

- 1) Make copy of Receipt from TUMK. # 622967
- 2) Make copy of Proposal # 3885-2
- 3) Make copy of Stallone estimate total # 3871.00

**SIMPLIFIED APPLICATION**

- 4) Make copy of Kessler's estimate for interior wood (Monday)

**The New York State Individual and Family Grant Program**

**SECTION A - INFORMATION**

- 5) Fill in Amount of Loss of Paperwork being sent in \*

Applicant Name: \_\_\_\_\_

Applicant Address: \_\_\_\_\_ County of Residence: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Name of Business, Farm or Applying Entity (if applicable): \_\_\_\_\_

Address of Business: (if applicable): \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_

Tax Identification Number or Social Security Number: \_\_\_\_\_ County of Business: \_\_\_\_\_

Type of Business, Farm or Applying Entity (if Applicable): \_\_\_\_\_

Number of Employees (as of June 28, 2006 not to exceed 500 full-time employees): \_\_\_\_\_

Nature of Loss: Boiler, water heater, water softener & U.V. disinfection  
cellar wall & floor, deck, main panel box destroyed in  
flood June 2006

*Add Kessler estimate to this number -*

Amount of Loss: 10,557 + partition - less FEMA Grant (\$700)  
+ 6,200  
17,257

**SECTION B - PROOF OF OWNERSHIP/INTEREST (CHECK ONE AND ATTACH COPY)**

- |                  |                                                         |                                                            |                                                     |
|------------------|---------------------------------------------------------|------------------------------------------------------------|-----------------------------------------------------|
| <b>Business</b>  | <input type="checkbox"/> DBA Form                       | <input type="checkbox"/> Income Tax Form                   | <input type="checkbox"/> Other (explain and attach) |
| <b>Operation</b> | <input type="checkbox"/> Certificate of Incorporation   |                                                            | _____                                               |
|                  | <input type="checkbox"/> Tax Identification Number Form |                                                            | _____                                               |
| <b>Residence</b> | <input type="checkbox"/> Recorded Deed                  | <input type="checkbox"/> Lease                             | <input type="checkbox"/> Other (explain and attach) |
|                  | <input type="checkbox"/> Mortgage Statement             | <input checked="" type="checkbox"/> Real Property Tax Bill | _____                                               |
|                  |                                                         |                                                            | _____                                               |

*Copy to keep with med in 9-26 boxes*

**SECTION C – ELIGIBILITY FOR STATE GRANT/PROOF OF LOSS\* (check one and attach copy)**

Eligible project costs include damage or destruction to primary residences, personal property, debris removal, emergency housing costs or real property, livestock, machinery or equipment used in the normal course of business and only those damaged or destroyed by the Floods of June 2006. These grants are not to exceed FIVE THOUSAND DOLLARS (\$5,000.00).

- Damage estimate or estimate of repair or replacement to damaged property
  - Letter of denial of insurance coverage for loss or proof of deductible from insurance company
  - Other, explain and attach
- 
- 

**\*NOTE: LOSS OF PERSONAL, BUSINESS OR FARM INCOME IS NOT ELIGIBLE UNDER THIS PROGRAM.**

**SECTION D – CERTIFICATION**

Please complete the certification on **the following pages** (failure to do so renders application incomplete and ineligible for consideration).

**PLEASE TAKE NOTICE:**

- Your application must be postmarked by Tuesday, September 5, 2006 to be considered for this program.
- This application is a request for a grant and does not convey any award of funds.
- Please allow sufficient time for processing applications.
- Further verification may be required in some cases.
- New York State reserves the right to reject and return incomplete or ineligible applications.
- Program funding is limited. Funds may become exhausted after your application is received and before an award is made.

**Completed applications should be sent to:** New York State Department of Labor

P. O. Box 1279

Albany, NY 12201-1279

CERTIFICATION

State of New York, County of

Otsego

I am the owner, officer, partner, or sole proprietor of the business, farm, or agricultural enterprise known as:

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OR:

I am the owner, tenant or possess an ownership interest in the following real or personal property (if residence, provide address):

321 Pany Farm Rd  
Oneonta NY 13820

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I have previously applied for relief or have been awarded a grant under the following program(s):

FEMA - Individuals + Households Program  
\$400 applied to home repair.

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- I am applying for relief under the New York State Individual and Family Grant Program and certify that I have suffered a loss of equipment, property, livestock, machinery, residence (including debris removal, loss of use) or personal property.
- The lost property was used in the normal course of my business or farm operations and I have attached proof of ownership, if applicable.
- I certify under penalty of perjury that the attached application is submitted without any fraudulent intent. I am the authorized individual eligible to make application for my business or residence and this is the only application submitted for this business or residence under these programs. I understand that any award received by me must be used only to pay for the costs described in the application for which the award was granted and that the use of such funds for any other purposes is strictly prohibited.
- I have not received compensation from any insurance proceeds or grants from any other relief program for the portion of this loss for which I am applying for assistance. (Insurance deductibles and uncovered portion of losses are eligible.)
- I have read, accepted and agree to abide by the terms of the program procedures governing the New York State Individual and Family Grant Program which are the subject of the attached application.
- I certify my business, farm, or other entity was operational at the time of the Floods of June 2006.
- I authorize my insurance carrier to release to the New York State Department of Labor or its agent any information needed to verify my claim.
- I agree to indemnify and hold harmless the State of New York, as well as its agents and employees, for any claims arising from the administration of the Program.
- I certify the above information is true and correct to the best of my knowledge, and I understand that the intentional filing of a false instrument with a government agency is a felony. I agree that, should I subsequently become entitled to and receive compensation for the loss or losses that are the subject of this application, I will repay the State any such duplicative compensation.

Patricia M. Solovitch

(Print Above listed Owner's Name)

Patricia M. Solovitch

(Above Listed Owner's Signature)

---

(Business/Farm/Entity Name, if Applicable)

9-23-06

(Date)



# PROPOSAL

**KESLER'S GENERAL CONTRACTING**  
 Tim & Judy Kessler  
 596 Loughood Rd.  
 Oneonta, N.Y. 13820  
 (607) 286-7320

PROPOSAL NO.	3885-2
SHEET NO.	1
DATE	11/16/06

PROPOSAL SUBMITTED TO:

NAME	PAT Solvitch
ADDRESS	321 Pony Farm Rd Oneonta, NY 13820
PHONE NO.	607-432-3885

WORK TO BE PERFORMED AT:

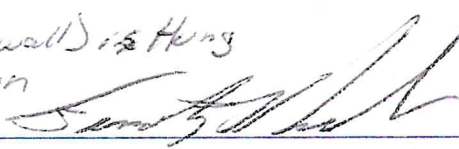
ADDRESS	SAME
DATE OF PLANS	
ARCHITECT	

We hereby propose to furnish the materials and perform the labor necessary for the completion of Finish BASEMENT  
 24'x22' Exterior WALLS 2x4 studs R-11 Insulation. Interior WALLS  
 2x4 studs. All WALLS to be finished with 1/2" Drywall Flat Finish + Prime  
 Paint. NEW STAIRS with ENCLOSED RISERS To accommodate 30" DOOR  
 To un finished PART OF BASEMENT. Bring Electric up to N.Y.S. Codes. Enclose  
 post and Beam with 4/4 Pine. Ceiling Fix Back Half Drop Ceiling with  
 material on site. Install New Drop Ceiling in Front Half  
 Vinyl Replacement windows 4 sliders For Basement. 1 slider For  
 Bath Room Remove all construction Debris From Job Site

Thank you Tom

11/16/06 V# 2603

All material is guaranteed to be as specified, and the above work to be performed in accordance with the drawings and specifications submitted for above work and completed in a substantial workmanlike manner for the sum of \_\_\_\_\_ Dollars (\$ 6800.00 )

with payments to be made as follows: \$4200.00 To start  
\$1600.00 when Rock (Drywall) is hung  
\$1000.00 upon completion  
 Respectfully submitted 

Any alteration or deviation from above specifications involving extra costs will be executed only upon written order, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents, or delays beyond our control.

Per Kessler's General Contracting

Note — This proposal may be withdrawn by us if not accepted within 15 days.

### ACCEPTANCE OF PROPOSAL

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payments will be made as outlined above.

Signature Pat Solvitch  
 Signature \_\_\_\_\_

Date 11-16-06



FEDERAL EMERGENCY MANAGEMENT AGENCY Application/Registration for Disaster Assistance		Registration ID 39-0015726	O.M.B. No. 3067-0009 Expires Feb. 28, 2003	DR No. 1650	Language English
1. Name (Last, First, MI) MS. SOLOVITCH, PATRICIA M		2. Social Security Number 101-26-6456		3. Date of loss 06/26/2006	
4A. Damaged phone number (607) 432-3885	4B. Cell Phone Number None	4C. Current phone number (607) 432-3885	4D. Work phone number (607) 432-1896	4E. Email address pmspfr@yahoo.com	
5 Address of Damaged Property	Street Address 321 PONY FARM RD	City ONEONTA	State NY	Zip+4 13620	County OTSEGO
6. Do you own or rent your home? Own	7. Is the address listed in #5 your primary residence? Yes (Primary)	8. Type of residence: House-Single/Duplex		9. What is your current location? Family/Friends Dwelling	
10. Cause of Damage Flood                  Seepage					
11. Current Mailing Address		321 PONY FARM RD	ONEONTA	NY	13620
12. Auto Damage: No					
13A. Was your home damaged by the disaster? Yes		13B. Personal property damaged? Yes			
13C. Was the access to your home restricted? Not Restricted					
14. Are any of your essential utilities currently not working as a result of the disaster?					Yes
15. Do you have any disaster related essential needs for food, clothing or shelter?					No
16. Do you own or lease a working farm or ranch that was affected by the disaster? (Does not include farm home)					No
17. Do you own a business or rental property which was affected by the disaster? (Not Farm Damage)					No
18. Has anyone in your family lost work or become unemployed due to the disaster? (Including self-employed)					No
19A. Did you have any disaster related medical expense? No		Was it insured?		Amount of loss?	
19B. Did you have any disaster related dental expense? No		Was it insured?		Amount of loss?	
19C. Did you have any disaster related funeral expense? No		Was it insured?			
19D. Did you have any disaster related moving and storage expenses? No		Was it covered by insurance?			
20. Other / Miscellaneous disaster related damages					
21. Names of all persons living in home at the time of disaster		Relationship	Social Security Number	Age	Dependent
SOLOVITCH, PATRICIA M		Registrant	101-26-6456	73	Yes
22. Employer/Source of income:		23. Total number of dependents claimed (Including Applicant): 1		24. Would you like to use the EFT option if eligible for assistance? (Electronic funds Transfer into your bank account) Yes	
25. Annual pre-disaster gross income for all members of the family: \$20763					
26. Insurance Company			Policy Number		
PERFERRED MUTUAL					
27. You have been referred to the following sources for Disaster Aid. For more information, refer to the enclosed program guide as well as the disaster assistance program information sheet.					
Housing Assistance (Owner)		Tax Assistance			
SBA Home & Personal Property (Owner)		SBA Workshop			
Other Other					
If you have any questions or feel our information is incorrect, please call the Disaster Helpline at 1-800-621-FEMA, or for the speech or hearing impaired only, call 1-800-462-7585			28. Date of Application: 07/12/2006	29. Information taken by:	



## Assistance from other agencies or organizations

[Help for this page](#)

Based on the information you have given us you may be eligible for assistance from one or more of the following agencies or organizations. Please read each description for a brief explanation of the services available. You may print a list of all available disaster relief agencies in your state by clicking the following link: [available Agencies](#)

Agency/Organization	Description	Info
Tax Assistance	Since you have damaged or lost property in a location declared by the President as a major disaster area, you may be able to get some money back from the IRS. For more information, order their Publication Number 2194 (for Individuals or 2194B for Businesses) 'Disaster Loss Kit' by calling 1-800-829-3676.	<a href="#">Details</a>
Small Business Administration (SBA)	Property tax relief may also be available in your area. Contact your county/parish tax assessor for additional information. If you would like more information about the <a href="#">Small Business Administration (SBA) Disaster Loan Program</a> you have been referred to or require further assistance in filling out the Disaster Loan application, a workshop may open in your area. An SBA representative can provide you with the address or you can monitor local newspapers and media for location announcements.	

[Help for this page](#)

Based on the information you have given us you may be eligible for assistance from one or more of the programs listed. Please read each program description for additional information.

Program	Description
<b>Individuals &amp; Households Program</b>	<p>You are being referred to FEMA's Individuals and Households Program (IHP) for possible assistance.</p> <p>You will receive a pamphlet titled, "Help After a Disaster, Applicant's Guide to the Individuals and Households Program". Please read it carefully; this pamphlet should answer most of your questions and provide additional information about other programs that may be able to assist in your recovery efforts.</p> <p>A FEMA inspector will contact you WITHIN 10-14 days of registration to verify your disaster related damages. It is very important that you or another adult member of the household (18 years or older) be present so the inspection can be performed." You will be asked to sign a statement confirming your citizenship status and may need the following information for the inspector:</p> <ul style="list-style-type: none"> <li>• proof that you were occupying the home at the time of the disaster (such as a utility bill)</li> <li>• your home ownership papers or lease agreement if you are a renter and</li> <li>• your insurance policies</li> </ul> <p>If you have applied using the SSN of a dependent child in your household you must provide copies of the documents(s) that state the child is a United States citizen, non-citizen national, or qualified alien.</p> <p>Within 10-days following your FEMA inspection you will be notified by mail of your eligibility. If you are found eligible a check or electronic funds transfer will arrive separately.</p> <p>Because FEMA assistance is limited to emergency home repairs and rent, we are unable to assist with all home repairs, personal property damages, vehicle damage, or moving and storage expenses. We will send a copy of your application to the disaster low interest loan program administered by the <a href="#">Small Business Administration (SBA)</a>.</p>
<b>SBA Home &amp; Personal Property Loan</b>	<p>The SBA will mail a Home-Personal Property Disaster Loan application to you. Please complete it and return it to them as soon as possible so they can determine if you qualify for a low interest loan to cover your losses. If the SBA does not offer you a loan, your application will be referred back to the Individuals and Households Program (IHP) for possible grant assistance. You will receive a pamphlet titled "Help After a Disaster, Applicant's Guide to the Individuals and Households Program". Please read it carefully; this pamphlet should answer most of your questions and provide additional information about other programs that may be able to assist in your recovery efforts.</p>
<b>Individuals and Households Program (M/D/F/other miscellaneous)</b>	<p>You are being referred to FEMA's Individual and Households Program. They may help you with your medical, dental, funeral, or other miscellaneous expenses.</p> <p>You will receive a pamphlet titled "Help After a Disaster, Applicant's Guide to the Individuals and Households Program". This program guide will help you understand the assistance provided by FEMA and the state. Please read it carefully; this pamphlet should answer most of your questions and provide additional information about other programs that may be able to assist in your recovery efforts.</p>



# Individual Assistance Center

If you have been affected by a disaster, you may be eligible for federal assistance. Review the instructions below to ensure you are ready to complete the application process.

If you are applying for multiple disasters, you will need to complete an Online registration for each disaster.

If you are filing for both home and business disaster assistance, you will complete a single registration for the combined losses.

The application process will take 18 - 20 minutes and is authorized by the Office of Management and Budget under Control number 1660-0002.

For technical problems with this site, please contact FEMA's Technical Helpdesk at 1-800-745-0243 or (TTY) 1-800-462-7585 for the speech and hearing impaired.

You will need the following information to complete the registration:

#### Social Security Number

You will be asked to provide your social security number; if you are registering for a business, your tax ID number should be provided. If you do not have a social security number, your household may still be able to receive assistance if there is a minor child in the household who is a U.S. Citizen, Non-Citizen National, or Qualified Alien with a social security number.

#### Insurance information

You will be asked to identify the type(s) of insurance coverage you have.

#### Financial information

You will be asked to enter your family's gross total household income at the time of the disaster.

#### Contact information

Along with the address and phone number where the damages occurred, you will be asked for information on how FEMA can contact you. It is very important that you provide FEMA with your current mailing address and phone numbers where you can be contacted.

#### Electronic Funds Transfer (EFT) Direct Deposit Information (optional)

If you are determined to be eligible for assistance and would prefer that funds be transferred to your account, you will be asked for your banking information, which includes; the institution name, type of account, routing and account number.

Please have pen and paper available to record information during the registration process.

#### Paperwork Burden Disclosure Notice

Public reporting burden for this form is estimated to average 19 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting the form. You are not required to respond to this collection of information unless a valid OMB control number is displayed in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472, Paperwork Reduction Project (1660-0002). **NOTE: Do not send your completed form to this address.**

PHYSICAL DISASTER SURVEY FORM

Date: June 30, 06 Time of Report: \_\_\_\_\_ Person Taking Report: \_\_\_\_\_

NAME: Solovitch, Patricia M.

ADDRESS: 321 Pony Farm rd Oneonta

TELEPHONE: 432-3885

LOSS WAS INCURRED TO: BUSINESS \_\_\_\_\_ HOME  CONTENTS

If property owner (Describe the Monetary Damage to Real Estate)

flooded finished basement, water level up to 1 ft. from 1st floor.  
Damage to heating system, boiler, water pressure tank, softener unit, elec. clothes dryer  
carpeting, paneling, storage units. Sections of concrete flooring lifted. Total loss  
of all personal items. 1 to 2 ft of silt covered entire area. Outside crater  
along back wall (larger than Volkswagen) Damage to deck & supports on  
back of house. - estimates will probably exceed \$5000.00 dollars.

PRE-DISASTER FAIR MARKET VALUE OF REAL ESTATE \$ \$140,000.

If renter or lessee (Describe monetary damage to personal property, Equipment, Inventory Etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

INSURANCE: Name of Carrier: Preferred Mutual Ins. Co.  
Amount of Insurance: no flood ins.

RETURN FORM TO:



FEMA



R. David Paulison  
Director

Governor  
State of New York

National Processing Service Center  
P.O. BOX 10055  
Hyattsville, MD 20782-7055

07/22/2006

FEMA Application No.390015726

Disaster No.1650

MS PATRICIA M SOLOVITCH  
321 PONY FARM RD  
ONEONTA, NY 13820-3536

Dear Ms. Solovitch:

The Federal Emergency Management Agency (FEMA) and the State of New York have reviewed your request for disaster help and/or the inspection done on your home. Listed below are the decisions that have been made regarding your request for help. For a full explanation of the decisions, please refer to the section called "**If You Are Not Eligible For Help**" in HELP AFTER A DISASTER, Applicant's Guide to the Individuals & Households Program mailed to you after you applied for assistance.

**CATEGORIES**

**DETERMINATION**

Home Repair	\$5,400.00
Other	IID- Ineligible - Insufficient Damage
Rental Assistance	\$483.00
=====	=====
Total Grant Amount:	\$5,883.00

Your home is located in a Special Flood Hazard Area designated by the National Flood Insurance Program (NFIP). If you accept money from FEMA for NFIP-insurable real and/or personal property, you must obtain and maintain flood insurance. For more information about this requirement or to learn where to obtain flood insurance call 1-800-427-4661.

**PLEASE READ THE NOTICES FOR IMPORTANT INFORMATION**

**Applicants with Insurance:** Your application for assistance may be placed on hold to allow you time to file your insurance claim. Federal law prohibits FEMA or the State from duplicating assistance that may be available from insurance. A \$0 amount above does not mean that you are ineligible for assistance. It means FEMA needs to know what your insurance settlement is and what your unmet needs are before we can continue processing your application.

If a decision results in a monetary award, you will soon receive a check at the mailing address you provided when you registered or electronic funds transfer to your bank for the Total Grant Amount listed above.

If you disagree with the decision(s) above, you have the right to appeal within 60 days of the date of this decision letter. If you have, any questions about writing an appeal please read the Notices on the back of this letter, call the FEMA Disaster Helpline at **1-800-621-FEMA (3362)** (hearing/speech



impaired only, call 1-800-462-7585), or visit us on the web at [www.fema.gov](http://www.fema.gov) and click on the "Online Individual Assistance Center."

Sincerely,

SUPER

Individuals and Households Program Appeals Officer

# NOTICES

1. This letter is about your request for help from FEMA only. Money received from FEMA should be used as specified in the category above. If you do not use the money as specified, you and/or your household may not be eligible for additional help from FEMA.
2. If you have funds available or have received funds from another source for disaster losses that duplicates money received from FEMA, you may be required to return all or part of the money received from FEMA.
3. This program will not cover all of your losses from damage to your property (home, personal property, household goods) that resulted from the disaster.
4. This program is not intended to restore your damaged property to its condition before the disaster.
5. This program does not cover business-related losses that resulted from the disaster.
6. Before you begin any repairs, check with your local building department to find out what local permits or inspections are required.
7. If you have hotel/motel expenses and receipts, due to the disaster, call the FEMA Helpline for information on how you may be reimbursed.
8. Filing an Appeal: To file an appeal, you must:

Explain in writing why you feel FEMA's decision is wrong. Send any new or additional information that you have to show the Appeals Officer that you are eligible for this money. Be sure to include your FEMA Application Number, shown at the top of this letter, when you write to FEMA.

Mail your letter and the documents to FEMA Appeals Officer, National Processing Service Center, P.O. Box 10055, Hyattsville, MD 20782-7055. Your appeal must be postmarked within 60 days of the date of this letter. Appeals will not be accepted after this date.

9. Insured Applicants: If you have not already contacted your insurance agent to file a claim, please do this as soon as possible. Failure to file a claim with your insurance company may affect your eligibility for assistance from the FEMA-State Individuals and Households Program. After filing your claim, if any of the following situations occur, please call the FEMA Disaster Helpline for additional information. **Note to Insured Applicants. You have up to twelve (12) months from the date you registered with FEMA to submit your insurance information for review.**

\*Your insurance settlement is delayed.

\*Your insurance settlement is insufficient to meet your disaster-related needs.

\*You have exhausted the Additional Living Expenses (ALE) provided by your insurance company.

\*You are unable to locate rental resources in your area.

By law, FEMA cannot provide money to you for losses that are covered by your insurance.

# Requirements for Continued Rental Assistance

## Instructions:

1. Provide your housing plan as outlined in (A) below.
2. Provide all of the documentation listed under (B) "All Applicants".
3. Select the group (C or D) that best fits your situation and long term housing plan. Provide all of the documentation listed under the group you selected.
4. Send this information along with your name, disaster number and registration number to FEMA, at the address provided on the front of this letter, 30-days before your current rental assistance award expires.

A. **Housing Plan** - A description of your plan to obtain affordable housing, e.g., secure a loan, hire a contractor, or find a new place to live. Please include the earliest date that you believe you can fulfill your housing plan.

B. **All Applicants**: You must submit the following information in addition to the documentation requested above:

- \* Canceled checks, receipts or statements showing your pre-disaster mortgage or rent amount, landlord's name and contact information.
- \* Pre-disaster income, e.g., pay check stub, w-2 form, disability income, Supplemental Security Income (SSI) statement, etc.
- \* Current income, e.g., pay check stub, w-2 form, disability income, SSI statement, unemployment benefits, retirement benefits, etc.
- \* Documentation of efforts to reestablish income (if unemployed) or to increase income to self-sufficing levels, e.g., job search records provided to the State for unemployment benefits.

C. **Pre Disaster Owners**: If your plan is to repair or rebuild, you must submit the following:

- \* Mortgage statement and rent receipts/ proof of payment of rent to verify your current monthly housing cost (excluding utilities). Include your rental unit address, landlord's name, and contact information.
- \* Builder's contract to repair/rebuild your pre-disaster home including name, address and contact information.
- \* Verification of your source of funding to repair or rebuild your damaged home, e.g., insurance settlement, Small Business Administration (SBA) loan, commercial loan, FEMA grant and the status of the funding, i.e., disbursement date.
- \* Other relevant items (please describe and attach supporting documentation).

D. **Pre Disaster Renters or Owners**: If your plan is to find another place to rent you must submit the following:

- \* Rent receipts/ proof of payment of rent to verify your current monthly housing cost (excluding utilities). Include your rental unit address, landlord's name, and contact information.
- \* Other relevant items (please describe and attach supporting documentation).



PROPOSAL

*Basement*

KESSLER'S GENERAL CONTRACTING  
Tim & Judy Kessler  
586 Lougheed Rd.  
Oneonta, N.Y. 13820  
(607) 286-7320

PROPOSAL NO.	3885-2
SHEET NO.	1
DATE	7/17/06

PROPOSAL SUBMITTED TO:

NAME	PAT Solovitch
ADDRESS	321 Pony Farm Rd Oneonta NY 13820
PHONE NO.	432-3885

WORK TO BE PERFORMED AT:

ADDRESS	<i>JAMES</i>
DATE OF PLANS	
ARCHITECT	

We hereby propose to furnish the materials and perform the labor necessary for the completion of 12'x22' Basement

*slab. Remove all High & Broken Concrete  
POUR NEW slab 4" THICK. Remotor cracked  
Block on Backwall. POUR a 12"x22" curb on  
Back wall. POUR a 4'x6" curb around oil  
TANK. Install 5" wire mesh in slab and  
Curb on Back wall.*

*pd \$1200 7/17/06 ✓ # 2579*

*pd IN FULL Thank you ✓ # 2579*

All material is guaranteed to be as specified, and the above work to be performed in accordance with the drawings and specifications submitted for above work and completed in a substantial workmanlike manner for the sum of

Dollars (\$ 1750<sup>00</sup> )

with payments to be made as follows.

*\$1200 - To start  
550 - upon completion*

*✓ # 2577W*

Respectfully submitted

*[Signature]*  
Per K.G.C.

Any alteration or deviation from above specifications involving extra costs will be executed only upon written order, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents, or delays beyond our control.

Note — This proposal may be withdrawn by us if not accepted within 15 days.

ACCEPTANCE OF PROPOSAL

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payments will be made as outlined above.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

622967

KESSLER'S GENERAL CONTRACTING  
Tim & Judy Kessler  
586 Louheed Rd.  
Oneonta, N.Y. 13820  
(607) 286-7320

CUSTOMER'S ORDER NO. <i>432 3885</i>		DEPARTMENT			DATE <i>1/17/06</i>	
NAME <i>PAT Solovitch</i>						
ADDRESS <i>321 Pony Farm Rd</i>						
CITY, STATE, ZIP <i>Oneonta NY 13820</i>						
SOLD BY		CASH	C.O.D.	CHARGE	ON ACCT.	MDSE RETD PAID OUT
QUANTITY	DESCRIPTION			PRICE	AMOUNT	
1						
2	<i>Balance on Contract.</i>			<del><i>\$100</i></del>		
3						
4	<i>Replace Rotten Beam</i>					
5	<i>Under screen porch</i>			<i>\$110</i>	<i>-</i>	
6						
7	<i>Replace Rotten Fram</i>					
8	<i>on 6'x10' Bottom step</i>			<i>\$145</i>	<i>-</i>	
9						
10	<i>Replace Rotten Fram on</i>					
11	<i>3'x4' middle step</i>			<i>\$95</i>	<i>-</i>	
12						
13						
14	<i>Total</i>			<del><i>\$450</i></del>		
15						
16	<i>Thank you</i>			<i>\$350</i>	<i>-</i>	
17						
18						
19						
20						
RECEIVED BY						

*Total*  
*Thank you*  
*Tim*  
*(P) INFV 1/17/06*

adams  
5805

KEEP THIS SLIP FOR REFERENCE



KESSLER'S GENERAL CONTRACTING  
Tim & Judy Kessler  
536 Lougheed Rd.  
Oneonta, N.Y. 13820  
(607) 266-7320

PROPOSAL NO. 3885  
SHEET NO. 1  
DATE 7/14/06

PROPOSAL SUBMITTED TO:

NAME PAT Solovitch  
ADDRESS 321 Pony Farm Rd.  
Oneonta, N.Y. 13820  
PHONE NO. 432-3885

WORK TO BE PERFORMED AT:

ADDRESS SAME  
DATE OF PLANS  
ARCHITECT

We hereby propose to furnish the materials and perform the labor necessary for the completion of 11'x8' Deck with proper drainage under deck to daylight. Digging of Trench to be done by others. Install #2 stone 6" under pipe + 12" over pipe. Install landscape fabric over stone. Backfill with stone & place stone under deck. Deck to be built out of PT Lumber with finished floor to be Gray Trex. 3'x4' Round Step use Existing Frame & cover with Gray Trex. 10'x6' Bottom Step use Existing Frame & cover with Gray Trex. Re-support End of Saver Patch next to Deck. Remove all construction debris from job site.

PO # 2000 of 7/14/06  
Thank you Tim  
7/12/06

All material is guaranteed to be as specified, and the above work to be performed in accordance with the drawings and specifications submitted for above work and completed in a substantial workmanlike manner for the sum of 2100.00 Dollars (\$ )

with payments to be made as follows. \$1500.00 to start  
\$600.00 upon completion

Respectfully submitted [Signature]

Per H.G.C.

Any alteration or deviation from above specifications involving extra costs will be executed only upon written order, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents, or delays beyond our control.

Note — This proposal may be withdrawn by us if not accepted within 15 days.

ACCEPTANCE OF PROPOSAL

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payments will be made as outlined above.

Signature Pat Solovitch

Date 7-14-06

Signature \_\_\_\_\_



**KESSLER'S GENERAL CONTRACTING**

Tim & Judy Kessler  
 596 Lougheed Rd.  
 Oneonta, N.Y. 13820  
 (607) 286-7320

PRO

CUSTOMER'S ORDER NO. 432 3885		DEPARTMENT		DATE 12/4/06	
NAME PAT Solvitch					
ADDRESS 321 Pony Farm Rd					
CITY, STATE, ZIP Oneonta NY 13820					
SOLD BY	CASH	C.O.D.	CHARGE	ON ACCT.	MDSE RETD PAID OUT
QUANTITY	DESCRIPTION			PRICE	AMOUNT
1					
2	Balance on Contract			1000	00
3					
4	Extras:				
5	Install Dryer Labor & Materials			225	-
6	Bottom Start Light Labor & Material			50	-
7	Extra stiff to MOSA			25	-
8	Jump Pump Labor & Material			310	-
9	<del>Door Bottom</del>			<del>25</del>	
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
				Total	\$1610 00
pd IN FULL v# 109					
Thank you Tim					
RECEIVED BY					

adams  
5805

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