

REQUESTING DEPARTMENT: Street Dept**FUNCTION OR NEED OF REQUESTED PURCHASE:**

We are replacing a regular 12 ft dump bed for a roll-off system and 12' container that can be used for multiple purposes

FINANCIAL ANALYSIS:

COST PER ITEM	\$ -
# OF ITEMS REQUESTED	0
TOTAL AMOUNT REQUESTED	\$ 22,153.67

PURPOSE OF REQUEST Replace truck bed

REVENUE IMPACTS:

IS THIS A REVENUE PRODUCING ITEM? No

IF YES, AVERAGE EXPECTED ANNUAL CHANGE N/A

COST IMPACTS (ADDITIONAL STAFF, INSURANCE, FEES, CONTRACTS):**OTHER CONSIDERATIONS:**

IS RENOVATION REQUIRED No
 IS ADDITIONAL SPACE NEEDED No
 EXPECTED LIFE 20 years YEARS

Replacement of OLD

FUND/APPROPRIATION REQUESTED TO EXPENSE FROM:

	AMOUNT
HOST (709)	
RAINY DAY (510)	
EDIT (102)	
GENERAL ()	
2202.4200.00000.0571	\$ 22,153.67

HAVE YOU EXPENDED ALL OF YOUR DONATION, GRANT AND/OR APPROPRIATIONS FOR THIS FUNDING FIRST:

Yes / No

IMPORTANT:

All requests must be submitted to the Town Manager and Clerk-Treasurer at least 7 days prior to the next Council meeting to be included on the agenda for Council consideration.

Budget Review Recommendation:
 Town Manager & Clerk-Treasurer
 Approve, Disapprove, Further Review
 Comments:

Carrie S. Keaton
Mark R. W. Wagoner

COUNCIL NOTES:

REQUESTED BY: David Newell

DATE 6/10/2025

Capital Asset Notification Form

Department: Street Department

This Notification is for: ☒ Addition ☐ Update ☐ Transfer ☐ Disposal

Acquisition is by: (Attach Copy) ☒ Purchase ☐ Donation ☐ Lease ☐ Transfer

Date of Transaction: 6/10/25

Account No: 2202.4200.0000.0571 PO No: ST-5

Estimated Life Expectancy: 20 Mileage or Hours: 0

CIP Number: _____ Location: Street Department

Serial or VIN Number: _____

Total /Partial Value of Asset: \$22,153.67

Please attach or forward copy of check(s) to document costs, if assets were
Donated, attach documentation of fair market value of asset, how to determined,
And date board approved.

Description of Asset: 12' Dump Bed Roll off

System
(Building description must be include square footage, building materials, roof type
And if equipped with sprinkler systems or boiler)

Brand Make: SWAN HOGG Model No: SH 1512EW-G2

Year: 2005 License No: _____

Gross Vehicle Weight(Trucks Only); _____ Type of Fuel: _____

Disposal of Capital Asset: _____

Method of Disposition: ☐ Sale ☐ Trade-In ☐ Scrapped ☐ End-of-Lease ☐ Stolen/Wreck
(Attach Police Report)

Transferred To: _____

Amount of Cash Received or Trade-In Value (If Applicable) \$ _____

Supervisor Signature: [Signature]

If Transferred Receiving Persons Signature: _____

Print Name: _____

Clerk-Treasurer's Use Only

Received _____
Enter Capital Asset _____
Insured _____
Clerk Treasurer's Initial _____



KDC BODY SHOP, INC.
2702 NORTH COLORADO AVENUE
INDIANAPOLIS, IN 46218
317-227-0533

4/21/2025 2:12:05 PM EDT

Estimate #61440 - Sub Est - Electric Over Hydraulic

Page:1

Misc. Customer

Phone: 317.373.7120

PAID BEFORE RETURNED
OR PICKED UP

Service Writer : 6835-2
Tag/State : /IN

Vehicle : 2014 Dodge 5500

VIN : NEED

Fleet #/Driver : 01 /

Created : 3/11/2025 10:57:37 AM EDT

Labor/Notes

Qty	Technician	Reference	Description	Unit Price	Price
		LABOR	Danville Street Garage	\$150.00	\$0.00
		-Aaron Plunkett - aplunkett@danvillein.gov			
10		LABOR	1.) Install SwapHog dump bed	\$150.00	\$1,500.00
			-12' roll off frame, includes 15K electric winch with swivel hook, hoist mounted subframe with an electric over hydraulic pump and in cab controls		
			-Will install container upon completion of system		
2		LABOR	2.) Install poly fender kit above both wheels	\$150.00	\$300.00

Parts

Qty	Code	Reference	Description	Condition	Unit Price	Price
1	---	sh1512ewg2volt	12' SwapHog Frame Kit		\$12,487.50	\$12,487.50
		Note: -Kit Includes: all mounting hardware, pump, and winch				
1	---	fenderkit	SwapHog Fender Kit		\$843.75	\$843.75
1	---	desh1250sdt	SwapHog 12' Container		\$6,780.00	\$6,780.00
1	---	WELDING	Welding & Abrasive Supplies		\$103.42	\$103.42
1	---	SHOPSUPPLIES	Shop Materials		\$139.00	\$139.00

Labor	*****	\$1,800.00
Parts	*****	\$20,353.67

Estimate \$22,153.67

I hereby authorize the repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft or any other cause beyond your control. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express garagekeeper's lien is hereby acknowledged on above vehicle to secure the amount or repairs thereto. All Vehicles left over 48 hrs. after repairs are completed WILL INCUR A \$75.00 PER DAY STORAGE FEE. Any payments made via credit card/debit card will incur a 5% processing fee to the total of the bill.

Customer Signature _____

Estimates are valid for 15 days