

# CITY of RAPID CITY

## Work Session Agenda Information

Item Number: WS

<b>Work Session Meeting Date:</b> 3-31-21	<b>1<sup>st</sup> Council Meeting Date:</b> 4-5-21
<b>Department:</b> Engineering	<b>2<sup>nd</sup> Council Meeting Date:</b>
<b>Staff Contact:</b> Jesse Rieb	<b>Petitioner:</b>
<b>Location:</b> Well No. 9	

### Agenda Placement:

<input type="checkbox"/> <b>Presentation (Informational)</b>	<input type="checkbox"/> <b>Discussion Item (Non Consent)</b>	<input checked="" type="checkbox"/> <b>Regular Business (Consent)</b>	<input type="checkbox"/> <b>Regular Business (Non Consent)</b>
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### Agenda Title:

Authorize staff to advertise for bids Well #9 Pump Replacement Project #20-2573 CIP#51271.  
Estimated Cost \$80,000.

### Explanation:

Well 9 pump and motor has exceeded its useful life and parts are unavailable.

**Staff Recommendation:** Approve

### Funding Source & Fiscal Impact *(if applicable)*:

<table border="1"><tr><th>Fund</th><th>Cost Center</th></tr><tr><td>Water Repl/Impr</td><td>933</td></tr><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table>	Fund	Cost Center	Water Repl/Impr	933					<table border="1"><tr><th>Fund</th><th>Cost Center</th></tr><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table>	Fund	Cost Center						
Fund	Cost Center																
Water Repl/Impr	933																
Fund	Cost Center																
<input checked="" type="checkbox"/> Budgeted <input type="checkbox"/> Not Budgeted																	

### Attachments & Links:

Vicinity Map		

**REQUEST FOR ADVERTISING AUTHORITY**

This form must be completed and approved by the City Finance Office prior to presenting items to the City Council and/or Committees of the City Council. This covers all items which require formal bids.

I. PROJECT NO.: 20-2573 CIP No. 51271  
 II. PROJECT NAME: Well #9 Pump Replacement  
 III. Project/Item(s) Description: The work includes removing and replacing submersible pump equipment in Well #9 off of Arrowhead Dr.

IV. BID LETTING DATE: April 27, 2021

V. ESTIMATED COST OF PROJECT/ITEM(S) \$ \$80,000

VI. BASIS OF PAYMENT Assessed ☐ Non-Assessed ☐  
 Single Payment ☐ Partial Payment ☒

## VII. APPROPRIATION DATA

Amount	\$80,000				
Fund Name	Water				
Department	933				
Line Item	4381				
Fund	602				

VIII. (If applicable) Grant No. or special funding: \_\_\_\_\_  
 Funding Source: \_\_\_\_\_  
 Estimated Completion Date: \_\_\_\_\_  
 Estimated Grant Receipt Date: \_\_\_\_\_

## IX. DEPARTMENT/DIVISION:

Project Manager:  Date 2-10-21

COMPLIANCE SPECIALIST Signature \_\_\_\_\_ Date \_\_\_\_\_

DIVISION MANAGER Signature \_\_\_\_\_ Date \_\_\_\_\_

DEPARTMENT DIRECTOR Signature \_\_\_\_\_ Date \_\_\_\_\_

FINANCE OFFICE USE ONLY			Approved		Carbon Copy
Appropriation Cash Flow	Date	Initial	Yes		Investment Desk
					Public Works
					Engineering
					Project Manager



**WELL NO. 9 PUMP REPLACEMENT &  
ELECTRICAL IMPROVEMENTS  
PROJECT NO. 20-2573      CIP NO. 51271**

