

Colorado Petroleum Storage Tank Fund **SUPPLEMENTAL REIMBURSEMENT APPLICATION -- Short Form S (2010)**

This form should be used, and can only be used, on Supplemental Reimbursement Applications when the Applicant has already established eligibility for reimbursement of remediation costs relative to this occurrence. RAP # \_\_\_\_\_  
CDLE/OPS Internal Use only

**The nature of this Supplemental Reimbursement Application is: [Select all that apply]**

Additional costs not previously reimbursed.	<b>X</b>
Applicant seeks reimbursement of costs approved but not reimbursed pursuant to Committee Policy #13 (Costs exceeded \$50,000 without a Corrective Action Plan, CAP now approved.)	
Other (Explain):	

List RAP # of last claim previously filed for this remediation: **22780**

Applicant's Full Legal Name:	City and County of Denver	Social Security # or Federal Tax ID #	84-8000580
Contact Person:	Diuane DeLillo	Phone # 720.865.5448	Fax # 720.865.5534

Mailing Address: Street 200 West 14th Avenue, Suite 300  
City Denver State CO Zip 80204-2732 Email: dlane.dlillo@denvergov.org

Reimbursement Mailing Address (if different): Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email: \_\_\_\_\_

Applicant is (select one): **Government**

Site Name: Fire Station #28

Site Address: Street 430<sup>6</sup> South Wolff Street  
City Denver State CO Zip 80221

*Complete this section only if you want the representative to be the primary contact and copied on all correspondence.*

Applicant's Representative (if applicable)	Name Paragon Consulting Group, Inc. Address 6901 Broadway City Denver State CO Zip 80221	Email: dmrau@paragoncg.com & lsbaker@paragoncg.com Phone # 303.428.7610 Fax # 303.428.7620
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Total from Listing of Costs, last column: **\$142,123.58**

Less reimbursement from any other source (see #5):

**NET REIMBURSEMENT REQUEST:** **\$142,123.58**

Dates of work covered by this application:	From:	5/18/08	To:	12/31/08
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**REIMBURSEMENT INFORMATION**

1	Will there be additional reimbursement applications for this release?	<b>YES</b>
2	Have any of the costs submitted for reimbursement already been submitted with another reimbursement application? If yes, identify these costs and explain why you are resubmitting these costs:	<b>NO</b>
3	Do any of the costs submitted for reimbursement cover a time period for which you have already received, or requested reimbursement? If yes, identify these costs and explain why you are resubmitting them:	<b>NO</b>
4	Except for this remediation, is there any relationship - personal, financial, or otherwise - between Applicant and any company or person who performed work for which reimbursement is claimed? If yes, explain:	<b>NO</b>
5	Has Applicant received, or does Applicant expect to receive, compensation for corrective action costs from ANY source other than the Colorado Petroleum Storage Tank Fund, including lawsuits, settlements, judgments, contributions from other parties? If yes, state amount of other reimbursement: \$ _____. Identify source of reimbursement, including court case name and number, if applicable:  <i>Note: If there have been any changes to insurance from that submitted with the Original Application, provide updated information with this Application (in the same format as the Original Application - insurance information).</i>	<b>NO</b>
6	Do any costs claimed for reimbursement represent work performed by the Applicant or Applicant's employees? If yes, submit the Affidavits Regarding Work Performed by Applicant.	<b>NO</b>
7	Has the Legal Name, Remit Entity or Address, Mailing Address or Tax Payer Identification Number changed since the submittal of the Original or last Supplemental Reimbursement Application? If so, please submit a W-9 with an original signature and Internal Revenue Service (IRS) documentation (see Application Checklist).	<b>YES</b>

By submitting this application, the Applicant affirms and agrees that:

1. The Applicant certifies, under penalty of law, that Applicant is the appropriate person to request reimbursement, and that this document and all attachments were prepared under Applicant's direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted.
2. The Applicant is the owner/operator or duly authorized agent of the owner/operator responsible for this Site. The Applicant is and shall be responsible for assuring compliance with all applicable State and federal regulations.
3. The information submitted by the Applicant, to the best of Applicant's knowledge and belief, is true, accurate and complete. Applicant understands that this application will be submitted by the Colorado Department of Labor and Employment (CDLE or State) for consideration by the Petroleum Storage Tank Committee (Committee). Upon demand by the Committee, Applicant agrees to return the entire award Applicant may receive or any other amount the Committee considers appropriate if (a) Applicant misrepresented or omitted any fact, either in writing or orally, relevant to the determinations made by the Committee or the CDLE; or (b) Applicant fails to complete, to the Committee's or the CDLE's satisfaction, the corrective action.
4. The Applicant shall not be entitled to obtain any other reimbursement from any source other than the State for the same costs or work reimbursed by the State. Any reimbursement the Applicant receives or is entitled to receive, including insurance proceeds, is and shall be the property of the State of Colorado to the extent of payment(s) made to the Applicant by the State from the Petroleum Storage Tank Fund. Upon receipt of any such reimbursement from a source other than the State, Applicant shall immediately report and pay such reimbursement to the State.
5. To the extent payment is made from the Petroleum Storage Tank Fund, the Applicant hereby assigns to the State of Colorado any rights the Applicant may have which may allow the Applicant to seek and obtain recovery from any other entity for the costs or work reimbursed by the State, including the right to recover from insurance companies.
6. The Applicant shall not submit any further claims for reimbursement from the State for the Site(s) and work identified in this application, other than an amendment to the application or protest of the Fund Payment Report, if any, for work not heretofore reimbursed.
7. To the extent authorized by law, the Applicant shall indemnify, save, and hold harmless the State against any and all claims, damages, liability and court awards including costs, expenses, and attorney fees and related costs, incurred as a result of any act or omission by the Applicant, or its employees, agents, subcontractors, or assignees pursuant to the terms of this application.

As to governmental entity Applicants, no term or condition of this application shall be construed or interpreted as a waiver, express or implied, of any of the immunities, rights, benefits, protection, or other provisions, of the Colorado Governmental Immunity Act, CRS 24-10-101 et seq., or the Federal Tort Claims Act, 28 USC 2671 et seq., as applicable, as now or hereafter amended.

The Applicant, by execution of this application containing this indemnification clause, does not waive the operation of any law concerning the parties' ability to indemnify.

8. In addition to any other legal rights the State of Colorado may have, the State shall have audit and on-site inspection rights for 3 years after payment.
9. The remediation services and supplies for which expenses are listed in this application were performed and/or purchased at the most reasonable rates available for compliance.
10. The Applicant shall provide all formal or informal environmental assessment information to any future owner upon request.
11. In the event the Applicant breaches any of the terms, conditions or requirements of this application, the State of Colorado, in addition to any other remedies, at law or equity, shall be entitled to immediate repayment on demand of all amounts paid to the Applicant; and in the event that the State is required to take legal action to enforce any of the provisions contained herein, the State shall be entitled, in addition to damages, to its costs and reasonable attorney fees and related expenses incurred in connection with such enforcement.
12. At all times during the performance of this remediation, the Applicant shall strictly adhere to all applicable federal and state laws, rules and regulations that have been or may hereafter be established, including without limitation 42 USC 6991 and CRS 8-20.5-101, et seq., and associated regulations.

13. The State may allocate more or less funds to the remediation described in this Application than the amount requested by the Applicant. Once the reimbursement request is approved, the State will issue a Fund Payment Report, substantially in the form of Exhibit B, documenting the amount that will be processed and paid.
14. The Committee has the authority and the right to designate funds be paid to Applicants on pro-rata basis when the Petroleum Storage Tank Fund balance prevents payment in full, pursuant to CRS 8-20.5-206(e)(2).
15. Each additional request by Applicant for reimbursement from the Petroleum Storage Tank Fund must be submitted on a new supplemental application. Any additional payment by the State shall be conditioned upon the issuance by the Committee of a new Fund Payment Report for payment.
16. Pursuant to 7 CCR 1101-14, Article 8, the Applicant may file a protest of the Fund Payment Report if the Applicant disputes a decision by the Committee, as stated on the Fund Payment Report. The Applicant may petition the Committee to review its decision. A Protest must be submitted within 60 days of the date of the Fund Payment Report. See 7 CCR 1101-14, 8-8. The Applicant shall use the form of Protest of Fund Payment Report provided by the Division of Oil and Public Safety of the Colorado Department of Labor and Employment.
17. The maximum amount to be paid by the State, if any, in connection with this reimbursement request shall be authorized by the Committee in the Fund Payment Report.
18. The payment by the State and acceptance by the Applicant of any reimbursement amounts requested under this application shall be deemed to be good and sufficient consideration for the promises, certifications and affirmations made by Applicant in this Application.
19. The City does not by this Agreement irrevocably pledge present cash reserves for payments in future fiscal years, and this Agreement is not intended to create a multiple-fiscal year debt of the City.

**SUBMIT THE FOLLOWING DOCUMENTS AND THIS CHECK LIST  
FOR A SUPPLEMENTAL APPLICATION**

This document is part of the Application. It **MUST** be filled out and **INCLUDED** with your Application.

Copies of forms can be accessed on the OPS website at <http://www.colorado.gov/cdle/ops> (State Fund Section/Fund Forms)

**Directions:**

Select the appropriate boxes to the right of each number to indicate the required documents listed below are included with this Application.

Failure to supply the necessary information outlined in these boxes will result in your application being returned to you as "Incomplete".

1.	<input checked="" type="checkbox"/>	Two copies of the "Supplemental Reimbursement Application - Short Form S (Supplemental 2010)" form. One of these copies must have an original signature with the proper signatory authority. If the Applicant is a corporation, signature must be by the corporate president or vice president and the corporate secretary or equivalent must attest the Application. The president or vice president can delegate signatory authority. Said authority must be on corporate letterhead.
2.	<input checked="" type="checkbox"/>	Two copies of the CDLE/OPS form - "Listing of Costs". <i>Note: The Listing of Costs MUST BE IN ORDER BY date of work performed with the earliest date listed first.</i>
3.	<input checked="" type="checkbox"/>	An original with a notarized seal and one copy of the CDLE/OPS form "Affidavit: Proof of Payment" listing each invoice as outlined on the "Listing of Costs". The Affidavit must be on company letterhead. OR - Cancelled checks with the front of the check encoding the amount of the check proving that the check cleared the bank.
	<input type="checkbox"/>	OR - An original and one copy of the CDLE/OPS form: "CPA Certification". The Affidavit must have an original signature and all information at the bottom of the Affidavit must be completed including the CPA's license number, State where issued and expiration date.
	<input type="checkbox"/>	OR - If applicable, an original with a notarized seal and one copy of the CDLE/OPS form: "Affidavit: Work Performed by Non-Listed Applicant". The Affidavit <b>MUST</b> have the original certified signatures of both the consultant/contractor and the Applicant.
	<input type="checkbox"/>	OR - If applicable, an original with a notarized seal and one copy of the CDLE/OPS form: "Affidavit: Work Performed by Employees of Listed Applicant". The affidavit <b>MUST</b> have the original and certified signatures of both the Applicant and the Employee (if still employed by the Applicant).
	<input type="checkbox"/>	OR - If applicable, an original with a notarized seal and one copy of the CDLE/OPS form: "Affidavit: Equipment or Material Purchased by Applicant". The affidavit <b>MUST</b> have the original and certified signatures of both the Consultant/Contractor and the Applicant.
4.	<input checked="" type="checkbox"/>	Two copies of invoices to support each cost. <b>The invoices MUST be in order by date of work performed and should match the order of the Listing of Costs. OPS Invoices are required.</b>
5.	<input type="checkbox"/>	Two copies of Internal Revenue Service (IRS) LTR 147C (for entities), LTR 76C (for individuals), or equivalent document sourced by the IRS which is no older than six months (can be obtained by calling the IRS at 1-800-829-4933 or 1-800-829-1040).
	<input type="checkbox"/>	Two copies of current W-9, one with an original signature, which exactly matches the IRS sourced document.

Colorado's Reasonable Cost Guidelines apply to all work performed July 1, 1997 forward with respect to costs only. The invoice format must be in accordance with the revised invoice format effective July 1, 2009 (see OPS webpage, Fund Section, Invoicing). Phase of Work, Activity and Task and Labor codes must be on every invoice for each cost - including utilities - regardless of when the work was performed.

**Note: Failure to record each of these codes for each cost requested will result in a deficiency letter and the Application review process will halt. Additionally, the time clock will stop and no interest will accrue.**

<p align="center"><b>MAIL TO:</b></p> <p><b>Colorado Department of Labor and Employment Division of Oil &amp; Public Safety - Fund Section 633 17th St, Ste 500 Denver, CO 80202-3610</b></p>	<p>If you have any questions please consult the OPS website and/or contact OPS via the "Technical Assistance Line" at (303) 318-8547.</p> <p align="center"><b>OPS website: <a href="http://www.colorado.gov/cdle/ops">http://www.colorado.gov/cdle/ops</a></b></p>
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Colorado Petroleum  
Storage Tank Fund

Photocopy additional pages as necessary

LISTING OF COSTS

Primary Invoice # <sup>1</sup>	Contractor Name	Dates of Work <sup>2</sup>		Proof of Payment			Invoice Amount	Amount Submitted for Reimbursement <sup>5</sup>
		xx/xx/xx Beginning	xx/xx/xx Ending	Canceled Check <sup>3</sup>	Check #	Check Amt		
7 (80289218)	CDM	5/18/08	6/14/08				\$53,531.75	\$36,722.73
Note: Difference of \$16,809.02 for CDM invoice #7 (80289218) includes \$22.00 for labor above the Reasonable Cost Guidelines (RCG); \$4.35 for mileage above the RCG; and \$16,782.67 for undocumented excavation expenses.								
8 (80295919)	CDM	6/15/08	9/6/08				\$8,836.27	\$6,666.31
Note: Difference of \$2,169.96 for CDM invoice #8 (80295919) includes \$459.00 for labor above the RCG; \$8.70 for mileage above the RCG; \$1.96 for unallowed markup on shipping and \$1,700.30 for well sampling without analytical.								
9 (80299925)	CDM	9/7/2008	10/18/2008				\$61,847.01	\$61,653.00
Note: Difference of \$193.50 for CDM invoice #9 (80302074) includes \$193.50 for labor above the RCG.								
10 (80302074)	CDM	10/19/2008	11/22/2008				\$18,069.61	\$17,304.45
Note: Difference of \$765.16 for CDM invoice #10 (80302074) includes \$660.00 for labor above the RCG; \$83.60 for mileage above the RCG; \$21.56 for unallowed markup on shipping and freight.								
11 (80307559)	CDM	11/23/2008	12/31/2008				\$25,980.74	\$19,776.58
Note: Difference of \$6,204.16 for CDM invoice #10 (80307559) includes \$3,883.78 for labor above the RCG and labor performed after December 31, 2008 (we prorated 62% for the 2008 portion of this invoice for this application; \$90.45 for mileage above the RCG and 62% of total mileage on the invoice; \$528.00 for pump and associated markup which will be included on the next application; and \$1.63 unallowed markup on shipping, and \$1,700.30 for sampling 14 monitoring wells with no associated analytical.								
SUBTOTAL ALLOWABLE COSTS SUBMITTED FOR REIMBURSEMENT							\$142,123.58	
REIMBURSEMENT APPLICATION PREPARATION COSTS (1% of net allowable costs submitted for reimbursement)								
TOTAL SUBMITTED FOR REIMBURSEMENT CONSIDERATION:							\$142,123.58	

- 1 List all PRIMARY invoices. If invoice does not clearly identify work performed, add that information to the invoice copy submitted with the application.
- 2 List invoices in order by the date of work performed.
- 3 If proof of payment is by canceled check, back of canceled check is also required if the dollar amount is not encoded by the bank on the front of the check.
- 4 If proof of payment is by payee affidavit or CPA Certification, use following codes: AFF = Affidavit. CPA = CPA Certification of Payment. Use CDLE Forms.
- 5 List only ALLOWABLE costs. If amount requested differs from invoice amount, identify on the invoice any cost for which reimbursement is NOT requested.



555 17th Street Suite 1100  
 Denver, Colorado 80202  
 tel: 303 383-2300  
 fax: 303 308-3003

**COLORADO PETROLEUM STORAGE TANK FUND** **AFFIDAVIT: PROOF OF PAYMENT**

*This form should be used when an applicant submits an affidavit as proof of payment for costs claimed for reimbursement. See 7CCR1101-14, 8-2(d)(2)(D). This form is not required if copies of canceled checks are provided.*

- **THIS FORM MUST BE REPRODUCED ON THE COMPANY LETTERHEAD OF THE PAYEE (NOT on the applicant's letterhead). AFFIDAVITS THAT ARE NOT ON THE PAYEE'S LETTERHEAD ARE NOT ACCEPTABLE.**
- **This form must be signed by the payee (NOT by the applicant.)**
- **Use a separate affidavit for each contractor.**
- **Do not use this form if there is any affiliation or relationship between the applicant and the payee.**

Applicant's name \_\_\_\_\_ City and County of Denver \_\_\_\_\_

Site name and address \_\_\_\_\_ Fire Station #28, 4036 South Wolff Street, Denver, Colorado \_\_\_\_\_

Check As Appropriate:

I, being first duly sworn upon oath and being of lawful age, state that the following invoices relative to the referenced application for reimbursement from the Colorado Petroleum Storage Tank Fund have been paid in full by the applicant.

I, being first duly sworn upon oath and being of lawful age, state that the following invoices relative to the referenced application for reimbursement from the Colorado Petroleum Storage Tank Fund will be paid in full by the applicant upon receipt of the reimbursement in accordance with a promissory agreement. (Provide a signed and notarized copy of the agreement)

INVOICE #	INVOICE DATE	AMT. PAID	INVOICE #	INVOICE DATE	AMT. PAID
Invoice #12 (80240760)	10/7/06	\$47,652.83	Invoice #13 (80246759)	1/12/07	\$3,543.08
Invoice #1 (80251186)	3/9/07	\$2,644.15	Invoice #2 (80258252)	6/8/07	\$4,220.22
Invoice #3 (80264874)	8/24/07	\$3,254.00	Invoice #4 (80266750)	9/24/07	\$2,601.06
Invoice #5 (80280031)	3/4/08	\$6,196.00	Invoice #6 (80287193)	5/28/08	\$28,228.25

# CDM

Invoice #7 (80289218)	6/13/08	\$53,531.75	Invoice #8 (80295919)	9/19/08	\$8,836.27
Invoice #9 (80299925)	11/03/08	\$61,847.01	Invoice #10 (80302074)	12/1/08	\$18,069.61
Invoice #11 (80507559)	2/3/09	\$25,980.74			

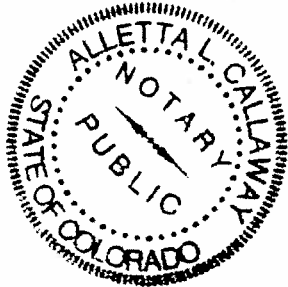
I further state that there is no relationship or affiliation between the applicant and myself.

I hereby certify that the foregoing information is correct to the best of my knowledge, information and belief. I understand there are severe civil and/or criminal penalties for any false statement or misrepresentation of a material fact, knowing it to be false, or failing to disclose a material fact with the intent to defraud.

Signature <i>Robert G. Armstrong</i>	Date <i>2/24/10</i>
Print name <i>Robert G. Armstrong</i>	Title <i>Vice President</i>
Company (payee) name <i>CDM (Metrix, Inc)</i>	
Company (payee) mailing address <i>555 17<sup>th</sup> Street, Suite 1100, Denver, CO 80202</i>	
Phone # <i>(303) 383-2300</i>	

Subscribed and sworn to before me in the county of Denver, Colorado, this 24<sup>th</sup> day of February [month], 2010 [year]. My commission expires July 31, 2012.

*Alletta J. Callaway*  
Notary Public Signature





**Contract Control Number:** ENVHL-RC91008-03

**Contractor Name:** State of Colorado - Colorado Department of Labor  
and Employment, Division of Oil and Public Safety

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

Name: \_\_\_\_\_  
(please print)

Title: \_\_\_\_\_  
(please print)

**ATTEST: [if required]**

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

Name: \_\_\_\_\_  
(please print)

Title: \_\_\_\_\_  
(please print)



**Contract Control Number:** ENVHL-RC91008-03

**Contractor Name:** State of Colorado - Colorado Department of Labor and Employment, Division of Oil and Public Safety

IN WITNESS WHEREOF, the parties have set their hands and affixed their seals at Denver, Colorado as of

SEAL

**CITY AND COUNTY OF DENVER**

ATTEST:

By \_\_\_\_\_

\_\_\_\_\_

APPROVED AS TO FORM:

REGISTERED AND COUNTERSIGNED:

DOUGLAS J. FRIEDNASH, Attorney  
for the City and County of Denver

By \_\_\_\_\_

By \_\_\_\_\_

By \_\_\_\_\_



# OPS INVOICE FORMAT

**Client Name:** City and County of Denver, Dept Env Health, ESD  
**Billing Address:** 200 West 14th Avenue, Suite 310  
**City, State, Zip:** Denver, CO 80204-2732  
**Site Name:** Fire Station #28  
**Site Address:** 4306 South Wolff Street  
**City, State, Zip:** Denver, CO  
**Event #:** 4805

7  
**Invoice#:** (80289218)  
**Invoice date:** 6/13/2008

**Job#:** 63623  
**Consultant Listing #:** C315  
**Period Covered by Invoice:**

**Start Date:** 5/18/2008      **End Date:** 6/14/2008

Note delete any rows on the invoice that are not being requested for reimbursement

PHASE OF WORK CODE (PWC)	ACTIVITY CODE (AC)	TASK OR LABOR CODE (TLC)	TASK DESCRIPTION	UNITS	QUANTITY	UNIT RATE REQUESTED REIMBURSEMENT	SUBTOTAL REQUESTED REIMBURSEMENT	MARKUP REQUESTED REIMBURSEMENT	SUBTOTAL BY ACTIVITY AND TASK GROUP	TOTAL REQUESTED REIMBURSEMENT
<b>3D1 Remediation system installation/excavation</b>										
<b>d. System installation</b>										
<b>Labor</b>										
	d.	5.3	project manager	/hour	1.00	\$ 63.00	\$ 63.00			\$ 63.00
	d.	5.9	clerical and courier	/hour	4.00	\$ 35.00	\$ 140.00			\$ 140.00
TLC-5 group - Labor Subtotal									\$ 203.00	
<b>Subcontractor</b>										
	d.	8.99	other (Landscaping) (Install 1,350 sq. ft of bluegrass sod, mob-fuel & equip. dispatch, delivery, removal disposal of debris & site cleanup (Landscape Connections Inv.#2008221)	list units	1	\$ 1,690.00	\$ 1,690.00	\$ 169.00		\$ 1,859.00
TLC-8 group - Subcontractor Subtotal									\$ 1,859.00	
Activity Code d (1) Subtotal									\$ 2,062.00	
<b>TOTAL 3D (1) COSTS:</b>										\$ 2,062.00
<i>See pages 2 and 3 for breakdown for Code 3D - Remediation system installation/excavation (Subcontractor) CDM Constructors, Inc.</i>										
<b>3D2 Remediation system installation/excavation (Outside Professional Services)</b>										
<b>d. System installation (Outside Professional Services) (CDM Constructors, Inc.)</b>										
<b>Invoice # 05082008</b>										
	d.	5.5	staff engineer / scientist	/hour	24.00	\$ 60.00	\$ 1,440.00			\$ 1,440.00
	d.	5.6	senior technician	/hour	24.00	\$ 50.00	\$ 1,200.00			\$ 1,200.00
TLC-5 group - Labor Subtotal									\$ 2,640.00	
<b>Subcontractor</b>										
	d.	8.2	electrical (Conduit Installation)	list units	1	\$ 3,000.00	\$ 3,000.00	\$ 450.00		\$ 3,450.00
	d.	8.7	private property utility locates	visits	1	\$ 200.00	\$ 200.00	\$ 30.00		\$ 230.00
TLC-8 group - Subcontractor Subtotal									\$ 3,680.00	
<b>Travel</b>										
	d.	9.4	mileage	/mile	750	\$ 0.36	\$ 270.00			\$ 270.00
TLC-9 group - Travel Subtotal									\$ 270.00	
<b>Equipment</b>										
	d.	13.9	fence	/each	15	\$ 75.00	\$ 1,125.00	\$ 168.75		\$ 1,293.75
	d.	13.27	remediation vault (30") (Installed) (7)	/each	7	\$ 715.00	\$ 5,005.00	\$ 750.75		\$ 5,755.75
	d.	13.27a	remediation vault (18") (Installed) (2)	/each	2	\$ 225.00	\$ 450.00	\$ 67.50		\$ 517.50
TLC-13 group - Equipment Subtotal									\$ 7,567.00	
<b>Materials</b>										
	d.	14.8	piping (4" 40 PVC)	LS	1	\$ 508.00	\$ 508.00	\$ 76.20		\$ 584.20
	d.	14.6a	piping (2" 40 PVC)	LS	1 of 1	\$ 650.00	\$ 650.00	\$ 97.50		\$ 747.50



**OPS INVOICE FORMAT**

Client Name: City and County of Denver, Dept Env Health, ESD  
 Billing Address: 200 West 14th Avenue, Suite 310  
 City, State, Zip: Denver, CO 80204-2732  
 Site Name: Fire Station #28  
 Site Address: 4306 South Wolff Street  
 City, State, Zip: Denver, CO  
 Event #: 4805

7  
 Invoice#: (80289218)  
 Invoice date: 6/13/2008  
 Job#: 63623  
 Consultant Listing #: C315  
 Period Covered by Invoice:  
 Start Date: 5/18/2008      End Date: 6/14/2008

Note delete any rows on the invoice that are not being requested for reimbursement

PHASE OF WORK CODE (PWC)	ACTIVITY CODE (AC)	TASK OR LABOR CODE (TLC)	TASK DESCRIPTION	UNITS	QUANTITY	UNIT RATE REQUESTED REIMBURSEMENT	SUBTOTAL REQUESTED REIMBURSEMENT	MARKUP REQUESTED REIMBURSEMENT	SUBTOTAL BY ACTIVITY AND TASK GROUP	TOTAL REQUESTED REIMBURSEMENT
<b>3G Monitoring plan implementation &amp; report preparation</b>										
<b>Groundwater Sampling</b>										
3G	g	4.1	sample wells-includes labor, bailer, tape, pH meter, tools and misc. (analytical on next invoice)	wells	8	\$ 121.45	\$ 971.60			\$ 971.60
TLC-4 group - Groundwater Sampling Subtotal									\$ 971.60	
<b>Labor</b>										
3G	g	5.3	project manager (6154)	/hour	3.00	\$ 85.00	\$ 255.00			\$ 255.00
TLC-5 group - Labor Subtotal									\$ 255.00	
<b>Travel</b>										
3G	g	9.4	mileage	miles	30	\$ 0.36	\$ 10.80			10.80
TLC-9 group - Travel									\$ 10.80	
<b>Field Instrumentation</b>										
3G	g	12.1	misc field supplies	days	1	\$ 23.00	\$ 23.00			23.00
TLC-12 group - Field Instrumentation Subtotal									\$ 23.00	
Activity Code g. Subtotal									\$ 1,280.40	
<b>i. Data review &amp; reporting</b>										
<b>Labor</b>										
3G	i	5.9	clerical and courier	hours	2.00	\$ 35.00	\$ 70.00			70.00
TLC-5 group - Labor Subtotal									\$ 70.00	
Activity Code i. Subtotal									\$ 70.00	
<b>TOTAL 3G COSTS:</b>										<b>\$ 1,330.40</b>

**PHASE OF WORK COST SUMMARY**

PHASE OF WORK CODE AND DESCRIPTION	EFS TOTAL COSTS
3D(1) Remediation System Installation	\$ 2,062.00
3D(2) Remediation System Installation (CDM Constructors, Inc.)	\$ 33,330.33
3G Monitoring plan Implementation & report preparation	\$ 1,330.40
<b>GRAND TOTAL</b>	<b>\$ 36,722.73</b>



17301 W. Colfax Avenue, Suite 170  
Golden, Colorado 80401  
tel: 303 566-5400  
fax: 303 216-2418

June 25, 2008

Mr. Ali Sogue  
City and County of Denver  
Department of Environmental Health  
Environmental Services Division  
201 W. Colfax Ave., Dept. 1009  
Denver, CO 80202

EVENT ID 4805

**RE: INVOICE 7 FOR WORK BETWEEN MAY 18, 2008 AND JUNE 14, 2008  
FIRE STATION 28, 4306 SOUTH WOLFF STREET  
CONTRACT ON CALL JOB NUMBER 20077024, CE70655  
CITY AND COUNTY OF DENVER  
CDM PROJECT NO.: 63623**

Dear Mr. Sogue:

This invoice has been prepared to summarize costs associated with environmental work performed between May 18, 2008 and June 14, 2008 at the Denver Fire Station 28 located at 4306 South Wolff Street in Denver, Colorado. This invoice includes a summary of work activities performed and approved Scope of Work, a summary of project and deliverables status, a description of next billing period scheduled activities, an Invoice Summary Table, and the backup for invoiced costs.

**Summary of Activities for This Invoice Period:**

As a brief summary, the work activities performed and accomplishments by task for the subject invoice period are described below.

- Task 3D – Remediation System Installation/Excavation (OC51027, CE70652/20077024, Fund/Org 78410/6506102):

Work performed during this invoice period included trenching and installing conveyance lines, installing an injection gallery and installing/providing power to remediation system.

- Task 3G – Monitoring Plan Implementation and Report Preparation (OC51027, CE70652/20077024, Fund/Org 78410/6506102):

Work performed during this invoice period has included preparing the 1st Quarter 2008 groundwater monitoring report and the 2<sup>nd</sup> Quarter 2008 groundwater sampling.



Summary of Project Status:

EVENT ID 4805

The project status is as follows:

- Work being performed at the Site meets the requirements established in the approved CAP. Work activities are on schedule.

Summary of Deliverables:

- The 2<sup>nd</sup> Quarter 2008 groundwater monitoring report was submitted during this invoice period.

Summary of Scheduled Activities for Next Invoice Period:

- CDM will finalize and submit the 3<sup>rd</sup> Quarter 2008 report during the next reporting period.

The total cost associated with the above described activities for this reporting period is \$53,531.75. The allocation of costs for various tasks is provided in the attached Invoice Cost Summary Table.

Should you have questions or comments, please contact me at (303) 566-5400.

Sincerely,  
CDM, INC

Chip Mickel, P.E.  
Principal



17301 W. Colfax Avenue, Suite 170  
 Golden, Colorado 80401  
 tel: 303 566-5400  
 fax: 303 216-2418

EVENT ID 4805

**INVOICE**

*A. J. 7/14/08*  
*This is the original - haven't fully marked it up yet...*

12:59 PM 7/12/08

Please Remit To:

Camp Dresser & McKee, Inc  
 P.O. Box 100902  
 Atlanta, GA 30384-0902

Date: June 13, 2008

Project: UST-Fire Station 28  
 CDM Project #63623  
 OC51027 CE70655/20077024  
 Fund/Org 78410/6506102  
 Invoice #80289218

DEPT OF ENVIRONMENTAL HEALTH  
 ATTN: MR ALI SOGUE  
 201 W COLFAX AVE DEPT 1009  
 DENVER, CO 80202-5332

Amount Due  
 This Invoice

*with 7/14/08*  
**\$53,531.75**

Due Date: July 31, 2008

Task 3D: Remediation System Installation/Excavation

PWC-AC-TLC	Quantity	Item	Description	Rate	Amount
3Dd - 5.85	1	Proj Eng/Sci	Report Prep, Review (1st and 2nd Qtrs 2008)	63 85.00	\$ 85.00
3Dd - 5.9	4	Admin/Clerical	Administration	35.00	\$ 140.00
3Dd - 8.99		Misc	Landscaping	1,690.00	\$ 1,690.00
			Mark up 10% (\$1,690.00)	169.00	\$ 169.00
			<b>Subtotal</b>		<b>\$ 2,084.00</b>
					<i>2,084.00</i>
<b>Outside Professional Services</b>					
3D (Phase of work codes provided on attached invoice)		Remediation Subcontractor		50,113.00	\$ 50,113.00
			<b>Subtotal</b>		<b>\$ 50,113.00</b>
					<i>33,330.33</i>

3G Plan Monitoring and Report Preparation

PWC-AC-TLC	Quantity	Item	Description	Rate	Amount
3Gg - 5.3	3	Proj Eng/Sci	Report Prep, Review (1st and 2nd Qtrs 2008)	85.00	\$ 255.00
3Gg - 5.9	2	Admin/Clerical	Administration	35.00	\$ 70.00
3Gg - 4.1	8	Misc	Sample Wells	121.45	\$ 971.60
3Gg - 9.4	30	Misc	Mileage	-0.505	\$ -15.15
3Gg - 12.1	1	Misc	Field Supplies	23.00	\$ 23.00
			<b>Subtotal</b>		<b>\$ 1,334.75</b>
					<i>10.80</i>

UST Firestation # 28 Project Total **\$ 53,531.75**

*Less labor above RGG < 22.00 >*  
*Less mileage above RCH < 4.35 >*  
*Less excavation/disposal fees - no documentation < 16,782.67 >*  


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**36,722.73**





Invoice 7  
 Work Between May 18, 2008 and June 14, 2008  
 CCOD - Fire Station 28 - Project Number 63623 Year 2008  
 OC51027 - CE70655/20077024 Fund Org 78410/6506102  
 Task 3G - System Monitoring/Plan Implementation

EVENT ID 4805

Phase of Work (PW)	Activity Code (AC)	Task/Labor Code (TLC)	Description	Quantity	Unit Rate	Units	Extended Cost (\$)
<b>Professional Services</b>							
3G	g	5.1	Principal	→ 3	\$ 105.00	hour	\$ -
		5.2	Senior Engineer/Scientist		\$ 100.00	hour	\$ -
		5.3	Project Manager (6154)		\$ 90.00	hour	\$ -
		5.4	Project Engineer/Scientist		\$ 85.00	hour	\$ 255.00
		5.6	Staff Engineer/Scientist		\$ 60.00	hour	\$ -
		5.7	Draftsperson		\$ 44.00	hour	\$ -
3G	g	5.8	Staff Technician	2	\$ 40.00	hour	\$ -
		5.9	Clerical and Courier		\$ 35.00	hour	\$ 70.00
				5	<b>Subtotal:</b>		\$ 325.00
<b>Expenses and Materials</b>							
Markup: 10 %							
Subtotal							
3G	9.4		Mileage	30	.36 0.505		\$ 10.80 15.15
				<b>Subtotal:</b>		\$ 15.15	
<b>Rental Equipment</b>							
3G	g	4.1	Sample Wells	8	\$ 121.45	Ea	\$ 971.60
3G	g	12.1	Misc Field Supplies	1	\$ 23.00	Day	\$ 23.00
				<b>Subtotal:</b>		\$ 994.60	
<b>Subcontractors</b>							
Markup: 10 %							
Subtotal:							
				<b>TOTAL:</b>		\$ 1,334.75	

**CDM Constructors, Inc.**  
 555 17th Street, Ste. 1200  
 Denver, CO. 80202

Chip Mickel  
 CDM, Inc.  
 17301 W. Colfax Avenue, Ste 170  
 Golden, CO 80401

**Invoice**

*EVENT ID 4805*

**Amount Due \$ 50,113**      Date: 5/8/2008  
 CDM Project No.: 0581-63623  
**DENVER, CO CITY COUNTY OF - UST FIRE STATION #28**  
 CCI Project No.: 61259  
**CCOD UST SITES (001.00002)**  
 Invoice No.: Draft

Intercompany billing for services to CDM Inc. projects by CCI Rocky Mountain

3D		Remediation system installation/excavation		hours		\$			
d.		System Installation							
<b>Labor</b>									
3D	d.	5.5	staff scientist	24	\$	60	/hour	\$	1,440
3D	d.	5.6	senior technician	24	\$	50	/hour	\$	1,200
TLC-5 group - Labor Subtotal								\$ 2,640	
<b>Travel</b>									
		9.4	mileage	750	\$	0.36	/mile	\$	270
TLC-9 group - Travel Subtotal								\$ 2,910	
<b>Equipment</b>									
3D	d.	13.9	fence	15	\$	75	lf	\$	1,125
3D	d.	13.27	remediation vault (30") (Installed)(7)	7	\$	715	ea	\$	5,005
3D	d.	13.27	remediation vault (18") (Installed)(2)	2	\$	225	ea	\$	450
3D	d.	9.6	piping (4" 40 PVC)	1	\$	508	/unit	\$	508
3D	d.	10.6	piping (2" 40 PVC)	1	\$	650	/unit	\$	650
3D	d.	11.6	piping (1" 40 PVC)	1	\$	3,346	/unit	\$	3,346
3D	d.	12.6	piping (3/8" various fittings and hose)	1	\$	308	/unit	\$	308
TLC-14 group - Materials Subtotal								\$ 13,101	
<b>Subcontractor</b>									
3D	d.	8.2	electrical - Conduit Installation	1	\$	3,000	/unit	\$	3,000
3D	d.	8.7	private property utility locates	1	\$	200	/unit	\$	200
TLC-8 group - Subcontractor Subtotal								\$ 3,200	
Activity Code d. Subtotal								\$ 3,680	
								\$ 19,691	

*146  
146a  
146b  
146c*

Remit To: CDM Constructors, Inc.

File: 41005

Los Angeles, CA. 90074-1005

# CDM Constructors, Inc.

555 17th Street, Ste. 1200  
Denver, CO. 80202

# Invoice

2 of 3

*EVENT ID 4805*

Chip Mickel

CDM, Inc.

17301 W. Colfax Avenue, Ste 170  
Golden, CO 80401

Date: 5/8/2008

CDM Project No.: 0581-63623

DENVER, CO CITY COUNTY OF - UST FIRE STATION #28

CCI Project No.: 61259

CCOD UST SITES (001.000002)

Invoice No.: Draft

Amount Due \$ 50,113

Intercompany billing for services to CDM Inc. projects by CCI Rocky Mountain

## 3D Remediation system installation/excavation

### I. Trenching (peroxide infiltration trench)

Labor		hours	24 \$	60 /hour	\$ 1,440		\$ 1,440
TLC-5 group - Labor Subtotal		hours	22 \$	50 /hour	\$ 1,100		\$ 1,100
3D I.	5.5 staff scientist						
3D I.	5.6 senior technician						
TLC-5 group - Labor Subtotal \$ 2,540							
Excavation, Transportation and Disposal of Contaminated Soil							
3D I.	3.4 excavation and loading	cu yd	200 \$	11.17 /yd3	\$ 2,234	\$ 335	\$ 2,569
3D I.	3.5 transportation of contaminated soil	cu yd	90 \$	9.16 /yd3	\$ 824	\$ 124	\$ 948
3D I.	3.6 disposal of contaminated soil	cu yd	90 \$	13.75 /yd3	\$ 1,238	\$ 186	\$ 1,423
3D I.	3.99 fill	cu yd	150 \$	40 /yd3	\$ 6,000	\$ 900	\$ 6,900
TLC-3 group - Excavation, Transportation and Disposal of Contaminated Soil Subtotal \$ 11,840							
Subcontractor							
3D I.	8.13 flow-fill subcontractor <i>CLAFARKE INV # 6348375</i>	cy	9 \$	70 /unit	\$ 626	\$ 94	\$ 719
Travel							
3D I.	9.4 mileage	miles	180 \$	0.36 /mile	\$ 65		\$ 65
TLC-9 group - Travel Subtotal \$ 65							
3D I.	12.1 misc field supplies	days	2 \$	23 /day	\$ 46		\$ 46
3D I.	12.3 interface probe	a	2 \$	65 /unit	\$ 130	\$ 20	\$ 150
3D I.	12.4 organic vapor meter	a	2 \$	75 /unit	\$ 150	\$ 23	\$ 173
TLC-12 group - Field Instrumentation Subtotal \$ 368							
Activity Code I. Subtotal \$ 15,532							

Remit To: CDM Constructors, Inc.

File: 41005

Los Angeles, CA. 90074-1005