



LAKE COUNTY
FLORIDA

To: Cottoms Sod From: Public Works Road Operations

Fax (352) 751-4503 Phone : (352) 343-6439

Phone (352) 751-4434 Pages: 1

Re: Sod Installation: 14-0439A

REQUEST FOR SOD INSTALLED

Install Date Requested: A.S.A.P. Road Seg. #: 2-0734B-01

Delivery address: 10407 Carlson Cr.

Section: 11 Town: 23 Range: 25

Directions to Delivery Point: From SR 50 go south on CR 561 to Loghouse Road go east on Loghouse Rd. to Carlson Cr. turn right go south to address listed above

Type of sod: floritam Quantity: 2,200 sq. ft.

Field adjusted quantity per site visit: _____

Notes:

Prior to performance of work, questions concerning the measurements shall be addressed and agreed upon in writing either by the Maintenance Area Supervisor or the Senior Contracting Officer. No work shall be done without an agreement. Please send invoice to the address listed below.

Please Contact us if there is a different quantity needed than what was ordered.

County Representative: Robert Baker

Date: 10-3-2016

Work completed and OK to Pay, Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Inspected by: Robert Baker	Date: 10-12-16
Invoice # : 219194	



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Type of sod: floritam Quantity: 2,200 sq. ft.

Field adjusted quantity per site visit: AB 10-4-16 GHC 10-4-16

Notes:

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County Representative: Robert Baker

Date: 10-3-2016

Work completed and OK to Pay, Yes <input type="checkbox"/> No <input type="checkbox"/>	
Inspected by:	Date:
Invoice # :	

BP
10/3



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Re: Sod Installation: 14-0439A

REQUEST FOR SOD INSTALLED

Install Date Requested: A.S.A.P. Road Seg. #: 2-0734B-01

Delivery address: 10407 Carlson Cr.

Section: 11 Town: 23 Range: 25

Directions to Delivery Point: From SR 50 go south on CR 561 to Loghouse Road go east on Loghouse Rd. to Carson Cr. turn right go south to address listed above

Type of sod: floritam Quantity: 2,200 sq. ft.

Field adjusted quantity per site visit: _____

Notes:

Prior to performance of work, questions concerning the measurements shall be addressed and agreed upon in writing either by the Maintenance Area Supervisor or the Senior Contracting Officer. No work shall be done without an agreement. Please send invoice to the address listed below.

Please Contact us if there is a different quantity needed than what was ordered.

County Representative: Robert Baker

Date: 10-3-2016

Work completed and OK to Pay, Yes <input type="checkbox"/> No <input type="checkbox"/>	
Inspected by:	Date:
Invoice # :	

BP
10/3

Baker, Robert

From: Baker, Robert
Sent: Monday, October 03, 2016 9:07 AM
To: 'jimg@lakejemfarms.com'
Cc: Press, Brenda; Johnson, Jeff
Subject: FW: Sod install on 10407 Carlson Circle
Attachments: Lake Jem, 10407 Carlson Circle.doc

Jim,

We would like to cancel the order for 10407 Carlson Circle due to lack of a timely response. If you have any questions or concerns please give us a call.

Thank you;

Robert Baker

Contract Technician

Lake County Public Works/ Road Operation
12901 Landfill Rd. Tavares, Fl. 32778

Mailing Address: PO Box 7800, Tavares, Fl. 32778-7800

Phone: 352-343-6439
Fax: 352-742-3888

Email: rbaker@lakecountyfl.gov

From: Baker, Robert
Sent: Monday, September 19, 2016 9:23 AM
To: 'jimg@lakejemfarms.com'
Cc: Press, Brenda; Johnson, Jeff; Haynes, Denise; Berger, David; Hicks, Christopher; Wilkins, Temia
Subject: Sod install on 10407 Carlson Circle

Good morning Jim,

We have a sod install in Clermont area. I would like to meet you on site and I will call you later today set a time to meet.

Thank you;

Robert Baker

Contract Technician

Lake County Public Works/ Road Operation
12901 Landfill Rd. Tavares, Fl. 32778

Mailing Address: PO Box 7800, Tavares, Fl. 32778-7800

Phone: 352-343-6439
Fax: 352-742-3888



Lake Jam \$792
Cottoms \$880

To: _____ From: **Public Works Road Operations**

Fax: _____ Phone : **(352) 343-6439**

Phone: _____ Pages: **1**

Re: **Sod Installation** _____

Cancelled RB
10-3-16

REQUEST FOR SOD INSTALLED

Install Date Requested: ASAP Road Seg. #: 0734B-01

Delivery address: 10407 Carlson Circle

Section: 11 Town: 23 Range: 25

Directions to Delivery Point: US 27 south to Hammock Ridge turn right continue until it turns to Lakeshore Dr. keep going to Lighthouse Rd. turn right go to Carlson Circle and turn left go to address.

Type of sod: Floratam St. Augustine Quantity: 2,200 sq. ft.

Notes:

Prior to performance of work, questions concerning the measurements shall be addressed and agreed upon in writing either by the Maintenance Area Supervisor or the Senior Contracting Officer. No work shall be done without an agreement. Please send invoice to the address listed below.

Please Contact us if there is a different quantity needed than what was ordered.

County Representative: _____

Date:

Work completed and OK to Pay, Yes <input type="checkbox"/> No <input type="checkbox"/>	
Invoice # :	
Inspected by :	Date:

BP
9/16