

RECEIVED

AUG - 9 2016

LAKE COUNTY ROAD OPERATIONS

INVOICE

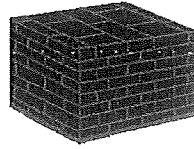
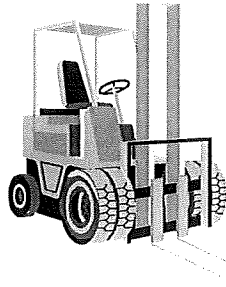
Invoice Number: 219108

Invoice Date: Jul 27, 2016

A- 1 SOD INC. dba
COTTOM'S A-1 SOD
4250 MARION COUNTY ROAD
WEIRSDALE, FL 32195
USA

Voice: 352-751-4434

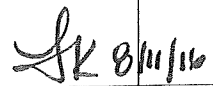
Fax: 352-751-4503



Bill To:
LAKE COUNTY ROAD OPERATIONS PO BOX 7800 TAVARES, FL 32778

Ship to:
CR 25 AND SR 441 OVER PASS ON CR 25 BOB 308-9784

Customer ID	Customer PO	Payment Terms	
19007	20160769	Net 30 Days	
Sales Rep ID	Shipping Method	Ship Date	Due Date
166	INSTALL		8/26/16

Quantity	Item	Description	Unit Price	Amount
		7100 SF BAHIA SOD INSTALLED AND ROLLED LAKE COUNTY ROAD OPERATIONS CR 25 AND SR 441 OVER PASS ON CR 25		1,775.00
			 OK TO PAY COTTOMS A 1 SOD INC. PO#: 20160769 Acct#: 1120.5053200.830530 Goods Recd: <u>8/1/16</u> <u>KK 08-10-16</u>	

TERMS: CASH ON RECEIPT UNLESS CREDIT HAS BEEN ESTABLISHED, NET 10 DAYS AFTER DATE OF INVOICE. 1 1/2 % MONTHLY SERVICE CHARGE ON ALL PAST DUE ACCOUNTS.	Subtotal	1,775.00
	Sales Tax	
	Total Invoice Amount	1,775.00
	Payment/Credit Applied	
	TOTAL	1,775.00

GUARANTEE: New Installs-30 Days-Provided proper maintenance is done: Watering and starting a spray program for bugs and fungus within 10 days of installation. All problems with any grass must be reported within 7 days. There is NO GUARANTEE on grass picked up or delivered, as we are not responsible once sod is accepted by customer. All grass must be installed within 24 hours of taking possession. With proper watering, spraying, & sunlight, grass will thrive.

Title to the material herein described is retained by Cottom's A-1 Sod, Inc. and the same shall not pass or become vested in purchaser until the full purchase price for same has been paid in full. In case of default in the payment of any part of the purchase price, the entire unpaid balance shall at once become due and payable and Cottom's A-1 Sod, Inc. shall have full right and power to repossess the material herein. In case of default, the purchaser shall pay all costs and damages including reasonable attorney's fees which may be sustained by Cottom's A-1 Sod, Inc.

Handwritten signatures and initials:
JA 8/11/16
BP
8/11



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. #: 1-7804-04

Delivery address: CR 25 and SR 441 over pass on CR 25

Section: 17 Town: 18 Range: 24

Directions to Delivery Point: From Marion County Rd. and CR 25 go south to the south side of SR 441 over pass on CR 25

Type of sod: bahia Quantity: 6,754 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: 7-25-2016

Work completed and OK to Pay, Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Inspected by: Robert Baker	Date: 8-2-16
Invoice # : 219108	



Cottoms \$1,688.50
LakeJem \$2,228.82

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Re: Sod Installation: 14-0439A

REQUEST FOR SOD INSTALLED

Install Date Requested: A.S.A.P. Road Seg. #: 1-7804-04

Delivery address: N/A

Section: 17 Town: 18 Range: 24

Directions to Delivery Point: Marion County Rd to CR 25, head south on CR 25 just past the SR 27 over pass on the east side of the road.

Type of sod: Bahia Quantity: 6, 754 sqft.

Field adjusted quantity per site visit: _____

Notes: Area to be sodded is marked out with pink paint.

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"/>	
Inspected by:	Date:
Invoice # :	

BP
7/25

Request Details Report

Request Number MA1-11038-R **Associated Work Order** MA1-20329-WO **Observed Date/Time** 7/13/16 2:01:P

Citizen Information

Name _____ **Phone** (352) 751-1526 **Ext.** _____
Address _____ **Alternate Phone** _____
_____ **Email Address** _____

Organization City of Lady Lake

Requestor

Contact Peggy

Issue and Location

Activity _____ **Issue** _____ **Washout** _____
_____ **Map Page** _____ **SEC** **TWN** **RNG**

SHD Build-Up Shoulder

Address Number

Route CR 25 (7804)

Intersect Route HWY 441

Details

Peggy with the City of Lady Lake called and reported that water run-off from the overpass of Hwy 441/27 has created a bas washout on CR 25 which is underneath the overpass.

Notes

History

Resolution _____

Request Response Date 07/13/2016