|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  | **Name of Consulting Firm:** | | |  |
|  | **Hourly Fee Schedule** | | |  |
|  |  |  |  |  |
|  | **Consultant Services for Berlin Sidewalk Design Project Berlin Bid # 2024-10** | | |  |
|  |  | | |  |
|  |  |  |  |  |
|  | **Employee Classification** | **Hourly Fee** | |  |
|  | **to December 31, 2024** | **January 1, 2025 to December 31, 2025** |  |
|  | **Title 1** | **$xx.xx** | **$xx.xx** |  |
|  | **Title 2** | **$xx.xx** | **$xx.xx** |  |
|  | **Title 3** | **$xx.xx** | **$xx.xx** |  |
|  | **Title 4** | **$xx.xx** | **$xx.xx** |  |
|  | **Title 5** | **$xx.xx** | **$xx.xx** |  |
|  | **Title 6** | **$xx.xx** | **$xx.xx** |  |
|  | **Title 7** | **$xx.xx** | **$xx.xx** |  |
|  |  |  |  |  |
|  | These rates, unless modified and approved by both the Town of Berlin and Consultant, | | |  |
|  | shall be utilized by Consultant in estimating for Berlin Sidewalk Design Project. | |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  | **Name of Consultant Firm** |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  | Authorized Representative Name and Title |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  | **Signature of Authorized Representative** |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  | Town of Berlin Steele Center Sidewalk Design Project Berlin Bid # 2024-10 | |  |  |
|  |  |  |  |  |