

**RECOMMENDATION TO GOVERNOR
FOR CONTRACT AND BOND APPROVAL**

DT25 2/2005

Project ID(s) 1177-11-22		Organization - Division Transportation System Development	Let Proposal Number Bureau Project Development
Parcels 42, 55, & 58		Originator Name Scott Lawry, P.E.	Title Chief Proposal Management Engineer
		Contract Amount \$	WisDOT Confidential Estimate \$ 35,300

Contract With of	Contract Type <input type="checkbox"/> Let Construction <input type="checkbox"/> LFA (State) <input type="checkbox"/> LFA (Local) <input checked="" type="checkbox"/> Razing <input type="checkbox"/> Emergency Construction <input type="checkbox"/> Traffic Mitigation <input type="checkbox"/> Local Construction <input type="checkbox"/> Construction Eng <input type="checkbox"/> Design Eng <input type="checkbox"/> Survey <input type="checkbox"/> Bridge Design <input type="checkbox"/> Environmental <input type="checkbox"/> Railroads Other:
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Project Description/Location
Tomahawk - Minocqua
Rocky Run to CTH Y
USH 51
Oneida County

Date Let 10/20/2015; 10:00 AM	Date Awarded	<input checked="" type="checkbox"/> Bond Required	<input type="checkbox"/> Bond Not Required
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Project Requested By or Purpose
To raze and remove acquired buildings for public safety.

Work Consists of
Razing and removal of buildings, asbestos abatement, and site clearance

Consequences - If Not Approved
Construction expenses will rise and project letting could be delayed because right-of-way would not be cleared

PROJECT FUNDING PERCENTAGES				
STATE I.D.	STATE FUNDS	FEDERAL FUNDS	LOCAL FUNDS	OTHER
1177-11-22	100%			

Contract Authority

I certify that this contract is financially and programmatically consistent with the approved annual operating budget or facilities program. I further certify that this request for Governor's approval meets all applicable state and federal statutes, rules, regulations, and guidelines. This certification is based upon a thorough and complete analysis of this request.

Forward to Department Secretary X (Contract Authority) _____ (Date) _____

Forward to Office of the Governor X (Department Secretary / Deputy Secretary) _____ (Date) _____

Return to Contract Authority X (Governor - Approval and Authorization) _____ (Date) _____