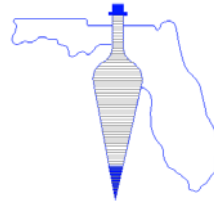


r.m. packard & assoc., inc.

surveying & mapping

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Rockledge, Florida 32955
tel: (321) 632-6335 • fax: (321) 631-7392



E-Mail: packardsurvey@cfl.rr.com

March 23, 2010

Mr. Everette Wegerif
Director of Public Works
City of Cocoa
600 School Street
Cocoa, FL 32922

RE: HILLTOP CEMETARY

Dear Ed:

In response to your proposal request, I have prepared the following Scope of Services and accompanying Fee.

SITE DESCRIPTION:

- "Hilltop Cemetary" in Cocoa, Florida (a portion of "Dixon's Addition to Cocoa")

SCOPE OF SERVICES:

- Boundary Survey
- Survey to also include the following:
 - a) Locations of fencing, structures, paving and / or other permanent improvements within or immediately adjacent to property boundaries
 - b) Locations of visible / marked gravesites immediately adjacent to either side of property boundaries
 - c) Location of U.S. Highway #1 right of way as recently established for widening

FEE\$935.00

SCHEDULE:

Completion of the above reference work will require one (1) week from date of authorization to proceed.

ASSUMPTIONS AND CONDITIONS:

1. Legal Description of lands to be acquired to be furnished.
2. All work to meet or exceed the "Minimum Technical Standards for Surveys" as defined in Chapter #61G17-6, FAC, Section #472.027, FS.
3. All services are "one-time" and any request for additional work will be invoiced on hourly rates pursuant to the fee schedule listed herein.

HOURLY RATES:

- Professional Land Surveyor \$100.00 per hour
- Field Crew (2 man)..... \$85.00 per hour
- Survey Technician..... \$50.00 per hour

DELIVERABLES:

- Six (6) signed / sealed copies
- One (1) electronic transfer file

INVOICING / PAYMENT:

An invoice for services will be provided upon completion of the work specified. Payment for services is due within twenty (20) days of invoice date.

The opportunity to provide this quotation is greatly appreciated. Should you have questions or comments, please do not hesitate to contact me.

Sincerely,

Robert M. Packard

Robert M. Packard, PSM

Authorized By: _____

Date: _____