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***SECTION 6***  
***SPECIFIC PROJECT REQUIREMENTS***

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## **SPECIFIC PROJECT REQUIREMENTS**

### **1 - CONTACT DURING BIDDING**

- 1.1 All questions during bidding should be addressed to Robert C. Heady, who can be reached at CT Consultants, Inc., Wagner Building, 2001 Main Street, Suite 202, Wheeling, WV 26003 at 614.779.023 or [CT21039503P@ctconsultants.com](mailto:CT21039503P@ctconsultants.com).

### **2 - INSURANCE**

- 2.1 Section SC-5.04(D) of the Supplementary Conditions shall be deleted and no "all risk builders risk" or "installation floater" insurance need be purchased by the Contractor.

### **3 - WORKING HOURS**

- 3.1 No work shall be performed between the hours of 7:30 PM and 7:30 AM nor on Saturday, Sunday, or legal Holidays, without written permission of the Owner.

### **4 - PROJECT COMPLETION**

- 4.1 All work including restoration and clean-up shall be completed no later than the contract completion date. Failure to complete all work within the allotted time will result in assessment of liquidated damages. Upon completion of all work and written notification of same by the Contractor, the Engineer and Owner will compile a List of Items to be Completed or Corrected. The list will be sent to the Contractor. All items to be completed or corrected shall be completed to the satisfaction of the Engineer and the Owner within 14 days after receipt of the list. Failure to complete the List of Items to be Completed or Corrected Work within the allotted time will result in assessment of liquidated damages.

### **5 - TAXES**

- 5.1 This project is sales-tax exempt; however, there is a 2% B&O tax.
- 5.2 This project shall be Class Code 6611-6630. Refer to Business & Occupation Tax Return Form.
- 5.3 The Contractor shall pay the City Service Fee. Refer to City Service Fee Overview sheet.





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## CITY SERVICE FEE OVERVIEW

The City of Wheeling imposes a two dollar (\$2.00) per week City Service Fee (“CSF”) upon all full-time employees, part-time employees, and self-employed individuals who regularly report to work at a physical location or work from home within the City of Wheeling. Employers are required to withhold \$2.00 per week from each employee's pay. Withheld fees are remitted quarterly to the City Finance Department. Self-employed individuals are responsible for remitting their own fees. CSF payments not received within one month following the end of the calendar quarter will be subject to penalties.

If you work multiple jobs in Wheeling, and the fee is being deducted by more than one employer, complete a *Prior Payment Form* (CSF-1). Fill out areas one (1) and two (2) and sign area three (3). Your primary employer must sign area four (4). Once the form is completed, it should then be given to your secondary employer(s) and retained by them. ***THE PRIOR PAYMENT FORM SHOULD NOT BE SENT TO THE CITY FINANCE DEPARTMENT.***

If the fee is withheld from your pay in error, complete a *Refund Claim Form* (CSF-4), attach a copy of your pay stub or other employer-provided documentation showing the fee was deducted in error, and return the form to the City Finance Department. This form must be received within thirty (30) days following the receipt of payment from your employer.

**Businesses exempt from Wheeling Business & Occupation Tax, but that maintain offices / locations in Wheeling, are required to withhold the fee from employees.**

| CLASS CODE | BUSINESS CLASSIFICATIONS  | RATE PER \$100 |
|------------|---|----------------|
| 1000       | OTHER NATURAL RESOURCE PRODUCTS   | 1.00           |
| 2111-3999  | MANUFACTURED PRODUCTS   | .28            |
| 5212-5999  | RETAILERS AND OTHERS  | .365           |
| 5111-5199  | WHOLESALERS   | .15            |
| *6611-6630 | CONTRACTING BUSINESS * (List Specific Project/s in excess of \$5,000 Separately)            | 2.00           |
| *6147-6151 | RENTAL/LEASE INCOME PROPERTY FOR HIRE * (List all Rental Property Owned within City Limits) | .73            |
| 6211-6599  | SERVICES AND ALL OTHER BUSINESS   | .88            |
| 6111-6152  | BANKING AND OTHER FINANCIAL INSTITUTIONS  | .94            |
| 6600       | SHARED SERVICES   | .15            |
|            |   |                |
|            |   |                |

| EXEMPTION TYPE | AMOUNT | EXEMPTION TYPE | AMOUNT |
|----------------|--------|----------------|--------|
|                |        |                |        |
|                |        |                |        |
|                |        |                |        |

\*IF REPORTING INCOME UNDER CLASS 6611-6630 (CONTRACTING BUSINESS) IT IS NECESSARY FOR YOU TO SEPARATELY LIST SPECIFIC PROJECT(S) IN EXCESS OF \$5000

| PROJECT NAME (ADDRESS OR JOB SITE)  | Completion date, if complete | Gross Amount |
|---|------------------------------|--------------|
| 1) _____  | _____                        | \$ _____     |
| 2) _____  | _____                        | \$ _____     |
| 3) TOTAL OF ALL OTHER GROSS CONTRACTING INCOME RECEIVED (FOR JOBS LESS THAN \$5000) |                              | \$ _____     |
| TOTAL REVENUE THIS QUARTER FOR "CONTRACTING BUSINESS"                               |                              | \$ _____     |

(CARRY TOTAL AMOUNT RECEIVED TO FRONT OF FORM UNDER "TAXABLE AMOUNT" COLUMN-CLASS 6611-6630)

\*IF REPORTING INCOME UNDER CLASS 6151 "RENTAL BUSINESS" IT IS NECESSARY FOR YOU TO UPDATE AND LIST ALL RENTAL PROPERTY YOU OWN WITHIN THE CITY LIMITS OF WHEELING (USE SEPARATE SHEET IF NECESSARY)

| PROPERTY ADDRESS | # OF UNITS | (Circle One)                | GROSS RENT COLLECTED |
|------------------|------------|-----------------------------|----------------------|
| 1) _____         | _____      | Commercial (or) Residential | \$) _____            |
| 2) _____         | _____      | Commercial (or) Residential | \$) _____            |
| 3) _____         | _____      | Commercial (or) Residential | \$) _____            |
| 4) _____         | _____      | Commercial (or) Residential | \$) _____            |