



Your Complete Glass Service Center

July 21, 2021

Crystal Lake Township

Twin Bay Glass

Authorized

Signature Kevin Rehb

RE: New Commercial Door

NOTE: Proposal pricing valid for 30 days.

Twin Bay Glass, Inc. hereby proposes to furnish and install per specifications the following:

One 36" x 80" Door and Frame

- *Framing: 1" x 4 1/2" Junior Jambs with three butt hinges
- *Finish: Clear Aluminum – anodized
- *Door: Narrow stiles w/10" bottom rail
- *Dead bolt w/exterior cylinder and interior P4550 lever handle
- *Standard push/pull hardware
- *Glass: 1" insulated Low E Tempered
- *Automatic operator for handicapped access – two wireless push button activators Batteries.
- *120 Electrical power – by others
- *Break metal if needed – NOT included in bid

BASE BID \$5,900.00

All material is guaranteed to be as specified. All work must be completed in a workmanlike manner according to standard practices. Any alteration or deviation from specifications below 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 or delays beyond our control. Owner will carry fire, tornado and all other necessary insurance. Our workers are fully covered by Workman's Compensation Insurance. We conform to all State of Michigan Safety Glazing Regulations.

All permits and architecturally approved prints and specifications are the responsibility of the owner/general contractor or customer of Twin Bay Glass, Inc.

RIGHT TO LIEN: The seller reserves all contractor's mechanics, and materialmen liens which may be asserted under any provision of the law to secure payment of the contract price and may at the sellers option, asset and fix the same liens upon the real property on which the installation is made.

Terms of payment are 30 days from invoice date. A service charge of 1.5% monthly or 18% annually will be added to past due accounts.

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

Date of Acceptance: _____

Signature _____ 770 N. US 31 SOUTH
TRAVERSE CITY, MI 49685

231/941-7112
800/442-9831
fax 231/941-0120



1101 Hammond Rd W
Traverse City, MI 49686

Proposal

16462

Northern Michigan Glass
1101 Hammond Rd W
Traverse City, MI 49686
P 231-941-0050
F 231-941-2251

		DATE:	8/27/2021
TO:	PROJECT NAME	NMG REP:	
CRYSTAL LAKE TOWNSHIP 1651 FRANKFORT HWY FRANKFORT, MI 49635	NEW ENTRANCE	JSB	
	Phone: (231) 352-9791	Fax:	

<p>WE ARE PLEASED TO PROVIDE YOU WITH THE FOLLOWING PROPOSAL: FURNISH AND INSTALL;</p> <p>1) NEW KAWNEER 36" x 80" WIDE STILE DOOR WITH 6" MID RAIL IN A CLEAR ANODIZED FINISH IN KAWNEER 1-3/4" x 4-1/2" STOREFRONT FRAMING WITH UPPER LITE CLEAR 1" TEMPERED INSULATED SAFETY GLASS AND LOWER LITE AS 1" CLEAR ANODIZED INSULATED ALUMINUM PANEL.</p> <p>DOOR HARDWARE INCLUDES; 1-1/2 PAIR OF STAINLESS STEEL BUTT HINGES, MS LOCK WITH CYLINDER, ADA DEAD LEVER, STANDARD PUSH/PULLS, INTERNATIONAL OVERHEAD CLOSER, THRESHOLD AND SWEEP.</p> <p>INCLUDES (1) CR LAURENCE NO DRAFT MAIL SLOT, CUT INTO CROSS RAIL.</p> <p>PER ON SITE INSPECTION.</p> <p>DEMOLITION OF EXISTING DOOR INCLUDED.</p> <p>GLASS CLEANING NOT INCLUDED.</p>	<p>Total</p> <p>3,775.00</p>
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DUE TO VARIANCES IN NATURAL GAS COST TO THE GLASS MANUFACTURERS, THIS PROPOSAL IS BASED ON ____ SQUARE FEET OF GLASS WITH AN ENERGY SURCHARGE OF ____% UPON ORDERING GLASS FOR THE PROJECT A COPY OF THE CURRENT SURCHARGE WILL BE PROVIDED AND OUR CONTRACT MAY BE ADJUSTED ACCORDINGLY.
THIS PROPOSAL IS SUBJECT TO CHANGE IF NOT ACCEPTED WITHIN 90 DAYS.
PAYMENT TO BE MADE AS FOLLOWS: NET 30, PRICE REFLECTS PAYMENT WITH CASH OR CHECK. ADD 5% IF OVER \$500.00 AND PAID BY CREDIT CARD. 1 1/2% CARRYING CHARGE FOR ALL PAST DUE CHARGES, INCLUDING LEGAL FEES.

ALL WORK IS TO BE COMPLETED IN A WORKMANLIKE MANNER ACCORDING TO STANDARD PRACTICES. ANY ALTERATION OR DEVIATION FROM ABOVE SPECIFICATIONS INVOLVING EXTRA COST S WILL BE EXECUTED ONLY UPON WRITTEN ORDERS AND WILL BECOME AN EXTRA CHARGE OVER AND ABOVE THIS ESTIMATE.

Mfg warranty applies. No employee is authorized to alter the mfg's warranty. Errors of a clerical nature are subject to revision. We hereby guarantee all workmanship and materials against defects for a period of one full year after substantial completion. Items of work found defective during the warranty period will be replaced at no cost to the owner. This warranty does not cover any product which has been subject to abuse, alteration, neglect, misuse, abnormal use, accident, fire, war, or acts of God.

Authorized Signature _____

Submitted by: _____

WORK WILL COMMENCE UPON RECEIPT OF SIGNED ACCEPTANCE OF PROPOSAL.

The above prices, specifications, and conditions are satisfactory and are hereby accepted. Northern Michigan Glass is authorized to do the work as specified. Payment will be made as indicated above.

Signature: _____

Printed Name: _____

Date of Acceptance: _____

Crystal Lake Township
1651 Frankfort Highway
PO Box 2129
Frankfort, MI 49635-2129

Resolution Number: 08-21-2021 #

Date: 2021 Sept 2021

WHEREAS, Crystal Lake Township government is housed in a building that is approximately 75 years old and features few salient ADA-friendly features; and

WHEREAS, the Crystal Lake Township Board supports steps towards adding ADA-compliant building features that would make better access and safer exiting for all the public;

WHEREAS, the lower entryway currently requires not only a new exterior door to access the ADA ramp, it also might benefit from a door with added safety, security and convenience features, as well as ADA-compliant push plates;

NOW, THEREFORE, BE IT RESOLVED the Crystal Lake Township Board authorizes up to \$7000.00 for the installation of a new exterior door an automatic opener and other features as deemed worthy by the direction of the Buildings & Grounds Committee.

Moved by: _____

Seconded by: _____

Roll Call Vote:

Amy Ferris, Supervisor: _____

Richard Nielsen, Trustee: _____

William Northway, Trustee: _____

Sue Sullivan, Clerk: _____

Brooke Trentham Popp, Treasurer: _____

The supervisor declared this motion carried and duly adopted.

Sue Sullivan, Crystal Lake Township Clerk