	0.00	0.00	0.00	0
<b>Grand Totals</b>		<b>4,562,320.69</b>	<b>3,549,643.19</b>	<b>177,232.50</b>	<b>187,802.44</b>	<b>3,914,678.13</b>	<b>86</b>

**RESOLUTION 2024-33B**

**A RESOLUTION OF THE BOARD OF PUBLIC  
WORKS AND SAFETY OF THE CITY OF MADISON, INDIANA  
REGARDING PARKING SPACE CLOSINGS FOR  
DONUTNV FOOD TRUCK**

WHEREAS, there has been a request filed by Becky Pyles on behalf of DonutNV for the closure of parking spaces in front of the James Dell clothing store located at 108 West Main Street to allow its Food Truck to park and operate for food vending on certain dates throughout 2024.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF PUBLIC WORKS AND SAFETY OF THE CITY OF MADISON, INDIANA, that four (4) parking spaces located in front of the James Dell clothing store at 108 West Main Street shall be closed from 10:00 p.m. to Midnight on the following dates throughout 2024 in order to allow DonutNV to park its Food Truck to set up for food vending:

Friday, July 19th;  
Friday, September 27th;  
Friday, October 25th; and  
Thursday, November 7th.

DonutNV will detach its tow vehicle after completing its setup and will leave two (2) parking spaces open for public use.

BE IT FURTHER RESOLVED BY THE BOARD OF PUBLIC WORKS AND SAFETY OF THE CITY OF MADISON, INDIANA, that the two (2) remaining parking spaces located directly in front of the James Dell clothing store at 108 West Main Street shall be closed on the following dates and times throughout 2024 in order to allow DonutNV to park its Food Truck to operate food vending:

Friday, July 19<sup>th</sup>, at 10:00 p.m. through Saturday, July 20<sup>th</sup>, at 8:00 p.m.  
Friday, September 27<sup>th</sup>, at 10:00 p.m. through Saturday, September 28<sup>th</sup>, at 8:00 p.m.  
Friday, October 25<sup>th</sup>, at 10:00 p.m. through Saturday, October 26<sup>th</sup>, at 8:00 p.m.; and  
Thursday, November 7<sup>th</sup>, at 10:00 p.m. through Friday, November 8<sup>th</sup>, at 10:00 p.m.

BE IT FURTHER RESOLVED BY THE BOARD OF PUBLIC WORKS AND SAFETY OF THE CITY OF MADISON, INDIANA, that said parking spaces as closed shall be under the supervision and control of the DonutNV at the times noted above for the year 2024.

ADOPTED this 15th day of July 2024.

\_\_\_\_\_  
Bob G. Courtney, Chairman

\_\_\_\_\_  
Karl Eaglin, Member

\_\_\_\_\_  
David Carlow, Member

(SEAL)

ATTEST:

\_\_\_\_\_  
Shirley Ryneerson, Clerk-Treasurer



# 2024-05

City of Madison Peddler/Solicitor Permit

This valid permit issued by the City of Madison is granted for

120  
(NUMBER OF DAYS)

To  
Rebecca/Scott Pyles / DonutNV  
(COMPANY)

Beginning this date: 04/13/2024 and Expiring: 08/21/2024

Flex Market MA  
MAJOR

(HAVE THIS DOCUMENT VISIBLE AT ALL TIMES WHILE OPERATING)

(YOU MAY ONLY GO DOOR TO DOOR BETWEEN 9AM - 6PM)

**RESOLUTION 2024-34B**

**A RESOLUTION OF THE BOARD OF PUBLIC  
WORKS AND SAFETY OF THE CITY OF MADISON, INDIANA  
REGARDING PARKING SPACE CLOSING FOR  
PAKALANA'S POKE WAGON FOOD TRUCK**

WHEREAS, there has been a request filed by Isa Center on behalf of Pakalana's Poke Wagon for the closure of the parking space directly in front of the Scarlet Begonia store located at 118 East Main Street to allow its Food Truck to park and operate for food vending on Saturday, July 20, 2024.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF PUBLIC WORKS AND SAFETY OF THE CITY OF MADISON, INDIANA, that the parking space located directly in front of the Scarlet Begonia store at 118 East Main Street shall be closed from 10:00 a.m. to 6:00 p.m. on Saturday, July 20, 2024, in order to allow Pakalana's Poke Wagon to park its Food Truck to set up and operate for food vending.

BE IT FURTHER RESOLVED BY THE BOARD OF PUBLIC WORKS AND SAFETY OF THE CITY OF MADISON, INDIANA, that said parking space as closed shall be under the supervision and control of Pakalana's Poke Wagon at the times noted above for the year 2024.

ADOPTED this 15th day of July, 2024.

\_\_\_\_\_  
Bob G. Courtney, Chairman

\_\_\_\_\_  
Karl Eaglin, Member

\_\_\_\_\_  
David Carlow, Member

(SEAL)

ATTEST:

\_\_\_\_\_  
Shirley Rynearson, Clerk-Treasurer

Jefferson County Health Department

715 Green Road  
Madison, IN 47250

**MOBILE FOOD**

PAKALANNA'S POKE WAGON  
Owner: ISA AND CHUCK CENTER

*Having qualified as required by Health Department regulations this permit is granted to operate an eating and/or drinking establishment*

Issued: 02/01/2024

Permit #: F20240023

Expires: 01/31/2025

*Randsey Wynn*  
Administrator

*Andrew N. Araki, MD*  
Health Officer

THIS PERMIT IS PROPERTY OF JCHD AND IS NOT TRANSFERABLE



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
07/11/2024

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 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 Layman Hummel Insurance Inc	CONTACT NAME: BRYANT LAYMAN
	PHONE (A/C, No, Ext): 812-352-6174 FAX (A/C, No):
	E-MAIL ADDRESS: B.LAYMAN@ROYALTYASSOC.COM
	INSURER(S) AFFORDING COVERAGE
	INSURER A : Secura
	INSURER B :
	INSURER C :
	INSURER D :
	INSURER E :
	INSURER F :

INSURED Charles Center Isa Center  
DBA: PAKALANA'S POKE WAGON  
29 RAKER RD  
MILTON, KY 40045

**COVERAGES**                      **CERTIFICATE NUMBER:**                      **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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
X	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	X	X	20-CP-003385148-1	03/16/2024	03/16/2025	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
X	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS HIRED AUTOS SCHEDULED AUTOS NON-OWNED AUTOS			20-A-003385149-1	03/16/2024	03/16/2025	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	UMBRELLA LIAB EXCESS LIAB						EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE	OTH-ER
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

<b>CERTIFICATE HOLDER</b> The City of Madison 101 W Main St Madison, Indiana 47250	<b>CANCELLATION</b> 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 
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**RESOLUTION 2024-35B**

**A RESOLUTION OF THE BOARD OF PUBLIC  
WORKS AND SAFETY OF THE CITY OF MADISON, INDIANA  
REGARDING PARKING SPACE CLOSING FOR  
TINY HOS COFFEE TRUCK**

WHEREAS, there has been a request filed by Sabrina Rider on behalf of Tiny Hos Coffee for the closure of parking spaces directly in front of the Serendipity store located at 205 East Main Street to allow its Food Truck to park and operate for food vending on Saturday, July 20, 2024.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF PUBLIC WORKS AND SAFETY OF THE CITY OF MADISON, INDIANA, that the parking spaces located directly in front of the Serendipity store at 205 East Main Street shall be closed from 10:00 a.m. to 6:00 p.m. on Saturday, July 20, 2024, in order to allow Tiny Hos Coffee to park its Food Truck to set up and operate for beverage vending.

BE IT FURTHER RESOLVED BY THE BOARD OF PUBLIC WORKS AND SAFETY OF THE CITY OF MADISON, INDIANA, that said parking spaces as closed shall be under the supervision and control of Tiny Hos Coffee at the times noted above for the year 2024.

ADOPTED this 15<sup>th</sup> day of July 2024.

\_\_\_\_\_  
Bob G. Courtney, Chairman

\_\_\_\_\_  
Karl Eaglin, Member

\_\_\_\_\_  
David Carlow, Member

(SEAL)

ATTEST:

\_\_\_\_\_  
Shirley Rynearson, Clerk-Treasurer

**Jefferson County Health Department**

715 Green Road  
Madison, IN 47250

**MOBILE FOOD**

**HOS COFFEE MOBILE UNIT**

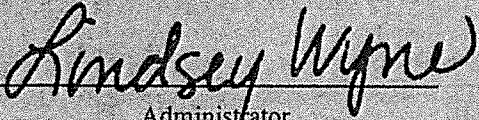
Owner: CHRIS AND TRICIA HOSTETLER

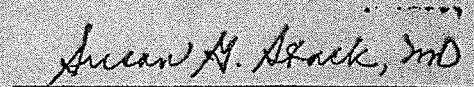
*Having qualified as required by Health Department regulations this  
permit is granted to operate an eating and/or drinking establishment*

Issued: 02/01/2024

Permit #: F20240149

Expires: 01/31/2025

  
\_\_\_\_\_  
Administrator

  
\_\_\_\_\_  
Health Officer

**THIS PERMIT IS PROPERTY OF JCHD AND IS NOT TRANSFERABLE**



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
07/11/2024 16:06

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 Koehler, Michael 1433 Clifty Dr Madison, IN 47250	CONTACT NAME:
	PHONE (A/C, No, Ext): (812) 273-3600      FAX (A/C, No): E-MAIL ADDRESS: Michael.Koehler@infarmbureau.com
INSURED HOS COLLECTIVE, LLC 5455 W 900 N DUPONT, IN 47231-9515	INSURER(S) AFFORDING COVERAGE      NAIC #
	INSURER A : United Farm Family Mutual Insurance Company      15288
	INSURER B :
	INSURER C :
	INSURER D :
INSURER E :	
INSURER F :	

**COVERAGES      CERTIFICATE NUMBER:      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.

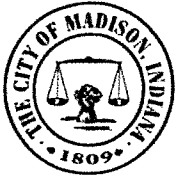
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY			CAP8527226	04/17/2024	04/17/2025	COMBINED SINGLE LIMIT (Ea accident) \$ <b>1,000,000</b> BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE    OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

**CERTIFICATE HOLDER****CANCELLATION**

Madison Police	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 Koehler, Michael

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# MADISON

*Indiana*  
Planning, Preservation and Design

101 W Main St  
Madison, IN 47250  
(812) 265-8324

PACE  
Grant Amendment

Property Address: 108 E Third St

Applicant Name(s): William e Stacy Barnes

P.A.C.E. Review Committee

Date of approval: 7/9/24

Director of Planning: [Signature]

Original Grant Amount Approved: \$7,500.00

Amended Grant Amount Approved: \$7,500.00 (change to scope only)

Mayor

Date of approval: \_\_\_\_\_

Mayor: \_\_\_\_\_

Board of Public Works and Safety

Date of approval: \_\_\_\_\_

Board of Public Works and Safety Representative: \_\_\_\_\_

Date of approval: \_\_\_\_\_

Board of Public Works and Safety Representative: \_\_\_\_\_

## Nicole M Schell, AICP

---

**From:** Bill Barnes <bill@cfmjc.org>  
**Sent:** Wednesday, June 26, 2024 2:36 PM  
**To:** Nicole M Schell, AICP  
**Cc:** Stacy Barnes  
**Subject:** PACE Grant Amendment Request  
**Attachments:** Estimate-1210.pdf

Nicole –

Thanks for your time this week.

Stacy and I request an amendment to our PACE Grant at 108 E. Third St. We would like to remove the 23' x 8' brick wall in the alley from the grant, which leaves the two outbuildings as part of the scope of work.

Omar Zanabria quoted the total cost using someone he had available when we applied last summer. Earlier this year, I was informed that this man had moved back to Mexico. Omar thought he might be able to find someone else, but that didn't work. Last month, Omar informed us that we would need to find a mason to do all the tuckpointing and repair of the buildings and wall. I have attached the estimate from Dennis Webster.

We have already paid for reframing the garage opening, a new garage door, and replacing fascia board and painting on the garage. Stacy and I can afford the higher than expected costs for the two buildings, and we estimate even without the alley wall that we will be spending approximately \$18,000. The additional \$12,550 is beyond our means at this time. It is our hope that this wall would qualify for another PACE grant in 2025. The wall is in bad shape and would fall if it wasn't being held up by a utility pole. Perhaps it would qualify for a dilapidated structure grant since it is pretty unsound.

Today, I met with Dennis on site and we discussed the change in scope. He is expected to start work in mid-August and hopes to be done by September 1. At that time, the rest of the work would be done by Omar Zanabria.

We are grateful for the City's support and your personal assistance to us. Please let me know if you have any questions.

Thank you -

Bill Barnes  
President & CEO  
Community Foundation of Madison & Jefferson County  
P.O. Box 306  
416 West St., Suite B  
Madison, IN 47250  
Main #: 812-265-3327  
Direct #: 812-274-0241  
Cell #: 812-801-3172  
Fax #: 812-273-0181  
[www.cfmjc.org](http://www.cfmjc.org)

**CREATE A LEGACY...PLEASE REMEMBER THE COMMUNITY FOUNDATION IN YOUR WILL, TRUST, LIFE INSURANCE POLICY, INVESTMENT ACCOUNT, OR RETIREMENT PLAN.**

# Estimate

Dennis Webster

properrestorationsllc@gmail.com

Bill Barnes  
 108 3rd st.  
 Madison Indiana 47250

Customer number	Document number	Page	Date	Valid to
1111	1210	1 / 1	6/22/2024	6/22/2024

**Not to exceed price stated, but may be reduced. To be completed within three weeks of start date.**

Item	Quantity	Price	Sales tax	Total
Material River and Masonry sand, lime, cement, color match, concrete, all thread, and support stars. Masonry blades and rakes. Waste disposal included.	1	1,400.00		1,400.00
Perimeter wall north of fountain Alley Top 5 foot of wall is beginning to bow towards fountain alley. After removal, wall will be relayed integrating it with the two structures at each end. Multiple brick at the base of the wall on the inside layer and outside layer need replaced. To be done prior to relaying wall.	1	8,350.00		8,350.00
SE structure 30+ brick to replace, multiple sections that need repointed, two window frames in need of wood repair.	1	3,600.00		3,600.00
SW structure 50+ brick to replace, multiple sections that need repointed and sections that need plaster added to wall.	1	4,700.00		4,700.00
Support pillars Footers poured, and two brick support pillars fastened into the wall. After partial cure, pillars to be filled with fiber reinforced concrete.	1	4,200.00		4,200.00
No Sales Tax: 22,250.00 x 0% = 0.00				

<b>Total ex. tax</b>	<b>\$22,250.00</b>
<b>No Sales Tax</b>	<b>\$0.00</b>
<b>Total</b>	<b>\$22,250.00</b>



# MADISON

*Indiana*  
Planning, Preservation and Design

101 W Main St  
Madison, IN 47250  
(812) 265-8324

PACE  
Grant Amendment

Property Address: 1003 East St

Applicant Name(s): Brian Marshall

P.A.C.E. Review Committee

Date of approval: 7/9/24

Director of Planning: *Ann M Schul*

Original Grant Amount Approved: \$25,000.00

Amended Grant Amount Approved: \$24,250.00 (50% cost of construction)

Mayor

Date of approval: \_\_\_\_\_

Mayor: \_\_\_\_\_

Board of Public Works and Safety

Date of approval: \_\_\_\_\_

Board of Public Works and Safety Representative: \_\_\_\_\_

Date of approval: \_\_\_\_\_

Board of Public Works and Safety Representative: \_\_\_\_\_



# MADISON

*Indiana*  
Planning, Preservation and Design

June 12, 2024

To:  
PACE Committee

Dear PACE Committee,

Brian Marshall is requesting an amendment at 1003 East St. His original application included the replacement of 6 windows for the cost of \$12,500. He is requesting that portion of his application be removed as he has decided to install a different material. The original total construction cost for the project of \$61,000 would be reduced by that amount.

Scope of Work	Original Grant	Amendment
Windows	\$12,500.00	\$0.00
Tuckpointing	\$14,000.00	\$14,000.00
Paint	\$4,000.00	\$4,000.00
Porch repair/rebuild	\$2,500.00	\$2,500.00
Back addition	\$28,000.00	\$28,000.00
Total	\$61,000.00	\$48,500.00

This amendment will reduce his approved amount from \$25,000 to \$24,250 or 50% of the cost of construction.

Thank you,

*Nicole M Schell*

Nicole M Schell, AICP  
Director of Planning  
City of Madison, Indiana



Applicant Name	Property Address	Target Area	Dilapidated Structure	Dangerous Structure	Commercial or Residential	Grant amount	Private Investment	Project Total	%	Score	Mini Score
604 Mulberry LLC	604 Mulberry St		X		Residential	\$25,000.00	\$125,000.00	\$150,000.00	17%	43	36
Dave Patterson	118 W Fifth St		X		Residential	\$25,000.00	\$56,832.39	\$81,832.39	31%	43.67	36
Matt and Daniel Chandler	301 Jefferson St		X		Commercial	\$25,000.00	\$725,000.00	\$750,000.00	2%	33.33	36
Matt and Daniel Chandler	221 E Second St		X		Commercial	\$25,000.00	\$725,000.00	\$750,000.00	2%	33.67	36
Paul and Paula Lee	820 W Main St		X		Residential	\$25,000.00	\$56,200.38	\$81,200.38	31%	31	36
Jacob Binzer / Brian Martin	811.5 E Second St		X		Residential	\$25,000.00	\$165,000.00	\$190,000.00	13%	50	36
Jerry&Louise Martin / B. M.	811 E Second St		X		Residential	\$25,000.00	\$165,000.00	\$190,000.00	13%	50.67	36
<b>Total</b>						<b>\$175,000.00</b>	<b>\$2,018,032.77</b>	<b>\$2,193,032.77</b>			

Available	Requested	Remaining
25% \$ -	\$ -	\$ -
75% \$ 174,087.64	\$ 175,000.00	\$ (912.36)
<b>Total</b>	<b>\$ 174,087.64</b>	<b>\$ (912.36)</b>



# MADISON

*Indiana*  
Planning, Preservation and Design

101 W Main St  
Madison, IN 47250  
(812) 265-8324

## Application for P.A.C.E. Preservation & Community Enhancement Grant Program

Application Fee: \$10.00

Purpose: Application is hereby made to request funding from the PACE Program. This application must be filed prior to work beginning on a property located within the City of Madison. This application does not replace the need for approval from the HDBR for properties located downtown.

### APPLICANT INFORMATION

Date: 5/28/24

Property Owner Name: 604 Mulberry LLC/ Kelly Rodgers

Mailing Street Address: 804 E First Street

City: Madison

State: In Zip: 47250

Phone (Preferred): 812-818-6772

Phone (Alternate): 703-244-6326

Email: ryan@pinelanelc.com

### PROJECT INFORMATION

Street Address: 604 Mulberry St

Total Cost of Project (include all costs to complete the entire project): \$150,000.00

Estimated Date of Completion of Work: Nov 2024

Hilltop

Downtown

### GRANT INFORMATION

Rehabilitation  
(Downtown) Grant

Curb Appeal  
(Hilltop) Grant

Dilapidated  
Structures Grant

Dangerous  
Buildings Grant

Amount of Grant Requested (can be obtained from the office): 25,000

### A PACE grant application must include the following documents:

- Complete application
- Photographs of existing conditions of Property
- Project Plans (required if altering footprint or openings)
- Copies of Construction Quotes for the project
- Certificate of Appropriateness (COA) (If applicable)
- Proof of Property Insurance
- Proof of Ownership (Deed)
- Certificate of Incorporation (If organization/business)
- Unsafe Letter (Required for Dangerous Structures Grant)



**DESCRIPTION OF THE PROJECT**

Please describe the project and the property's current condition.

Rehabilitation of residential structure, to include:

- 1) Complete replacement of Electrical, Plumbing, HVAC, kitchen, baths, and interior finishes
- 2) Repair floor joist and replace subflooring in brick structure
- 3) Repair and replace wood structure additions on the rear of building.
- 3) Repair of chimneys and structural masonry repairs.
- 4) Paint exterior body, trim, doors, windows and repair wood exterior

Additional pages are attached.

**DETAILED PROJECT SCHEDULE**

Show how the project will be completed within a 12-month time period. If the project will take longer than 12 months, please explain.

Demolition of the existing electrical, plumbing and mechanical systems have been completed. Additionally a permit has been issued by the city for the work to be performed. Once structural repairs have been completed (30-60Days) the project should be a fairly straight forward remodel 90-120 days to complete.

Additional pages are attached.



**Applicant must read and initial the following:**

I understand that the grant funds must be used only for the project described in this application. The work must be completed within twelve (12) months of the date that the grant is awarded. If a project is not completed the recipient(s) may request an extension to the City of Madison Board of Works and Safety.

I understand that I must receive all required permits from the Office of Planning, Preservation, and Design and from the State of Indiana prior to beginning work on my project or I will forfeit any awarded grant monies.

I understand that a failure to complete any project may result in the City of Madison placing a lien on the property in order to recover grant monies in the amount of monies received by Recipient(s).


I understand that if any plans to the project change or if the contractor changes, I must notify the Director of Planning prior to the project construction continuing.

I understand that all property taxes must be current and that there cannot be any current tax liens against the property or current litigation between the City of Madison and the applicant. I understand that if one of these is not true, my application will not be considered for funds.

I understand that if I am applying for a Dilapidated Structures Grant, I am required to complete the full renovation exterior of the building including paint.

I understand that if I am applying for a Dangerous Buildings Grant, infill construction must be completed within 2 years after approved funding. Final disbursement of funds will be withheld until such time that construction is completed.

**I certify that I have read the P.A.C.E. Program Guidelines and that all required documents are included in my final application packet.**

  
Applicant(s) Signature

5/28/24  
Date

**Documentation Review (Completed by Planning Office)**

- Complete application
- Photographs of Property
- Project Plans (If required)
- Copies of Construction Quotes
- COA application filed (If applicable)
- Proof of Property Insurance
- Proof of Ownership (Deed)
- Certificate of Incorporation (If required)
- Unsafe Letter (If required)

Staff Notes



**DETAILED PROJECT BUDGET WORKSHEET**

List all major tasks necessary to complete the proposed Project, the total budget, and the matching grant amount requested. The P.A.C.E. Grant Program funds materials and labor. Please separate materials from labor. The Detailed Project Budget Worksheet does not replace the need to include copies of construction quotes from a registered contractor. If a copy of quote from a registered contractor is not provided, the application will be deemed incomplete.

Task #	Description of Work and/or Material Please Reference Appropriate Quote (Must be attached)	Total Task Budget	Amount of Grant Funds (50% max)
	SAMPLE: Lumber and supplies per sales ad from Lowe's	\$1,076	\$538.00
1	Lumber and materials to rebuild old kitchen addition.	6994.44	<b>3497.22</b>
2	Lumber and Materials to rebuild porch addition.	13,983.33	<b>6991.66</b>
3	Labor to rebuild both additions.	12,777.59	<b>6399.79</b>
4	Chimney, tuck pointing and Masonry repairs.	13,722.00	<b>6861.00</b>
5	Painting Body, trim, doors, windows and wood repair	3,700.00	<b>1250.33</b>
6			
7			
8			
9			
10			
	<b>Totals</b>	<b>51,177.36</b>	<b>25000</b>

Additional pages are attached.

**DETAILED REBUILDING PLAN (ONLY FOR DANGEROUS BUILDINGS GRANT APPLICATIONS)**

Please explain what you will be rebuilding after the building is demolished. You must include a timeline for the rebuilding plan.

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Additional pages are attached.

## 604 Mulberry PACE Grant Request

### Preservation to architectural elements exterior:

- Chimney Repair front & Rear
- Tuck pointing
- Existing window and door restoration
- Trim Repair
- Painting

### Materials to be used

- LP smart siding on rear additions
- Painted wood trim
- Restored wooden doors.
- Restored wooden windows, possible new clad in rear if not repairable.

### Visibility

- Front façade visible from Mulberry
- South Façade visible from E 4<sup>th</sup> street

### Property status

- Vacant for about a year

### Investment

- Approximatly \$150,000.00

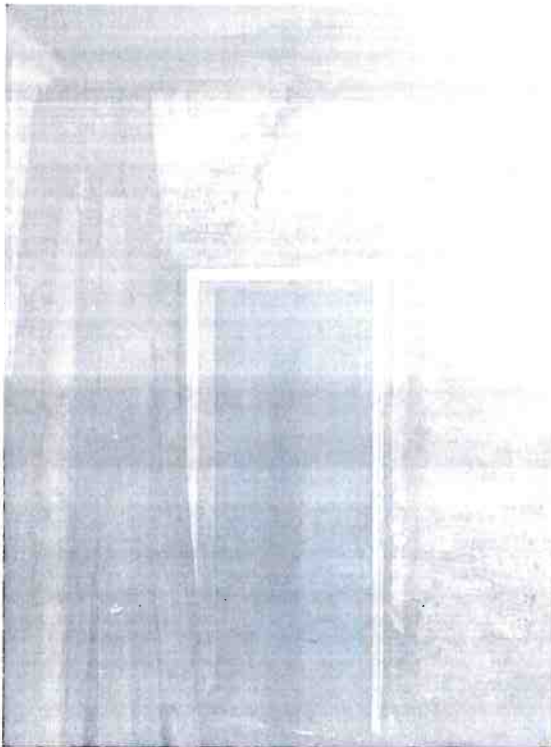
### Use

- Most likely rental but may be offered for sale.

### Unsafe

- The building has been deemed unsafe by the building inspector.

604 Mulberry PACE Grant Request

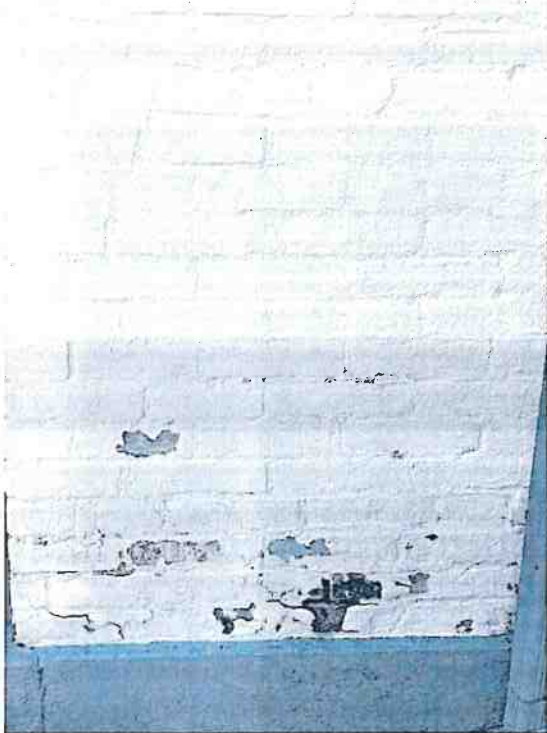


604 Mulberry PACE Grant Request





604 Mulberry PACE Grant Request

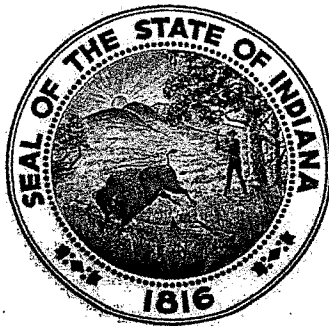


State of Indiana  
Office of the Secretary of State

Certificate of Organization  
of  
**604 MULBERRY LLC**

I, DIEGO MORALES, Secretary of State, hereby certify that Articles of Organization of the above Domestic Limited Liability Company have been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Code.

NOW, THEREFORE, with this document I certify that said transaction will become effective Tuesday, June 06, 2023.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, June 06, 2023.

*Diego Morales*

DIEGO MORALES  
SECRETARY OF STATE

202306061697237 / 9903417

To ensure the certificate's validity, go to <https://bsd.sos.in.gov/PublicBusinessSearch>

DULY ENTERED FOR TAXATION  
SUBJECT TO FINAL ACCEPTANCE  
FOR TRANSFER

Heather Hull 07/06/2023  
AUDITOR, JEFFERSON CO.

202302404 WD \$25.00  
07/06/2023 03:42:03P 3 PGS  
Molly O'Connor  
Jefferson County Recorder IN  
Recorded as Presented



Parcel No. 39-08-35-334-091.000-007

## WARRANTY DEED

THIS INDENTURE WITNESSETH, That ROBERT E. JONES AND JANET R. JONES, husband and wife, (Grantors) of Jefferson County, in the State of Indiana, CONVEY AND WARRANT to 604 MULBERRY, LLC. an Indiana Limited Liability Company, (Grantee) of Jefferson County, in the State of Indiana, for the sum of One and No/100 Dollars (\$1.00) and other valuable consideration, the receipt and sufficiency which is hereby acknowledged, the following described real estate in Jefferson County, State of Indiana:

Being in Dobbins-Hodges and Robinson's Addition North to the City of Madison, Indiana, commencing on the east line of Mulberry Street and the west line of Lot No. 4 in the middle of the partition wall; thence south with the east line of Mulberry Street 20-1/2 feet to a point in the center of a partition fence already built; thence east by and with the middle of said partition of said partition fence to the west line of Lot No. 2; thence continuing east in a direct line with the middle of said partition fence 20 feet, more or less, to George J. Hummel's west line; thence north with Hummel's west line parallel with the east line of Lot No. 2 to a point where a direct line to the center of a partition west on Lot No. 4 extended would touch said point; thence west in a direct line that will pass through the center of said partition wall to the east line of Mulberry Street, the place of beginning.

ALSO, a strip of ground five feet wide off the entire side of a lot formerly owned by Harry Lemen, the land hereby described being alley-way five feet wide immediately south of the southeast corner of the lot of ground hereinabove described.

SUBJECT to an easement over such last described real estate.

MLT 2500 ③

Being and intended to be the same real estate conveyed to Robert E. Jones and Janet R. Jones by a Warranty Deed from Richard Cox, as Trustee of the Richard Cox Trust dated August 27, 1992, deed dated and recorded August 28, 1995, in Record No. 179, page 1022, in the Recorder's Office of Jefferson County, Indiana.

Grantors shall pay the fall installment of taxes for 2022, due and payable November 10, 2023. Grantee shall pay all subsequent real estate taxes commencing with the fall installment for 2023, due and payable May 10, 2024.

Possession shall be given at closing.

Subject to any and all easements, agreements and restrictions of record. The address of such real estate is commonly known as 604 Mulberry St. Madison IN 47250

Tax bills should be sent to Grantees at such address unless otherwise indicated below.

IN WITNESS WHEREOF, Grantor has executed this deed this 28th day of June, 2023.

Grantor: \_\_\_\_\_ (SEAL)

Signature 

Printed ROBERT E. JONES

Grantor: \_\_\_\_\_ (SEAL)

Signature 

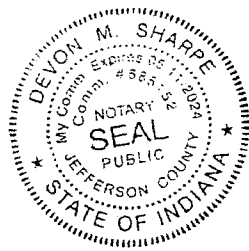
Printed JANET R. JONES


STATE OF INDIANA

COUNTY OF JEFFERSON

Before me, a Notary Public in and for said County and State, personally appeared Robert E. Jones and Janet R. Jones, who acknowledged the execution of the foregoing Warranty Deed, and who, having been duly sworn, stated that any representations therein contained are true.

Witness my hand and Notarial Seal this 28<sup>th</sup> day of June, 2023.



Signature   
Printed Devon M. Sharpe, Notary Public

This instrument prepared by: Devon M. Sharpe, Attorney, Madison, Indiana

Property Address: 604 Mulberry St. Madison IN 47250  
Address of Grantee: 804 East First St. Madison, IN 47250  
Tax Mailing Address: 804 East First St. Madison, IN 47250  
Mail Deed to: 804 East First St. Madison, IN 47250

*I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law, Devon M. Sharpe*



9800 Fredericksburg Road  
San Antonio, Texas 78288

KELLY L RODGERS AND RYAN RODGERS  
604 MULBERRY ST  
MADISON, IN 47250

January 24, 2024

Reference: Existing USAA Rental Property Insurance Policy Summary

We're writing to provide the following summary of the USAA rental property policy:

<b>Effective date of policy:</b>	June 28, 2023 12:01 a.m. local time
<b>Policy expiration date:</b>	June 28, 2024 12:01 a.m. local time
<b>Policy location:</b>	604 MULBERRY ST, MADISON, IN 47250
<b>Policy number:</b>	CIC 008154796 84A
<b>Named Insured:</b>	KELLY L RODGERS AND RYAN RODGERS
<b>Additional Insured:</b>	604 MULBERRY LLC
<b>Additional Insured Type:</b>	Professional / Private Corporation

**Description of coverage(s)**

<b>Dwelling coverage:</b>	\$564,000
<b>Home Protector:</b>	Not Included
<b>Personal liability:</b>	\$500,000
<b>Medical payments:</b>	\$5,000

**Deductible(s)**

**All perils:** \$2,000

**Revised Annual Premium:** \$2,050.08

**Mortgage clause:**

GERMAN AMERICAN BANK  
ISAOA, ATIMA  
PO BOX 360  
JASPER, IN 47547-0360

Your Home Protector coverage, if included, provides you an additional 25% of dwelling coverage. Policy terms, conditions and exclusions apply.

**Notification to Additional Interest Upon Cancellation**

If this policy is canceled or not renewed, the mortgagee/lender will be properly notified at least 10 days before the date cancellation or nonrenewal takes effect.



## Unsafe Structure Determination

**Issued to:** 604 Mulberry LLC  
804 EAST FIRST ST  
MADISON, IN 47250

**Date Issued:** April 1, 2024

Project Location: 604 MULBERRY ST , MADISON IN 47250

Structure Type: Primary Residential Structure

There was an inspection completed at the property on 604 MULBERRY ST . The intent of this letter is to state that I, Bryan Shaw (City of Madison Building Inspector) made a site visit to said property on April 1, 2024, to verify the location, external, and Internal condition of the building in disrepair.

Based upon my site visit and the observations made, there are

Unsafe Building Chapter 154.03:

- (A) Whenever any door, aisle, passageway, stairway or other means of exit is not of sufficient width or size or is not so arranged as to provide safe and adequate means of exit in case of fire or panic.
- (B) Whenever the stress in any materials, member or portion thereof, due to all dead and live loads, is more than one and one half times the working stress or stresses allowed in the Building Code for new buildings of similar structure, purpose or location.
- (C) Whenever any portion thereof has been damaged by fire, earthquake, wind, flood or by any other cause, to such an extent that the structural strength or stability thereof is materially less than it was before such catastrophe and is less than the minimum requirements of the Building Code for new buildings of similar structure, purpose or location.
- (D) Whenever any portion or member or appurtenance thereof likely to fail, or to become detached or dislodged, or to collapse and hereby injure persons or damage property.
- (E) Whenever any portion of a building, or any member, appurtenance or ornamentation on the exterior thereof is not of sufficient strength or stability, or is not so anchored, attached or fastened in place so as to be capable of resisting a wind pressure of one half of that specified in the Building Code for new buildings of similar structure, purpose or location without exceeding the work stresses permitted in the Building Code for such buildings.
- (F) Whenever any portion thereof has wracked, warped, buckled or settled to such an extent that walls or other structural portions have materially less resistance to winds or earthquakes than is required in the case of similar new construction.
- (G) Whenever the building or structure, or any portion thereof, because of dilapidation, deterioration, or decay; faulty construction; the removal, movement, or instability of any portion of the ground necessary for the purpose of supporting such building; the deterioration, decay, or inadequacy of its foundation; or any other cause, is likely to partially or completely collapse.
- (H) Whenever, for any reason, the building or structure, or portion thereof, is manifestly unsafe for the purpose for which it is being used.



Unsafe Structure Determination

Issued to: 604 Mulberry LLC Date Issued: April 1, 2024  
804 EAST FIRST ST  
MADISON, IN 47250

- (I) Whenever the exterior walls or other vertical structural members list, lean or buckle to such an extent that a plumb line passing through the center of gravity does not fall inside the middle one third of the base.
- (J) Whenever the building or structure, exclusive of the foundation, shows 33 percent or more damage or deterioration of its supporting member or members, or 50 percent damage or deterioration of its nonsupporting members, enclosing or outside walls or coverings.
- (K) Whenever the building or structure has been so damaged by fire, wind, earthquake or flood, or has become so dilapidated or deteriorated as to become an attractive nuisance to children; or freely accessible to persons for the purpose of committing unlawful acts.
- (L) Whenever any building or structure has been constructed, exists or is maintained in violation of any specific requirement or prohibition applicable to such building or structure provided by the building regulations of this city, or of any law or ordinance of this state or city relating to the condition, location or structure of buildings.
- (M) Whenever any building or structure which, whether or not erected in accordance with all applicable laws and ordinances, has in any nonsupporting part, member or portion less than 50 percent, or in any fire-resisting qualities of characteristics, or weather-resisting qualities or characteristics required by law in the case of a newly constructed building of like area, height and occupancy in the same location.
- (N) Whenever a building or structure, used or intended to be used for dwelling purposes, because of inadequate maintenance, dilapidation, decay, damage, faulty construction or arrangement, inadequate light, air or sanitation facilities, or otherwise, is determined by the city to be unsanitary, unfit for human habitation or in such a condition that is likely to cause sickness or disease.
- (O) Whenever any building or structure, because of obsolescence, dilapidated condition, deterioration, damage, inadequate exits, lack of sufficient fire resistant construction, faulty electric wiring, gas connections or heating apparatus, or other cause, is determined by the city to be a fire hazard.
- (P) Whenever any portion of a building or structure remains on a site after the demolition or destruction of the building or structure or whenever any building or structure is abandoned for a period in excess of six months so as to constitute such building or portion thereof an attractive nuisance or hazard to the public.

As such, the City of Madison Office of Planning, Preservation, and Design requests you contact this office within five (5) business days to set up a date and time to discuss plans for remediation. Our goal is to work with all property owners toward keeping our community safe for all residents. If we are unable to come to a resolution, I will be forced to request action before the City of Madison Board of Public Works and Safety. We hope that we have your cooperation in this matter. Please contact me at 812-265-8324.

Issued By:

Bryan Shaw, Building Inspector

City of Madison, Indiana





Application for P.A.C.E.  
Preservation & Community  
Enhancement Grant Program

Application Fee: \$10.00

Purpose: Application is hereby made to request funding from the PACE Program. This application must be filed prior to work beginning on a property located within the City of Madison. This application does not replace the need for approval from the HDBR for properties located downtown.

**APPLICANT INFORMATION**

Date: June 3, 2024  
 Property Owner Name: Dave Patterin  
 Mailing Street Address: 2940 S. Old Michigan Road  
 City: Holton State: IN Zip: 47023  
 Phone (Preferred): 812-621-2085 Phone (Alternate): \_\_\_\_\_  
 Email: pattersinhursry@aol.com

**PROJECT INFORMATION**

Street Address: 118 W. Fifth Street Madison, IN 47250  
 Total Cost of Project (include all costs to complete the entire project): \$ 81,832.39  
 Estimated Date of Completion of Work: July 2025  
 Hilltop  Downtown

**GRANT INFORMATION**

Rehabilitation (Downtown) Grant  Curb Appeal (Hilltop) Grant  Dilapidated Structures Grant  Dangerous Buildings Grant

Amount of Grant Requested (can be obtained from the office): \$ 25,000

**A PACE grant application must include the following documents:**

- Complete application
- Photographs of existing conditions of Property
- Project Plans (required if altering footprint or openings)
- Copies of Construction Quotes for the project
- Certificate of Appropriateness (COA) (If applicable)
- Proof of Property Insurance
- Proof of Ownership (Deed)
- Certificate of Incorporation (if organization/business)
- Unsafe Letter (Required for Dangerous Structures Grant)



**DESCRIPTION OF THE PROJECT**

Please describe the project and the property's current condition.

Please see Attachment A.

Additional pages are attached.

**DETAILED PROJECT SCHEDULE**

Show how the project will be completed within a 12-month time period. If the project will take longer than 12 months, please explain.

Please see Attachment B.

Additional pages are attached.



**DETAILED PROJECT BUDGET WORKSHEET**

List all major tasks necessary to complete the proposed Project, the total budget, and the matching grant amount requested. The P.A.C.E. Grant Program funds materials and labor. Please separate materials from labor. The Detailed Project Budget Worksheet does not replace the need to include copies of construction quotes from a registered contractor. If a copy of quote from a registered contractor is not provided, the application will be deemed incomplete.

Task #	Description of Work and/or Material Please Reference Appropriate Quote (Must be attached)	Total Task Budget	Amount of Grant Funds (50% max)
	SAMPLE: Lumber and supplies per sales ad from Lowe's	\$1,076	\$538.00
1	Please see Attachment C.		
2			
3			
4			
5			
6			
7			
8			
9			
10			
	Totals		

Additional pages are attached.

**DETAILED REBUILDING PLAN (ONLY FOR DANGEROUS BUILDINGS GRANT APPLICATIONS)**

Please explain what you will be rebuilding after the building is demolished. You must include a timeline for the rebuilding plan.

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Additional pages are attached.



**Applicant must read and initial the following:**

DFP I understand that the grant funds must be used only for the project described in this application. The work must be completed within twelve (12) months of the date that the grant is awarded. If a project is not completed the recipient(s) may request an extension to the City of Madison Board of Works and Safety.

DFP I understand that I must receive all required permits from the Office of Planning, Preservation, and Design and from the State of Indiana prior to beginning work on my project or I will forfeit any awarded grant monies.

DFP I understand that a failure to complete any project may result in the City of Madison placing a lien on the property in order to recover grant monies in the amount of monies received by Recipient(s).


DFP I understand that if any plans to the project change or if the contractor changes, I must notify the Director of Planning prior to the project construction continuing.

DFP I understand that all property taxes must be current and that there cannot be any current tax liens against the property or current litigation between the City of Madison and the applicant. I understand that if one of these is not true, my application will not be considered for funds.

DFP I understand that if I am applying for a Dilapidated Structures Grant, I am required to complete the full renovation exterior of the building including paint.

DFP I understand that if I am applying for a Dangerous Buildings Grant, infill construction must be completed within 2 years after approved funding. Final disbursement of funds will be withheld until such time that construction is completed.

**I certify that I have read the P.A.C.E. Program Guidelines and that all required documents are included in my final application packet.**



**Applicant(s) Signature**

06/03/2024

**Date**

**Documentation Review (Completed by Planning Office)**

- Complete application
- Photographs of Property
- Project Plans (If required)
- Copies of Construction Quotes
- COA application filed (If applicable)
- Proof of Property Insurance
- Proof of Ownership (Deed)
- Certificate of Incorporation (If required)
- Unsafe Letter (If required)

Staff Notes

## **ATTACHMENT A: DESCRIPTION OF THE PROJECT**

Upon purchasing the property located at 118 West Fifth Street, Madison Indiana, in 2024, it was discovered that the house was in need of exterior rehabilitation to the foundation, roof, siding, windows, doors, and gutters.

The structural integrity of the home is compromised as the foundation is deteriorating and requires immediate attention. Currently, the frame of the standing structure is elevated by 22 inches on support beams. A skilled stone mason will diligently restore and preserve the foundation to what it looked like in the early 1900's and ensure the stability and longevity of the structure.

The roof is currently made up of metal standing seam that is approximately fifty to eighty years old, which is in dire need of replacement due to natural wear-and-tear. In order to preserve the historic nature of the house, new metal standing seam will replace the old roof to provide a reliable covering for the top of the building. The historic roof shape will be retained.

The exterior walls of the house are currently covered with clapboard that is cracked and broken into fragmented pieces. Thus, the current siding will be removed and replaced with textured LP siding to enhance the building's historical architectural character.

Windows of the house are also made up of wood and are in need of complete replacement due to the original window missing and/or containing cracks in the glass. Windows being replaced within will be double-hung windows to match the original design of the historic building.

Three doors are needed for the historic home. When the property was purchased, only one wooden door was attached to the structure of the home. This door is unusable, and unfortunately cannot be restored. Thus, doors will be replaced with solid mahogany wood doors with glass and grills to complement the style of the house.

When the property was purchased, there were no gutters on the house. According to the Madison Residential Design Review Guidelines (Thomas and Associates, page 46), half round gutters are the most appropriate design if new gutters are needed. Half round gutters will be installed on the fascia and run the entire length of the roof, ending to the downspout.

CITY OF MADISON, INDIANA  
P.A.C.E. Preservation & Community Enhancement Grant Program  
Dave Patterson – 118 West Fifth Street, Madison, IN 47250

**ATTACHMENT B: DESCRIPTION OF THE PROJECT  
DETAILED PROJECT SCHEDULE**

July 2024 - Hire a skilled stone mason to restore and preserve the foundation

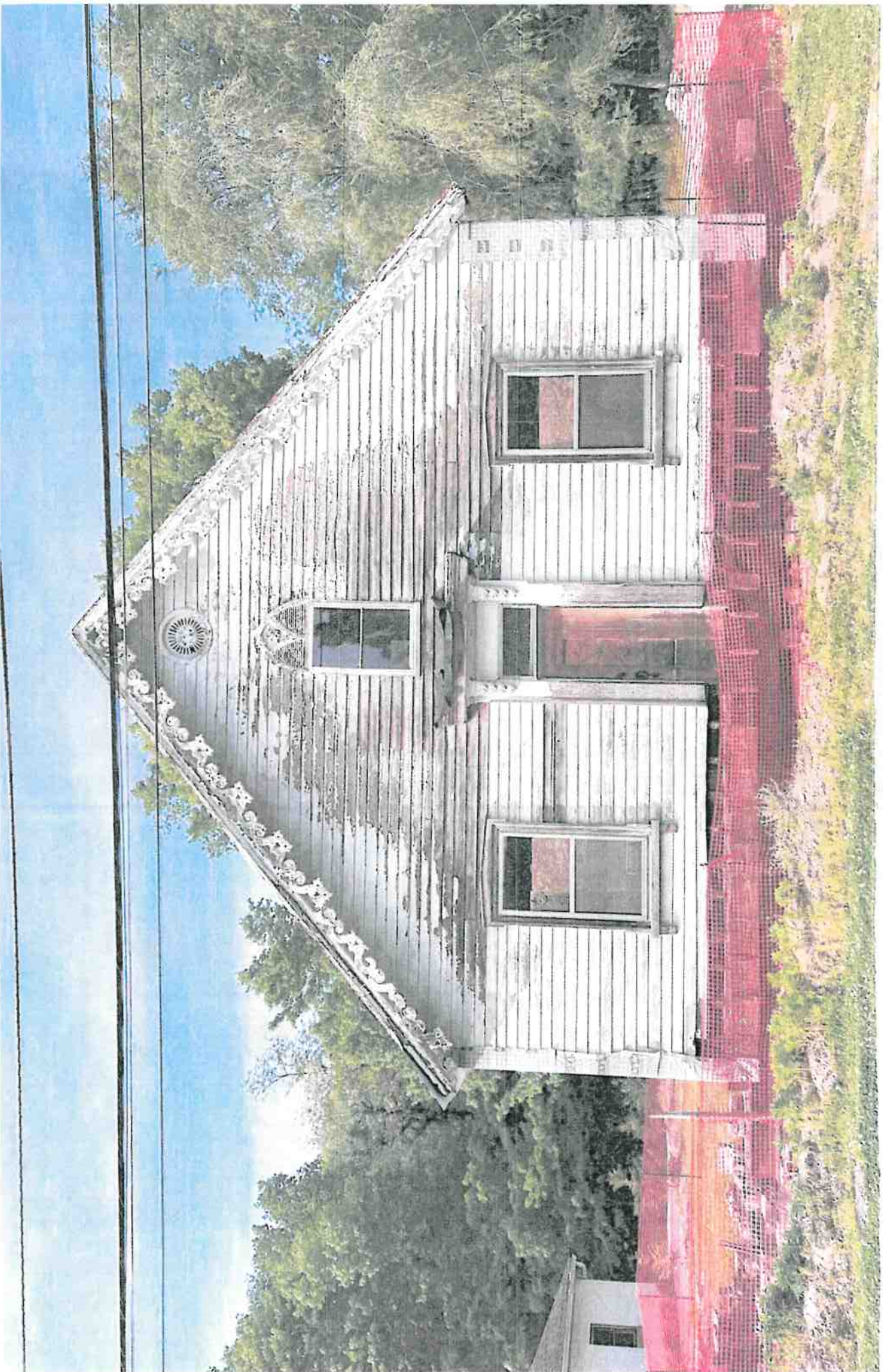
September 2024 – Install metal standing seam roof

October 2024 – Install half round gutters

November 2024 – Install windows and mahogany wood doors

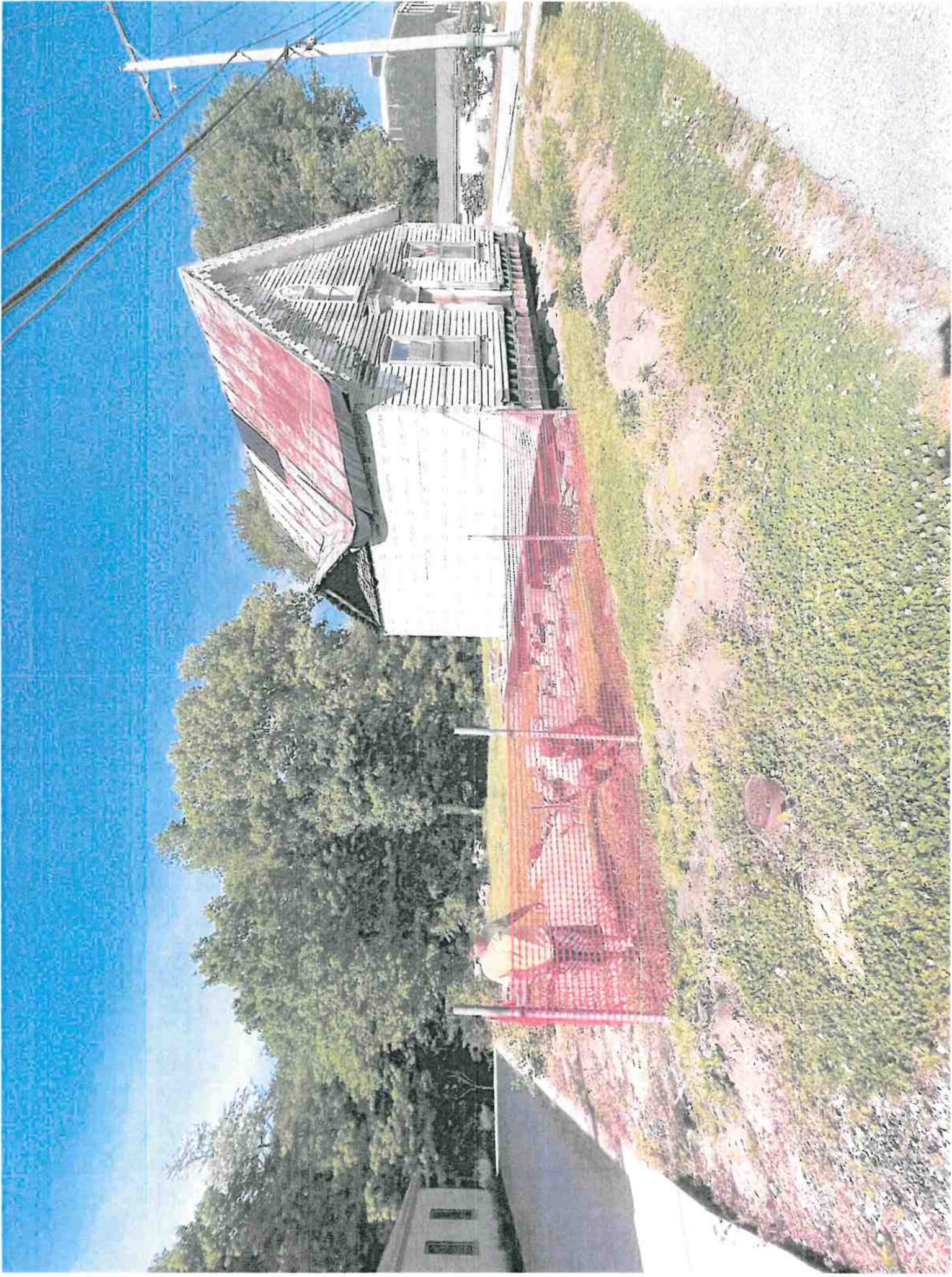
June 2025 - Replace clapboard siding with textured LP siding

The project is expected to be completed within the 12-month grant timeframe.



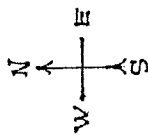
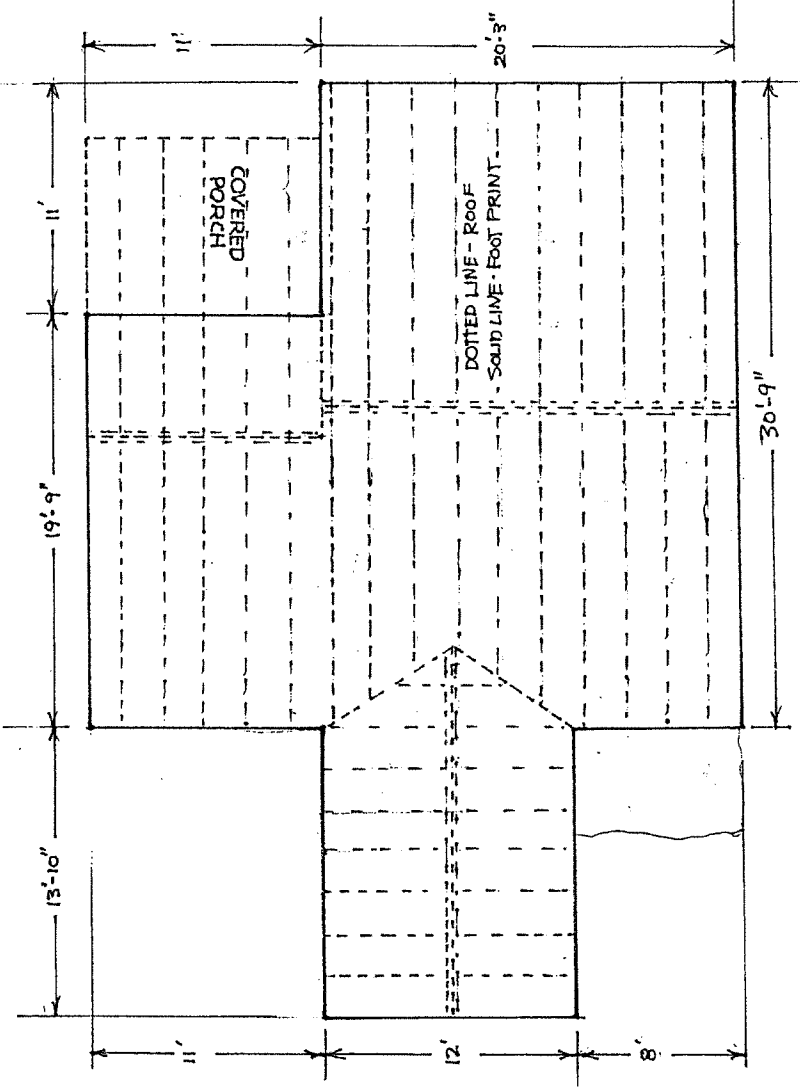




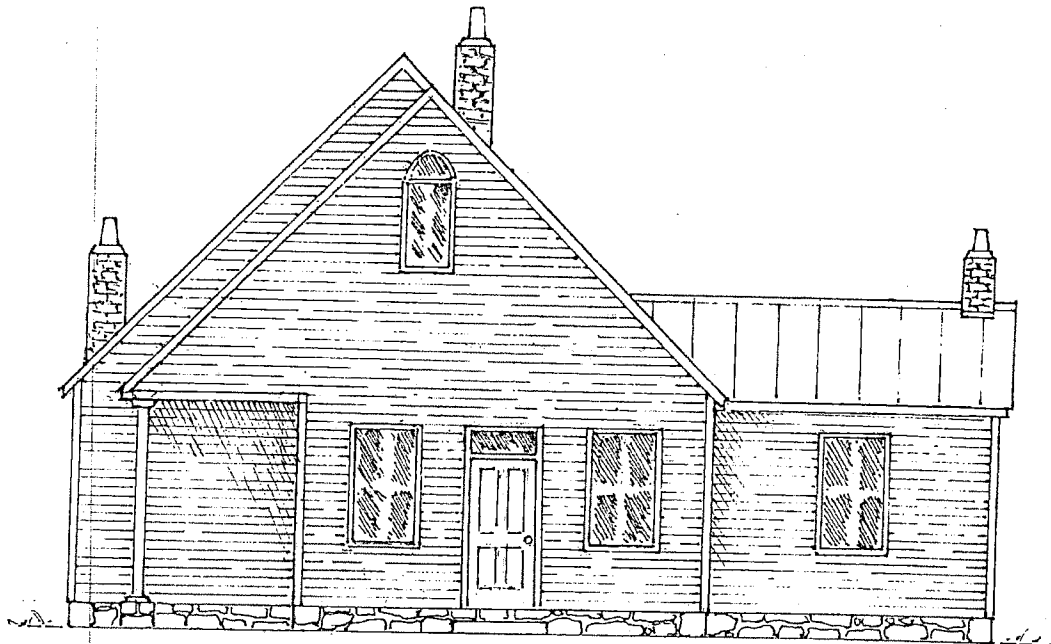




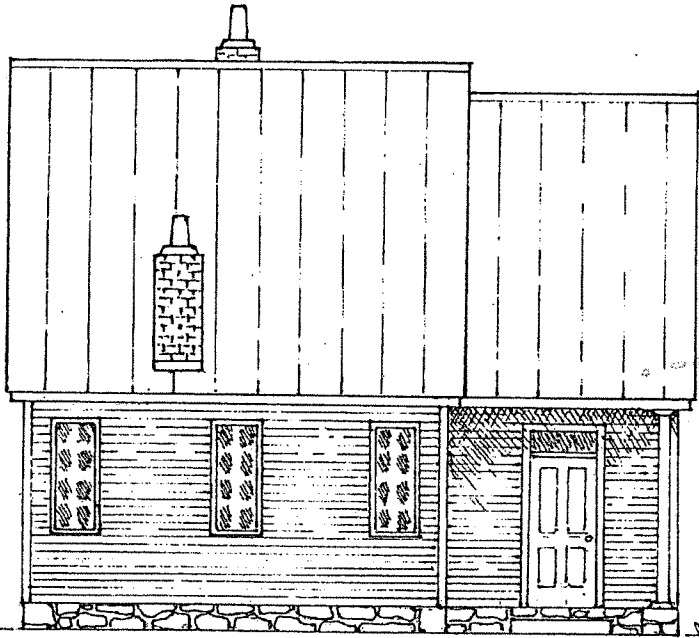
14 9  
11  
50-9



118 W. 5<sup>TH</sup> ST.  
**RESIDENCE**  
SCALE - 1/4" = 1 FT.



NORTH ELEVATION

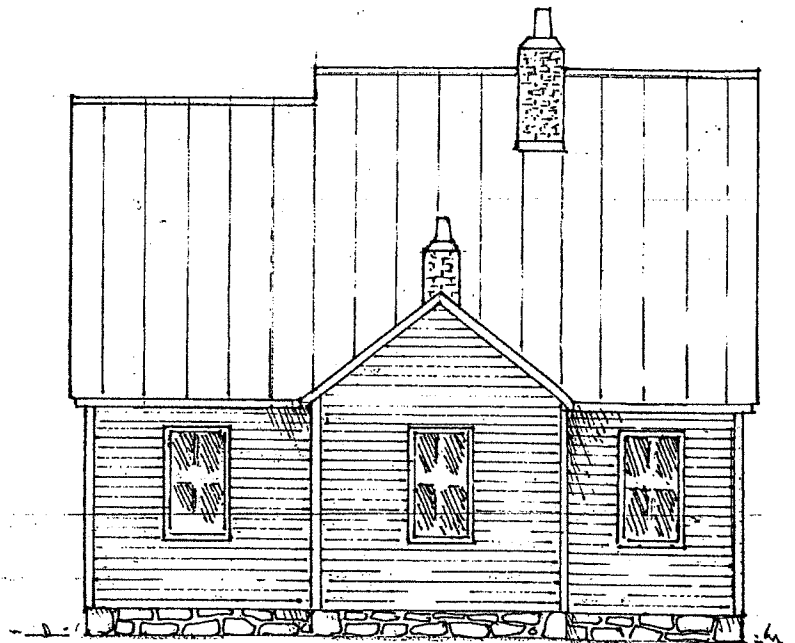


EAST ELEVATION

118 W. 5<sup>TH</sup> ST.

RESIDENCE

SCALE - 1/4 in. = 1 ft.



WEST ELEVATION

**CITY OF MADISON, INDIANA**  
**P.A.C.E. Preservation & Community Enhancement Grant Program**  
**Dave Patterson – 118 West Fifth Street, Madison, IN 47250**

**ATTACHMENT C: DETAILED PROJECT BUDGET WORKSHEET**

<b>Description of Work and/or Material</b>	<b>Task Budget</b>	<b>Grant Request</b>
Stone for foundation from Ohio Stone	\$5,000.00	\$2,500.00
Labor to restore and preserve foundation	\$10,000.00	\$5,000.00
Metal Standing Seam from Halcombs	\$4,030.18	\$2,015.09
Labor to install Metal Standing Seam	\$3,500.00	\$1,750.00
Textured LP Siding from Halcombs	\$16,246.00	\$8,123.00
Labor to install textured LP Siding	\$13,500.00	\$6,750.00
Double-Hung Windows from Halcombs	\$10,603.29	\$5,301.65
Labor to install Double-Hung Windows	\$3,500.00	\$1,750.00
Mahogany Doors from Halcombs	\$8,352.92	\$4,176.46
Labor to install Mahogany Doors	\$1,800.00	\$900.00
Half-Round Gutters from The Gutter Guy	\$3,800.00	\$1,900.00
Labor to install Half-Round Gutters	\$1,500.00	\$750.00
	<hr/>	<hr/>
	<b>\$81,832.39</b>	<b>\$40,916.20</b>



**SOLD BY:**

Haltcomb Supply Versailles  
 2358 S State Road 129  
 Versailles, IN 47042-9112  
 Fax: 812-689-3252

**SOLD TO:**

CREATED DATE	5/31/2024
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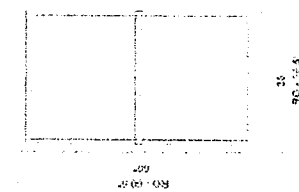
LATEST UPDATE	5/31/2024
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OWNER	STEVE JOHNSON
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**Abbreviated Quote Report - Customer Pricing**

QUOTE NAME: Unassigned Quote      PROJECT NAME: Unassigned Project      QUOTE NUMBER: 5874797      CUSTOMER PO#:      TRADE ID:      DELIVERY NOTES:

**ORDER NOTES:**



Item	Qty	Operation	Location	Unit Price	Ext. Price
100	5	Active/Active	None Assigned	\$1,299.28	\$6,496.40

RO Size: 36 1/2" x 60 1/2"      Unit Size: 36" x 60"

TCLDH3050, Unit, E-Series Double-Hung, Equal Sash, 4 9/16" Frame Depth, Exterior Trim Installation Flange, Dark Bronze 2604 Exterior Frame, Dark Bronze 2604 Exterior Sash/Panel, Pine w/White - Painted Interior Frame, Pine w/White - Painted Interior Sash/Panel, Active/Active, Dual Pane Low-E4 Standard Argon Fill Contemporary Glass Stop Stainless Glass / Grille Spacer, 2 Sash Locks Oil Rubbed Bronze, White/Jamb Liner, Plastic/Jamb Liner Inserts, Dark Bronze, 2604, Full, Aluminum Wrapping: 2" Brickmould 4-Sided Dark Bronze 2604 Factory Applied Exterior Trim

Insect Screen 1: E-Series Double-Hung, TCLDH3050 Full Aluminum Dark Bronze 2604

Unit #	U-Factor	SHGC	ENERGY STAR Clear Opening/Unit #	Width	Height	Area (Sq. Ft)
A1	0.31	0.3	NO	31.6875	23.7500	5.22620

Unit Price Ext. Price  
 \$1,333.13 \$2,066.26

Location  
 None Assigned

Operation  
 Active/Inactive

Item Qty  
 100 2

RC Size: 24 1/2" x 48 1/2"

Unit Size: 24" x 48"

TCLDH2040, Unit, E-Series Double-Hung, Equal Sash, 4 9/16" Frame Depth, Exterior Trim Installation Flange, Dark Bronze  
 204 Exterior Frame, Dark Bronze 2604 Exterior Sash/Panel, Pig: w/White - Painted Interior Frame, Pine w/White - Painted  
 Interior Sash/Panel, Active/Active, Dual Panel Low-E4 Standard Argon Fill Contemporary Glass Stop Stainless Glass / Grille  
 Spacer, 2 Sash Locks Oil Rubbed Bronze, WhiteJamb Liner, PlasticJamb Liner Insert: Dark Bronze, 2604, Full, Aluminum  
 Wrapping: 2" Brickmold 4-Sided Dark Bronze 2604 Factory Applied Exterior Trim

Installation Screen 1: E-Series Double-Hung, TCLDH2040 Full Aluminum Dark Bronze 2604

Unit #	U-Factor	SHGC	Clear Opening/Unit #	Width	Height	Area (Sq. Ft)
A1	0.31	0.3	NO	19.6875	17.500	2.42680

Unit Price Ext. Price  
 \$2,140.63 \$2,040.63

Location  
 None Assigned

Operation  
 Active/Inactive/Active

Item Qty  
 100 1

RC Size: 73" x 36 1/2"

Unit Size: 72 1/2" x 36"

Mull: Factory Mull, Andersen Ribbon Mull 1/2 Inch Mull Material  
 TCLDH3030-2, Unit, E-Series Double-Hung, Equal Sash, 4 9/16" Frame Depth, Exterior Trim Installation Flange, Dark Bronze  
 204 Exterior Frame, Dark Bronze 2604 Exterior Sash/Panel, Pig: w/White - Painted Interior Frame, Pine w/White - Painted  
 Interior Sash/Panel, Active/Active, Dual Panel Low-E4 Standard Argon Fill Contemporary Glass Stop Stainless Glass / Grille  
 Spacer, 2 Sash Locks Oil Rubbed Bronze, WhiteJamb Liner, PlasticJamb Liner Insert: Dark Bronze, 2604, Full, Aluminum  
 Wrapping: 2" Brickmold 4-Sided Dark Bronze 2604 Factory Applied Exterior Trim

Installation Screen 1: E-Series Double-Hung, TCLDH3030 Full Aluminum Dark Bronze 2604

Unit #	U-Factor	SHGC	Clear Opening/Unit #	Width	Height	Area (Sq. Ft)
A1	0.31	0.3	NO	31.6875	11.500	2.58560
B1	0.31	0.3		31.6875	11.500	2.58560



Cincinnati  
 1360 Harrison Brookville Road  
 West Harrison, Indiana 47060-9668  
 Phone: 859-341-5500  
 Fax: 859-341-4115

Office Address

Delivery Address  
 HALCOMB HOME CENTER INC  
 STORE# 3977  
 2353 S STATE ROAD 123  
 VERSAILLES, IN, 47042-9112

Customer 571999

Customer Name DO IT BEST CORP

Job HALCOMB HOME CENTER INC

**Expiration Date: 06/30/2024**

Special Instructions	Notes

Line	Product Code	Description	Qty/Footage
1		***FRAME SIZE 37-1/2 x 95-3/8***	
2	zz_EDUS_142654	RH 3-0 x 6-8, I/S, DBL BORE, 6 PANEL RAISED MAHOGANY 4-9/16" FS Jamb, BRZ Adj Sill, w/ Sill Cover, BRZ W/S, STD US10B Oil Rubbed Brz With Transom Applied: 12" Continuous trsm, 1Lt Low-E Trsm, FS 120 PM	2 ea
3	zz_EDUS_142659	RH 3-0 x 8-0, I/S, DBL BORE, 6 PANEL MAHOGANY 4-9/16" FS Jamb, BRZ Adj Sill, w/ Sill Cover, BRZ W/S, STD US10B Oil Rubbed Brz With Transom Applied: 12" Continuous trsm, 1Lt Low-E Trsm, FS ***NO AVAILABLE OPTIONS***	1 ea
4		***FRAME SIZE 37-1/2 x 111-3/8***	

**HALCOMB HOME CENTER**  
**2358 SOUTH STATE RD. 129**  
**PO BOX 790**  
**VERSAILLES, IN 47042**  
**PHONE: (812) 689-6060**

PRICE NO 1

\*\*STORE HOURS WEEKDAYS 7:30AM-5:00PM\*\*  
 \*\*\*SAT. 7:30-NOON\*\*\*

EST NO 890102	JOB NO	Purchase Order MAD	Reference	Terms 5.00%/10TH N/15TH	Clerk STEVE	Date 5/31/24
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**Sold To:**  
 PATTERSON'S NURSERY, INC  
 2940 S OLD MICHIGAN RD.  
 HOLTON IN 47023

**Ship To:**

EXP. DATE: 6/ 1/24      DOC# 80  
 TERM#569      \*\*\*\*\*  
 \* ESTIMATE  
 SLSPR: 12 STEVE JOHNSON      \*\*\*\*\*  
 TAX : 005 AGRICULTURE      EST. 00

NOTE: SEE 1800

LN#	SHIPPED	ORDERED	UM	SKU	DESCRIPTION	SUGG	UNITS	PRICE/PER	EXT
1		1	RL	SS6	SILL SEALER 6" X 50 FT ROLL	6.69	1	6.69 /RL	
2		2	EA	2614T	2 X 6-14 #1 TREATED YP MCA	11.06	2	11.06 /EA	
3		1	EA	2612T	2 X 6-12 #1 TREATED YP MCA	9.56	1	9.56 /EA	
4		11	EA	21212	2 X 12- 12 #1 YELLOW PINE	18.36	11	18.36 /EA	20
5		1	EA	21212	2 X 12- 12 #1 YELLOW PINE	18.36	1	18.36 /EA	
6		2	EA	21214	2 X 12- 14 #1 YELLOW PINE	20.37	2	20.37 /EA	
7		8	PC	34SWTG	4X8 3/4 STRUCTUREWOOD T&G	26.90	8	26.90 /PC	21
8		30	EA	1710	2 X 4- 10 #1 YELLOW PINE	4.23	30	4.23 /EA	20
9		22	EA	2812	2 X 8- 12 #1 YELLOW PINE	10.74	22	10.74 /EA	21
10					THIS LIST OF MATERIAL IS AN				
11					ESTIMATE ONLY DUE TO DIFFERENT				
12					BUILDING TECHNIQUES HALCOMB HOME				
13					CENTER CAN NOT GUARANTEE				
14					ACCURACY OF THE ESTIMATE. THIS				
15					ESTIMATE SHOULD BE CHECKED FOR				
16					ACCURACY BY THE PURCHASER BEFORE				
17					ORDERING.				

TAXABLE 0.  
 NON-TAXABLE 963.  
 SUBTOTAL 963.

\*\* ESTIMATE \*\* ESTIMATE \*\* ESTIMATE \*\* ESTIMATE \*\*  
 (DAVE PATTERSON )

TAX AMOUNT 0.  
 TOTAL AMOUNT 963.

X

Received By

**HALCOMB HOME CENTER**  
**2358 SOUTH STATE RD. 129**  
**PO BOX 790**  
**VERSAILLES, IN 47042**  
**PHONE: (812) 689-6060**

INVOICE NO 1

\*\*STORE HOURS WEEKDAYS 7:30AM-5:00PM\*\*  
 \*\*\*SAT. 7:30-NOON\*\*\*

ORDER NO 890102	POD NO	PURCHASE ORDER KAD	REFERENCE	ADDRESS 5.008/10TH N/15TH	CLIENT STEVE	DATE 5/31/24	TIME 2:05
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**Sold To:**  
 PATTERSON'S NURSERY, INC  
 2940 S OLD MICHIGAN RD.  
 HOLTON IN 47023  
 (812) 321 1200

**Ship To:**

EXP. DATE: 6/ 1/24  
 TERM#569  
 SLSPR: 12 STEVE JOHNSON  
 TAX : 000 AGRICULTURE  
 DOC# 800991  
 \* ESTIMATE \*  
 EST. 000001

LN#	SHIPPED	ORDERED	UM	UNIT	DESCRIPTION	SUGG	UNITS	PRICE/UNIT	EXTENSION
1		48	EA	12SW	4X8 1/2 STRUCTUREWOOD SQ EDGE	19.96	48	19.96 /EA	958.08
2		2	EA	HOUSEWRAP10	WHITE 10'X100' PRIME WRAP	98.49	2	98.49 /EA	196.98
3		48	PC	58SW	4X8 5/8 STRUCTUREWOOD SQ EDGE	22.89	48	22.89 /PC	1,098.72
4		3	RL	SYNFLT	REX SYNTHETIC FELT (10SQ)	178.40	3	178.40 /RL	535.20
5		1530	EA	SOSS	SPECIAL ORDER SHEET SIDINGS	3.15	1530	3.15 /EA	4,819.50
6					6" SMART SIDING				
7		28	EA	SOMT	SPECIAL ORDER MOULDING & TRIM	24.00	28	24.00 /EA	672.00
8									
11		1	EA	SOL	SPL. LUMBER	750.00	1	750.00 /EA	750.00
12					PAINT				
13		500	EA	SORP	SPECIAL ORDER ROOFING PRODUCTS	7.82	500	7.82 /EA	3,910.00
14					STANDING SEAM METAL				
15		6	EA	SOMT	SPECIAL ORDER MOULDING & TRIM	21.59	6	21.59 /EA	129.54
16					RIDGE CAPS				
17		3	EA	SOMT	SPECIAL ORDER MOULDING & TRIM	40.06	3	40.06 /EA	120.18
18									
19		4	EA	SOMT	SPECIAL ORDER MOULDING & TRIM	30.29	4	30.29 /EA	121.16
20					16' OUTSIDE CORNERS				
21		2	EA	SOMT	SPECIAL ORDER MOULDING & TRIM	23.12	2	23.12 /EA	46.24
22					12' OUTSIDE CORNERS				
23		2	EA	SOED	SPECIAL ORDER EXTERIOR DOOR	2655.08	2	2655.08 /EA	5,310.16
24					3-0 X 6-8 MAHOGANY DOORS WITH				
25					TRANSOMS				
26		1	EA	SOED	SPECIAL ORDER EXTERIOR DOOR	3033.70	1	3033.70 /EA	3,033.70
27					3-0 X 8-0 MAHOGANY DOOR WITH				
28					TRANSOM				
29		5	EA	SOWAND	ANDERSEN	1299.28	5	1299.28 /EA	6,496.40
30					**THIS ITEM IS NOT RETURNABLE**				
31					3 X 5 ANDERSEN E SERIES				
32		2	EA	SOWAND	ANDERSEN	1033.13	2	1033.13 /EA	2,066.26
33					**THIS ITEM IS NOT RETURNABLE**				
34					3 X 4 ANDERSEN E SERIES				
35		1	EA	SOWAND	ANDERSEN	2040.63	1	2040.63 /EA	2,040.63
36					**THIS ITEM IS NOT RETURNABLE**				
37					3 X 3 ANDERSEN E SERIES TWIN				

CONT'D



**HALCOMB HOME CENTER**  
**2358 SOUTH STATE RD. 129**  
**PO BOX 790**  
**VERSAILLES, IN 47042**  
**PHONE: (812) 689-6060**

PRICE NO 2

\*\*STORE HOURS WEEKDAYS 7:30AM-5:00PM\*\*

\*\*\*SAT. 7:30-NOON\*\*\*

Cust No 890102	Job No	Purchase Order MAD	Reference	Terms 5.00%/10TH N/15TH	Clerk STEVE	Date 5/31/24	TI 2:0
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**Sold To:**  
 PATTERSON'S NURSERY, INC  
 2940 S OLD MICHIGAN RD.  
 HOLTON IN 47023  
 (812) 321 1200

**Ship To:**

EXP. DATE: 6/ 1/24      DOC# 80098  
 TERM#569      \*\*\*\*\*  
 \* ESTIMATE \*  
 \*\*\*\*\*  
 SLSPR: 12 STEVE JOHNSON  
 TAX : 000 AGRICULTURE      EST. 000981

LN#	SHIPPED	ORDERED	UM	SKU	DESCRIPTION	SUGG	UNITS	PRICE/PER	EXTENS
38					THIS LIST OF MATERIAL IS AN ESTIMATE ONLY DUE TO DIFFERENT BUILDING TECHNIQUES HALCOMB HOME CENTER CAN NOT GUARANTEE ACCURACY OF THE ESTIMATE. THIS ESTIMATE SHOULD BE CHECKED FOR ACCURACY BY THE PURCHASER BEFORE ORDERING.				
39									
40									
41									
42									
43									
44									
45									
46									
47									

\*\* ESTIMATE \*\* ESTIMATE \*\* ESTIMATE \*\* ESTIMATE \*\*  
 (DAVE PATTERSON )

TAXABLE	0.00
NON-TAXABLE	32304.75
<b>SUBTOTAL</b>	<b>32304.75</b>
TAX AMOUNT	0.00
<b>TOTAL AMOUNT</b>	<b>32304.75</b>

X  
 Received By \_\_\_\_\_

# POLICY DECLARATIONS

American Modern Property and Casualty Insurance Company

**Dwelling Basic**

**Policy Change**



## Premium Summary

Dwelling #1:	\$1,085.00
118 W 5TH ST MADISON IN 47250-3352	
Policy Coverages	\$0.00
Additional Costs	\$0.00
<b>Total Policy Premium</b>	<b>\$1,085.00</b>

Note: a minimum earned premium of \$100.00 applies to this policy.

## Policy Discounts

Auto/Home Discount  
Paid in Full Discount  
Claims Free Discount

## Policy Summary

**Policy Number:**  
104-326-213

**Policy Period:**  
04/30/2024 to 04/30/2025 12:01 A.M. Standard Time

**Named Insured(s):**  
BAREROOT PROPERTIES, LLC  
DAVID PATTERSON  
2940 S OLD MICHIGAN RD  
HOLTON IN 47023-9193

**Contracted Agency:**  
ARLINGTON/ROE & CO INC - #556001  
8888 KEYSTONE CROSSING  
STE 900  
INDIANAPOLIS IN 46240

**Your Agent:**  
FRIENDSHIP FINANCIAL SERVICES LLC - #800703  
12933 LENOVEE ST  
DILLSBORO IN 47018

## Additional Named Insureds and Designees

<b>Name:</b> DAVID F PATTERSON	<b>Address:</b> 2940 S OLD MICHIGAN RD, HOLTON IN 47023-9193
<b>Relationship to Primary Named Insured:</b> Other	<b>Description of Interest:</b> ADDITIONAL NAMED INSURED

## Dwelling #1: 118 W 5TH ST, MADISON IN 47250-3352

<b>Occupancy:</b> Vacant	<b>Residence Type:</b> 1 Family Residence	<b>Construction Type:</b> Frame	<b>Year Built:</b> 1900	<b>Protection Class Code:</b> 4	<b>Territory:</b> 1
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## Coverage Detail

Coverage	Limit / Description	Premium
Dwelling (Fire & Extended Coverage)		\$694.00
Limit	100,000	
Loss Settlement	Actual Cash Value	
Roof Loss Settlement Option	Actual Cash Value	
All Other Peril Deductible	5,000	
Other Structures	10,000	Included
Loss Settlement	Actual Cash Value	
Roof Loss Settlement Option	Actual Cash Value	
Premises Liability	1,000,000	\$261.00
Medical Payments	5,000 Per person/25,000 Per occurrence	\$25.00

## Dwelling Basic Policy Declaration

American Modern Property and Casualty Insurance Company

Policy Period: 04/30/2024 - 04/30/2025

Policy Number: 104-326-213

Policy Type: Dwelling Basic



Property Manager Premises Liability Extension		Included
Builder's Risk Renovation and/or New Construction		\$35.00
Vandalism or Malicious Mischief		\$70.00
Deductible	500	
Fire Department Service Charge	500	Included
Mold Exclusion - Premises Liability		Included
<b>Important Information</b>		
This dwelling does not have coverage for the peril of flood.		
This dwelling does not have coverage for the peril of earthquake.		
	<b>Premium</b>	<b>\$1,085.00</b>

### Your Policy Documents

Your policy consists of this Policy Declaration and the documents in the following list. Please keep these together.

#### **Policy Level Forms (Forms that apply to all Dwelling)**

DW-CW-G-0001(01-15) - Condemnation Endorsement

DB-IN-A-0001(05-20) - Special Provisions - Indiana

IL-CW-G-0001(01-15) - Signature Endorsement

DB-CW-P-0001(01-15) - Dwelling Property - Basic Form

DW-IN-X-0004(08-18) - Criminal Acts Exclusion - Indiana

#### **Forms that apply to Dwelling #1: 118 W 5TH ST, MADISON IN 47250-3352**

IP-CW-C-0004(01-15) - Reinstatement of Limit

DY-CW-X-0002(01-15) - Premises Liability Fungi, Wet or Dry Rot, or Bacteria Exclusion

DB-CW-C-0009(01-15) - Builders Risk Renovation and/or New Construction Coverage

DY-CW-C-0001(01-16) - Premises Liability Endorsement

DY-CW-X-0003(01-15) - Premises Liability Swimming Pool Slide and Diving Board Exclusion

DB-CW-C-0002(01-16) - Permitted Vacancy or Seasonal Usage Clause

DY-CW-C-0005(01-16) - Property Manager - Premises Liability

DY-CW-X-0001(01-16) - Premises Liability Lead Paint Liability Exclusion

### **Policy Maintenance Information**

It's easy to manage your policy online 24/7. You can make payments, file claims, view policy documents, and more. Go to [amig.com](http://amig.com) to create an account or log in today!

## Dwelling Basic Policy Declaration

American Modern Property and Casualty Insurance Company

Policy Period: 04/30/2024 - 04/30/2025

Policy Number: 104-326-213

Policy Type: Dwelling Basic



**PLEASE REVIEW THE INFORMATION CONTAINED IN THIS POLICY.  
IF ANY INFORMATION IS INCORRECT, PLEASE CONTACT:**

FRIENDSHIP FINANCIAL SERVICES LLC  
(812) 667-5101

**Report a Claim: 1-800-375-2075**

American Modern Insurance Group

Mailing address  
PO Box 5323  
Cincinnati, OH 45201-5323

Main Administrative Office  
7000 Midland Blvd.  
Amelia, OH 45102-2607

A handwritten signature in cursive script that reads "Edward J. Woodhouse".

I hereby certify that this is a true  
and exact copy of the original.

By: Deborah B. Payne  
Jefferson County Land/Title

## WARRANTY DEED

Parcel Number: 39-08-35-334-041.000-007

Property Address: 118 W Fifth St, Madison, IN 47250

THIS INDENTURE WITNESSETH, that

DAVID F. PATTERSON Grantor(s), of Jefferson County, in the State of Indiana, for and in consideration of the sum of One and no/100 Dollar (\$1.00) and other good and valuable consideration, the receipt whereof is hereby acknowledged,

CONVEY(S) AND WARRANT(S) TO

BAREROOT PROPERTIES, LLC, AN INDIANA LIMITED LIABILITY COMPANY, Grantee(s), of Jefferson County, in the State of Indiana, the following described Real Estate in Jefferson County, in the State of Indiana, to-wit:

92 feet and 6 inches off of the entire east end of Lots Numbered 21 and 22, 25 and 26 in Block "D" in Sering & Leonard's Addition North to the City of Madison; fronting 92 feet and 6 inches on the North side of Fifth Street, and being and intended to be the same real estate which was conveyed to said Michael S. Cavanaugh and Ada Cavanaugh, husband and wife, by James E. Crozier and wife, by Deed made February 24, 1920 and recorded in Deed Record 90, Page 488.

EXCEPTION: Commencing at the Southeast Corner of said Lot Number 26 at the intersection of the Northerly Line of Fifth Street with the Westerly Line of a 12 foot wide Alley; thence along said Northerly Line North  $75^{\circ}45'53''$  West, 78.50 feet to a Mag Spike set being the POINT OF BEGINNING; thence continuing along said Northerly Line, North  $14^{\circ}14'07''$  East, 105.00 feet to a Point on the Northerly Line of said Lot Number 21; thence along said Northerly Line South  $75^{\circ}45'53''$  East, 14.00 feet to a point; thence leaving said Northerly Line South  $14^{\circ}14'07''$  West, 105.00 feet (passing through a 5/8" Rebar set at 30.00 feet) to the POINT OF BEGINNING. Containing 0.034 acres, more or less, and subject to all legal rights-of-way and easements.

Subject to all easements and rights-of-way of record.

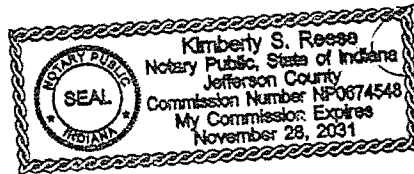
Being and intended to be same real estate conveyed to Grantor by Limited Warranty Deed dated April 30, 2024 and recorded 2<sup>nd</sup> day of May, 2024 as Instrument #2024-01525 in the Office of the Recorder of Jefferson County, Indiana.



STATE OF INDIANA, JEFFERSON COUNTY SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 8<sup>th</sup> day of May, 2024 came David F. Patterson and acknowledged the execution of the foregoing instrument.

Witness my hand and official seal.



*Kimberly S. Reese*  
Notary Public  
Residing in Jefferson County, IN

This Instrument Prepared By: Anthony J. Castor, Attorney at Law  
I.D. No. 3161-39  
320 Walnut Street  
Madison, IN 47250

I affirm, under the penalties for perjury that I have taken reasonable care to redact each Social Security number in this document, unless required by law. Name: Anthony J. Castor

Tax Billing Address: 2940 S Old Michigan Rd, Madison, IN 47250

Grantee(s) Address: 2940 S Old Michigan Rd, Madison, IN 47250



# Unsafe Structure Determination

**Issued to:** Pond David  
716 MAIN ST  
Madison, IN 47250-3352

**Date Issued:** March 26, 2024

Project Location: 118 W FIFTH ST , MADISON IN 47250

Structure Type: Primary Residential Structure

There was an inspection completed at the property on 118 W FIFTH ST . The intent of this letter is to state that I, Bryan Shaw (City of Madison Building Inspector) made a site visit to said property on , to verify the location, external, and Internal condition of the building in disrepair.

Based upon my site visit and the observations made, there are

Unsafe Building Chapter 154.03:

- (A) Whenever any door, aisle, passageway, stairway or other means of exit is not of sufficient width or size or is not so arranged as to provide safe and adequate means of exit in case of fire or panic.
- (B) Whenever the stress in any materials, member or portion thereof, due to all dead and live loads, is more than one and one half times the working stress or stresses allowed in the Building Code for new buildings of similar structure, purpose or location.
- (C) Whenever any portion thereof has been damaged by fire, earthquake, wind, flood or by any other cause, to such an extent that the structural strength or stability thereof is materially less than it was before such catastrophe and is less than the minimum requirements of the Building Code for new buildings of similar structure, purpose or location.
- (D) Whenever any portion or member or appurtenance thereof likely to fail, or to become detached or dislodged, or to collapse and hereby injure persons or damage property.
- (E) Whenever any portion of a building, or any member, appurtenance or ornamentation on the exterior thereof is not of sufficient strength or stability, or is not so anchored, attached or fastened in place so as to be capable of resisting a wind pressure of one half of that specified in the Building Code for new buildings of similar structure, purpose or location without exceeding the work stresses permitted in the Building Code for such buildings.
- (F) Whenever any portion thereof has wracked, warped, buckled or settled to such an extent that walls or other structural portions have materially less resistance to winds or earthquakes than is required in the case of similar new construction.
- (G) Whenever the building or structure, or any portion thereof, because of dilapidation, deterioration, or decay; faulty construction; the removal, movement, or instability of any portion of the ground necessary for the purpose of supporting such building; the deterioration, decay, or inadequacy of its foundation; or any other cause, is likely to partially or completely collapse.
- (H) Whenever, for any reason, the building or structure, or portion thereof, is manifestly unsafe for the purpose for which it is being used.



Unsafe Structure Determination

Issued to: Pond David                      Date Issued: March 26, 2024  
716 MAIN ST  
Madison, IN 47250-3352

- (I) Whenever the exterior walls or other vertical structural members list, lean or buckle to such an extent that a plumb line passing through the center of gravity does not fall inside the middle one third of the base.
- (J) Whenever the building or structure, exclusive of the foundation, shows 33 percent or more damage or deterioration of its supporting member or members, or 50 percent damage or deterioration of its nonsupporting members, enclosing or outside walls or coverings.
- (K) Whenever the building or structure has been so damaged by fire, wind, earthquake or flood, or has become so dilapidated or deteriorated as to become an attractive nuisance to children; or freely accessible to persons for the purpose of committing unlawful acts.
- (L) Whenever any building or structure has been constructed, exists or is maintained in violation of any specific requirement or prohibition applicable to such building or structure provided by the building regulations of this city, or of any law or ordinance of this state or city relating to the condition, location or structure of buildings.
- (M) Whenever any building or structure which, whether or not erected in accordance with all applicable laws and ordinances, has in any nonsupporting part, member or portion less than 50 percent, or in any fire-resisting qualities of characteristics, or weather-resisting qualities or characteristics required by law in the case of a newly constructed building of like area, height and occupancy in the same location.
- (N) Whenever a building or structure, used or intended to be used for dwelling purposes, because of inadequate maintenance, dilapidation, decay, damage, faulty construction or arrangement, inadequate light, air or sanitation facilities, or otherwise, is determined by the city to be unsanitary, unfit for human habitation or in such a condition that is likely to cause sickness or disease.
- (O) Whenever any building or structure, because of obsolescence, dilapidated condition, deterioration, damage, inadequate exits, lack of sufficient fire resistant construction, faulty electric wiring, gas connections or heating apparatus, or other cause, is determined by the city to be a fire hazard.
- (P) Whenever any portion of a building or structure remains on a site after the demolition or destruction of the building or structure or whenever any building or structure is abandoned for a period in excess of six months so as to constitute such building or portion thereof an attractive nuisance or hazard to the public.

As such, the City of Madison Office of Planning, Preservation, and Design requests you contact this office within five (5) business days to set up a date and time to discuss plans for remediation. Our goal is to work with all property owners toward keeping our community safe for all residents. If we are unable to come to a resolution, I will be forced to request action before the City of Madison Board of Public Works and Safety. We hope that we have your cooperation in this matter. Please contact me at 812-265-8324.

Issued By:  
Bryan Shaw, Building Inspector  
City of Madison, Indiana



Application for P.A.C.E.  
Preservation & Community  
Enhancement Grant Program

Application Fee: \$10.00

Purpose: Application is hereby made to request funding from the PACE Program. This application must be filed prior to work beginning on a property located within the City of Madison. This application does not replace the need for approval from the HDBR for properties located downtown.

**APPLICANT INFORMATION**

Date: 5/31/2024  
 Property Owner Name: Matt & Daniel Chandler  
 Mailing Street Address: 111 E 2nd St  
 City: Madison State: IN Zip: 47250  
 Phone (Preferred): 8125841376 Phone (Alternate): \_\_\_\_\_  
 Email: matt@thechandlerhotel.com

**PROJECT INFORMATION**

Street Address: 301 Jefferson St. Madison, IN 47250  
 Total Cost of Project (include all costs to complete the entire project): 1.5 Million  
 Estimated Date of Completion of Work: Quarter 1 2025  
 Hilltop  Downtown

**GRANT INFORMATION**

Rehabilitation (Downtown) Grant  Curb Appeal (Hilltop) Grant  Dilapidated Structures Grant  Dangerous Buildings Grant

Amount of Grant Requested (can be obtained from the office): 25,000

**A PACE grant application must include the following documents:**

- Complete application
- Photographs of existing conditions of Property
- Project Plans (required if altering footprint or openings)
- Copies of Construction Quotes for the project
- Certificate of Appropriateness (COA) (If applicable)
- Proof of Property Insurance
- Proof of Ownership (Deed)
- Certificate of Incorporation (if organization/business)
- Unsafe Letter (Required for Dangerous Structures Grant)



**DESCRIPTION OF THE PROJECT**

Please describe the project and the property's current condition.

We are seeking funding for the rehabilitation of two buildings to create Vintage Lanes, a unique entertainment destination in our community. The project includes:

Building Rehabilitation: Modern updates such as HVAC, plumbing, electric, and insulation to transform the uninhabitable space into a functional and inviting venue.

Interior Improvements: Two levels of duckpin bowling with 4 lanes on each floor, along with two bathrooms for guest convenience.

COA Application Items: Updates like an updated overhead door, new double entry door for private access, new private entry double doors for apartment egress, and window restoration/repair to maintain architectural integrity.

Exterior Enhancements: Tuckpointing, painting, and repairing the exterior of the building to enhance its appearance and longevity.

Rooftop Terrace: Transforming the rooftop into a new terrace for guests to enjoy.

Additional pages are attached.

**DETAILED PROJECT SCHEDULE**

Show how the project will be completed within a 12-month time period. If the project will take longer than 12 months, please explain.

Month 1: Planning and Permitting

Gather permits and approvals.  
Begin procurement of materials.  
Month 2-3: Electrical, HVAC, and Plumbing (Draw 1)

Complete half of the electrical, HVAC, and plumbing work.  
Start on rooftop patio and cellar  
Month 4-5: Interior Construction (Draw 2)

Begin bowling alley construction.  
Work on elevator and stairwell.  
Month 6-7: Bar and Sprinkler System (Draw 3)

Focus on bar construction and installation.  
Install sprinkler system.  
Month 8-9: Apartment Construction (Draw 4)

Work on apartment area, including electrical, HVAC, and plumbing.  
Month 10-11: Exterior and Final Touches (Draw 5)

Complete rooftop patio, cellar, and exterior work.  
Finalize interior finishes and furnishings.  
Month 12: Testing, Inspections, and Opening Preparation

Conduct testing and inspections.  
Prepare for grand opening and marketing activities.

Additional pages are attached.



**DETAILED PROJECT BUDGET WORKSHEET**

List all major tasks necessary to complete the proposed Project, the total budget, and the matching grant amount requested. The P.A.C.E. Grant Program funds materials and labor. Please separate materials from labor. The Detailed Project Budget Worksheet does not replace the need to include copies of construction quotes from a registered contractor. If a copy of quote from a registered contractor is not provided, the application will be deemed incomplete.

Task #	Description of Work and/or Material Please Reference Appropriate Quote (Must be attached)	Total Task Budget	Amount of Grant Funds (50% max)
	SAMPLE: Lumber and supplies per sales ad from Lowe's	\$1,076	\$538.00
1	Jacob Binzer - new electric install	17,500	
2	Painting/Labor/Leo Torrel	9,500	
3	<i>ve</i> <del>Industrial</del> Window Repair / Leo Torrel	5,500	
4	Storefront Repair/Brian Martin	12,500	
5	Structural Repair/Framing/Brian Martin	7,500	
6			
7			
8			
9			
10			
	Totals		

Additional pages are attached.

**DETAILED REBUILDING PLAN (ONLY FOR DANGEROUS BUILDINGS GRANT APPLICATIONS)**

Please explain what you will be rebuilding after the building is demolished. You must include a timeline for the rebuilding plan.

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Additional pages are attached.



**Applicant must read and initial the following:**

MC I understand that the grant funds must be used only for the project described in this application. The work must be completed within twelve (12) months of the date that the grant is awarded. If a project is not completed the recipient(s) may request an extension to the City of Madison Board of Works and Safety.

MC I understand that I must receive all required permits from the Office of Planning, Preservation, and Design and from the State of Indiana prior to beginning work on my project or I will forfeit any awarded grant monies.

MC I understand that a failure to complete any project may result in the City of Madison placing a lien on the property in order to recover grant monies in the amount of monies received by Recipient(s).

MC I understand that if any plans to the project change or if the contractor changes, I must notify the Director of Planning prior to the project construction continuing.

MC I understand that all property taxes must be current and that there cannot be any current tax liens against the property or current litigation between the City of Madison and the applicant. I understand that if one of these is not true, my application will not be considered for funds.

MC I understand that if I am applying for a Dilapidated Structures Grant, I am required to complete the full renovation exterior of the building including paint.

MC I understand that if I am applying for a Dangerous Buildings Grant, infill construction must be completed within 2 years after approved funding. Final disbursement of funds will be withheld until such time that construction is completed.

**I certify that I have read the P.A.C.E. Program Guidelines and that all required documents are included in my final application packet.**

\_\_\_\_\_  
**Applicant(s) Signature**

\_\_\_\_\_  
**Date**

Documentation Review (Completed by Planning Office)

- Complete application
- Photographs of Property
- Project Plans (If required)
- Copies of Construction Quotes
- COA application filed (If applicable)
- Proof of Property Insurance
- Proof of Ownership (Deed)
- Certificate of Incorporation (If required)
- Unsafe Letter (If required)

Staff Notes



# 301 JEFFERSON ST. WINE BAR



Two floors of duckpin bowling (warehouse side)  
along with a rooftop terrace.



Two story apartment.

Storefront will be  
converted to wine bar.







221 E 2ND ST.  
BOWLING





VINTAGE  
LANES





# MADISON

*Indiana*  
Planning, Preservation and Design

Historic District Board of Review

## CERTIFICATE OF APPROPRIATENESS

### HDBR Members:

Mike Pittman  
Happy Smith  
Sandy Palmer  
Carol Ann Rogers  
Ken McWilliams  
Michael Zink

The Historic District Board of Review of Madison, Indiana or Historic District Board of Review Staff has Approved the following work:

- 
- Replace garage door with half-glass garage door on south side.&nbsp;
- Replace dilapidated doors on south side.&nbsp;
- Remove two windows and replace with entry doors on the south side.&nbsp;
- Add one entry door on the south side.&nbsp;
- Add railing along roof line.

Conditions:

Findings of Fact:

- 
- 9.0 DOORS AND ENTRANCES
- 18.0 WINDOWS
- 26.0 NEW CONSTRUCTION – ADDITIONS

### City of Madison HDBR Staff:

Nicole M Schell, AICP  
Director of Planning  
Phone: 812-265-8324  
Email: nschell@madison-in.gov

The issuance of this certificate does NOT in any manner release the recipient from the responsibility of complying with the requirements of the zoning ordinances, building codes, safety codes, ADA or other requirements of the City of Madison, the County of Jefferson, the State of Indiana, or the United States Federal Government.

This certificate is good for one year from the date of issuance is effective from the date entered herein. Plans are on file and open for public inspection at the Office of Planning, Preservation, and Design, 101 W. Main St. during normal business hours.

**Applicant:** Matthew Chandler

**Location:** 301 JEFFERSON ST , Madison, IN 47250

**Application No.:** HDCA-24-3

**Certificate Issued:** February 26, 2024

**Issued By:** Mike Pittman, Chair

**Ordinance 151.23 – Expiration of Permit – A Certificate of Appropriateness permit shall be deemed to authorize the particular changes reflected on the permit. Such permit will expire if, for any reason, the change has not commenced within one (1) year.**

**NEW**

Renewal of Number

**Mount Vernon Fire Insurance Company**  
1190 Devon Park Drive, Wayne, Pennsylvania 19087  
A Member Company of United States Liability Insurance Group

Direct Bill Policy

POLICY DECLARATIONS

**No. CP 2673648**

NAMED INSURED AND ADDRESS:

**MATTHEW CHANDLER AND DANIEL SELTER**  
**PO BOX 63**  
**MADISON, IN 47250**

POLICY PERIOD: (MO. DAY YR.) From: 09/26/2023 To: 09/26/2024

12:01 A.M. STANDARD TIME AT YOUR  
MAILING ADDRESS SHOWN ABOVE

FORM OF BUSINESS: Individual

BUSINESS DESCRIPTION: Vacant Building without Renovation

**IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.**

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED.  
THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

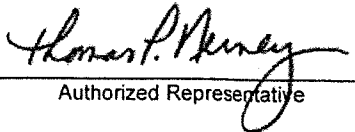
	PREMIUM
Commercial Liability Coverage Part	\$350.00
Commercial Property Coverage Part	\$3,216.00
<b>TOTAL:</b>	<b>\$3,566.00</b>

Coverage Form(s) and Endorsement(s) made a part of this policy at time of issue

**See Endorsement EOD (1/95)**

Agent: **VOLDICO, LLC (2684)**  
420 S. Buckeye St  
Osgood, IN 47037

Issued: **09/21/2023 4:21 PM**

By:   
Authorized Representative

UPD (08-07) THESE DECLARATIONS TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE PART DECLARATIONS, COVERAGE PART COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

## EXTENSION OF DECLARATIONS

Policy No. CP 2673648

Effective Date: 09/26/2023

12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS

### FORMS AND ENDORSEMENTS

**The following forms apply to multiple coverage parts**

<i>Endt#</i>	<i>Revised</i>	<i>Description of Endorsements</i>
2110IN	10/19	Indiana Service of Suit
CG2173	01/15	Exclusion Of Certified Acts Of Terrorism
CP0450	07/88	Vacancy Permit
IL0017	11/98	Common Policy Conditions
IL0021	09/08	Nuclear Energy Liability Exclusion Endorsement
IL0156	09/07	Indiana Changes - Concealment, Misrepresentation Or Fraud
IL0192	07/02	Indiana Changes - Pollution
IL0272	11/21	Indiana Changes - Cancellation and Nonrenewal
IL0935	07/02	Exclusion Of Certain Computer-Related Losses
Jacket	07/19	Policy Jacket
L-395	11/05	Vacant Building Protection Warranty
L-610	11/04	Expanded Definition Of Bodily Injury
LLQ100	07/06	Amendatory Endorsement
LLQ368	08/10	Separation Of Insureds Clarification Endorsement
P-247	12/20	Exclusion of Certified Acts of Terrorism
TRIADN	12/20	Disclosure Notice of Terrorism Insurance Coverage

**The following forms apply to the Commercial Liability coverage part**

<i>Endt#</i>	<i>Revised</i>	<i>Description of Endorsements</i>
CG0001	12/07	Commercial General Liability Coverage Form
CG0068	05/09	Recording And Distribution Of Material Or Information In Violation Of Law Exclusion
CG2018	04/13	Additional Insured-Mortgagee, Assignee or Receiver
CG2104	11/85	Exclusion - Products-Completed Operations Hazard
CG2107	05/14	Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-Related Liability - Limited Bodily Injury Exception Not Included
CG2109	06/15	Exclusion - Unmanned Aircraft
CG2136	03/05	Exclusion - New Entities
CG2139	10/93	Contractual Liability Limitation
CG2144	04/17	Limitation of Coverage to Designated Premises, Project or Operation
CG2147	12/07	Employment-Related Practices Exclusion
IL0117	12/10	Indiana Changes - Workers' Compensation Exclusion
IL0272	11/21	Indiana Changes - Cancellation and Nonrenewal
L 278VAC	12/14	Independent Contractors/Subcontractors Exclusion
L-232s	09/05	Classification Limitation Endorsement
L-500	12/17	Bodily Injury Exclusion - All Employees, Volunteer Workers, Temporary Workers, Casual Laborers, Contractors and Subcontractors
L-532 VAC	12/14	Exclusion - Construction Operations

## EXTENSION OF DECLARATIONS

Policy No. CP 2673648

Effective Date: 09/26/2023

12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS

### FORMS AND ENDORSEMENTS

L-540	11/09	Exclusion - Exterior Work Over 50 Feet
L-599	10/12	Absolute Exclusion for Pollution, Organic Pathogen, Silica, Asbestos and Lead with a Hostile Fire Exception
L-783	10/12	Amendment of Liquor Liability Exclusion
L-819	09/18	Swimming Pool, Hot Tub or Spa Exclusion

**The following forms apply to the Commercial Property coverage part**

<i>Endt#</i>	<i>Revised</i>	<i>Description of Endorsements</i>
CP 101	06/08	Maintenance Of Heat Condition
CP 109	06/09	Functional Building Valuation
CP 141 DEP	04/20	Changes - Actual Cash Value and Depreciation Definition
CP 142	04/14	Protective Devices Or Services Provisions
CP 224	10/21	Asbestos Material Exclusion
CP 225	02/11	Exclusion - Lead Contamination
CP 226	02/11	Absolute Pollution Exclusion - Property
CP 227	02/11	Mold, Fungus, Bacteria, Virus Or Organic Pathogen Exclusion
CP 238	04/15	Exclusion -- Loss Or Damage - Copper
CP 245	09/15	Earth Movement Exclusion
CP0010	06/07	Building And Personal Property Coverage Form
CP0090	07/88	Commercial Property Conditions
CP0152	07/96	Indiana Changes - Rights Of Recovery
CP1030	06/07	Causes Of Loss - Special Form
CP1032	08/08	Water Exclusion Endorsement
CP1056	06/07	Sprinkler Leakage Exclusion
CP1075	12/20	Cyber Incident Exclusion
IL0272	11/21	Indiana Changes - Cancellation and Nonrenewal
Notice-Cyber Incident Excl-CY	10/20	Cyber Incident Exclusion Endorsement Advisory Notice to Policyholders
P-247	12/20	Exclusion of Certified Acts of Terrorism

**COMMERCIAL PROPERTY COVERAGE PART DECLARATIONS**

**Policy No. CP 2673648**

Effective Date: 09/26/2023  
12:01 STANDARD TIME

**DESCRIPTION OF PREMISES**

<i>Prem</i>	<i>Bldg</i>	<i>Location, Construction, Occupancy and Other Information</i>	<i>Territory</i>	<i>Fire Code</i>
1	1	301 Jefferson St, Madison, IN 47250	006	1180
Description: <b>Vacant Building without Renovation</b>				
Covered Causes of Loss: <b>Special Excluding Sprinkler Leakage</b>			Protection Class	4
Construction: <b>Joisted Masonry</b>		Number of Stories: 3	Square Footage:	5520
Special Deductible: <b>None</b>		Special Deductible Type:		

**COVERAGES PROVIDED - INSURANCE AT THE DESCRIBED PREMISES APPLIES ONLY FOR COVERAGES FOR WHICH A LIMIT OF INSURANCE IS SHOWN**

<i>Prem</i>	<i>Bldg</i>	<i>Coverage</i>	<i>Limits of Insurance</i>	<i>Deductible</i>	<i>Coinsurance % or Monthly Indemnity</i>	<i>+ Valuation</i>	<i>Premium</i>
1	1	Building	\$400,000	\$1,000	80%	FBV	\$3,216
<b>MINIMUM PREMIUM FOR PROPERTY COVERAGE PART:</b>							<b>\$250</b>
<b>TOTAL PREMIUM FOR PROPERTY COVERAGE PART:</b>							<b>\$3,216</b>
MP - minimum premium							
+ Valuation: ACV - Actual Cash Value; RC - Replacement Cost; RC/ACV - Replacement Cost/ACV Roof							
FBV - Functional Building Value; AA - Agreed Amount; ALS - Actual Loss Sustained							

**LOSS PAYABLE(S): NONE**

Coverage Form(s)/Part(s) and Endorsement(s) made a part of this policy at time of issue:

**See Endorsement EOD (01/95)**

THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND THE POLICY PERIOD.

**COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS**

**Policy No. CP 2673648**

Effective Date: 09/26/2023  
12:01 STANDARD TIME

**LIMITS OF INSURANCE**

Each Occurrence Limit	\$1,000,000
Personal & Advertising Injury Limit (Any One Person/Organization)	\$1,000,000
Medical Expense (Any One Person)	\$5,000
Damages To Premises Rented To You (Any One Premises)	\$100,000
Products/Completed Operations Aggregate Limit	Excluded
General Aggregate Limit	\$2,000,000

**LIABILITY DEDUCTIBLE**

\$0

**LOCATIONS OF ALL PREMISES YOU OWN, RENT OR OCCUPY**

<i>Location</i>	<i>Address</i>	<i>Territory</i>
1	301 Jefferson St, Madison, IN 47250	006

**PREMIUM COMPUTATION**

<i>Loc</i>	<i>Classification</i>	<i>Code No.</i>	<i>Premium Basis</i>	<i>Pr/Co</i>	<i>Rate</i>		<i>Advance Premium</i>		
					<i>All Other</i>	<i>Pr/Co</i>	<i>All Other</i>	<i>All Other</i>	
1	Vacant Buildings - not factories - Other than Not-For-Profit	68606	5,520 Per 1,000 Total Area	Excluded	24.192	Excluded	\$350	MP	
1	Additional Insured - Mortgagee, Assignee or Receiver	49950	1 Flat	Excluded	0.000	Excluded	Included		
<b>TOTAL PREMIUM FOR GENERAL LIABILITY COVERAGE PART:</b>							<b>\$350</b>		
(This Premium may be subject to adjustment.)							MP - minimum premium		

Coverage Form(s)/Part(s) and Endorsement(s) made a part of this policy at time of issue:

**See Form EOD (01/95)**

**THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND THE POLICY PERIOD.**



# Jefferson County Assessor's Office

Amanda Creech, Assessor



**This is a no valuable consideration document.**

*(A sales disclosure is not needed when money is not involved with the purchase price.)*

Date of Transfer: April 15, 2024

Parcel Number: Part of Parcel No: 39-13-02-241-004.000-007

Current Owner Name(s): Vintage Lanes, LLC

Transferee Name(s): Vintage Lanes, LLC

Transferee Tax Mailing Address: 111 E 2<sup>nd</sup> Street  
Madison, Indiana 47250

Are you applying for a homestead? (Please check one)

Yes \_\_\_\_\_ No X

If yes, please list the last 5 digits of:

Driver's License # \_\_\_\_\_ and Social Security # \_\_\_\_\_

Driver's License # \_\_\_\_\_ and Social Security # \_\_\_\_\_

*(If this information is not provided, the homestead exemption will not be applied)*

Assessor Stamp

[Empty box for Assessor Stamp]

[Signature]  
Transferee Signature

\_\_\_\_\_  
Assessor's Office Signature

\_\_\_\_\_  
Date

Parcel No. 39-13-02-241-004.000-007

## QUITCLAIM DEED

**THIS INDENTURE WITNESSETH, VINTAGE LANES, LLC, an Indiana Limited Liability Company, (Grantor) of Jefferson County, State of Indiana, RELEASE AND QUITCLAIM to VINTAGE LANES, LLC, an Indiana Limited Liability Company, (Grantee) of Jefferson County, State of Indiana, for the sum of One and No/100 Dollars (\$1.00) and other valuable consideration, the receipt and sufficiency which is hereby acknowledged, the following described real estate in Jefferson County, State of Indiana:**

Being part of Lot 95, Old Town City of Madison, Jefferson County, and being part of the lands conveyed to Vintage Lanes, LLC (INST #202303620), records of the Recorder's Office of Jefferson County, Indiana and being more particularly described as follows:

Beginning at a building corner marking the Southeast corner of said Lot 95; thence with the North right of way line of Second Street S89°29'55" W for a distance of 38.52 feet to a point; thence with a newly created line and with a common wall N00°15'00" W for a distance of 25.11 feet to a point; thence with the lands Central Holdings, KKC (INST# 202103245) N89°34'26" E for a distance of 38.47 feet to the west right of way of Jefferson Street; thence along said right of way S00°32'16" E for a distance of 25.06 feet to the point of beginning.

Containing 0.022 acres more or less and being subject to all easements and legal rights-of-way of record. (Legal is from a Survey prepared by McAllister Land Consulting, LLC, certified by Eric M. Lang LS #21000192 on January 25, 2024, Project 24 Jeffco.vintage, recorded March 13, 2024 as Instrument No. 202400909, in the Recorder's Office of Jefferson County, Indiana.)

Being and intended to be the same property conveyed to Vintage Lanes LLC, an Indiana Limited Liability Company, by a Warranty Deed from Kimberly A. Kirchner N/K/A Kimberly A. Carlson, dated October 2, 2023 and recorded October 5, 2023, as Instrument No. 202303620, in the Recorder's Office of Jefferson County, Indiana.

**NO TITLE SEARCH WAS PERFORMED IN CONJUNCTION WITH THE PREPARATION OF THIS DEED.**

**THIS PARCEL IS BEING DIVIDED INTO TWO SEPARATE PARCELS. IT IS THE INTENTION OF THE GRANTEE FOR THIS PARCEL TO RETAIN PARCEL NUMBER 39-13-02-241-004.000-007 AND ADDRESS 301 JEFFERSON STREET, MADISON, INDIANA.**

Subject to any and all easements, agreements and restrictions of Record. The address of such real estate is commonly known as 301 Jefferson Street, Madison, Indiana 47250

The undersigned officials of Vintage Lanes, LLC, certify that they have full authority to execute this deed and have been authorized to execute such Deed on behalf of Vintage Lanes, LLC.

IN WITNESS WHEREOF, the said Grantor has hereunto affixed their name and seal this 5 day of April, 2024.

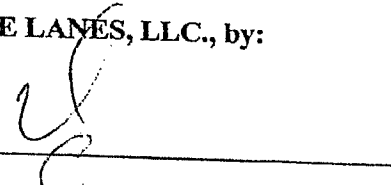
Grantor: \_\_\_\_\_ (SEAL)

Grantor: \_\_\_\_\_ (SEAL)

VINTAGE LANES, LLC., by:

VINTAGE LANES, LLC., by:

Signature 

Signature 

Printed DANIEL CHANDLER,  
Manager

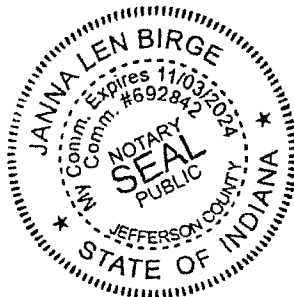
Printed MATT CHANDLER, Manager

STATE OF INDIANA

COUNTY OF JEFFERSON

Before me, a Notary Public in and for said County and State, personally appeared Daniel Chandler and Matt Chandler, Managing Members of Vintage Lanes, LLC., who acknowledged the execution of the foregoing Quitclaim Deed, and who, having been duly sworn, stated that any representations therein contained are true.

WITNESS my hand and Notarial Seal, this 5 day of April, 2024.



Signature Janna Len Birge  
Printed Janna Len Birge, Notary Public

This instrument prepared by: Devon M. Sharpe, Attorney, Madison, Indiana

Property Address: 301 Jefferson Street, Madison, Indiana 47250  
Address of Grantee: 111 E 2<sup>nd</sup> Street, Madison, Indiana 47250  
Tax Mailing Address: 111 E 2<sup>nd</sup> Street, Madison, Indiana 47250  
Mail Deed to: 111 E 2<sup>nd</sup> Street, Madison, Indiana 47250

*I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law, Devon M. Sharpe.*

APPROVED AND FILED  
DIBGO MORALES  
INDIANA SECRETARY OF STATE  
09/14/2023 03:07 PM

ARTICLES OF ORGANIZATION

Formed pursuant to the provisions of the Indiana Code.

ARTICLE I - NAME AND PRINCIPAL OFFICE ADDRESS

BUSINESS ID 202309141725007  
BUSINESS TYPE Domestic Limited Liability Company  
BUSINESS NAME VINTAGE LANES LLC  
PRINCIPAL OFFICE ADDRESS 301 Jefferson St. Madison, IN, 47250, USA

ARTICLE II - REGISTERED OFFICE AND ADDRESS

REGISTERED AGENT TYPE individual  
NAME Matt Chandler  
ADDRESS 111 E 2nd St. Madison, IN, 47250, USA  
SERVICE OF PROCESS EMAIL matt@thechandlerhotel.com

I acknowledge that the Service of Process email provided above is the email address at which electronic service of process may be accepted.

ARTICLE III - PERIOD OF DURATION AND EFFECTIVE DATE

PERIOD OF DURATION Perpetual  
EFFECTIVE DATE 09/14/2023  
EFFECTIVE TIME 02:38PM

ARTICLE IV - GOVERNING PERSON INFORMATION

TITLE Manager  
NAME Daniel Chandler  
ADDRESS 111 E 2nd St. Madison, IN, 47250, USA

TITLE Manager  
NAME Matt Chandler  
ADDRESS 111 E 2nd St. Madison, IN, 47250, USA



Application for P.A.C.E.  
Preservation & Community  
Enhancement Grant Program

Application Fee: \$10.00

Purpose: Application is hereby made to request funding from the PACE Program. This application must be filed prior to work beginning on a property located within the City of Madison. This application does not replace the need for approval from the HDBR for properties located downtown.

**APPLICANT INFORMATION**

Date: 4/15/2024

Property Owner Name: Matt & Daniel Chandler

Mailing Street Address: 111 E 2nd St

City: Madison

State: IN

Zip: 47250

Phone (Preferred): 8125841376

Phone (Alternate): \_\_\_\_\_

Email: matt@thechandlerhotel.com

**PROJECT INFORMATION**

Street Address: 221 E 2nd St. Madison, IN 47250

Total Cost of Project (include all costs to complete the entire project): 1.5 Million

Estimated Date of Completion of Work: Quarter 2 2025

Hilltop

Downtown

**GRANT INFORMATION**

Rehabilitation  
 (Downtown) Grant

Curb Appeal  
 (Hilltop) Grant

Dilapidated  
 Structures Grant

Dangerous  
 Buildings Grant

Amount of Grant Requested (can be obtained from the office): 25,000

**A PACE grant application must include the following documents:**

- Complete application
- Photographs of existing conditions of Property
- Project Plans (required if altering footprint or openings)
- Copies of Construction Quotes for the project
- Certificate of Appropriateness (COA) (If applicable)
- Proof of Property Insurance
- Proof of Ownership (Deed)
- Certificate of Incorporation (if organization/business)
- Unsafe Letter (Required for Dangerous Structures Grant)



**DESCRIPTION OF THE PROJECT**

Please describe the project and the property's current condition.

We are seeking funding for the rehabilitation of two buildings to create Vintage Lanes, a unique entertainment destination in our community. The project includes:

Building Rehabilitation: Modern updates such as HVAC, plumbing, electric, and insulation to transform the uninhabitable space into a functional and inviting venue.

Interior Improvements: Two levels of duckpin bowling with 4 lanes on each floor, along with two bathrooms for guest convenience.

COA Application Items: Updates like an updated overhead door, new double entry door for private access, new private entry double doors for apartment egress, and window restoration/repair to maintain architectural integrity.

Exterior Enhancements: Tuckpointing, painting, and repairing the exterior of the building to enhance its appearance and longevity.

Rooftop Terrace: Transforming the rooftop into a new terrace for guests to enjoy.

Additional pages are attached.

**DETAILED PROJECT SCHEDULE**

Show how the project will be completed within a 12-month time period. If the project will take longer than 12 months, please explain.

Month 1: Planning and Permitting

Gather permits and approvals.  
Begin procurement of materials.  
Month 2-3: Electrical, HVAC, and Plumbing (Draw 1)

Complete half of the electrical, HVAC, and plumbing work.  
Start on rooftop patio and cellar.  
Month 4-5: Interior Construction (Draw 2)

Begin bowling alley construction.  
Work on elevator and stairwell.  
Month 6-7: Bar and Sprinkler System (Draw 3)

Focus on bar construction and installation.  
Install sprinkler system.  
Month 8-9: Apartment Construction (Draw 4)

Work on apartment area, including electrical, HVAC, and plumbing.  
Month 10-11: Exterior and Final Touches (Draw 5)

Complete rooftop patio, cellar, and exterior work.  
Finalize interior finishes and furnishings.  
Month 12: Testing, Inspections, and Opening Preparation

Conduct testing and inspections.  
Prepare for grand opening and marketing activities.

Additional pages are attached.



**DETAILED PROJECT BUDGET WORKSHEET**

List all major tasks necessary to complete the proposed Project, the total budget, and the matching grant amount requested. The P.A.C.E. Grant Program funds materials and labor. Please separate materials from labor. The Detailed Project Budget Worksheet does not replace the need to include copies of construction quotes from a registered contractor. If a copy of quote from a registered contractor is not provided, the application will be deemed incomplete.

Task #	Description of Work and/or Material Please Reference Appropriate Quote (Must be attached)	Total Task Budget	Amount of Grant Funds (50% max)
	SAMPLE: Lumber and supplies per sales ad from Lowe's	\$1,076	\$538.00
1	Electric/Jacob Binzer	15,500	
2	Exterior Paint/Labor/Leo Torrel	5,500	
3	Structural/Framing/Brian Martin	25,500	
4	Industrial Window Repair/Leo Torrel	2,500	
5	Exterior garage door/Labor/Brian Martin	7,500	
6			
7			
8			
9			
10			
	Totals		

Additional pages are attached.

**DETAILED REBUILDING PLAN (ONLY FOR DANGEROUS BUILDINGS GRANT APPLICATIONS)**

Please explain what you will be rebuilding after the building is demolished. You must include a timeline for the rebuilding plan.

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Additional pages are attached.





**Applicant must read and initial the following:**

\_\_\_\_ I understand that the grant funds must be used only for the project described in this application. The work must be completed within twelve (12) months of the date that the grant is awarded. If a project is not completed the recipient(s) may request an extension to the City of Madison Board of Works and Safety.

\_\_\_\_ I understand that I must receive all required permits from the Office of Planning, Preservation, and Design and from the State of Indiana prior to beginning work on my project or I will forfeit any awarded grant monies.

\_\_\_\_ I understand that a failure to complete any project may result in the City of Madison placing a lien on the property in order to recover grant monies in the amount of monies received by Recipient(s).

\_\_\_\_ I understand that if any plans to the project change or if the contractor changes, I must notify the Director of Planning prior to the project construction continuing.

\_\_\_\_ I understand that all property taxes must be current and that there cannot be any current tax liens against the property or current litigation between the City of Madison and the applicant. I understand that if one of these is not true, my application will not be considered for funds.

\_\_\_\_ I understand that if I am applying for a Dilapidated Structures Grant, I am required to complete the full renovation exterior of the building including paint.

\_\_\_\_ I understand that if I am applying for a Dangerous Buildings Grant, infill construction must be completed within 2 years after approved funding. Final disbursement of funds will be withheld until such time that construction is completed.

**I certify that I have read the P.A.C.E. Program Guidelines and that all required documents are included in my final application packet.**

\_\_\_\_\_  
**Applicant(s) Signature**

\_\_\_\_\_  
**Date**

Documentation Review (Completed by Planning Office)

- Complete application
- Photographs of Property
- Project Plans (If required)
- Copies of Construction Quotes
- COA application filed (If applicable)
- Proof of Property Insurance
- Proof of Ownership (Deed)
- Certificate of Incorporation (If required)
- Unsafe Letter (If required)

Staff Notes



# 301 JEFFERSON ST. WINE BAR



Two floors of duckpin bowling (warehouse side)  
along with a rooftop terrace.



Two story apartment.

Storefront will be  
converted to wine bar.





221 E 2ND ST.  
BOWLING

---





VINTAGE  
LANES





# MADISON

Indiana  
Planning, Preservation and Design

Historic District Board of Review

## CERTIFICATE OF APPROPRIATENESS

### HDBR Members:

- Mike Pittman
- Happy Smith
- Sandy Palmer
- Carol Ann Rogers
- Ken McWilliams
- Michael Zink

The Historic District Board of Review of Madison, Indiana or Historic District Board of Review Staff has Approved the following work:

- 
- Replace garage door with half-glass garage door on south side.&nbsp;
- Replace dilapidated doors on south side.&nbsp;
- Remove two windows and replace with entry doors on the south side.&nbsp;
- Add one entry door on the south side.&nbsp;
- Add railing along roof line.

Conditions:

Findings of Fact:

- 
- 9.0 DOORS AND ENTRANCES
- 18.0 WINDOWS
- 26.0 NEW CONSTRUCTION – ADDITIONS

### City of Madison HDBR Staff:

Nicole M Schell, AICP  
 Director of Planning  
 Phone: 812-265-8324  
 Email: nschell@madison-in.gov

The issuance of this certificate does NOT in any manner release the recipient from the responsibility of complying with the requirements of the zoning ordinances, building codes, safety codes, ADA or other requirements of the City of Madison, the County of Jefferson, the State of Indiana, or the United States Federal Government.

This certificate is good for one year from the date of issuance is effective from the date entered herein. Plans are on file and open for public inspection at the Office of Planning, Preservation, and Design, 101 W. Main St. during normal business hours.

**Applicant:** Matthew Chandler

**Location:** 301 JEFFERSON ST , Madison, IN 47250

**Application No.:** HDCA-24-3

**Certificate Issued:** February 26, 2024

**Issued By:** Mike Pittman, Chair

**Ordinance 151.23 – Expiration of Permit – A Certificate of Appropriateness permit shall be deemed to authorize the particular changes reflected on the permit. Such permit will expire if, for any reason, the change has not commenced within one (1) year.**

NEW

Renewal of Number

**Mount Vernon Fire Insurance Company**  
1190 Devon Park Drive, Wayne, Pennsylvania 19087  
A Member Company of United States Liability Insurance Group

Direct Bill Policy

POLICY DECLARATIONS

No. CP 2673648

NAMED INSURED AND ADDRESS:

**MATTHEW CHANDLER AND DANIEL SELTER**  
PO BOX 63  
MADISON, IN 47250

POLICY PERIOD: (MO. DAY YR.) From: 09/26/2023 To: 09/26/2024

12:01 A.M. STANDARD TIME AT YOUR  
MAILING ADDRESS SHOWN ABOVE

FORM OF BUSINESS: Individual

BUSINESS DESCRIPTION: Vacant Building without Renovation

**IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.**

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED.  
THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

	PREMIUM
Commercial Liability Coverage Part	\$350.00
Commercial Property Coverage Part	\$3,216.00
<b>TOTAL:</b>	<b>\$3,566.00</b>

Coverage Form(s) and Endorsement(s) made a part of this policy at time of issue

**See Endorsement EOD (1/95)**

Agent: VOLDICO, LLC (2684)  
420 S. Buckeye St  
Osgood, IN 47037

Issued: 09/21/2023 4:21 PM

By:   
Authorized Representative

UPD (08-07) THESE DECLARATIONS TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE PART DECLARATIONS, COVERAGE PART COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

## EXTENSION OF DECLARATIONS

Policy No. CP 2673648

Effective Date: 09/26/2023

12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS

### FORMS AND ENDORSEMENTS

**The following forms apply to multiple coverage parts**

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CG2173	01/15	Exclusion Of Certified Acts Of Terrorism
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IL0017	11/98	Common Policy Conditions
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CG2109	06/15	Exclusion - Unmanned Aircraft
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CG2144	04/17	Limitation of Coverage to Designated Premises, Project or Operation
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IL0272	11/21	Indiana Changes - Cancellation and Nonrenewal
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## EXTENSION OF DECLARATIONS

Policy No. CP 2673648

Effective Date: 09/26/2023

12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS

### FORMS AND ENDORSEMENTS

L-540	11/09	Exclusion - Exterior Work Over 50 Feet
L-599	10/12	Absolute Exclusion for Pollution, Organic Pathogen, Silica, Asbestos and Lead with a Hostile Fire Exception
L-783	10/12	Amendment of Liquor Liability Exclusion
L-819	09/18	Swimming Pool, Hot Tub or Spa Exclusion

**The following forms apply to the Commercial Property coverage part**

<i>Endt#</i>	<i>Revised</i>	<i>Description of Endorsements</i>
CP 101	06/08	Maintenance Of Heat Condition
CP 109	06/09	Functional Building Valuation
CP 141 DEP	04/20	Changes - Actual Cash Value and Depreciation Definition
CP 142	04/14	Protective Devices Or Services Provisions
CP 224	10/21	Asbestos Material Exclusion
CP 225	02/11	Exclusion - Lead Contamination
CP 226	02/11	Absolute Pollution Exclusion - Property
CP 227	02/11	Mold, Fungus, Bacteria, Virus Or Organic Pathogen Exclusion
CP 238	04/15	Exclusion - Loss Or Damage - Copper
CP 245	09/15	Earth Movement Exclusion
CP0010	06/07	Building And Personal Property Coverage Form
CP0090	07/88	Commercial Property Conditions
CP0152	07/96	Indiana Changes - Rights Of Recovery
CP1030	06/07	Causes Of Loss - Special Form
CP1032	08/08	Water Exclusion Endorsement
CP1056	06/07	Sprinkler Leakage Exclusion
CP1075	12/20	Cyber Incident Exclusion
IL0272	11/21	Indiana Changes - Cancellation and Nonrenewal
Notice-Cyber Incident Excl-CY	10/20	Cyber Incident Exclusion Endorsement Advisory Notice to Policyholders
P-247	12/20	Exclusion of Certified Acts of Terrorism



**COMMERCIAL PROPERTY COVERAGE PART DECLARATIONS**

**Policy No. CP 2673648**

Effective Date: 09/26/2023  
12:01 STANDARD TIME

**DESCRIPTION OF PREMISES**

<i>Prem</i>	<i>Bldg</i>	<i>Location, Construction, Occupancy and Other Information</i>	<i>Territory</i>	<i>Fire Code</i>
1	1	301 Jefferson St, Madison, IN 47250	006	1180
Description: <b>Vacant Building without Renovation</b>				
Covered Causes of Loss: <b>Special Excluding Sprinkler Leakage</b>			Protection Class	4
Construction: <b>Joisted Masonry</b>		Number of Stories: 3	Square Footage:	<b>5520</b>
Special Deductible: <b>None</b>		Special Deductible Type:		

**COVERAGES PROVIDED - INSURANCE AT THE DESCRIBED PREMISES APPLIES ONLY FOR COVERAGES FOR WHICH A LIMIT OF INSURANCE IS SHOWN**

<i>Prem</i>	<i>Bldg</i>	<i>Coverage</i>	<i>Limits of Insurance</i>	<i>Deductible</i>	<i>Coinsurance % or Monthly Indemnity</i>	<i>+ Valuation</i>	<i>Premium</i>
1	1	Building	\$400,000	\$1,000	80%	FBV	\$3,216
<b>MINIMUM PREMIUM FOR PROPERTY COVERAGE PART:</b>							<b>\$250</b>
<b>TOTAL PREMIUM FOR PROPERTY COVERAGE PART:</b>							<b>\$3,216</b>
MP - minimum premium							
+ Valuation: ACV - Actual Cash Value; RC - Replacement Cost; RC/ACV - Replacement Cost/ACV Roof							
FBV - Functional Building Value; AA - Agreed Amount; ALS - Actual Loss Sustained							

**LOSS PAYABLE(S): NONE**

Coverage Form(s)/Part(s) and Endorsement(s) made a part of this policy at time of issue:

**See Endorsement EOD (01/95)**

THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND THE POLICY PERIOD.

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**COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS**

**Policy No. CP 2673648**

Effective Date: 09/26/2023  
12:01 STANDARD TIME

**LIMITS OF INSURANCE**

Each Occurrence Limit	\$1,000,000
Personal & Advertising Injury Limit (Any One Person/Organization)	\$1,000,000
Medical Expense (Any One Person)	\$5,000
Damages To Premises Rented To You (Any One Premises)	\$100,000
Products/Completed Operations Aggregate Limit	Excluded
General Aggregate Limit	\$2,000,000

**LIABILITY DEDUCTIBLE**

\$0

**LOCATIONS OF ALL PREMISES YOU OWN, RENT OR OCCUPY**

<i>Location</i>	<i>Address</i>	<i>Territory</i>
1	301 Jefferson St, Madison, IN 47250	006

**PREMIUM COMPUTATION**

<i>Loc</i>	<i>Classification</i>	<i>Code No.</i>	<i>Premium Basis</i>	<i>Rate</i>		<i>Advance Premium</i>	
				<i>Pr/Co</i>	<i>All Other</i>	<i>Pr/Co</i>	<i>All Other</i>
1	Vacant Buildings - not factories - Other than Not-For-Profit	68606	5,520 Per 1,000 Total Area	Excluded	24.192	Excluded	\$350 MP
1	Additional Insured - Mortgagee, Assignee or Receiver	49950	1 Flat	Excluded	0.000	Excluded	Included
<b>TOTAL PREMIUM FOR GENERAL LIABILITY COVERAGE PART:</b>							<b>\$350</b>
(This Premium may be subject to adjustment.) MP - minimum premium							

Coverage Form(s)/Part(s) and Endorsement(s) made a part of this policy at time of issue:

**See Form EOD (01/95)**

THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND THE POLICY PERIOD.

# Jefferson County Assessor's Office

Amanda Creech, Assessor



**This is a no valuable consideration document.**

*(A sales disclosure is not needed when money is not involved with the purchase price.)*

Date of Transfer: April 5, 2024

Parcel Number: Part of Parcel No: 39-13-02-241-004.000-007

Current Owner Name(s): Vintage Lanes, LLC

Transferee Name(s): Vintage Lanes, LLC

Transferee Tax Mailing Address: 111 E 2<sup>nd</sup> Street  
Madison, Indiana 47250

Are you applying for a homestead? (Please check one)  
Yes \_\_\_\_\_ No X

If yes, please list the last 5 digits of:  
Driver's License # \_\_\_\_\_ and Social Security # \_\_\_\_\_  
Driver's License # \_\_\_\_\_ and Social Security # \_\_\_\_\_

*(If this information is not provided, the homestead exemption will not be applied)*

Assessor Stamp

[Empty box for Assessor Stamp]

[Signature]  
Transferee Signature

\_\_\_\_\_  
Assessor's Office Signature Date

Part of Parcel No. 39-13-02-241-004.000-007

## QUITCLAIM DEED

**THIS INDENTURE WITNESSETH, VINTAGE LANES, LLC, an Indiana Limited Liability Company, (Grantors) of Jefferson County, State of Indiana, RELEASE AND QUITCLAIM to VINTAGE LANES, LLC, an Indiana Limited Liability Company, (Grantees) of Jefferson County, State of Indiana, for the sum of One and No/100 Dollars (\$1.00) and other valuable consideration, the receipt and sufficiency which is hereby acknowledged, the following described real estate in Jefferson County, State of Indiana:**

Being part of Lot 95, Old Town City of Madison, Jefferson County, and being part of the lands conveyed to Vintage Lanes, LLC. (INST #202303620), records of the Recorder's Office of Jefferson County, Indiana and being more particularly described as follows:

Beginning at a building corner marking the Southeast corner of said Lot 95; thence with the North right of way line of Second Street S89°29'55" W for a distance of 38.52 feet to the true point of beginning for the herein described tract; thence continuing along said right of way S89°29'55" W for a distance of 57.87 feet to a building corner at the Southwest corner of Vintage Lanes (INST #202303620); thence along the west line of said lands N00°15'00" W for a distance of 25.19 feet to a building corner; thence along the lands of Central Holdings (INST #202103245) N89°34'26" E for a distance of 57.80 feet to a point; thence with a newly created line and being a common wall S00°15'00" E for a distance of 25.11 feet to the point of beginning.

Containing 0.033 acres more or less and being subject to all easements and legal rights-of-way of record. (Legal is from a Survey prepared by McAllister Land Consulting, LLC, certified by Eric M. Lang LS #21000192 on January 25, 2024, Project 24 Jeffco.vintage, recorded March 13, 2024 as Instrument No. 202400909,

in the Recorder's Office of Jefferson County, Indiana.)

Being and intended to be the same property conveyed to Vintage Lanes LLC, an Indiana Limited Liability Company, by a Warranty Deed from Kimberly A. Kirchner N/K/A Kimberly A. Carlson, dated October 2, 2023 and recorded October 5, 2023, as Instrument No. 202303620, in the Recorder's Office of Jefferson County, Indiana.

**NO TITLE SEARCH WAS PERFORMED IN CONJUNCTION WITH THE PREPARATION OF THIS DEED.**

**THIS PARCEL IS BEING DIVIDED INTO TWO SEPARATE PARCELS. IT IS THE INTENTION OF THE GRANTEE FOR THIS PARCEL TO RECEIVE A NEW PARCEL NUMBER AND NEW ADDRESS.**

Subject to any and all easements, agreements and restrictions of Record. The address of such real estate is commonly known as 301 Jefferson Street, Madison, Indiana 47250

The undersigned officials of Vintage Lanes, LLC, certify that they have full authority to execute this deed and have been authorized to execute such Deed on behalf of Vintage Lanes, LLC.

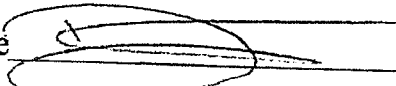
IN WITNESS WHEREOF, the said Grantors have hereunto affixed their names and seal this 5 day of April, 2024.


Grantor: (SEAL)

Grantor: (SEAL)

VINTAGE LANES, LLC., by:

VINTAGE LANES, LLC., by:

Signature 

Signature 

Printed DANIEL CHANDLER,  
Managing Member

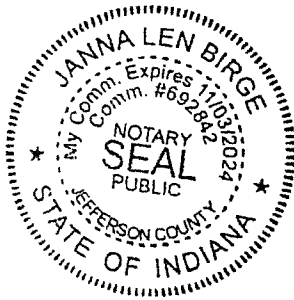
Printed MATT CHANDLER, Managing  
Member

STATE OF INDIANA

COUNTY OF JEFFERSON

Before me, a Notary Public in and for said County and State, personally appeared Daniel Chandler and Matt Chandler, Managing Members of Vintage Lanes, LLC., who acknowledged the execution of the foregoing Quitclaim Deed, and who, having been duly sworn, stated that any representations therein contained are true.

WITNESS my hand and Notarial Seal, this 5 day of April, 2024.



Signature Janna L Birge  
Printed Janna L Birge, Notary Public

This instrument prepared by: Devon M. Sharpe, Attorney, Madison, Indiana

Property Address: 301 Jefferson Street, Madison, Indiana 47250

Address of Grantee: 111 E 2<sup>nd</sup> Street, Madison, Indiana 47250

Tax Mailing Address: 111 E 2<sup>nd</sup> Street, Madison, Indiana 47250

Mail Deed to: 111 E 2<sup>nd</sup> Street, Madison, Indiana 47250

***I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law, Devon M. Sharpe.***

ARTICLES OF ORGANIZATION

Formed pursuant to the provisions of the Indiana Code.

ARTICLE I - NAME AND PRINCIPAL OFFICE ADDRESS

BUSINESS ID	202309141725007
BUSINESS TYPE	Domestic Limited Liability Company
BUSINESS NAME	VINTAGE LANES LLC
PRINCIPAL OFFICE ADDRESS	301 Jefferson St, Madison, IN, 47250, USA

ARTICLE II - REGISTERED OFFICE AND ADDRESS

REGISTERED AGENT TYPE	Individual
NAME	Matt Chandler
ADDRESS	111 E 2nd St, Madison, IN, 47250, USA
SERVICE OF PROCESS EMAIL	matt@thechandlerhotel.com

I acknowledge that the Service of Process email provided above is the email address at which electronic service of process may be accepted.

ARTICLE III - PERIOD OF DURATION AND EFFECTIVE DATE

PERIOD OF DURATION	Perpetual
EFFECTIVE DATE	09/14/2023
EFFECTIVE TIME	02:48PM

ARTICLE IV - GOVERNING PERSON INFORMATION

TITLE	Manager
NAME	Daniel Chandler
ADDRESS	111 E 2nd St, Madison, IN, 47250, USA
TITLE	Manager
NAME	Matt Chandler
ADDRESS	111 E 2nd St, Madison, IN, 47250, USA



Application for P.A.C.E.  
Preservation & Community  
Enhancement Grant Program

Application Fee: \$10.00

Purpose: Application is hereby made to request funding from the PACE Program. This application must be filed prior to work beginning on a property located within the City of Madison. This application does not replace the need for approval from the HDBR for properties located downtown.

**APPLICANT INFORMATION**

Date: \_\_\_\_\_  
 Property Owner Name: Paul A and Paula K Lee  
 Mailing Street Address: 1033 W Main St  
 City: Madison State: IN Zip: 47250  
 Phone (Preferred): 812-701-4472 Phone (Alternate): 812-493-9973  
 Email: vegas47250@gmail.com

**PROJECT INFORMATION**

Street Address: 820 W Main St Madison IN 47250  
 Total Cost of Project (include all costs to complete the entire project): 81,200.38  
 Estimated Date of Completion of Work: 12/31/2024  
 Hilltop  Downtown

**GRANT INFORMATION**

Rehabilitation (Downtown) Grant  Curb Appeal (Hilltop) Grant  Dilapidated Structures Grant  Dangerous Buildings Grant

Amount of Grant Requested (can be obtained from the office): 25,000.00

**A PACE grant application must include the following documents:**

- Complete application
- Photographs of existing conditions of Property
- Project Plans (required if altering footprint or openings)
- Copies of Construction Quotes for the project
- Certificate of Appropriateness (COA) (if applicable)
- Proof of Property Insurance
- Proof of Ownership (Deed)
- Certificate of Incorporation (if organization/business)
- Unsafe Letter (Required for Dangerous Structures Grant)





**DETAILED PROJECT BUDGET WORKSHEET**

List all major tasks necessary to complete the proposed Project, the total budget, and the matching grant amount requested. The P.A.C.E. Grant Program funds materials and labor. Please separate materials from labor. The Detailed Project Budget Worksheet does not replace the need to include copies of construction quotes from a registered contractor. If a copy of quote from a registered contractor is not provided, the application will be deemed incomplete.

Task #	Description of Work and/or Material Please Reference Appropriate Quote (Must be attached)	Total Task Budget	Amount of Grant Funds (50% max)
	SAMPLE: Lumber and supplies per sales ad from Lowe's	\$1,076	\$538.00
1	<b>Foundation/Insulation Materials</b>	6645.00	
2	<b>Lumber</b>	6310.73	
3	Windows & Doors (Glass Unlimited) - Front door questionable	9431.75	
4	<b>Drywall/Plumbing/Electrical</b>	5534.00	
5	LP Smart Siding Materials Only (this will be contracted waiting on bids)	8339.00	
6	<b>Lighting</b>	950.16	
7	<b>Flooring</b>	2709.00	
8	<b>HVAC (Smedly)</b>	13830.41	
9	<b>Bathroom</b>	4271.00	
10	<b>Kitchen (Cabinets, quartz countertop, hardware)</b>	15423.00	
	<b>Totals</b>	78,444.03	

Additional pages are attached.

**DETAILED REBUILDING PLAN (ONLY FOR DANGEROUS BUILDINGS GRANT APPLICATIONS)**

Please explain what you will be rebuilding after the building is demolished. You must include a timeline for the rebuilding plan.

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Additional pages are attached.



**DETAILED PROJECT BUDGET WORKSHEET**

List all major tasks necessary to complete the proposed Project, the total budget, and the matching grant amount requested. The P.A.C.E. Grant Program funds materials and labor. Please separate materials from labor. The Detailed Project Budget Worksheet does not replace the need to include copies of construction quotes from a registered contractor. If a copy of quote from a registered contractor is not provided, the application will be deemed incomplete.

Task #	Description of Work and/or Material Please Reference Appropriate Quote (Must be attached)	Total Task Budget	Amount of Grant Funds (50% max)
	SAMPLE: Lumber and supplies per sales ad from Lowe's	\$1,076	\$538.00
1	Interior and remaining Exterior Doors	2245.08	
2	Appliances	4055.00	
3	Interior Trim (6" pine w/corners)	1456.25	
4			
5			
6			
7			
8			
9			
10			
	Totals	7756.33	

Additional pages are attached.

*Grand Total \$81,200.38*

**DETAILED REBUILDING PLAN (ONLY FOR DANGEROUS BUILDINGS GRANT APPLICATIONS)**

Please explain what you will be rebuilding after the building is demolished. You must include a timeline for the rebuilding plan.

Additional pages are attached.



**DESCRIPTION OF THE PROJECT**

Please describe the project and the property's current condition.

Complete Remodel -

Removal of all rotten and termite eaten floor joist, flooring, walls and ceiling structure. Leaving only the roof and a few floor joist and inner 2x4s.

Removal of aluminum siding and rotten wooden siding and replacing with LP smart siding.

Repairing seal plates and foundation. Replacing floor joists. Adding Concrete piers support down the center to support the floor joist. Replacing corner posts, interior and exterior walls (reframing), and

flooring. Remove hazardous electrical panel and wiring and replace with electric up to code. Replace old plumbing, gas lines and HVAC and bring to code. Rebuilding kitchen and bath with quality

materials. Rebuilding front porch removing aluminum siding and exposing decorative trim which will be reworked. Remove porch rot in ceiling and corner and rebuild. Remove iron pillars and add

wooded columns to go with the decoration trim.

Trim the inside of the house with 6" wooden to get close to what was there with decorative corners.

Trim had to be removed due to rot and termite damage.

Additional pages are attached.

**DETAILED PROJECT SCHEDULE**

Show how the project will be completed within a 12-month time period. If the project will take longer than 12 months, please explain.

Destruction - started 11/2023 - 04/2024

Seal plate/ foundation work - 05/2024 - 06/2024

Floor Joist - 06/2024

Siding and windows - 07/2024

Interior walls/ drywall/ electrical/ plumbing/ HVAC - 08/2024

Trim/ Paint - 09/2024

Kitchen - 10/2024

Bath - 11/2024 - Complete

Additional pages are attached.



**DESCRIPTION OF THE PROJECT**

Please describe the project and the property's current condition.

New windows

- Aluminum clad - replacing rotten windows

New Doors

- Front door may be reworked but it is damaged with rot.

- If replaced it will be replaced with a door that goes with the period.

Front porch light

- historic replica gas or electric

Additional pages are attached.

**DETAILED PROJECT SCHEDULE**

Show how the project will be completed within a 12-month time period. If the project will take longer than 12 months, please explain.

Additional pages are attached.



**Applicant must read and initial the following:**

I understand that the grant funds must be used only for the project described in this application. The work must be completed within twelve (12) months of the date that the grant is awarded. If a project is not completed the recipient(s) may request an extension to the City of Madison Board of Works and Safety.

I understand that I must receive all required permits from the Office of Planning, Preservation, and Design and from the State of Indiana prior to beginning work on my project or I will forfeit any awarded grant monies.

I understand that a failure to complete any project may result in the City of Madison placing a lien on the property in order to recover grant monies in the amount of monies received by Recipient(s).

I understand that if any plans to the project change or if the contractor changes, I must notify the Director of Planning prior to the project construction continuing.

I understand that all property taxes must be current and that there cannot be any current tax liens against the property or current litigation between the City of Madison and the applicant. I understand that if one of these is not true, my application will not be considered for funds.

I understand that if I am applying for a Dilapidated Structures Grant, I am required to complete the full renovation exterior of the building including paint.

I understand that if I am applying for a Dangerous Buildings Grant, infill construction must be completed within 2 years after approved funding. Final disbursement of funds will be withheld until such time that construction is completed.

**I certify that I have read the P.A.C.E. Program Guidelines and that all required documents are included in my final application packet.**

*Paul Hill*  
**Applicant(s) Signature**

6/3/24  
**Date**

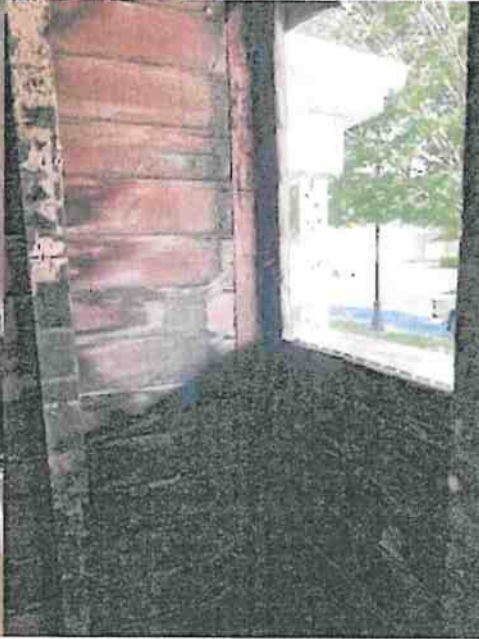
**Documentation Review** (Completed by Planning Office)

- Complete application
- Photographs of Property
- Project Plans (If required)
- Copies of Construction Quotes
- COA application filed (If applicable)
- Proof of Property Insurance
- Proof of Ownership (Deed)
- Certificate of Incorporation (If required)
- Unsafe Letter (If required)

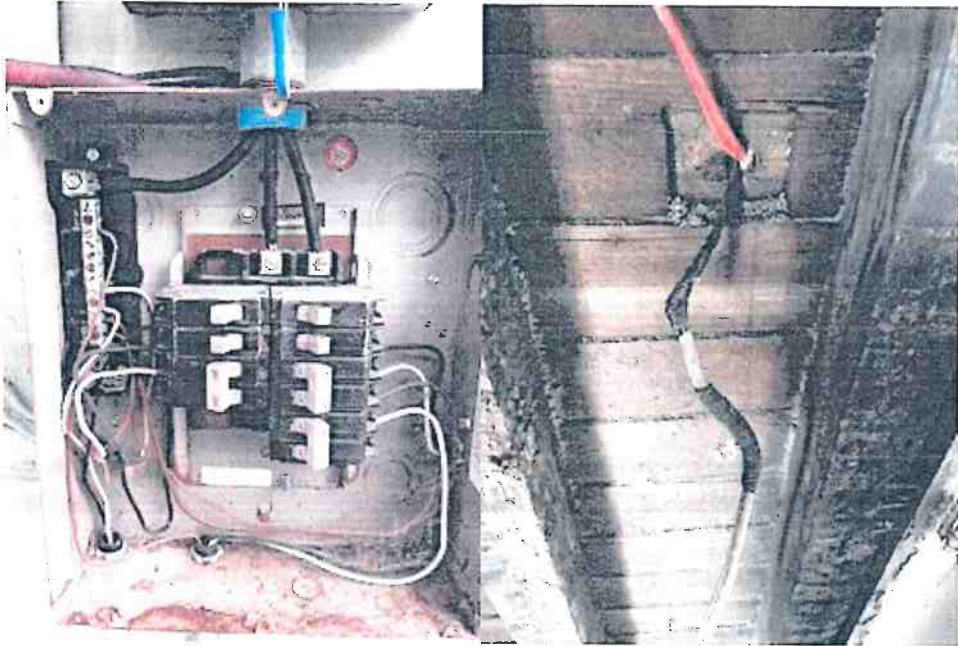
Staff Notes





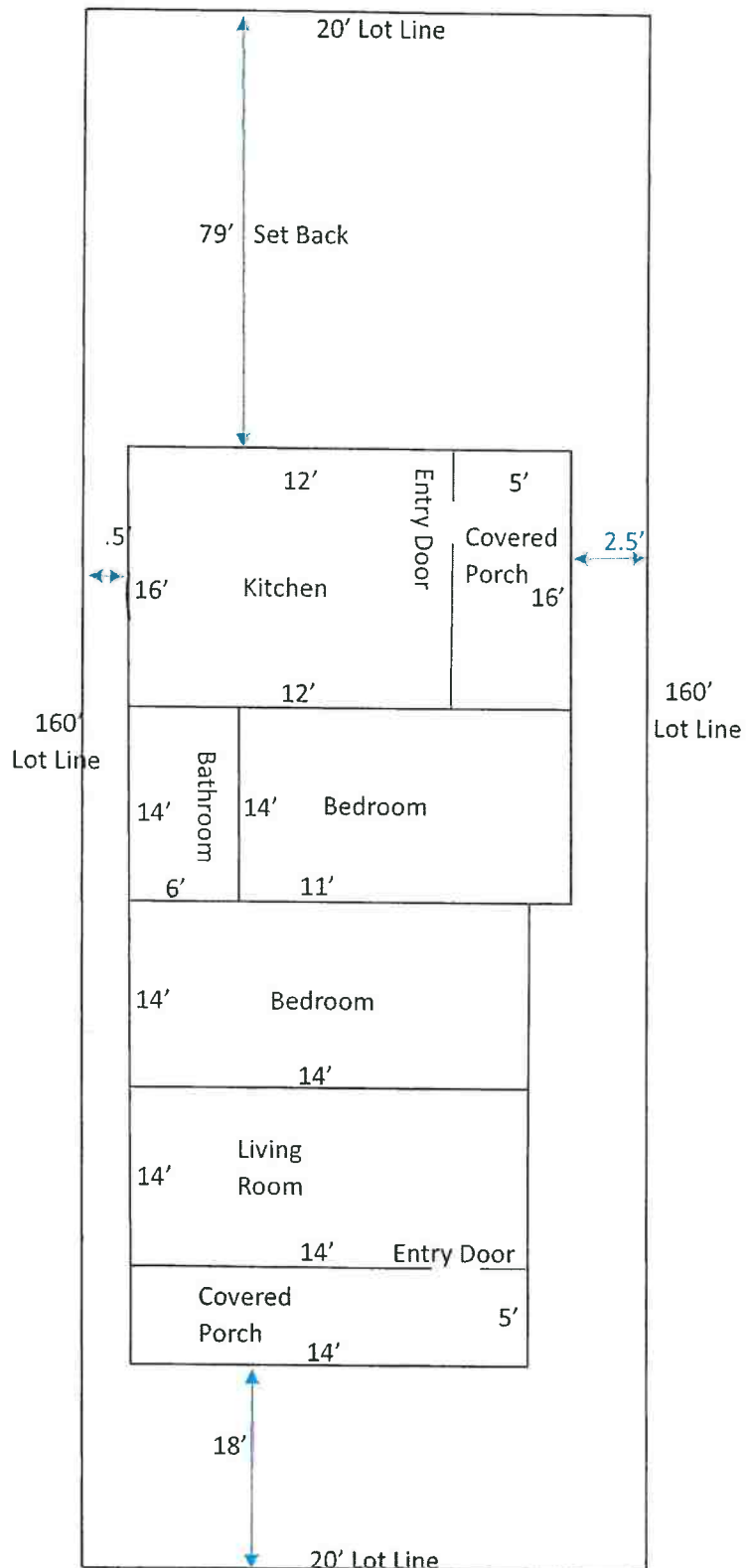






# Floor Plan 820 W Main Street

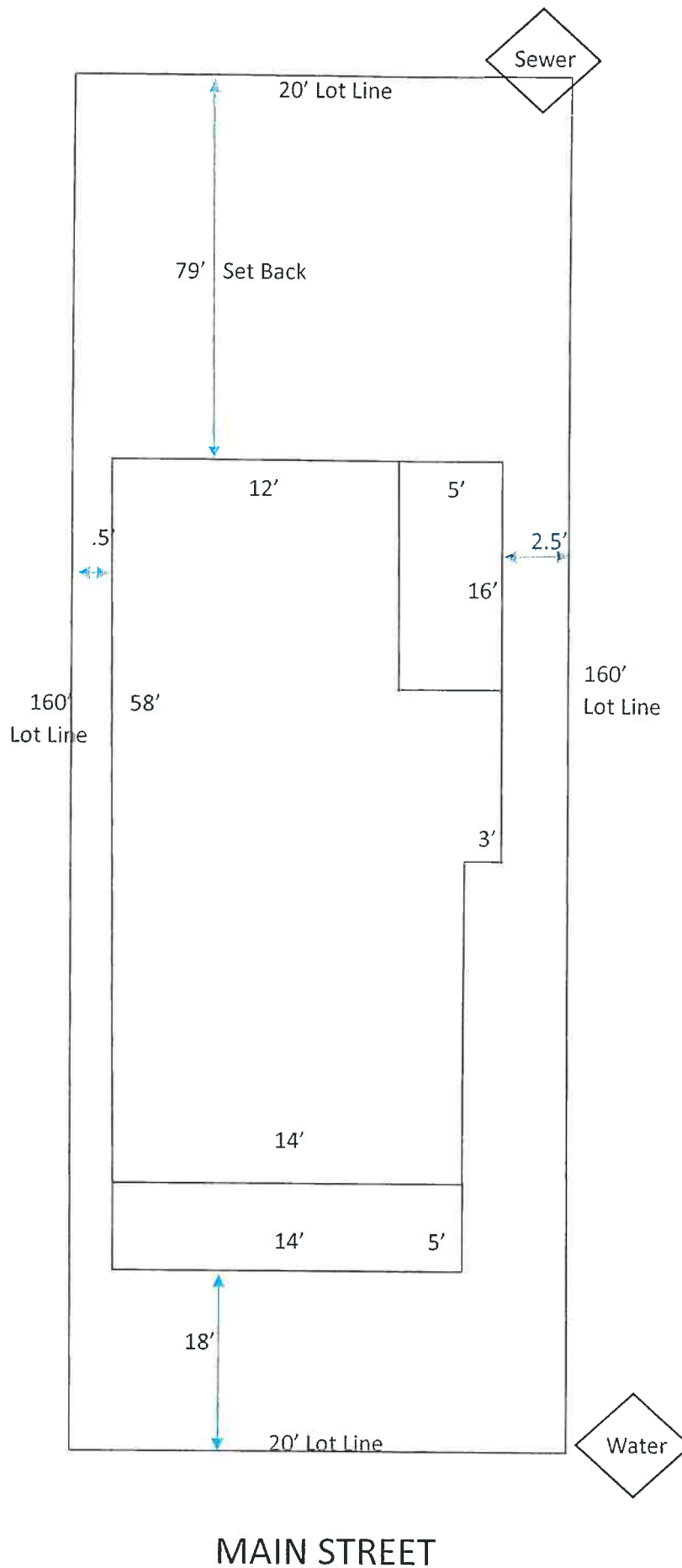
Paul & Paula Lee



MAIN STREET

# Site Plan 820 W Main Street

Paul & Paula Lee



MAIN STREET



**Smedley HVAC & Electric**  
 290 Meadow Ln  
 Madison, IN 47250 US  
 mmiller@smedleyhvac.com  
 www.smedleyhvac.com

**Estimate 1260**

<b>ADDRESS</b> Paula Lee 820 W Main St. Madison, IN 47250	<b>SHIP TO</b> Paula Lee 820 W Main St. Madison, IN 47250	<b>DATE</b> 05/29/2024	<b>TOTAL</b> <b>\$13,830.41</b>
--	--	---------------------------	------------------------------------

DATE		DESCRIPTION	AMOUNT
05/29/2024	<b>Services</b>	Electric option: - Install York 2.0-ton heat pump (17seer) - Install York 2.0-ton air handler - Install York 10kw heat strip - HMH7 install kit - Rectangular duct - Flex ductwork - Line set - Thermostat - Thermostat wire - Duct sealant - Supply registers - Return grills - Pad and risers for heat pump - Disconnect - Wire - Breaker - Surge protector - Condensate drain - Condensate pump - Soldering materials - Labor 10-year parts warranty  *Eligible for Duke Energy rebate \$565 *York rebate \$350  Heat pump: <a href="https://www.yorknow.com/lx-hmh72b241s.html">https://www.yorknow.com/lx-hmh72b241s.html</a> Air handler: <a href="https://www.yorknow.com/lx-jhetb24cbas2n1.html">https://www.yorknow.com/lx-jhetb24cbas2n1.html</a> , 1 @ \$13,830.41	13,830.41

All prices are subject to change with 30 days of notice. Any project with a total of \$5,000 or more will require a down payment of 50% of total.

**TOTAL** **\$13,830.41**

THANK YOU.



**Smedley HVAC & Electric**  
 290 Meadow Ln  
 Madison, IN 47250 US  
 mmiller@smedleyhvac.com  
 www.smedleyhvac.com

**Estimate 1259**

<b>ADDRESS</b>	<b>SHIP TO</b>	<b>DATE</b>	<b>TOTAL</b>
Paula Lee 820 W Main St. Madison, IN 47250	Paula Lee 820 W Main St. Madison, IN 47250	05/29/2024	<b>\$14,978.62</b>

DATE		DESCRIPTION	AMOUNT
05/29/2024	<b>Services</b>	Dual fuel option: - Install York 2.0-ton heat pump (17seer) - Install York 60,000BTU 95% gas furnace - Install York 3.0-ton cased coil - HMM7 install kit - Rectangular duct - Flex ductwork - Line set - Thermostat wire - Duct sealant - Supply registers - Return grills - Pad and risers for heat pump - Disconnect - Wire - Breaker - Surge protector - PVC flue pipe - Gas line - Condensate drain - Condensate pump - Soldering materials - Labor 10-year parts warranty  *Eligible for \$465 York rebate *York rebate \$275  Heat pump: <a href="https://www.yorknow.com/lx-hmh72b241s.html">https://www.yorknow.com/lx-hmh72b241s.html</a> Furnace: <a href="https://www.yorknow.com/lx-tm9e060b12mp12.html">https://www.yorknow.com/lx-tm9e060b12mp12.html</a> Coil: <a href="https://www.yorknow.com/xaib36dban1.html">https://www.yorknow.com/xaib36dban1.html</a> , 1 @ \$14,978.62	14,978.62

All prices are subject to change with 30 days of notice. Any project with a total of \$5,000 or more will require a down payment of 50% of total.

<b>TOTAL</b>	<b>\$14,978.62</b>
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807 Lanier Drive  
 Madison, IN 47250  
 (812) 273-3622  
 sales@guimadison.com

# Estimate

**ADDRESS**

Paula Lee  
 820 W Main St  
 Madison, Indiana 47250  
 United States

**SHIP TO**

Paula Lee  
 820 W Main St  
 Madison, Indiana 47250  
 United States

**ESTIMATE #** Lee 531 LM

**DATE** 05/31/2024

**DESCRIPTION**

Materials and Labor to supply and install:

- (1) Provia entry door. Door to be a 430 Heritage single entry door, in snow mist white. Door to have satin nickle pinnacle lever trilennium handle, and satin nickle ball bearing hinges. (\$4,742.91)
- (1) Sun USA Architectural wood clad windows. White exterior, clear pine interior. White sash locks, with a flanged keeper. Glass to be Sun 366 Bottom sash to be tempered. Full, extruded screen. (\$1,137.84)
- (7) Provia Endure series windows. White internal and external. Glass to be ComforTech Low-E. Hardware to include white vent lock, and white sash locks. (\$2,637.79)
- Replacement glass and repair (1) wood sash putty glaze style wood window. (\$296.18)

\*\*Customer responsible for preparing window openings.

Total cost includes all miscellaneous items, sealants, and removal and disposal of all debris.

NOTE: Payment Terms - 50% Deposit Up Front. Payment in Full Due at Completion of the Work.

SUBTOTAL  
 TAX  
 TOTAL

8814.72 ~~13,034.72~~  
 617.03 ~~667.48~~  
\$13,702.15  
 # 9431.75

All materials are guaranteed to be as specified. All work is to be completed in a working manlike manner according to standard practices. Any alteration or deviations from the above specifications involving extra costs will be executed only upon written orders and will become an extra charge over and above the estimate. All agreements are contingent upon strikes, accidents, and/or delays beyond our control.

Accepted By

Accepted Date

CUSTOMER SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_



United Ohio Insurance Co.

P.O. Box 111.  
Bucyrus, OH 44820

TOWN & COUNTRY DECLARATION

<b>Policy Number</b>	<b>Policy Period From To</b>	<b>Named Insured</b>
TNC 8608066 00	12/05/2023 12/05/2024 12:01 A.M. Standard Time	PAUL LEE
<b>Transaction</b>		
NEW BUSINESS DECLARATION		Pay Plan Semi-Annual Pay
<b>Named Insured and Address</b>		<b>Agent</b>
PAUL LEE PAULA K LEE 1033 W MAIN ST MADISON IN 47250		ESTHEIMER INSURANCE 1585 CLIFTY DR MADISON IN 47250  Telephone: 812-265-5557 1313301 00

**POLICY PREMIUM TOTAL (THIS IS NOT AN INVOICE FOR PAYMENT)**

\$758

The premises covered by this policy is located at the address/es indicated below. Coverage at the described location/s is provided only where a limit of liability is shown or a premium is stated.

**SECTION I - PROPERTY COVERAGES**

<b>Section I Deductibles</b>	
Windstorm or Hail Loss: \$2,500	All Other Perils except Windstorm or Hail: \$1,500

LOCATION 1 - 820 W Main St, MADISON, IN 47250

**RATING INFORMATION**

Automatic Value-up at Renewal	Frame
Protection Class 04	Year of Construction 1900
Feet to Hydrant 999	Number of Families 1
Vacant	No Solid Fuel-burning Device
Territory 145	Risk Grouping 1
No Swimming Pool	No Trampoline

LOC.	UNIT	COV	DESCRIPTION	LIMIT	PREMIUM
1	1	A	Residence	\$125,000	\$626
1	1	B	Related Private Structures	\$12,500	Included
1	1	D	Loss of Rent Coverage	\$12,500	Included

**SECTION II - LIABILITY COVERAGES**

COV	DESCRIPTION	LIMIT	PREMIUM
L	Bodily Injury/Property Damage - each occurrence	\$300,000	\$80
M	Medical Payments to Others - each person	\$5,000	\$36
N	Products/Completed Work - each occurrence	\$300,000	Included
	Products/Completed Work - aggregate	\$600,000	Included
0	Fire Legal Liability - each occurrence	\$100,000	Included



United Ohio Insurance Co.

P.O. Box 111.  
Bucyrus, OH 44820

TOWN & COUNTRY DECLARATION

Policy Number	Policy Period From To	Named Insured
TNC 8608066 00	12/05/2023 12/05/2024 12:01 A.M. Standard Time	PAUL LEE

ADDITIONAL INFORMATION

TNC-25 Theft Coverage  
Limit of Liability is \$4,000

ADDITIONAL COVERAGES AND ENDORSEMENTS

THEFT Coverage

\$16

Forms and Endorsements											
Form #	Date	Loc	Unit	Form #	Date	Loc	Unit	Form #	Date	Loc	Unit
TNC-17	02/13			TC-15-IN	12/21			TNE-1	06/14	1	1
TNC-20-IN	12/21			TNC-11-IN	11/22			TNC-25	06/14		
TNC-510	12/21			IL P 001	01/04			IL OM 302	09/17		
IL OM 703	09/17			IL UO 27	01/12			ML-146	08/16		
TC-46	12/21			TNC-268	09/15			TNC-300	05/19		
TNC-301	01/14			TNC-503	03/13			TRIA-115	01/14		
TRIA-600	01/15			TRIA-605	01/21			OM-101	01/21		
OM-102	01/21			UOI-101	03/18						



DULY ENTERED FOR TAXATION  
SUBJECT TO FINAL ACCEPTANCE  
FOR TRANSFER

*Heather Hull*

AUDITOR, JEFFERSON CO.

10/18/2023

202303731 WD \$25.00  
10/18/2023 10:16:05A 3 PGS  
Molly O'Connor  
Jefferson County Recorder IN  
Recorded as Presented



Parcel No. 39-08-34-443-110.000-007

## WARRANTY DEED

**THIS INDENTURE WITNESSETH**, That **RAYMOND E. BREEDEN**,  
(Grantor) of Trimble County, in the State of Kentucky, **CONVEY AND WARRANT** to  
**PAUL A. LEE AND PAULA K. LEE, husband and wife**, (Grantees) of Jefferson County, in the  
State of Indiana, for the sum of One and No/100 Dollars (\$1.00) and other valuable consideration,  
the receipt and sufficiency which is hereby acknowledged, the following described real estate in  
Jefferson County, State of Indiana:

A part of Block 3, in John McIntire's Addition West to the City of Madison,  
beginning on the north line of Main Street to a point 330 feet east of the east line  
of Cragmont Street, formerly called Depot Street; thence east with the north line  
of Main Street, 20 feet; thence north, parallel with the east line of Cragmont  
Street, 168 feet to an alley running east and west between Main and Third Streets;  
thence west on the south line of the alley, 20 feet; thence south 168 feet, more or  
less, to the place of beginning.

Being and intended to be the same real estate conveyed to Raymond E. Breeden  
by a Warranty Deed from Margaret L. Chambers, dated June 30, 2003, and  
recorded July 1, 2003, as Instrument No. 20035231, in the Recorder's Office of  
Jefferson County, Indiana.

Grantor shall pay the fall installment of taxes for 2022, due and payable November  
10, 2023. Grantees shall pay all subsequent real estate taxes commencing with the  
spring installment for 2023, due and payable May 10, 2024.

Possession shall be given at closing.

Subject to any and all easements, agreements and restrictions of record. The address of  
such real estate is commonly known as 820 W Main Street Madison IN 47250

MLT 25<sup>00</sup> (3)

Tax bills should be sent to Grantees at such address unless otherwise indicated below.

**IN WITNESS WHEREOF**, Grantor has executed this deed this 12th day of October, 2023.

Grantor: \_\_\_\_\_ (SEAL)

Signature \_\_\_\_\_

Printed \_\_\_\_\_

Grantor: \_\_\_\_\_ (SEAL)

Signature Raymond E. Breeden

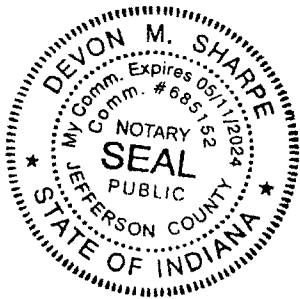
Printed RAYMOND E. BREEDEN

STATE OF INDIANA

COUNTY OF JEFFERSON

Before me, a Notary Public in and for said County and State, personally appeared Raymond E. Breeden, who acknowledged the execution of the foregoing Warranty Deed, and who, having been duly sworn, stated that any representations therein contained are true.

Witness my hand and Notarial Seal this 12th day of October, 2023.



Signature [Handwritten Signature]  
Printed Devon M. Sharpe, Notary Public

This instrument prepared by: Devon M. Sharpe, Attorney, Madison, Indiana

Property Address: 820 W Main Street Madison IN 47250  
Address of Grantee: 1033 W Main St Madison, IN 47250  
Tax Mailing Address: 1033 W Main St Madison, IN 47250  
Mail Deed to: 1033 W Main St Madison, IN 47250

*I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law, Devon M. Sharpe*



**Application for P.A.C.E.**  
**Preservation & Community**  
**Enhancement Grant Program**

Application Fee: \$10.00

Purpose: Application is hereby made to request funding from the PACE Program. This application must be filed prior to work beginning on a property located within the City of Madison. This application does not replace the need for approval from the HDBR for properties located downtown.

**APPLICANT INFORMATION**

Date: 6/3/2024  
 Property Owner Name: Jerry + Louise Martin / Brian Martin  
 Mailing Street Address: 104 Spring Street  
 City: Madison State: IN Zip: 47250  
 Phone (Preferred): 812-599-2695 Phone (Alternate): \_\_\_\_\_  
 Email: btmartin1@yahoo.com

**PROJECT INFORMATION**

Street Address: 811 East Second Street  
 Total Cost of Project (include all costs to complete the entire project): \$190,000<sup>00</sup>  
 Estimated Date of Completion of Work: May 2025  
 Hilltop  Downtown

**GRANT INFORMATION**

Rehabilitation (Downtown) Grant  Curb Appeal (Hilltop) Grant  Dilapidated Structures Grant  Dangerous Buildings Grant

Amount of Grant Requested (can be obtained from the office): \$25,000<sup>00</sup>

**A PACE grant application must include the following documents:**

- Complete application
- Photographs of existing conditions of Property
- Project Plans (required if altering footprint or openings)
- Copies of Construction Quotes for the project
- Certificate of Appropriateness (COA) (If applicable)
- Proof of Property Insurance
- Proof of Ownership (Deed)
- Certificate of Incorporation (if organization/business)
- Unsafe Letter (Required for Dangerous Structures Grant)



**DESCRIPTION OF THE PROJECT**

Please describe the project and the property's current condition.

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Additional pages are attached.

**DETAILED PROJECT SCHEDULE**

Show how the project will be completed within a 12-month time period. If the project will take longer than 12 months, please explain.

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Additional pages are attached.



**DETAILED PROJECT BUDGET WORKSHEET**

List all major tasks necessary to complete the proposed Project, the total budget, and the matching grant amount requested. The P.A.C.E. Grant Program funds materials and labor. Please separate materials from labor. The Detailed Project Budget Worksheet does not replace the need to include copies of construction quotes from a registered contractor. If a copy of quote from a registered contractor is not provided, the application will be deemed incomplete.

Task #	Description of Work and/or Material Please Reference Appropriate Quote (Must be attached)	Total Task Budget	Amount of Grant Funds (50% max)
	SAMPLE: Lumber and supplies per sales ad from Lowe's	\$1,076	\$538.00
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
	<b>Totals</b>		

Additional pages are attached.

**DETAILED REBUILDING PLAN (ONLY FOR DANGEROUS BUILDINGS GRANT APPLICATIONS)**

Please explain what you will be rebuilding after the building is demolished. You must include a timeline for the rebuilding plan.

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Additional pages are attached.



**Applicant must read and initial the following:**

*BM* I understand that the grant funds must be used only for the project described in this application. The work must be completed within twelve (12) months of the date that the grant is awarded. If a project is not completed the recipient(s) may request an extension to the City of Madison Board of Works and Safety.

*BM* I understand that I must receive all required permits from the Office of Planning, Preservation, and Design and from the State of Indiana prior to beginning work on my project or I will forfeit any awarded grant monies.

*BM* I understand that a failure to complete any project may result in the City of Madison placing a lien on the property in order to recover grant monies in the amount of monies received by Recipient(s).

*BM* I understand that if any plans to the project change or if the contractor changes, I must notify the Director of Planning prior to the project construction continuing.

*BM* I understand that all property taxes must be current and that there cannot be any current tax liens against the property or current litigation between the City of Madison and the applicant. I understand that if one of these is not true, my application will not be considered for funds.

*BM* I understand that if I am applying for a Dilapidated Structures Grant, I am required to complete the full renovation exterior of the building including paint.

*BM* I understand that if I am applying for a Dangerous Buildings Grant, infill construction must be completed within 2 years after approved funding. Final disbursement of funds will be withheld until such time that construction is completed.

**I certify that I have read the P.A.C.E. Program Guidelines and that all required documents are included in my final application packet.**

*[Handwritten Signature]*  
\_\_\_\_\_  
Applicant(s) Signature

*6/3/2024*  
Date

**Documentation Review** (Completed by Planning Office)

- Complete application
- Photographs of Property
- Project Plans (If required)
- Copies of Construction Quotes
- COA application filed (If applicable)
- Proof of Property Insurance
- Proof of Ownership (Deed)
- Certificate of Incorporation (If required)
- Unsafe Letter (If required)

Staff Notes

Description of the Project:

811 East Second street has been sitting vacant for many years, unless you count the squatting vultures. The property has had a few owners over the years, and each one has started to work on the property, but never made much progress. Thus, the home is currently in pretty poor condition.

The last owner began some rebuilding, but the work performed is subpar and so some of it will need to be changed or removed. We plan to completely renovate the house and the property so it lives up to the new name, given by Mayor Bob Courtney, the "Gateway House".

Detailed Project Schedule:

- 2024 June: Temporary power, clean, temporary close-up *ASBESTOS REMOVAL*  
July: Clean site, regrade, start restructure  
August: Re-structure basement to attic, interior/exterior  
September: Repair siding, restore windows, renovate front porch, weatherproof.  
October: Paint exterior, rough in mechanicals, insulate.  
November: Drywall and paint.  
December: Finish floors, trim, doors, stairway.
- 2025 January: Finish floors, trim, doors, stairway.  
February: Final paint, set cabinets.  
March: Countertops, tile.  
April: Set finish fixtures (plumbing, electrical, hardware).  
May - Certificate of occupancy for move in.

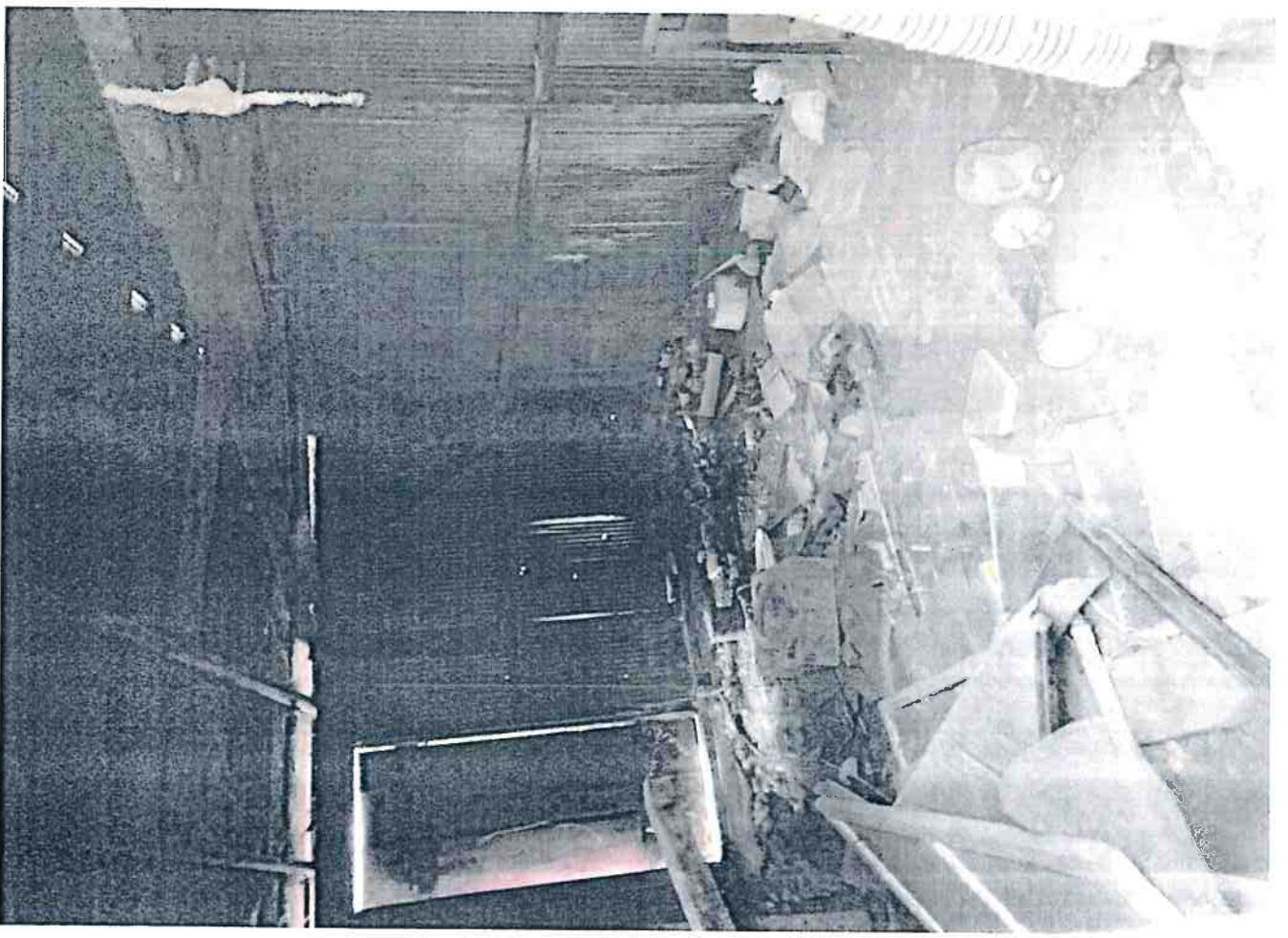
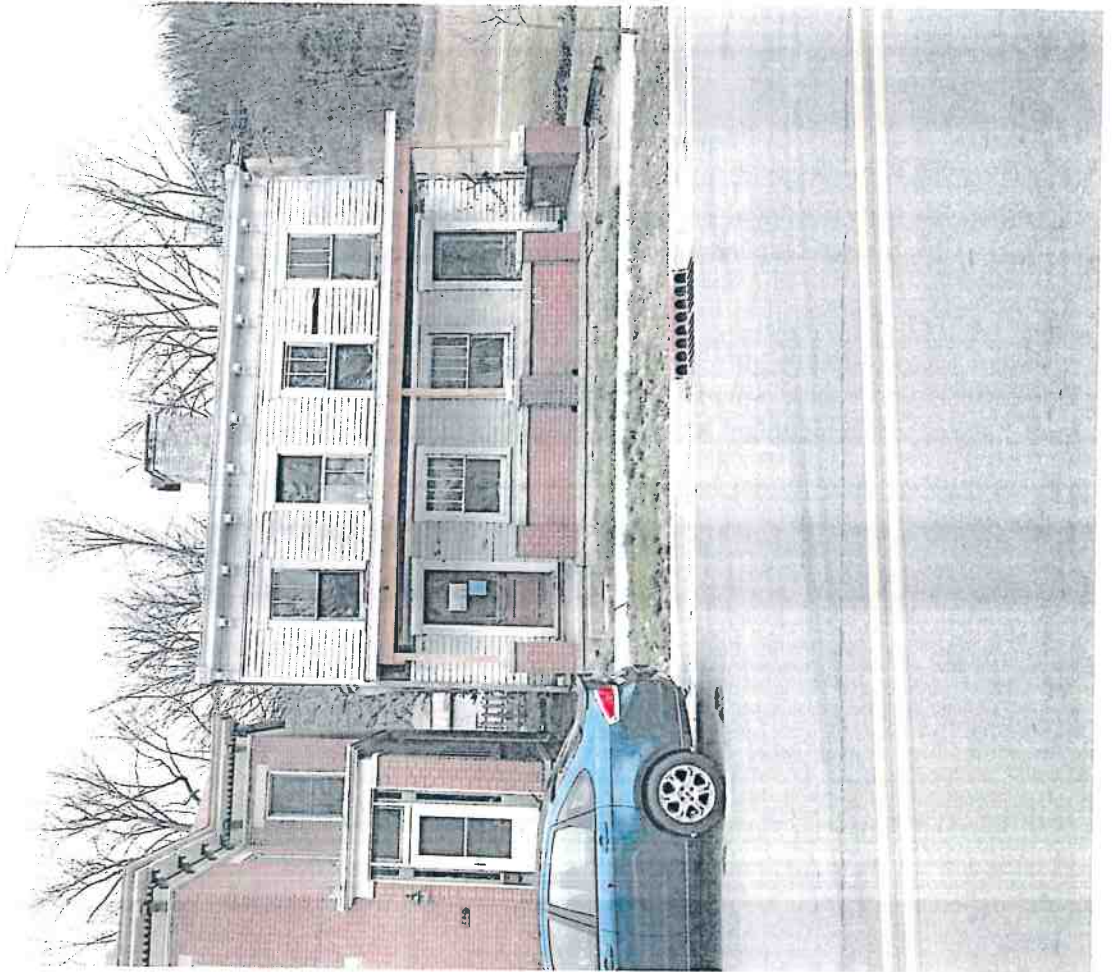


## Detailed Project Budget Worksheet

1. Foundation: Repair exterior stone foundation as needed.  
Tuckpoint and weather proof.  
Remove slab and rear of property, regrade to prevent water infiltration.  
Repair weatherproof as needed.
2. Structural: Repair floor joists, wall studs and beams, and rafters as necessary.  
Add additional blocking and bracing as needed.
3. Front Porch: Adjust and complete framing on porch roof.  
Side gable wall.  
Install beadboard porch ceiling.  
Trim beam.  
Box and trim columns.  
Prime/paint.  
Repair and seal concrete porch floor, brick wall, caps, steps.  
Foundation repair, weatherproof.
4. Cornice: Repair metal cornice as needed.  
Prime/paint.
5. Box Gutter: Repair/re-line gutter pan.  
Repair flashing as needed.
6. Gutters and Downspouts: Install new.
7. Chimney: Tuckpoint as needed.  
Install chimney cap.  
Repair/replace step flashing as needed.
8. Roof: Inspect and repair as needed.
9. Fascia/Rake Board/Soffit: Repair existing, replace as needed.  
Prime/paint.
10. Existing Siding: Salvage siding from rear addition to repair/replace existing siding.  
Adjust/reattach all siding.  
Install new corner boards.  
Repair/replace apron board and flashing as needed.  
Prime/paint.
11. New Siding: Install new L.P. Smartside on the addition to match the profile of existing house.  
Install new corner boards.  
Install new apron board and flashing.  
Prime/paint.
12. Windows: Repair wood sashes and jambs as needed.  
Reglaze as needed.  
Reinstall original windows as applicable.  
Install head flashing.  
Prime/paint.
13. Front Door: Restore front door including new weatherstip and hardware.

Prime/paint.

14. Rear Door: Install new half glass door and hardware; style to be period appropriate.
15. New Electrical Service: Rough in electrical service for home.
16. Spray Foam Insulation: Consideration of partial expense
  - \*Installation not part of pace
  - \*Vapor barrier and sheer diaphragm strength added to house via closed cel spray foam applied valid. In order to salvage wood siding, we will not remove but repair in place. By doing this, we have no way to add traditional vapor barrier and wall sheathing. These are both critical to a strong, healthy and weatherproof building envelope.









## Pricing

1. Foundation: Labor John Henry Stonemason \$1200.00  
Materials \$500.00
2. Structural: Labor Dan Pittman \$7500.00  
Materials \$4500.00
3. Front Porch: Labor Dan Pittman \$1850.00  
Labor Leo Toral \$750.00  
Materials \$1200.00
4. Cornice: Labor Leo Toral \$850.00  
Materials \$300.00
5. Box Gutter: Labor Can Do Maintenance \$1250.00
6. Gutters and Downspouts: \$1450.00
7. Chimney: Labor John Henry Stonemason \$750.00  
Materials \$300.00
8. Roof: Labor Can Do Maintenance \$1000.00  
Materials \$400
9. Fascia/Rake Board/Soffit: Labor Dan Pittman \$1800.00  
Labor Leo Toral \$750.00  
Materials \$450.00
10. Existing Siding: Labor Dan Pittman \$4500.00  
Labor Leo Toral \$2500.00  
Materials \$1500.00
11. New Siding: Labor Dan Pittman \$3750.00  
Labor Leo Toral \$2000.00  
Materials \$3500.00
12. Windows: Labor Leo Toral \$2750.00  
Labor Dan Pittman \$950.00  
Materials \$500.00
13. Front Door: Labor Leo Toral \$750.00  
Labor Dan Pittman \$500.00  
Materials \$200.00
14. Rear Door: Labor Dan Pittman \$950.00  
Materials \$1650.00
15. New Electrical Service: Materials \$4500.00
16. Spray Foam Insulation: Labor/Materials Tristate Roof Coating LLC \$5875.00

TOTAL Labor: \$36,300.00

TOTAL Materials: \$20,250.00



# Unsafe Structure Determination

**Issued to:** Kelwaski Rentals LLC  
509 DILLMAN RD  
, IN 47401

**Date Issued:** February 14, 2024

Project Location: 811 SECOND ST , MADISON IN 47250

Structure Type: Primary Residential Structure

There was an inspection completed at the property on 811 SECOND ST . The intent of this letter is to state that I, Bryan Shaw (City of Madison Building Inspector) made a site visit to said property on February 9, 2024, to verify the location, external, and Internal condition of the building in disrepair.

Based upon my site visit and the observations made, there are life safety violations that exist and meet the standards for an unsafe building.

Unsafe Building Chapter 154.03:

- (A) Whenever any door, aisle, passageway, stairway or other means of exit is not of sufficient width or size or is not so arranged as to provide safe and adequate means of exit in case of fire or panic.
- (B) Whenever the stress in any materials, member or portion thereof, due to all dead and live loads, is more than one and one half times the working stress or stresses allowed in the Building Code for new buildings of similar structure, purpose or location.
- (C) Whenever any portion thereof has been damaged by fire, earthquake, wind, flood or by any other cause, to such an extent that the structural strength or stability thereof is materially less than it was before such catastrophe and is less than the minimum requirements of the Building Code for new buildings of similar structure, purpose or location.
- (D) Whenever any portion or member or appurtenance thereof likely to fail, or to become detached or dislodged, or to collapse and hereby injure persons or damage property.
- (E) Whenever any portion of a building, or any member, appurtenance or ornamentation on the exterior thereof is not of sufficient strength or stability, or is not so anchored, attached or fastened in place so as to be capable of resisting a wind pressure of one half of that specified in the Building Code for new buildings of similar structure, purpose or location without exceeding the work stresses permitted in the Building Code for such buildings.
- (F) Whenever any portion thereof has wracked, warped, buckled or settled to such an extent that walls or other structural portions have materially less resistance to winds or earthquakes than is required in the case of similar new construction.
- (G) Whenever the building or structure, or any portion thereof, because of dilapidation, deterioration, or decay; faulty construction; the removal, movement, or instability of any portion of the ground necessary for the purpose of supporting such building; the deterioration, decay, or inadequacy of its foundation; or any other cause, is likely to partially or completely collapse.
- (H) Whenever, for any reason, the building or structure, or portion thereof, is manifestly unsafe for the purpose for which it is being used.





Unsafe Structure Determination

Issued to: Kelwaski Rentals LLC Date Issued: February 14, 2024

509 DILLMAN RD  
, IN 47401

- (I) Whenever the exterior walls or other vertical structural members list, lean or buckle to such an extent that a plumb line passing through the center of gravity does not fall inside the middle one third of the base.
- (J) Whenever the building or structure, exclusive of the foundation, shows 33 percent or more damage or deterioration of its supporting member or members, or 50 percent damage or deterioration of its nonsupporting members, enclosing or outside walls or coverings.
- (K) Whenever the building or structure has been so damaged by fire, wind, earthquake or flood, or has become so dilapidated or deteriorated as to become an attractive nuisance to children; or freely accessible to persons for the purpose of committing unlawful acts.
- (L) Whenever any building or structure has been constructed, exists or is maintained in violation of any specific requirement or prohibition applicable to such building or structure provided by the building regulations of this city, or of any law or ordinance of this state or city relating to the condition, location or structure of buildings.
- (M) Whenever any building or structure which, whether or not erected in accordance with all applicable laws and ordinances, has in any nonsupporting part, member or portion less than 50 percent, or in any fire-resisting qualities of characteristics, or weather-resisting qualities or characteristics required by law in the case of a newly constructed building of like area, height and occupancy in the same location.
- (N) Whenever a building or structure, used or intended to be used for dwelling purposes, because of inadequate maintenance, dilapidation, decay, damage, faulty construction or arrangement, inadequate light, air or sanitation facilities, or otherwise, is determined by the city to be unsanitary, unfit for human habitation or in such a condition that is likely to cause sickness or disease.
- (O) Whenever any building or structure, because of obsolescence, dilapidated condition, deterioration, damage, inadequate exits, lack of sufficient fire resistant construction, faulty electric wiring, gas connections or heating apparatus, or other cause, is determined by the city to be a fire hazard.
- (P) Whenever any portion of a building or structure remains on a site after the demolition or destruction of the building or structure or whenever any building or structure is abandoned for a period in excess of six months so as to constitute such building or portion thereof an attractive nuisance or hazard to the public.

As such, the City of Madison Office of Planning, Preservation, and Design requests you contact this office within five (5) business days to set up a date and time to discuss plans for remediation. Our goal is to work with all property owners toward keeping our community safe for all residents. If we are unable to come to a resolution, I will be forced to request action before the City of Madison Board of Public Works and Safety. We hope that we have your cooperation in this matter. Please contact me at 812-265-8324.

Issued By:

Bryan Shaw, Building Inspector

City of Madison, Indiana

DULY ENTERED FOR TAXATION  
SUBJECT TO FINAL ACCEPTANCE  
FOR TRANSFER

*Heather Huff*

AUDITOR, JEFFERSON CO.  
APR 04, 2024 AS

202401239 WD \$25.00  
4/4/2024 2:03:42 PM 3 PGS  
Molly O'Connor  
Jefferson County Recorder IN  
Recorded as Presented



WTS File No. 240102  
Tax ID No. 011-03602-00  
State Parcel No. 39-13-02-141-005.000-007

### WARRANTY DEED

Kelwaski Rentals, LLC, Grantor, CONVEYS and WARRANTS unto Brian Martin and Lori Martin, husband and wife, Grantees, in fee simple, as tenants by the entireties, for and in consideration of one dollar (\$1.00) and other valuable consideration, the receipt and sufficiency of which is acknowledged, the following described real estate located in Jefferson County, Indiana:

Part of Lots 8 and 7, Block 11, McIntire's Addition East and situated in the City of Madison, and beginning at a point on Second Street in said City 447 feet 7 inches east of Baltimore Streets, running thence East 31 feet; thence North 167 feet to an alley; thence West with said alley 31 feet; thence South 167 feet to the Place Of Beginning.

ALSO, 9 feet of ground on Second Street and off the West side of Lot No. 7 in Block 11 in McIntire's Addition East to the City of Madison. This is the same real estate conveyed to Grantor's by a deed found in Deed Record 164 at page 157 of records of Jefferson County, commonly known as 811 E. Second Street.

The undersigned person(s) represent that they are duly authorized member, manager, or agent of Grantor and have been fully empowered, by proper resolution of the members of Grantor, or by Articles of Organization or Operating Agreement, to execute and deliver this deed; that Grantor has full legal capacity to convey the real estate described herein; and that all necessary action for the making of this conveyance has been taken and done.



Send tax bills to: 104 Spring St., Madison, IN 47250

Grantee Address: SAME

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law. (Andrew A. Hoffer)

Prepared by: Andrew A. Hoffer, HOFFER LAW, LLC  
1842 East Spring Street, New Albany, Indiana 47150

State Farm Fire and Casualty Company

Applicant Name: MARTIN, BRIAN THOMAS

IN

Homeowners  
Application / Binder-Receipt

Binder Effective Date: 06-03-2024

14-E1-V360-4

**NEW BUSINESS**

**APPLICANT:** MARTIN, BRIAN THOMAS

**MAILING ADDRESS:** 104 SERING ST  
MADISON, IN 47250-3660

**PROPERTY LOCATION:** 811 E 2ND ST  
MADISON, IN 47250-3640

**BILLING:**

Put application on SFPP: Yes

**COVERAGES / PREMIUM SECTION:**

Type: HOMEOWNERS

Policy Deductible:

1% 3,560

Rate IV: 100%

**Policy Coverage**

	Limit	Premium
Dwelling (Coverage A)	356,000	2,487.00
Increased Dwelling - Option ID	71,200	
Dwelling Extension	35,600	
Personal Property (Coverage B)	267,000	
Personal Liability (Coverage L) each occurrence	300,000	11.00
Medical Payments (Coverage M) each occurrence	3,000	5.00
Credit Card / Bank Card and Forgery	1,000	
Damage to Property of Others (Each Occurrence)	1,000	
Loss of Use	106,800	

**Endorsements**

Dwelling Under Construction  
Fire Department Service Charge  
Increased Limits  
500 included

Limit Premium

**Loss Settlement Options**

Loss Settlement Option - Dwelling	A1 - Replacement Cost - Similar Construction
Loss Settlement Option - Personal Property	B1 - Limited Replacement Cost

**Accepted Options**

Jewelry and Furs	1,500 / 2,500	10.00
	Option JF	
Silver / Goldware Theft - Option SG	2,500 included	
Business Property - Option BP	1,500 included	
Building Ordinance or Law - Option OL (% of Coverage A)	10% 35,600	
Firearms - Option FA	2,500 included	

**Declined Options / Endorsements**

Additional Insured	
Add Insured - Special Event	
Back-Up Sewer/Drain - Dwelling/Contents, 10% of Dwelling	
Back-Up Sewer/Drain - Dwelling/Contents, 5% of Dwelling	
Building Ordinance or Law - Option OL (% of Coverage A)	25%
Building Ordinance or Law - Option OL (% of Coverage A)	50%
Business Property - Option BP	2,500
Business Property - Option BP	5,000
Business Pursuits - Option BU	
Common Construction Rplc Cost	
Cyber Event, Identity Restoration, and Fraud Loss Coverage	
Dwelling Under Const - Building Materials Theft	5,000
Earthquake	
Energy Efficiency Upgrade	
Fire Department Service Charge Increased Limits	1,000
Fire Department Service Charge Increased Limits	1,500
Fire Department Service Charge Increased Limits	2,000
Firearms - Option FA	5,000



P.A.C.E.  
Preservation & Community Enhancement  
Grant Program Final Report

Purpose: Application is hereby made to request the funding from the PACE Program. Forms must be accompanied by at least four photos showing the progress and one photo of the front of the building. Copies of all invoices and receipts must also be submitted.

**APPLICANT INFORMATION**

Date: 6/19/2024  
 Property Owner Name: Philip & Karen LeGrand  
 Mailing Street Address: 25 Ridgelake Dr  
 City: Mary Esther State: FL Zip: 32569  
 Phone (Preferred): 850.527.4200 Phone (Alternate): \_\_\_\_\_  
 Email: pjlegrand@cox.net

**PROJECT INFORMATION**

Street Address: 417 W 2nd Street, Madison, IN  
 Total Cost of Project (include all costs to complete the entire project): \$15,875.00  
 Estimated Date of Completion of Work: 06/07/2024  
 Hilltop  Downtown

**GRANT INFORMATION**

- Rehabilitation (Downtown) Grant     Curb Appeal (Hilltop) Grant     Dilapidated Structures Grant     Dangerous Buildings Grant

Total Amount of Grant Awarded (can be obtained from the office): \$7,500.00  
 Was a midpoint report submitted for this project?  Yes  No

**DESCRIPTION OF THE PROJECT**

Please describe the project elements that have been completed. If a midpoint report was submitted, only include the list of project elements completed since that report was submitted.

The porch columns and railings have been completed  
 \_\_\_\_\_  
 \_\_\_\_\_

Additional pages are attached.



**DETAILED PROJECT BUDGET WORKSHEET**

List all major tasks that have been complete of the Project. The P.A.C.E. Grant Program funds materials and labor. Please separate materials from labor. If a midpoint report was submitted, only include the tasks completed since that report was submitted.

Task #	Description of Work and/or Material Please Reference Appropriate Quote (Must be attached)	Total Task Budget	Amount of Grant Funds (50% max)
	SAMPLE: Lumber and supplies per sales ad from Lowe's	\$1,076	\$538.00
1	Material and Labor from Finish Well Home Solutions	\$15,875	\$7,500
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
	<b>Totals</b>	<b>\$15,875.00</b>	<b>\$7,500.00</b>

Additional pages are attached.

I certify that the project was completed and that all required documents are included in my final report packet.

8047d01b-3568-4d9a-  
-a445-dbf8e114ddc1

Digitally signed by 8047d01b-3568-4d9a-  
a445-dbf8e114ddc1  
Date: 2024.06.19 07:20:31 -05'00'

6/19/2024

**Applicant(s) Signature**

**Date**

# Invoice



Finish Well Home Solutions  
6235 E Lonnis Hill Road  
Madison, In. 47250  
812-493-2254

6/19/2024

Invoice For  
Philip and Karen Legrand  
417 West Second Street  
Madison, In. 47250

Notes Final Invoice  
All payments have been made  
Project is complete

DESCRIPTION	QTY	UNIT PRICE	TOTAL
Material deposit from Bender Lumber		paid March 15, 2024	\$11,125.00
First Install payment		paid April 26,2024	\$2,375.00
Final install payment		paid June 7, 2024	\$2,375.00
			0.00
			0.00
Total payments			-\$15,875.00

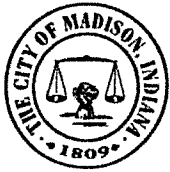
Comments Thank you for the honor of serving you!

**Invoice Total** \$0.00









P.A.C.E.  
Preservation & Community Enhancement  
Grant Program Final Report

Purpose: Application is hereby made to request the funding from the PACE Program. Forms must be accompanied by at least four photos showing the progress and one photo of the front of the building. Copies of all invoices and receipts must also be submitted.

**APPLICANT INFORMATION**

Date: 8 July 2024  
 Property Owner Name: Cornerstone Society, Inc.  
 Mailing Street Address: PO Box 92  
 City: Madison State: IN Zip: 47250  
 Phone (Preferred): 812-265-3714 Phone (Alternate): \_\_\_\_\_  
 Email: LinkLudington@gmail.com

**PROJECT INFORMATION**

Street Address: 815-817 West Second Street  
 Total Cost of Project (include all costs to complete the entire project): \$118,873.00  
 Estimated Date of Completion of Work: July 2024  
 Hilltop  Downtown

**GRANT INFORMATION**

- Rehabilitation (Downtown) Grant     Curb Appeal (Hilltop) Grant     Dilapidated Structures Grant     Dangerous Buildings Grant

Total Amount of Grant Awarded (can be obtained from the office): \$25,000.00  
 Was a midpoint report submitted for this project?  Yes  No

**DESCRIPTION OF THE PROJECT**

Please describe the project elements that have been completed. If a midpoint report was submitted, only include the list of project elements completed since that report was submitted.

South elevation foundation and exterior wall repair/reconstruction, including installation of remaining windows; completion of other miscellaneous work to fulfill PACE grant scope of work as outlined.

Additional pages are attached.



**DETAILED PROJECT BUDGET WORKSHEET**

List all major tasks that have been complete of the Project. The P.A.C.E. Grant Program funds materials and labor. Please separate materials from labor. If a midpoint report was submitted, only include the tasks completed since that report was submitted.

Task #	Description of Work and/or Material Please Reference Appropriate Quote (Must be attached)	Total Task Budget	Amount of Grant Funds (50% max)
	SAMPLE: Lumber and supplies per sales ad from Lowe's	\$1,076	\$538.00
1	Labor	\$72,000.00	
2	Materials	34,501.00	
3	Windows	12,372.52	
4			
5			
6			
7			
8			
9			
10			
11			
12			
	<b>Totals</b>	<b>\$118,873.52</b>	<b>25,000.00</b>

Additional pages are attached.

I certify that the project was completed and that all required documents are included in my final report packet.

*R. Pudenz*

8 July 2024

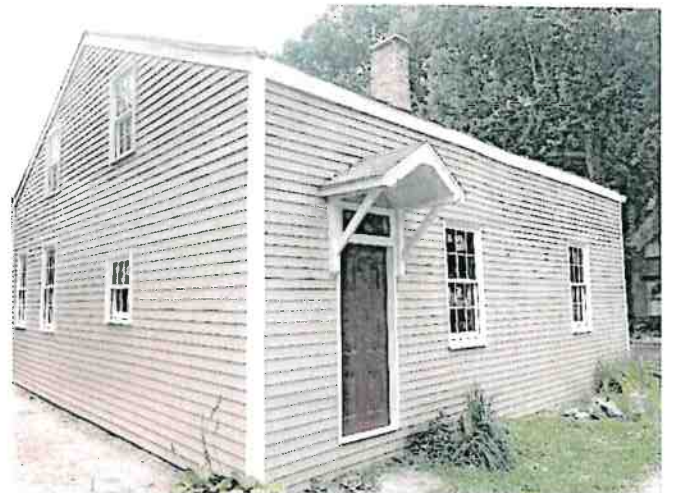
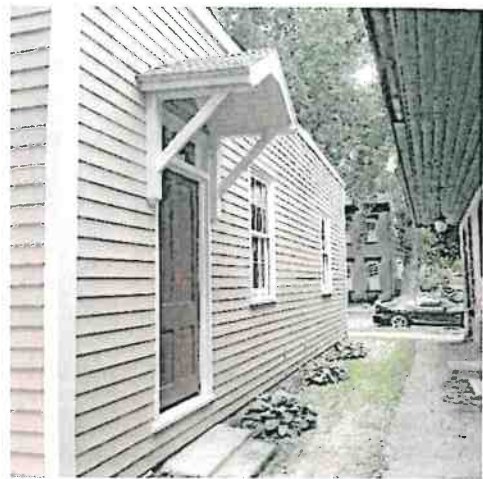
**Applicant(s) Signature**

**Date**



Front view  
from the left

Front view  
from the right



# Receipt

Dennis Webster

properrestorationsllc@gmail.com

Cornerstone Society Inc.  
Link Ludington  
815-817 West Second St.  
Madison Indiana 47250

Customer number	Invoice number	Page	Invoice date	Due date
1024	1157	1 / 1	6/17/2024	6/28/2024

Item	Quantity	Price	Total
Rehabilitation	1	72,000.00	72,000.00
Material	1	34,501.00	34,501.00
7/8/2024 Payment: \$106,501.00			(106,501.00)

*Paia*  
*x Dennis Webster*

<b>Total</b>	<b>\$106,501.00</b>
<b>Paid amount</b>	<b>\$106,501.00</b>
<b>Outstanding amount</b>	<b>\$0.00</b>

Thank you for your payment



PC BUILDING MATERIALS  
123 CHERRY ST.  
NEW ALBANY, IN. 47150  
RYAN RAINEY  
RRRAINEY@PCHOMESTORE  
S.COM

Quote  
492626  
Customer Pricing



Sun Windows, Inc.  
1515 E. 18th St.  
Owensboro, KY 42303  
Phone: (270) 684-0691  
Fax: (888) 391-0136  
www.SunWindows.com

Created: 10/10/2023

Sales Rep: Scott Schulz

PO:

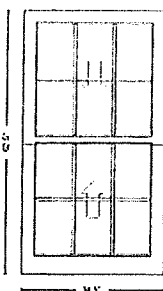
Username: pc

Project Name: The Cornerstone Society

Quote Name: Link Ludington

Line# 100-1

Unit Size: ~~34.5" x 62.5"~~ 34.25" x 62.25" Rough Opening: ~~34.5" x 62.5"~~



Viewed From Exterior

Price: \$1,316.67  
Quantity: x 4  
Extension: \$5,266.68

Room: replacement no brickmold

USA Clad Architectural Double Hung 34.5 x 62.5

Unit Width = Custom, Unit Height = Custom

Exterior Color = Milk White \ Interior Color = Clear Pine

Dual Glazed \ Sun Advantage 270

Sash Locks W/ Flanged Keeper \ White

Full Screen \ Extruded \ Milk White

5/8" SDL \ Colonial \ Milk White \ Raised \ Has Shadow Bar Glass 1: \ 3w

Glass 2: Upper Number Wide = 3 Glass 1: 2h

Glass 2: Upper Number High = 2

Nailing Fin Included

4 9/16" Jamb Depth \ Traditional Glass Stop

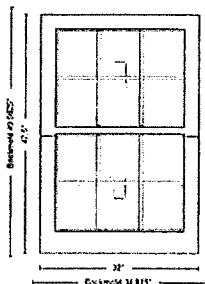
Jambliner Color = Tan \ Sill Angle = 14

U-Factor = 0.3 \ SHGC = 0.24 \ CR = 58 \ VT = 0.44 \ CPD = SUN-N-32-00004-00002

Line# 200-1

Unit Size: 32" X 47.5"

Rough Opening: 32.5" X 48"



Viewed From Exterior

Price: \$1,159.17  
Quantity: x 2  
Extension: \$2,318.34

Room: None Assigned

Brickmold: 34.875" X 49.5625"

USA Clad Architectural Double Hung 32 x 47.5

Unit Width = 32" (2-8"), Unit Height = 47 1/2" (4-0")

Exterior Color = Milk White \ Interior Color = Clear Pine

Dual Glazed \ Sun Advantage 270

Sash Locks W/ Flanged Keeper \ White

Full Screen \ Extruded \ Milk White

5/8" SDL \ Colonial \ Milk White \ Raised \ Has Shadow Bar Glass 1: \ 3w

Glass 2: Upper Number Wide = 3 Glass 1: 2h

Glass 2: Upper Number High = 2

Traditional Brick Mold (1 3/8") \ Milk White \ Nailing Fin Included \ 5/8" Sill Nosing

4 9/16" Jamb Depth \ Traditional Glass Stop

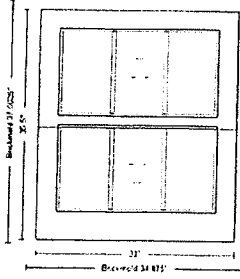
Jambliner Color = Tan \ Sill Angle = 14

U-Factor = 0.3 \ SHGC = 0.24 \ CR = 58 \ VT = 0.44 \ CPD = SUN-N-32-00004-00002

Line# 300-1

Unit Size: 32" X 35.5"

Rough Opening: 32.5" X 36"



Viewed From Exterior

Price: \$842.50  
Quantity: x 1  
Extension: \$842.50

Room: None Assigned

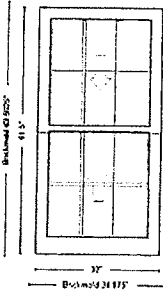
Brickmold: 34.875" X 37.5625"

USA Clad Architectural Double Hung 32 x 35.5  
Unit Width = 32" (2-8"), Unit Height = 35 1/2" (3-0")  
Exterior Color = Milk White \ Interior Color = Clear Pine  
Dual Glazed \ Sun Advantage 270  
Sash Locks W/ Flanged Keeper \ White  
Full Screen \ Extruded \ Milk White  
5/8" SDL \ Colonial \ Milk White \ Raised \ Has Shadow Bar Glass 1: \ 3w  
Glass 2: Upper Number Wide = 3 Glass 1: 1h  
Glass 2: Upper Number High = 1  
Traditional Brick Mold (1 3/8") \ Milk White \ Nailing Fin Included \ 5/8" Sill Nosing  
4 9/16" Jamb Depth \ Traditional Glass Stop  
Jambliner Color = Tan \ Sill Angle = 14  
U-Factor = 0.3 \ SHGC = 0.24 \ CR = 58 \ VT = 0.44 \ CPD = SUN-N-32-00004-00002

Line# 400-1

Unit Size: 32" X 61.5"

Rough Opening: 32.5" X 62"



Viewed From Exterior

Price: \$1,315.00  
Quantity: x 3  
Extension: \$3,945.00

Room: None Assigned

Brickmold: 34.875" X 63.5625"

USA Clad Architectural Double Hung 32 x 61.5  
Unit Width = 32" (2-8"), Unit Height = 61 1/2" (5-0")  
Exterior Color = Milk White \ Interior Color = Clear Pine  
Dual Glazed \ Sun Advantage 270  
Sash Locks W/ Flanged Keeper \ White  
Full Screen \ Extruded \ Milk White  
5/8" SDL \ Colonial \ Milk White \ Raised \ Has Shadow Bar Glass 1: \ 3w  
Glass 2: Upper Number Wide = 3 Glass 1: 2h  
Glass 2: Upper Number High = 2  
Traditional Brick Mold (1 3/8") \ Milk White \ Nailing Fin Included \ 5/8" Sill Nosing  
4 9/16" Jamb Depth \ Traditional Glass Stop  
Jambliner Color = Tan \ Sill Angle = 14  
U-Factor = 0.3 \ SHGC = 0.24 \ CR = 58 \ VT = 0.44 \ CPD = SUN-N-32-00004-00002

Project Name: The Cornerstone Society

Quote Name: Link Ludington

Subtotal: \$12,372.52  
Sales Tax: 7% \$866.08  
Labor: \$0.00  
Freight: \$0.00  
Total: \$13,238.60

All Sun Window and Door products are made to order, custom configured with the options and accessories specified. Therefore, once ordered it cannot be changed, canceled or returned for credit. Check this quote thoroughly to verify that it is exactly what you want. Submitting this quote as an order is your agreement to purchase the products as specified within this quote. All changes, corrections, and cancelations must be made before submitting this quote as an order. All quotations are subject to both credit and manufacturing approval.

*We Appreciate Your Business!*





# SPECIAL ORDER TERMS & CONDITIONS

Special Order # \_\_\_\_\_

## Customer Information

First Name Greg Last Name Sekula

Phone 502 216 8998 Email \_\_\_\_\_

Sales Rep Name Ryan Rainey

By initialing the boxes below, you are indicating your responsibility for order accuracy.

### Specifications



To ensure everything is ordered accurately, please be certain you read and fully understand all the descriptions & specifications including sizes, colors, price, quantities, etc. This information will be provided to you in other documents that will also require your signature.

### Non-Returnable Items



I understand that many of the products I am ordering are 100% built-to-order and/or special ordered specifically for me. With this in mind, there is no provision for returns or refunds. PC will work diligently to rectify any order issues, but returning products or full refunds are not permitted on most items. *If you are unsure of the returnability of any item, consult with your salesperson.*

I understand that once my order is placed, changes to my order may either require a change order fee or may be impossible altogether as this product is, again, fully custom and built to order.

### Payment Terms



Orders less than \$1000 require prepayment in full. Orders over \$1000 require 50% deposit before order is placed and must be paid in full before delivery. Installed orders require 50% deposit before order is placed and **must be paid in full before delivery.**

*Installs come with a one year limited workmanship warranty.*

Orders must be picked up within two weeks of notice that the material has been received. Material not picked up within two weeks may be returned to vendor with a restocking charge. Items will be subject to storage fees if not picked up within the two week time period.

There is a minimum delivery charge of \$100.00

I have read and agree to the terms above, and I have reviewed my order for accuracy.

*[Handwritten Signature]*

Customer's Signature

Date

*Ryan Rainey*

Salesperson's Signature

10/18/23

Date



P.A.C.E.  
Preservation & Community Enhancement  
Grant Program Final Report

Purpose: Application is hereby made to request the funding from the PACE Program. Forms must be accompanied by at least four photos showing the progress and one photo of the front of the building. Copies of all invoices and receipts must also be submitted.

**APPLICANT INFORMATION**

Date: 07.05.2024  
 Property Owner Name: Nathan Montoya and Annette Vestuto  
 Mailing Street Address: 110 E Main St  
 City: Madison State: IN Zip: 47250  
 Phone (Preferred): 469-835-5496 Phone (Alternate): 317-702-1841  
 Email: nathan@villagelightsbooks.com

**PROJECT INFORMATION**

Street Address: 110 E Main St  
 Total Cost of Project (include all costs to complete the entire project): \$19,322.52  
 Estimated Date of Completion of Work: Completed on 06.29.2024  
 Hilltop  Downtown

**GRANT INFORMATION**

Rehabilitation (Downtown) Grant  Curb Appeal (Hilltop) Grant  Dilapidated Structures Grant  Dangerous Buildings Grant  
 Total Amount of Grant Awarded (can be obtained from the office): \$9,659.37  
 Was a midpoint report submitted for this project?  Yes  No

**DESCRIPTION OF THE PROJECT**

Please describe the project elements that have been completed. If a midpoint report was submitted, only include the list of project elements completed since that report was submitted.  
See attached.

Additional pages are attached.

## **DESCRIPTION OF THE PROJECT**

Extensive scaffolding was constructed to access the exterior. A mini split heating/cooling unit was sealed with plastic to protect it during construction. The old, loose stucco was removed from the exposed and deteriorating formerly interior wall, and sections of brick were replaced and re-laid true to the remaining wall. To preserve and improve the integrity of the wall, this was accomplished with bricks appropriate for exterior use and with approved type N mortar. Additional areas of the exterior wall were re-pointed, or plastered, notably near the crown cornice overhanging Main Street. New flashing was installed over existing flashing. Some brick replacement and re-pointing was done for a small portion of the inner wall.



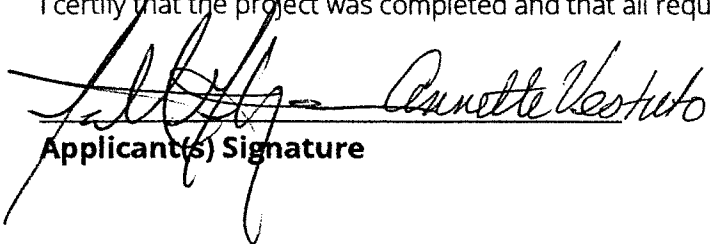
**DETAILED PROJECT BUDGET WORKSHEET**

List all major tasks that have been complete of the Project. The P.A.C.E. Grant Program funds materials and labor. Please separate materials from labor. If a midpoint report was submitted, only include the tasks completed since that report was submitted.

Task #	Description of Work and/or Material Please Reference Appropriate Quote (Must be attached)	Total Task Budget	Amount of Grant Funds (50% max)
	SAMPLE: Lumber and supplies per sales ad from Lowe's	\$1,076	\$538.00
1	Exterior plaster work	\$4,600.00	\$2,300.00
2	Brick replacement and partial relay	\$9,500.00	\$4,750.00
3	Repointing and brick replacement	\$4,200.00	\$2,100.00
4	Material (receipts attached)	\$1,022.52	\$511.26
5			
6			
7			
8			
9			
10			
11			
12			
	<b>Totals</b>	<b>\$19,322.52</b>	<b>\$9,661.26</b>

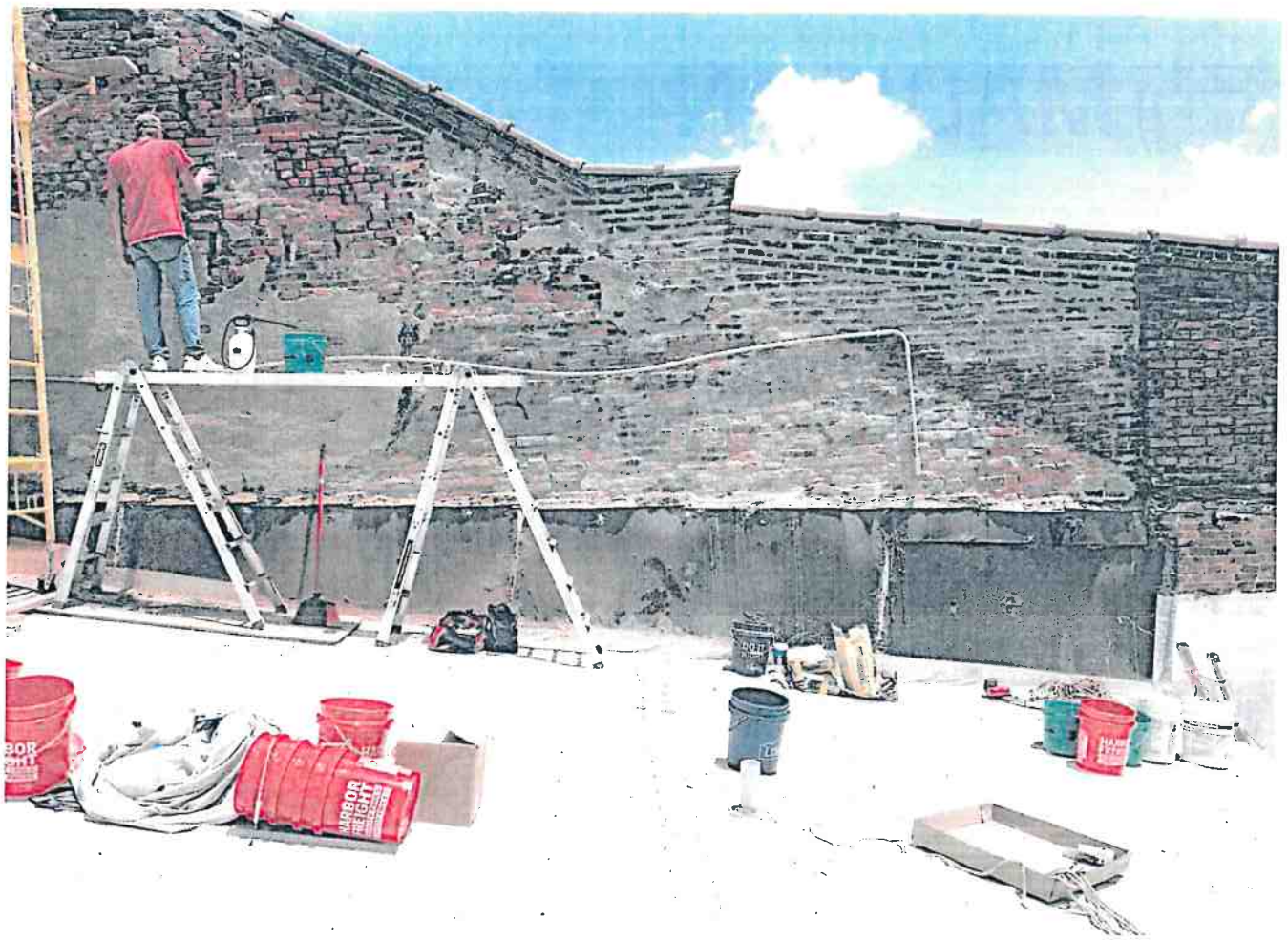
Additional pages are attached.

I certify that the project was completed and that all required documents are included in my final report packet.

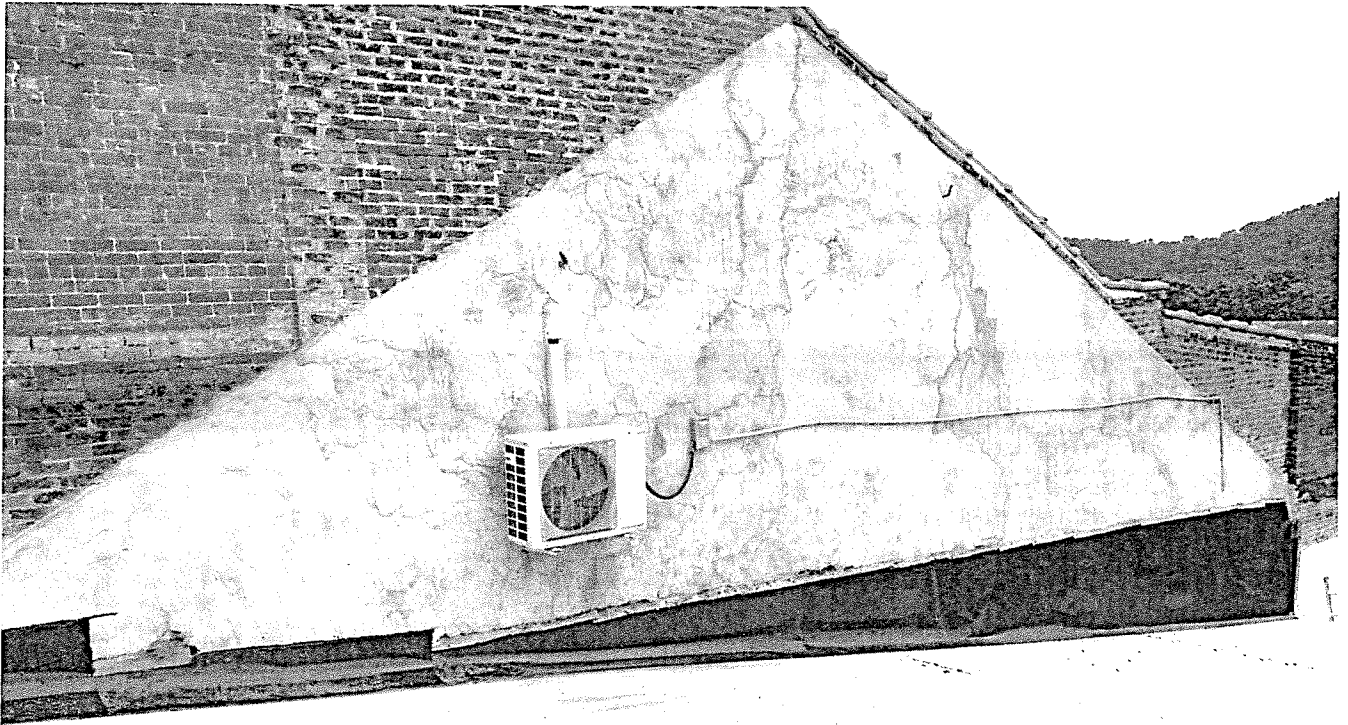
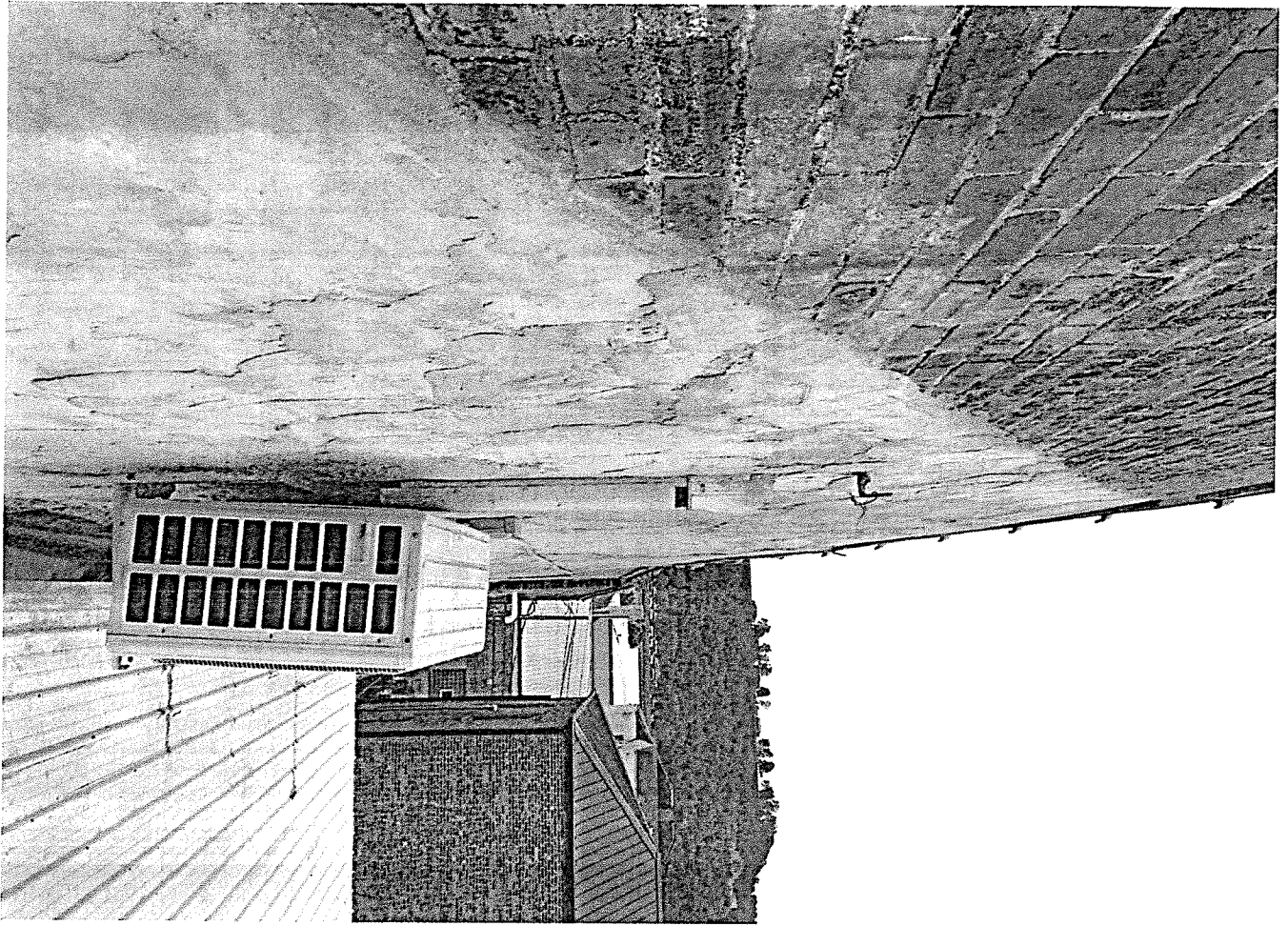
  
Applicant(s) Signature

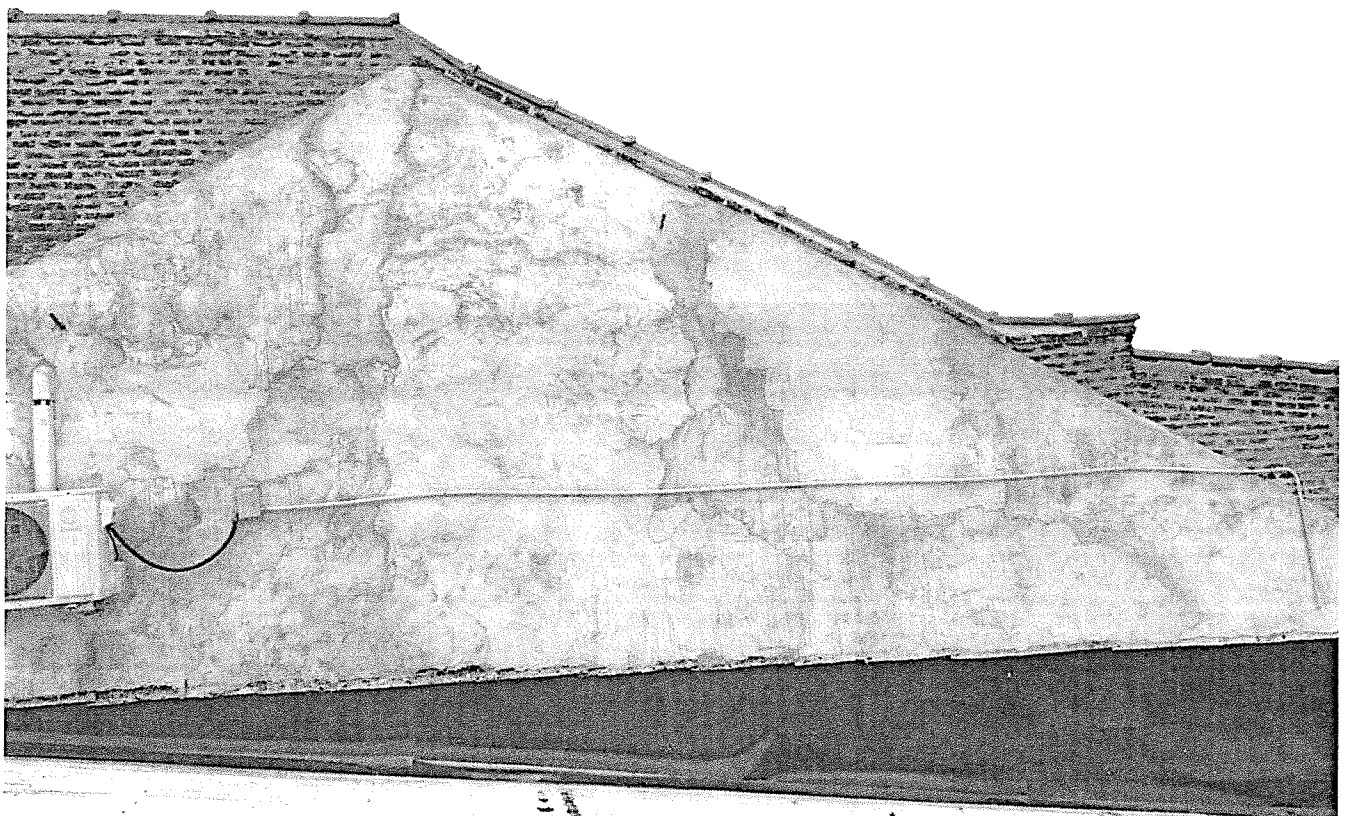
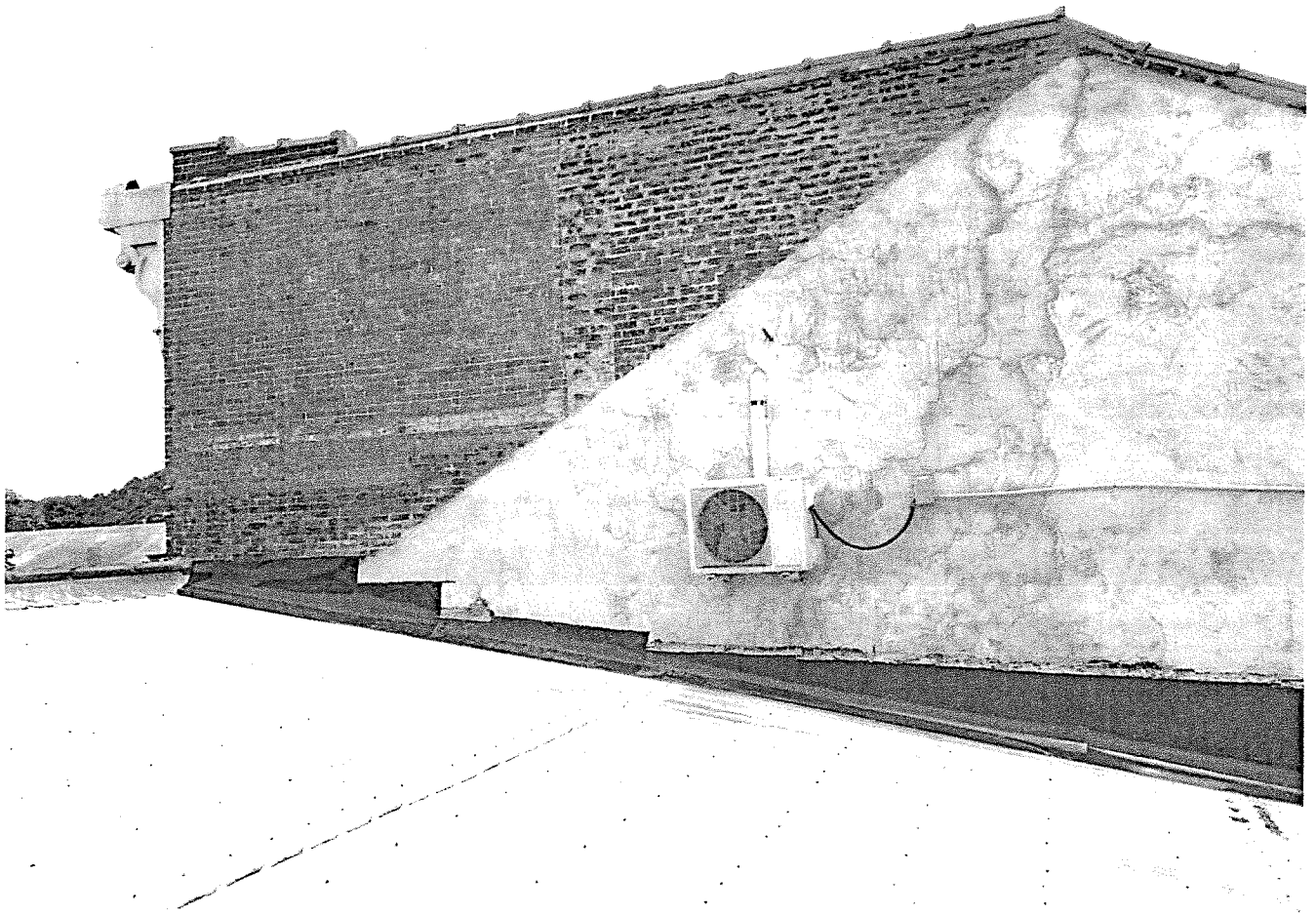
07.05.2024

Date

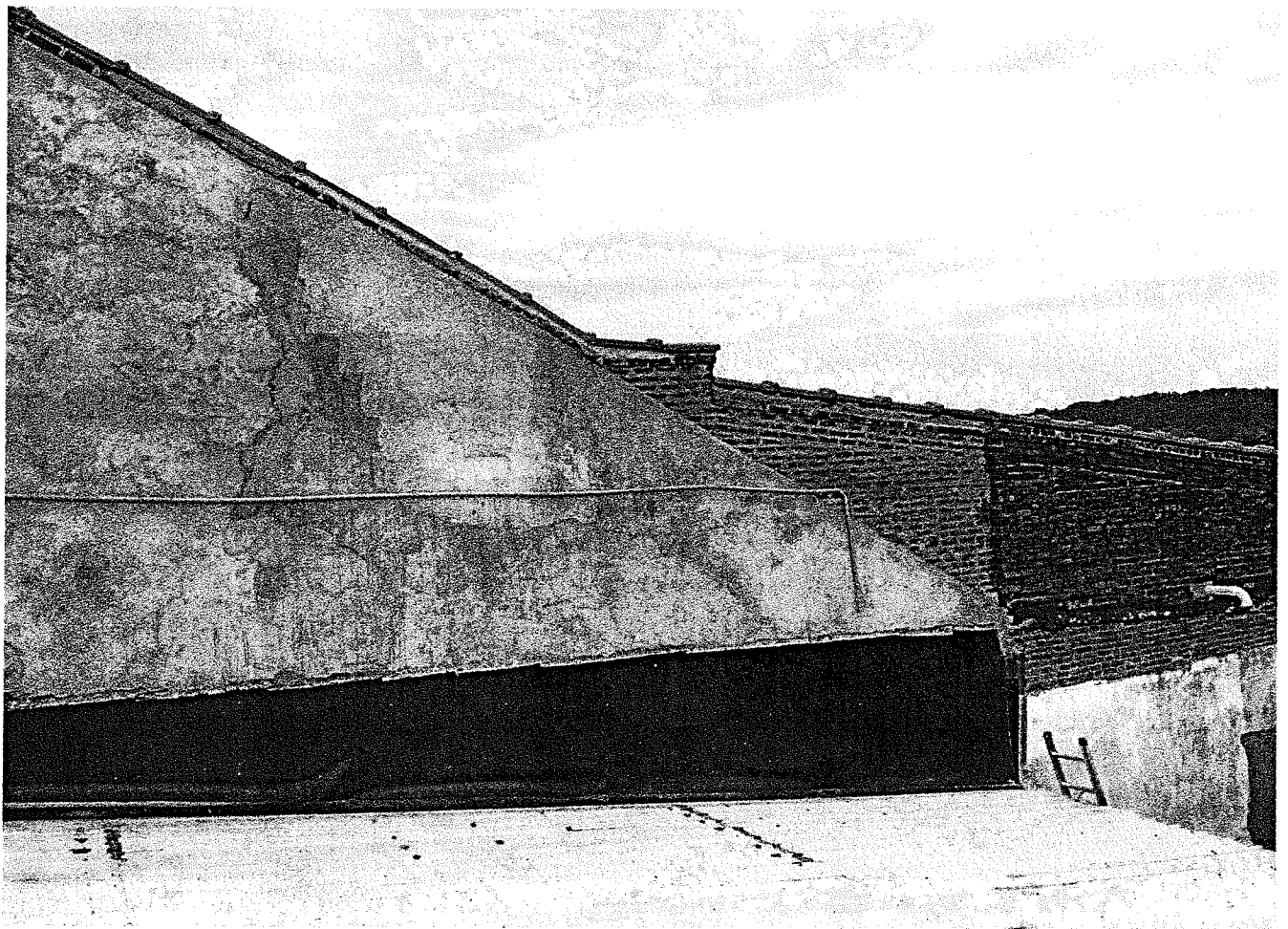
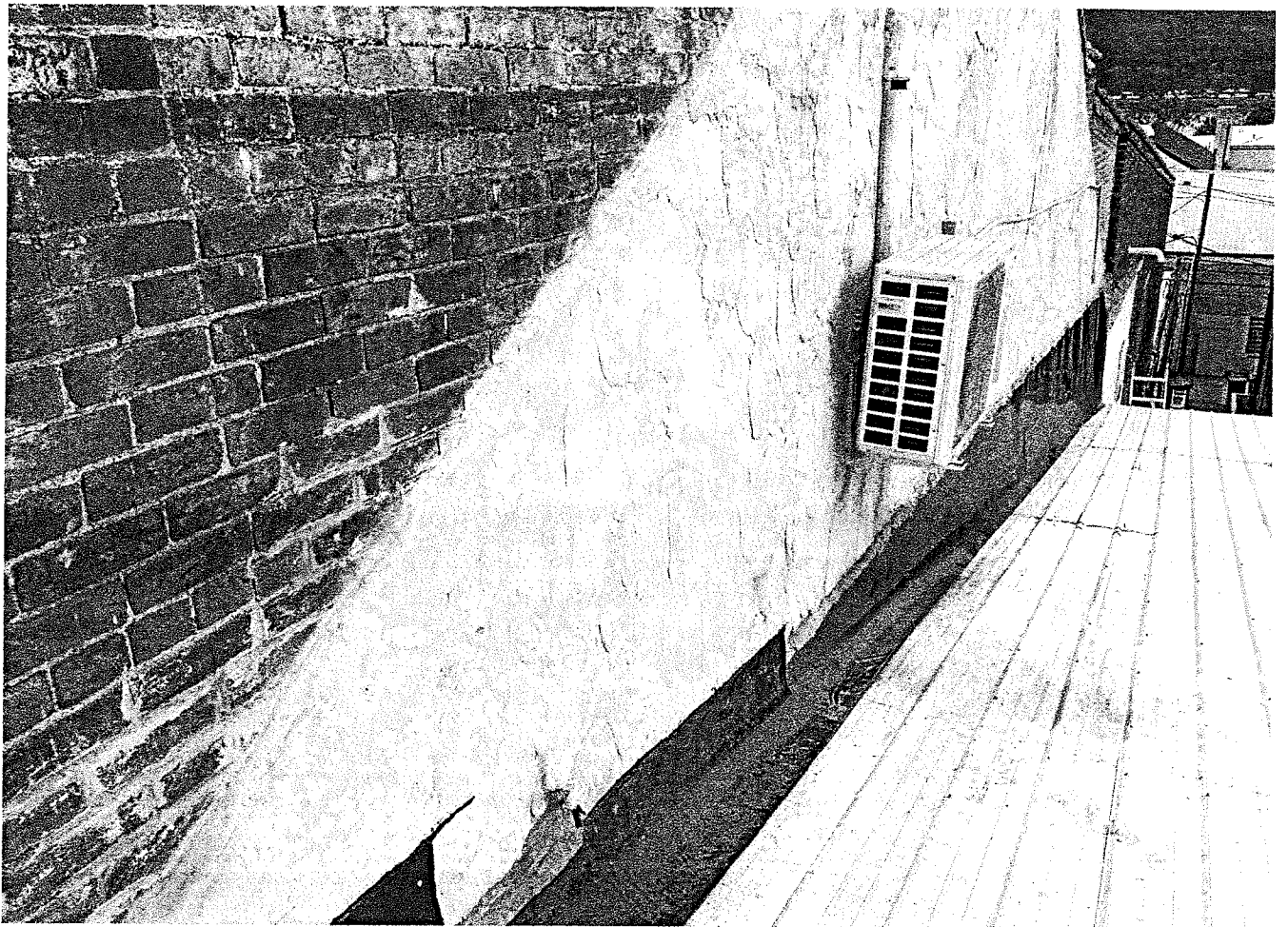


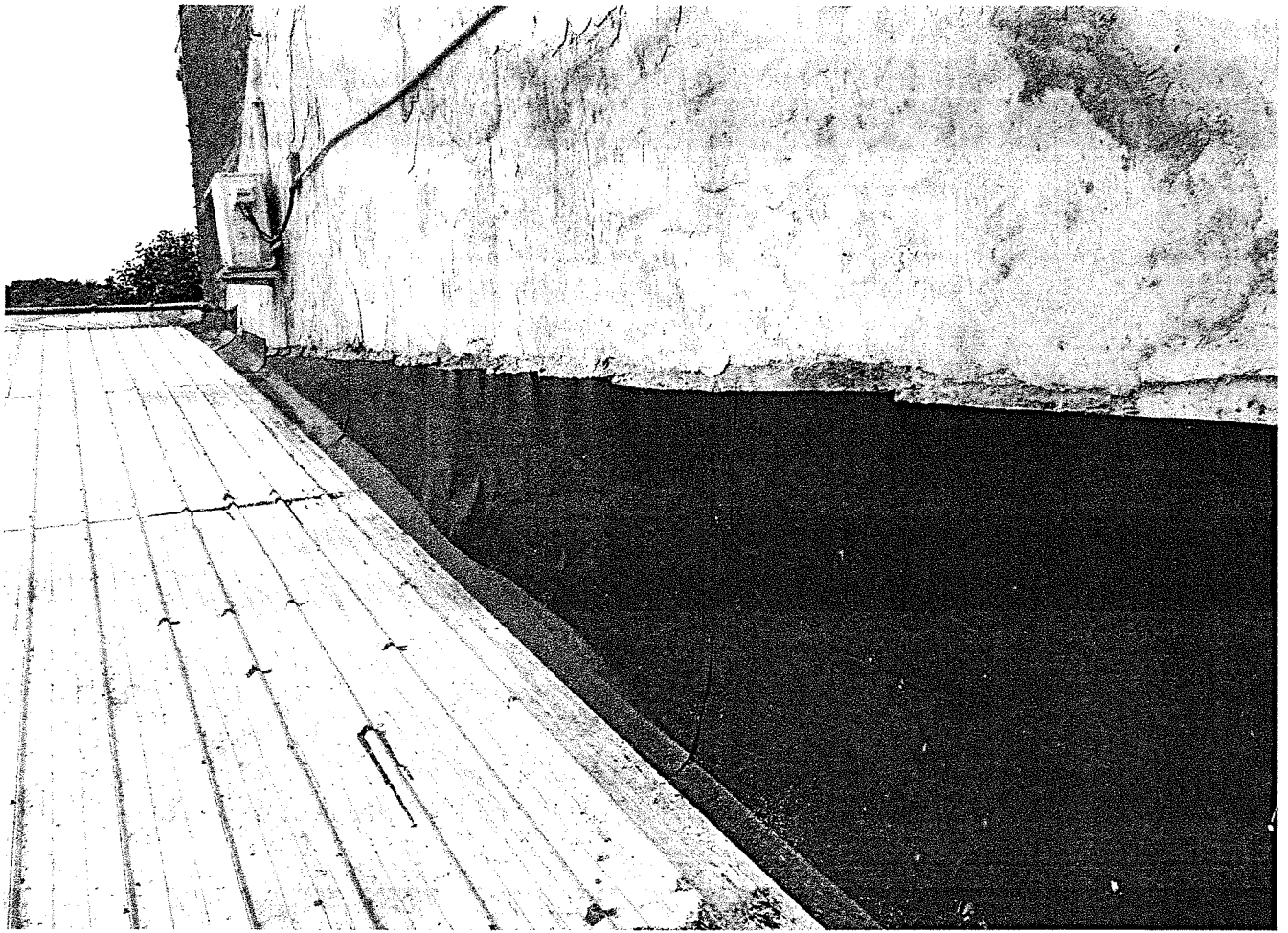












# Receipt

Dennis Webster

properrestorationsllc@gmail.com

Nathan Montoya  
110 E Main St.  
Madison IN 47250

Customer number	Invoice number	Page	Invoice date	Due date
1087	1156	1 / 2	6/30/2024	7/3/2024

**Not to exceed stated price for listed actions, but may be reduced.**

Item	Quantity	Price	Sales tax	Total
<b>Exterior plaster</b> To be carefully removed to repair brick wall. May be partially replaced, to be determined by the condition of the brick behind it. —(Edit) AC unit was left on a wall and we worked around existing mounts.	1	4,600.00		4,600.00
<b>Brick replacement and partial relay</b> A bulge is present near the top of the gable starting at the midpoint and there is a layer of failed exterior plaster likely added when the neighboring buildings third floor was removed. Inner and outer layers are suspected to be separated since the inner has minimal signs of movement. Exterior plaster to be removed, then at least 100+ brick to replace relaid true to the existing wall. — (Edit) ties were added between the inner and outer layers of the parapet wall and ties were also mounted to joist ends to help secure to the outer layer of plaster.	1	9,500.00		9,500.00
<b>Repointing and brick replacement</b> Multiple sections that will not need brick removed will need re-pointed on the exterior. Also, a few sections on the interior will need to be re-pointed where mortar has disintegrated and additional brick on the inside to be replaced.	1	4,200.00		4,200.00
<b>Material</b> Lumber for work stations, lime, sand, cement, flashing, cut off wheels, rotobits, silicone, and fasteners — (Edit) additional material was needed for flashing and working around AC unit.	1	1,022.52		1,022.52

**Continued on page 2**

Thank you for your payment

# Receipt

Dennis Webster

properrestorationsllc@gmail.com

Nathan Montoya  
110 E Main St.  
Madison IN 47250

Customer number	Invoice number	Page	Invoice date	Due date
1087	1156	2 / 2	6/30/2024	7/3/2024

**Not to exceed stated price for listed actions, but may be reduced.**

Item	Quantity	Price	Sales tax	Total
No Sales Tax: $19,322.52 \times 0\% = 0.00$				
6/30/2024 Payment: \$19,322.52				(19,322.52)

<b>Total ex. tax</b>	<b>\$19,322.52</b>
<b>No Sales Tax</b>	<b>\$0.00</b>
<b>Total</b>	<b>\$19,322.52</b>
<b>Paid amount</b>	<b>\$19,322.52</b>
<b>Outstanding amount</b>	<b>\$0.00</b>

Thank you for your payment



# Invoice

## LARDWARE

Invoice # 164198

06/21/2024 11:39  
3100 441115 01  
840100000 47250  
08173 721-0680

06/21/2024 11:39  
Sale

Trans # 11 Batch # 160

CREDIT CARD CHIP READ  
VISA CONTACTLESS  
CARD TYPE \*\*\*\*\*0513 \*17\*\*

TOTAL AMT: USD 515.99  
APPROVAL 190748  
RESP: 190748  
CODE: 417315175748  
TRANSEID: 584175363975821

APP NAME: 02 80641  
ATD: 000000000000  
ATM: 0107  
ATC: 32E058081542814  
TOL: 00011703400000  
TAD:

Page #  
June 21, 2024  
11:41:08 AM

Description	Price	Amount
HYDRATED LIME	\$15.99	\$31.98

Sub Total	\$31.98
Sales Tax	\$2.24
Services	\$0.00
<b>Total Due</b>	<b>\$34.22</b>
Pay Type:	Visa
Change Due	\$0.00

NO SIGNATURE REQUIRED

Thank You!  
CUSTOMER COPY



Nathan Montoya <nathan@villageightsbooks.com>

**Fwd: Your Lowe's Purchase Receipt**

1 message  
Proper Restorations <properrestorations@gmail.com>  
To: nathan@villageightsbooks.com

Sun, Jun 30, 2024 at 11:37 AM

Forwarded message  
From: **Lowe's Home Improvement** <do-not-reply@receipt.lowes.com>  
Date: Fri, Jun 28, 2024 at 6:51 PM  
Subject: Your Lowe's Purchase Receipt  
To: <properrestorations@gmail.com>



**Your Lowe's Receipt**

Thanks for shopping at Lowe's. Use this just like you would a paper receipt as proof of purchase, record keeping, returns and more.

**LOWE'S HOME CENTERS, LLC**  
511 Ivy Tech Drive  
Madison, IN 47250  
(812) 801-2000

Transaction #: 150688947  
Order Date: 06/28/24 18:51:43



Item	Price
FLEX PASTE BLACK 90Z	\$ 14.38

Item #: 2674780  
1 @ 14.38

DW 1/8-IN HEX TITANIUM BI \$ 13.96

Item #: 2693884  
2 @ 6.98

DW 3/16-IN HEX TITANIUM B \$ 6.98

Item #: 689771  
1 @ 6.98

Invoice 97202 Subtotal \$ 35.32

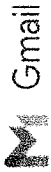
Invoice 97202 Subtotal \$ 35.32  
 Subtotal \$ 35.32  
 Total Tax \$ 2.47  
 Total \$ 37.79  
 Change \$ 0.00

Total # of items purchased: 4  
Excludes fees, services and special order items

Payment: DEBITVISA ending in 0413 \$ 37.79  
 AuthTime 06/28/24 18:51:22  
 AuthCD 255637  
 REFID 173518202690  
 TSI 6800  
 TVR 8080048000  
 Order Date 06/28/24 18:51:43  
 Store # 1735  
 Terminal # 18

Tell us how we did! Enter for a chance to win!

STAY SURVEY



Nathan Montoya <nathan@villageightsbooks.com>

**Fwd: Your Lowe's Purchase Receipt**

1 message

Proper Restorations <properrestorations@gmail.com>  
To: nathan@villageightsbooks.com

Sun, Jun 30, 2024 at 11:39 AM

Forwarded message

From: Lowe's Home Improvement <do-not-reply@receipts.lowes.com>  
Date: Fri, Jun 14, 2024 at 8:40 AM  
Subject: Your Lowe's Purchase Receipt  
To: <properrestorations@gmail.com>



**Your Lowe's Receipt**

Thanks for shopping at Lowe's. Use this just like you would a paper receipt as proof of purchase, record keeping, returns and more.

LOWE'S HOME CENTERS, LLC  
511 Ivy Tech Drive  
Madison, IN 47250  
(812) 801-2000

Transaction #: 687897413  
Order Date: 06/14/24 08:40:05



Item	Price
2-4-10 TOP CHOICE KD WHIT	\$ 27.28
Item #: 27172	
4 @ 6.82	

PROJECT SOURCE HH SPRAYER \$ 15.96

Item #: 5427306  
2 @ 7.98

Invoice 88166 Subtotal \$ 43.24

Invoice 88166 Subtotal \$ 43.24  
 Subtotal \$ 43.24  
 Total Tax \$ 3.03  
 Total \$ 46.27  
 Change \$ 0.00

Total # of Items purchased: 6  
Excludes fees, services and special order items

Payment: DEBIT/VISA ending in 0413 \$ 46.27  
 AuthTime 06/14/24 08:39:49  
 AuthCD 801729  
 REFID 173523166380  
 TSI 6800  
 TVR 8080048000  
 Order Date 06/14/24 08:40:05  
 Store # 1735  
 Terminal # 23

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 O U R I D #881667 173521 666372 \*\* \*\* NO PURCHASE NECESSARY TO ENTER!  
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 WINNERS AT: www.lowes.com/survey \*\*\*\*\*





Nathan Montoya <nathan@villagelightsbooks.com>

**Fwd: Your Lowe's Purchase Receipt**

1 message

Proper Restorations <properrestorationslic@gmail.com>  
To: nathan@villagelightsbooks.com

Sun, Jun 30, 2024 at 11:39 AM

Forwarded message

From: Lowe's Home Improvement <do-not-reply@lowes.com>  
Date: Mon, Jun 17, 2024 at 1:04 PM  
Subject: Your Lowe's Purchase Receipt  
To: <properrestorationslic@gmail.com>



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Thanks for shopping at Lowe's. Use this just like you would a paper re proof of purchase, record keeping, returns and more.

LOWE'S HOME CENTERS, LLC  
511 Ivy Tech Drive  
Madison, IN 47250  
(812) 801-2000

Transaction #: 438649294  
Order Date: 06/17/24 13:04:45



Item	Price
60-LB TYPE-N MORTAR MIX	\$ 30.12
Item #: 10391	
4 @ 7.53	
<b>Invoice 97710 Subtotal</b>	<b>\$ 30.12</b>

Invoice 97710 Subtotal \$ 30.12  
 Subtotal \$ 30.12  
 Total Tax \$ 2.11  
 Total \$ 32.23  
 Change \$ 0.00

Total # of Items purchased: 4  
Excludes fees, services and special order items

Payment: DEBITVISA ending in 0413 \$ 32.23  
 AuthTime 06/17/24 13:04:24  
 AuthCD 958101  
 REFID 173523710660  
 TSI 6800  
 TVR 8080048000  
 Order Date 06/17/24 13:04:45  
 Store # 1735  
 Terminal # 23

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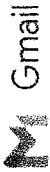
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 OUR ID #977103 173561 693227 \*\* \*\* NO PURCHASE NECESSARY TO ENTER  
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Nathan Montoya <nathan@villagelightbooks.com>

\$ 16.98

**Fwd: Your Lowe's Purchase Receipt**

1 message

Proper Restorations <properrestorationsllc@gmail.com>  
To: nathan@villagelightbooks.com

Sun, Jun 30, 2024 at 11:39 AM

Forwarded message

From: Lowe's Home Improvement <do-not-reply@receipt.lowes.com>  
Date: Tue, Jun 18, 2024 at 6:42 PM  
Subject: Your Lowe's Purchase Receipt  
To: <properrestorationsllc@gmail.com>



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LOWE'S HOME CENTERS, LLC  
511 Ivy Tech Drive  
Madison, IN 47250  
(812) 801-2000

Transaction #: 504810307  
Order Date: 06/18/24 18:42:22



Item	Price
PROJECT SOURCE MINI ROLLE	\$ 1.68
Item #: 172223	
1 @ 1.68	

VAUGHAN 15IN SUPERBAR

Item #: 348331  
2 @ 8.49

5-GAL LOWES BUCKET-UNITED

\$ 9.96

Item #: 954434  
2 @ 4.98

OSI QUAD MAX 001 WHITE 9.

\$ 118.56

Item #: 662750  
10.98 Discount Ea -1.10  
12 @ 9.88

Invoice 71646 Subtotal

\$ 147.18

Invoice 71646 Subtotal

\$ 147.18

Subtotal

\$ 147.18

Total Tax

\$ 10.30

Total

\$ 157.48

Change

\$ 0.00

Total Savings This Trip: \$ 13.20

Total # of items purchased: 17  
Excludes fees, services and special order items

Payment: DEBIT/VISA ending in 0413

\$ 157.48

AuthTime	06/18/24 18:41:31
AuthCD	184937
REFID	173518646478
TSI	6800
TVR	8080048000
Order Date	06/18/24 18:42:22



Nathan Montoya <nathan@villageightsbooks.com>

**Fwd: Your Lowe's Purchase Receipt**

1 message

Proper Restorations <properrestorationsic@gmail.com>  
To: nathan@villageightsbooks.com

Sun, Jun 30, 2024 at 11:38 AM

Forwarded message

From: Lowe's Home Improvement <do-not-reply@receipt.lowes.com>  
Date: Thu, Jun 20, 2024 at 2:56 PM  
Subject: Your Lowe's Purchase Receipt  
To: <properrestorationsic@gmail.com>



# Your Lowe's Receipt

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LOWE'S HOME CENTERS, LLC  
511 Ivy Tech Drive  
Madison, IN 47250  
(812) 801-2000

Transaction #: 97366418  
Order Date: 06/20/24 14:56:05



Item	Price
HGSW ALL-PURPOSE POWER PR	\$ 29.98
Item #: 5474398	
1 @ 29.98	
<b>Invoice 76244 Subtotal</b>	<b>\$ 29.98</b>

Invoice 76244 Subtotal	\$ 29.98
Subtotal	\$ 29.98
Total Tax	\$ 2.10
Total	\$ 32.08
Change	\$ 0.00

**Total # of Items purchased: 1**

Excludes fees, services and special order items

Payment: DEBIT/ISA ending in 4542	\$ 32.08
AuthTime	06/20/24 14:55:52
AuthCD	314527
REFID	173518244797
TSI	6800
TVR	8080048000
Order Date	06/20/24 14:56:05
Store #	1735
Terminal #	18

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SECRET KEY

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O U R I D #762440 173501 729394 \*\* \*\* NO PURCHASE NECESSARY TO ENTER!  
VOID WHERE PROHIBITED. MUST BE 18 OR OLDER TO ENTER. \*\* OFFICIAL  
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Nathan Montoya <nathan@vllagelightsbooks.com>

**Fwd: Your Lowe's Purchase Receipt**

1 message

Proper Restorations <properrestorationsllc@gmail.com>  
To: nathan@vllagelightsbooks.com

Sun, Jun 30, 2024 at 11:38 AM

----- Forwarded message -----

From: Lowe's Home Improvement <do-not-reply@receipts.lowe.com>  
Date: Fri, Jun 21, 2024 at 8:08 AM  
Subject: Your Lowe's Purchase Receipt  
To: <properrestorationsllc@gmail.com>



**Your Lowe's Receipt**

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**LOWE'S HOME CENTERS, LLC**  
511 Ivy Tech Drive  
Madison, IN 47250  
(812) 801-2000

Transaction #: 717105889  
Order Date: 06/21/24 08:08:39



Item	Price
OK 92LB PORTLAND CEMENT T	\$ 35.94
Item #: 10352	
2 @ 17.97	
<b>Invoice 77385 Subtotal</b>	<b>\$ 35.94</b>

Invoice 77385 Subtotal \$ 35.94  
 Subtotal \$ 35.94  
 Total Tax \$ 2.52  
 Total \$ 38.46  
 Change \$ 0.00

Total # of Items purchased: 2  
 Excludes fees, services and special order items

Payment: DEBIT/VISA ending in 0413 \$ 38.46  
 AuthTime 06/21/24 08:08:31  
 AuthCD 692833  
 REFID 173501385974  
 TSI 6800  
 AID A0000000980840  
 TVR 80800048000  
 Order Date 06/21/24 08:08:39  
 Store # 1735  
 Terminal # 1

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 BY COMPLETING A SHORT SURVEY \*\* WITHIN ONE WEEK AT: www.lowes.cc  
 O U R I D #773851.173521 739836 \*\* \*\* NO PURCHASE NECESSARY TO ENTER  
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 WINNERS AT: www.lowes.com/survey \*\*\*\*\*

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Nathan Montoya <nathan@villageightsbooks.com>

### Fwd: Your Lowe's Purchase Receipt

1 message

Proper Restorations <properrestorationsllc@gmail.com>  
To: nathan@villageightsbooks.com

Sun, Jun 30, 2024 at 11:38 AM

Forwarded message -----

From: Lowe's Home Improvement <do-not-reply@receipt.lowes.com>  
Date: Tue, Jun 25, 2024 at 11:31 AM  
Subject: Your Lowe's Purchase Receipt  
To: <properrestorationsllc@gmail.com>



## Your Lowe's Receipt

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LOWE'S HOME CENTERS, LLC  
511 Ivy Tech Drive  
Madison, IN 47250  
(812) 801-2000

Transaction #: 284415423  
Order Date: 06/25/24 11:31:17



Item	Price
OK 92LB PORTLAND CEMENT T	\$ 17.97
Item #: 10352	
1 @ 17.97	
<b>Invoice 88436 Subtotal</b>	<b>\$ 17.97</b>

Invoice 88436 Subtotal	\$ 17.97
Subtotal	\$ 17.97
Total Tax	\$ 1.26
Total	\$ 19.23
Change	\$ 0.77

Total # of items purchased: 1

Excludes fees, services and special order items

Payment: CASH 0000 \$ 20.00

AuthTime 06/25/24 11:30:41

Order Date 06/25/24 11:31:17

Store # 1735

Terminal # 23

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 O U R I D #884365 173541 770856 \*\* \*\* NO PURCHASE NECESSARY TO ENTER  
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1000 Lowe's Boulevard, Mooresville, NC 28117



Nathan Montoya <nathan@villagelightsbooks.com>

**Fwd: Your Lowe's Purchase Receipt**

1 message

Proper Restorations <properrestorationsllc@gmail.com>  
To: nathan@villagelightsbooks.com

Sun, Jun 30, 2024 at 11:38 AM

----- Forwarded message -----

From: Lowe's Home Improvement <do-not-reply@receipt.lowes.com>  
Date: Mon, Jun 24, 2024 at 6:40 PM  
Subject: Your Lowe's Purchase Receipt  
To: <properrestorationsllc@gmail.com>

KB 11/64-IN HEX TITANIUM

\$ 14.04

Item #: 2660836  
3 @ 4.68

TAP 316X1-3/4IN WHT STAR

\$ 29.98

Item #: 5685586  
1 @ 29.98

Invoice 87305 Subtotal \$ 73.96



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LOWE'S HOME CENTERS, LLC  
511 Ivy Tech Drive  
Madison, IN 47250  
(812) 801-2000

Transaction #: 667882179  
Order Date: 06/24/24 18:40:08



Item	Price
9-OZ POWER GRAB ULTIMATE	\$ 29.94

Item #: 818868  
3 @ 9.98

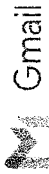
Invoice 87305 Subtotal \$ 73.96  
 Subtotal \$ 73.96  
 Total Tax \$ 5.18  
 Total \$ 79.14  
 Change \$ 0.00

Total # of Items purchased: 7  
Excludes fees, services and special order items

Payment: DEBITVISA ending in 0413 \$ 79.14  
 AuthTime 06/24/24 18:39:54  
 AuthCD 560145  
 REFID 173521305826  
 TSI 6800  
 TVR 8080048000  
 Order Date 06/24/24 18:40:08  
 Store # 1735  
 Terminal # 21

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Nathan Montoya <nathan@villagelightsbooks.com>

**Fwd: Your Lowe's Purchase Receipt**

1 message

Proper Restorations <properrestorationsllc@gmail.com>  
To: nathan@villagelightsbooks.com

Sun, Jun 30, 2024 at 11:37 AM

Forwarded message -----

From: Lowe's Home Improvement <do-not-reply@receipt.lowes.com>  
Date: Wed, Jun 26, 2024 at 9:00 AM  
Subject: Your Lowe's Purchase Receipt  
To: <properrestorationsllc@gmail.com>

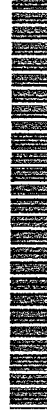


**Your Lowe's Receipt**

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LOWE'S HOME CENTERS, LLC  
511 Ivy Tech Drive  
Madison, IN 47250  
(812) 801-2000

Transaction #: 68343198  
Order Date: 06/26/24 09:00:56



Item	Price
VENOM 50CT MAX GRIP	\$ 18.98
Item #: 1900653	
1 @ 18.98	
<b>Invoice 90173 Subtotal</b>	<b>\$ 18.98</b>

Invoice 90173 Subtotal \$ 18.98  
 Subtotal \$ 18.98  
 Total Tax \$ 1.33  
 Total \$ 20.31  
 Change \$ 0.00

Total # of Items purchased: 1

Excludes fees, services and special order items

Payment: DEBITVISA ending in 0022 \$ 20.31

AuthTime 06/26/24 09:00:34  
 AuthCD 575478  
 REFID 173523173824  
 TSI 6800  
 TVR 8080048000  
 Order Date 06/26/24 09:00:56  
 Store # 1735  
 Terminal # 23

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Nathan Montoya <nathan@villagehighbooks.com>

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1 message

Proper Restorations <properrestorationslc@gmail.com>  
To: nathan@villagehighbooks.com

Sun, Jun 30, 2024 at 11:37 AM

Forwarded message

From: Lowe's Home Improvement <do-not-reply@receipt.lowes.com>  
Date: Thu, Jun 27, 2024 at 1:10 PM  
Subject: Your Lowe's Purchase Receipt  
To: <properrestorationslc@gmail.com>



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LOWE'S HOME CENTERS, LLC  
511 Ivy Tech Drive  
Madison, IN 47250  
(812) 801-2000

Transaction #: 82082513  
Order Date: 06/27/24 13:10:22



Item	Price
2-4-8 TOP CHOICE #2-PRIME	\$ 9.70
Item #: 7001	
2 @ 4.85	

MAX 17 OZ BLACK SPRAY \$ 16.98

Item #: 3746274  
1 @ 16.98

Invoice 93482 Subtotal \$ 26.68

Invoice 93482 Subtotal \$ 26.68  
 Subtotal \$ 26.68  
 Total Tax \$ 1.87  
 Total \$ 28.55  
 Change \$ 0.00

Total # of Items purchased: 3  
Excludes fees, services and special order items

Payment: DEBIT/VISA ending in 0413 \$ 28.55  
 AuthTime 06/27/24 13:10:08  
 AuthCD 770764  
 REFID 173501482706  
 TSI 6800  
 AID A0000000980840  
 TVR 8080048000  
 Order Date 06/27/24 13:10:22  
 Store # 1735  
 Terminal # 1

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 O U R I D #934824 173561 790196 \*\* \*\* NO PURCHASE NECESSARY TO ENTER  
 VOID WHERE PROHIBITED. MUST BE 18 OR OLDER TO ENTER. \*\* OFFICI  
 WINNERS AT: www.lowes.com/survey \*\*\*\*\*