



Hancock County Tourism Commission

Grant Application

Hancock County Tourism & Visitor Center Office 119 W. North St., Greenfield, IN 46140
317-477-8687 ♦ info@visitinhancock.org ♦ www.visitinhancock.org

Company, Business or Organization Name Applying for the Grant:

Hancock County 4-H Agriculture Association

Contact Person and Title: Josh Phares - President

Mailing Address: 620 North Apple St

City: Greenfield State: IN Zip: 46140

Preferred Phone Number: 317-498-4791 Alternate Number: 317-462-1469

Email: jphares67@gmail.com

Date of Incorporation: 1940

Federal Tax ID Number (if applicable) 31-1159963

Are you a 501c3 Not for Profit? Yes If you are not, how are you considered a Not for Profit? _____

Tax Exempt Number: 000144795

Please List Board of Directors, Committee or Project Members (you may attach a separate sheet with a list of all board members if needed):

President – Josh Phares, Vice President – Mike Merlau
Secretary – Tammy Bearhope, Treasurer – David Wildman
Assistant Treasurer- Mike Manship

Request Information

Describe the project need or event: restrooms in the exhibit hall at the Hancock County 4-H Fairgrounds will be rebuilt to make them compliant with the Americans with Disabilities Act. The restrooms will get all new fixtures and new floors, and the ceilings will be lowered

If the need is for an event, what is your estimated attendance? Will be used for future events

How will the funding of this request increase tourism or impact other Hancock County businesses in a positive manner? It will make the facility acceccible to those who need ADA compliant facilities.

Which will market to a new audience for use of the facilities.



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How are you planning on engaging the county hotel industry in your event or project?
We publicize the county hotels on our website with a link to the Hancock County Tourism website.

We will now be able to include ADA compliant restrooms in our rental agreement and promotion.

How do you plan to measure the tourism impact on visitors with this project or event?
We will be able to visually count the number of handicap cars periodically throughout events as well as keep track

of attendees of events throughout the year by a licence plate review.

Tourism Support Budget

What is the total amount that you are requesting the Tourism Commission to support?
\$98,150.00

Please provide a breakdown of the Tourism Support Budget for your event. You may submit separate documents.

Project Needs Description: Development of new hancicap restrooms in the exhibit hall.

(i.e. advertising, project support, studies or plans, operating expenses)

\$ _____
\$ _____
\$ _____
\$ _____

Please attach an overall budget for your ENTIRE event or project that includes the Tourism Support Budget as well as the other areas of your budget that are not to be supported by Tourism. Please show how your own organization is supporting this project, and how other organizations, sponsors, or other grants are fulfilling the need for this event or project.

What funding, if any, is being sought from other organizations for this project? _____

(When possible, the Hancock County Tourism Commission suggests that local companies or contractors be utilized when assisting with this project)



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Have you previously requested or been granted funds by the Hancock County Tourism Commission? If so, when and for what purpose were those funds used?

Yes. Funds used to repave parking lot and mark handicap spaces. The project was to assist with safety for attendees coming to the various events at the fairgrounds rental buildings.

Timing

When are the funds needed for this project? July 2019

If this is a long term project, is there anyway that funds could be split up over time, with partial payment now, and partial payment at a later date? If yes, how are you proposing this split to happen?

Project will take 4-6 weeks to complete. Project needs to start and finish due to events being held at the facility.

When will the event be completed or the project finished? Approx. mid-August

You will need to submit a follow up Final Grant Report Sixty days after the completion of this project or event. On what date, will the Tourism Commission be expecting your Final Grant Report along with all of the receipts detailing the expenditures for the Tourism Support Budget listed above? By October 1, 2019

Signature

I hereby submit this application and supportive documents for the proposed request. I have read and understand that I must comply with the Grant Guidelines attached. I understand that if the funded request is approved, the printed and or broadcast material must indicate that **a source of the funding was via the Hancock County Tourism and Visitor Center.**

Applicant Signature:  Date: 5-31-2019

Title: President - Hancock County 4-H Ag Association

Company or Business Name: Hancock County 4-H Agriculture Association

If approved; what name should be listed on the check? Hancock County 4-H Agriculture Association

How would you like to receive the check? Circle one

Pick up at Visitor Center / Mail to address on application / Mail to address below.

Mail to: _____



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FOR TOURISM COMMISSION USE ONLY

Hancock County Tourism Commission Approval: Yes or No

Amount Approved: _____

Check #: _____ Date: _____

First Signature: _____ Date: _____

Second Signature: _____ Date: _____

Final Grant Report Received? Yes or No

When: _____ Complete? _____

Submitted to the Board for Review: _____

Returned Funds? Yes or No If yes, amount: _____

Notes:

Restroom Flooring Quote

Teri Barnett <teri@espritdesign.com>
Reply-To: <teri@espritdesign.com>
To: Josh Phares <jphares67@gmail.com>

Mon, May 27, 5:39 PM

Hi Josh. I hope you're having a good holiday weekend!

Attached is the cost to do the restroom floors in the sheep barn. Do you want to add this to the existing project? If so, I'll work it into the contract.

Here are the adjusted numbers:

total deduct for removal of temporary restroom hookup: \$1690

previous price quote = \$93350

addition of floor = \$6500

brings new price quotation for entire project to \$98150

Please let me know how you'd like to proceed.

Thank you

teri

Teri Barnett RID NCIDQ

Principal/Designer

Esprit Design LLC

Space Planning Interior Design Facilities Management

RID 00594/NCIDQ 9384

317.379.3451

www.espritdesign.com

Avouch Contractors, Inc.
6845 Hawthorn Park Drive
Indianapolis, IN 46220

Estimate

Date	Estimate #
3/26/2019	19-0198
PHONE#	317-253-2609

Name / Address
HANCOCK COUNTY FAIRGROUNDS 620 APPLE STREET GREENFIELD IN 46140

Ship To
HANCOCK COUNTY FAIRGROUNDS 620 APPLE STREET GREENFIELD IN 46140

Project Manager	Project	Store Number	PO
DWS/TERI	19-0198	HANCOCK COUNTY FAIR...	

Item	Description	Qty	Cost	Total
	1. OBTAIN ALL PERMITS AND PERFORM INSPECTIONS AS REQUIRED FOR BATHROOMS AND HALLWAY RENOVATION 2. DEMO SINKS, MIRRORS, CEILINGS, TOILETS, DIFFUSERS, PARTITIONS, FLOORS AND BASE MOLDING AND URINAL BODIES AND DISCARD 3. REMOVE AND SAVE FOR RE-USE GRAB BARS, CHANGING STATIONS, TP AND PAPER TOWEL HOLDERS, AIR FRESHENERS AND URINAL FLUSH VALVES 4. LEVEL/RE-SLOPE FLOORS TO DRAINS AS DISCUSSED (primarily men's room) 5. INSTALL EPOXY FLOORING PER SPECIFICATIONS 6. REPAIR CONCRETE BLOCK AS NEEDED/ PRIME AND PAINT WALLS 7. PERFORM ALL TASKS OUTLINED IN DRAWINGS FOR HVAC CONTRACTOR 8. PROVIDE AND INSTALL ACOUSTICAL CEILINGS AS SPECIFIED 9. PERFORM NECESSARY ELECTRICAL CONNECTIONS AND INSTALL LIGHTING (electrician has offered lighting fixture alternative if desired for cost savings send RFI) 10. PERFORM PLUMBING CONNECTIONS/PROVIDE AND INSTALL SPECIFIED FIXTURES/PROVIDE HOOKUPS FOR TEMPORARY TOILETS NE CORNER OF BUILDING 11. PROVIDE AND INSTALL NEW PARTITIONS, MIRRORS AND LAVEX IMP1102 WH PER DRAWING SPECIFICATIONS			
Project Total			93350.00	93,350.00

Accepted: _____
 By: _____
 Owner: _____
 Date: _____

Total **\$93,350.00**



Avouch Contractors Inc.
232 N. Main Street Maxwell, IN 46154
Office 317.253.2609 Fax 317.255.6966

Date: 5/20/2019

Customer: HANCOCK COUNTY FAIRGROUNDS 620 APPLE STREET GREENFIELD, IN 46140	Estimate: 19-359
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We, Avouch Contractors Inc., propose to furnish all labor, materials, equipment, supervision, and insurance to complete the following scope of work.

Scope of Work
1. EPOXY FLOORING IN ADDITIONAL BATHROOMS AND HALLWAY
2. MECHANICALLY GRIND AS NEEDED TO CSP-2 OR BETTER PROFILE
3. APPLY BASE COAT OF ROCK-TRED LV 100% SOLIDS BPA-FREE INDUSTRIAL POLYMER
4. INSTALL GRANITE ROCK 100% SOLIDS EPOXY QUARTZ SURFACING SYSTEM, DOUBLE BROADCAST
5. PROTECTIVE TOPCOAT APPLIED WITH ROCK-TRED'S ULTRA HIGH BUILD CLEAR COAT
6. BROADCAST 60 GRIOT AO AGGREGATE FOR NON-SLIP
7.
8. PROJECT TOTAL \$6500
9.
10.
11.
12.

Payment Terms: Due in Full Net 30

Confidentiality notice: This proposal includes the work product of Avouch Contractors Inc. and is confidential. If you are not a representative of the corporation listed above, please do not read, use, disclose, copy, or distribute this proposal.

March 18, 2019

SECTION 01030 – BID FORM

Note: the owner is tax exempt and will supply exemption number to the successful bidder

1. Restrooms:	Supplier / Line Item Cost	Sub-Contractor	Notes
Demolition:	\$ <u>9,300</u>	_____	_____
General Construct	\$ <u>33,000</u>	_____	_____
Plumbing:	\$ <u>60,500</u>	_____	_____
HVAC:	\$ <u>9,100</u>	_____	_____
Electrical:	\$ <u>6,100</u>	_____	_____

1. TOTAL CONSTRUCTION: \$ 118,000

2. GENERAL REQUIREMENTS: \$ 13,400

TOTAL CONSTRUCTION COST: * \$ 131,400 *
(Total Bid Amount)

Alternate No. 1: \$ N/A

Alternate No. 2: \$ N/A

Allowance No. 1: \$ N/A

Hancock County Fairgrounds
Restroom Renovations
Greenfield, IN

March 18, 2019

I acknowledge receipt of () Addendum's issued prior to submitting this bid, and all addendum items and alternates listed above are a part of this Bid. Date of the Construction Drawings / specifications utilized by for preparing this bid:

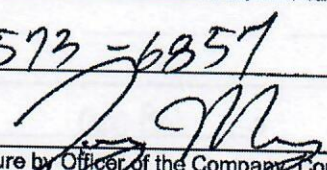
Submitted by:
Business Name: CTI CONSTRUCTION, LLC

Address: 1016 3RD AVENUE SW, SUITE 200

City, State, Zip: CARMEL, IN 46032

Phone: 317-573-6281

Fax: 317-573-6857

Representative: 
Signature by Officer of the Company, Corporation, Partnership,
or Sole Proprietor
Tony Meclurg - Vice President
Type Name and Title of Representative:

In addition to the information completed and submitted above, a complete bid will contain the following information:

1. Qualifications of the Respondent – Completed AIA Document, A305, Contractor's Qualification Statement.
2. Resumes of key project staff.
3. Proposed construction schedule for completion of the work.
4. Firm Profile and History showing work completed over the last five years (min) with date of completion, type of project, size of project, approximate value of construction work, primary contact for project (do not list unless the same entity was the contractor on that project as the entity proposing on this work. i.e. do not list work done under another name.)
- 5.

END OF SECTION

SECTION 01030 - BID FORM

Note: the owner is tax exempt and will supply exemption number to the successful bidder

<u>1. Restrooms:</u>	<u>Supplier / Line Item Cost</u>	<u>Sub-Contractor</u>	<u>Notes</u>
Demolition:	\$ <u>1,040</u>	<u>T&W Corp.</u>	
General Construct	\$ <u>43,785</u>	<u>T&W Corp.</u>	
Plumbing:	\$ <u>43,895</u>	<u>TMI Mechanical</u>	
HVAC:	\$ <u>2,170</u>	<u>TMI Mechanical</u>	
Electrical:	\$ <u>5,800</u>	<u>Total Electric of Indiana</u>	
<u>1. TOTAL CONSTRUCTION:</u>		\$ <u>96,690</u>	
<u>2. GENERAL REQUIREMENTS:</u>		\$ <u>35,022</u>	
<u>TOTAL CONSTRUCTION COST:</u> (Total Bid Amount)		\$ <u>131,712</u>	
<u>Alternate No. 1:</u>		\$ <u>Deduct \$ 23,380⁰⁰</u>	<u>(see Below)</u>
<u>Alternate No. 2:</u>		\$ _____	
<u>Allowance No. 1:</u>		\$ _____	

A11#1

Delete two (2) Sloan DSWD Stainless Steel Designer Sinks and install laminated wood base, wall hung Casework with three (3) bowl integral Sink Corian tops
1- each restroom.

(See Attached Sample Photo's)

T&W Corp.
David Parnell