

School District:	Application Number:
School Name:	DSA Number:
County:	

PART II

General Requirements (CSI # 01.0000 000)

8. General Conditions (Field Office Overhead) (enter %)	
9. General Requirements (Home Office) (enter %)	
10. Bonds (enter %)	
11. Overhead & Profit	

Based on OPSC's Allowance Subtotal and upon CSI# 01.1000 000 Project Type in Sierra West.

- Facility Hardship Rehabilitation (Fire and/or Water Damage) – "Repair of Fire Damage"
- Facility Hardship Rehabilitation (historical structures) – "Unique Structures"
- Facility Hardship Rehabilitation (all others) – "Alterations & Additions"
- Seismic Mitigation Program Rehabilitation – "Alterations & Additions"

Based on OPSC's Allowance Subtotal and upon CSI# 01.2000 000 Project Type in Sierra West.

Based on OPSC's Allowance Subtotal and based upon CSI# 01.2000 000 Project Type in Sierra West.

Based on OPSC's Allowance Subtotal and upon CSI# 01.2000 000, "Institutional Structure" in Sierra West.

12. DSA Inspection Fee (allowed at 1.00%):	
13. Escalation (enter % for current year):	
14. Industry Specialist's Report Costs: (\$10,000 or 1% of OPSC's Allowance)	
15. Construction Testing Allowance:	
16. Design Cost Allowance:	
17. CDE Plan Fee:	
18. DSA Plan Fee (enter \$ amount):	

Always 1.00%, based on Construction Subtotal. Only allowed if project required DSA approval.

This is based on Construction Subtotal, Allowed if the project has not been completed at the time of SAB approval. Allow one year escalation, based upon CSI# 01.3000 000, "Institutional Structure" in Sierra West.

Based on OPSC's Allowance Subtotal, enter the greater of \$10,000 or 1% of OPSC's Allowance.

Always 1.00%, based on Construction Subtotal. Only allowed for rehabilitation projects if specialized testing of construction materials is required

Based on Construction Subtotal, using the Design Cost Allowance chart below.

Based on the published fee found on CDE's website.

<https://www.cde.ca.gov/ls/fa/sf/forms.asp>

Based on Construction Subtotal, use the calculator found on the DSA's website.

<https://www.apps2.dgs.ca.gov/dsa/tracker/FeeCalculator.aspx>

OPSC Approved Total Project Cost: _____

Design Cost Allowance

Construction Subtotal (from above): \$ _____

	Multiplier	
first \$500,000	12.00%	\$
next \$500,000	11.50%	\$
next \$1 million	11.00%	\$
next \$4 million	10.00%	\$
next \$4 million	9.00%	\$
Beyond	8.00%	\$

Design Cost Allowance: \$ _____

School District:	Application Number:
School Name:	DSA Number:
County:	

I certify, as the District Representative, that the information reported on this form is true and correct and that:

- I am designated as an authorized district representative by the governing board of the district; and,
- under penalty of perjury, under the laws of the State of California, the foregoing statements are true and correct to the best of my knowledge and belief, and that the Public Contract Code was adhered to in the construction of this project; and,
- this form is an exact duplicate (verbatim) of the form provided by Office of Public School Construction. No variations of this form may be used.

Name of District Representative (Print):	Phone Number:
Signature of District Representative:	Date: