Great benefits are coming into view.

DeltaVision provides your clients a great value in eyecare, while delivering simplified management that saves everyone time. It's a program more than 800 lowa businesses have trusted since 2009.



P Superior Coverage

FLEXIBLE

- A variety of plans, each available on a voluntary or contributory basis.
- Includes additional benefits for certain medical conditions.

SIMPLE

- Allows members to bundle vision with dental coverage for convenient simplified billing.
- Coverage accepted at 74,000 providers nationwide with a choice of independent and retail providers.

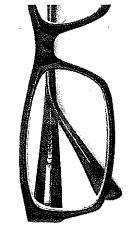
COMPREHENSIVE

- Covers exams, frames, lenses and more.
- Benefits for contact lenses and Fit & Follow-Up Exams for standard and premium lenses.

True Customization

DeltaVision plans let you:

- 1. Pick your Lens Copay: \$10 or \$25
- Select your Frame Allowance: \$130, \$150 or \$200
- Decide if you want to offer Funded or Discounted Fit & Follow-Up Exams
- Or choose to offer a Materials
 Only plan with a frame allowance
 option of: \$130, \$150 or \$200



Insight In-Network	\$10 Lens Copay	\$25 Lens Copay	Materials Only
Benefit Frequency		Calendar year	
Vision Exam (once every calendar year)	\$10 copay	\$10 copay	\$10 copay
Standard Contact Lens Fit & Follow-Up Exam Funded	\$O copay	\$0 copay	ΑŅ
Discounted	_ Up to \$40	Up to \$40	A,Z
Frames (once every two calendar years)	Choice of allowance: \$130/\$150/\$200 20% discount off balance	Choice of allowance: \$130/\$150/\$200 20% discount off balance	Choice of allowance: \$130/\$150/\$200 20% discount off balance
Lens Standard Plastic Lens (once every calendar year) - Single Vision, Standard Bifocal, Standard Trifocal and Standard Lenticular	\$10 copay	\$25 copay	\$i0 copay
Standard Progressive Lens	\$75 copay	\$90 copay	\$75 copay
Premium Progressive Lens	Copay for Tiers 1/2/3: \$95/\$105/\$120 Tier 4: \$75 copay. plus 80% of charge less \$120	Copay for Tiers 1/2/3: \$110/\$120/\$135 Tier 4: \$90 copay, plus 80% of charge less \$120	Copay for Tiers 1/2/3: \$95/\$105/\$120 Tier 4: \$75 copay, plus 80% of charge less \$120
Lens Options Standard Progressive, Tint, UV Coating, Standard Polycarbonate		Various copayments per lens option — approximately equivalent to a 20% discount	
Premium Anti-Reflective Coating	Copay for Tiers 1/2: \$57/\$68 Tier 3: 80% of retail	Copay for Tiers 1/2: \$57/\$68 Tier 3: 80% of retail	Copay for Tiers 1/2: \$57/\$68 Tier 3: 80% of retail
Contact Lenses (once every calendar year) Conventional	Choice of Allowance: \$130/\$150/\$200 15% discount off the balance	Choice of Allowance: \$130/\$150/\$200 15% discount off the balance	Choice of Allowance: \$130/\$150/\$200 15% discount off the balance
Disposable	Balance over \$130/\$150/\$200	Balance over \$130/\$150/\$200	Balance over \$130/\$150/\$200
Medically Necessary	Paid in full	Paid in full	Paid in full
LASIK and PRK Benefit		15% off retail price or 5% off promotional price	9

DeltaVision' is underwritten by Veratrus Benefit Solutions, Inc., a wholly owned subsidiery of Delta Dental of lows, utilizing the EyeMed Vision Care insight network.



Voluntary Plan Rates

		\$10 Lens Copay			\$25 Lens Copay		Ma	Materials Only	17
Frame Allowance	\$130	\$150	\$200	\$130	\$150	\$200	\$130	\$150	\$200
Fit & Follow-Up	Discounted / Funded								
Four-Tier Single	\$7.58 / \$8.26	\$7.98, \$8.90	\$9.02 / \$9.90	\$6.82 / \$7.48	\$7.14 / \$7.84	\$8.28 / \$9.04	\$5.86	\$6.22	\$7.32
Employee/Spouse	\$14.40 / \$15.74	\$15.18 / \$16.96	\$17.16 / \$18.86	\$13.00 / \$14.20	\$13.62 / \$14.92	, \$15.78 / \$17.22	\$11.04	\$11.78	\$13.84
Employee/Child(ren)	\$16.34 / \$17.76	\$17.22, \$19.20	\$19.44 / \$21.36	\$14.74 / \$16.10	\$15.42 / \$16.90	\$17.86 / \$19.52	\$12.56	\$13.34	\$15.70
Family	\$21.56 / \$23.46	\$22.76 \$25.34	\$25.66 / \$28.20	\$19.46 / \$21.26	\$20.36 / \$22.32	\$23.58 / \$25.78	\$16.52	\$17.56	\$20.68
Three-Tier					`				
Single	\$7.58 / \$8.26	\$7.98 / \$8.90	\$9.02 / \$9.90	\$6.82 / \$7.48	\$7.14 / \$7.84	\$8.28 / \$9.04	\$5.86	\$6.22	\$7.32
Two Person	\$14.40 / \$15.74	\$15.18 / \$16.96	\$17.16 / \$18.86	\$13.00 / \$14.20	\$13.62 / \$14.92	\$15.78 / \$17.22	\$11.04	\$11.78	\$13.84
Family	\$20.18 / \$21.96	\$21.26 / \$23.74	\$24.00 / \$26.38	\$18.20 / \$19.88	\$19.06 / \$20.88	\$22.06 / \$24.12	\$15.42	\$16,44	\$19.32
Two-Tier									
Single	\$7.58 / \$8.26	\$7.98 / \$8.90	\$9.02 / \$9.90	\$6.82 / \$7.48	\$7.14 / \$7.84	\$8.28 / \$9.04	\$5.86	\$6.22	\$7.32
Family	\$19.34 / \$21.06	\$20.40 / \$22.74	\$23.04 / \$25.30	\$17.46 / \$19.08	\$18.26 / \$20.04	\$21.16 / \$23.12	\$14.84	\$15,78	\$18.54

P Contributory Plan Rates

		\$10 Lens	(E0)05			SZE Lans Copaly		ME	Valerrals Only	113
Frame Allowance	\$130	\$150		\$200	\$130	\$150	\$200	\$130	\$150	\$200
Fit & Follow-Up	Discounted / Funded	Discounted / Funded	Funded	Discounted / Funded	Discounted / Funded	Discounted / Funded	Discounted / Funded	••••		
Four-Tier			ĺ							
Single	\$5.78 / \$6.30	\$6.08 / \$6.80	5.80	\$6.88 / \$7.56	\$5.20 / \$5.70	\$5.46 / \$5.98	\$6.32 / \$6.90	\$4,48	\$4.76	\$5.60
Employee/Spouse	\$11.00 / \$12.00	\$11.60 /\$12.94	2.94	\$13.10 / \$14.38	\$9.92 / \$10.84	\$10.38 / \$11.38	\$12.04 / \$13.14	\$8,44	\$8.98	\$10.56
Employee/Child(ren)	\$12.46 / \$13.56	\$13.14 / \$14,66	4.66	\$14.84 / \$16.30	\$11.24 / \$12.28	\$11.78 / \$12.90	\$13.64 / \$14.90	\$9.58	\$10.18	\$11.98
Family	\$16.46 / \$17.92	\$17.36 /\$19.34	9.34	\$19.58 / \$21.52	\$14.86 / \$16.22	\$15.54 / \$17.04	\$18.00 / \$19.68	\$12.62	\$13.40	\$15.78
Three-Tier		J					`			
Single	\$5.78 / \$6.30	\$6.08 / \$6.80	5.80	\$6.88 / \$7.56	\$5.20 / \$5.70	\$5.46 / \$5.98	\$6.32 / \$6.90	\$4.48	\$4.76	\$5.60
Two Person	\$11.00 / \$12.00	\$11.60 / \$12.94	2.94	\$13.10 / \$14.38	\$9.92 / \$ 10.84	\$10.38 / \$11.38	\$12.04 / \$13.14	\$8.44	\$8.98	\$10.56
Family	\$15.40 / \$16.76	\$16.22/\$	18.10	\$18.32 / \$20.14	\$13.90 / \$15.16	\$14.56 / \$15.94	\$16.84 / \$18.40	\$11.78	\$12.54	\$14.74
Two-Tier	i									
Single	\$5.78 / \$6.30	\$6.08 / \$6.80	6.80	\$6.88 / \$7.56	\$5.20 / \$5.70	\$5.46 / \$5.98	\$6.32 / \$6.90	\$4.48	\$4.76	\$5.60
Family	\$14.78 / \$16.08	\$15.60 / \$17.36	17.36	\$17.56 / \$19.32	\$13.32 / \$14.56	\$13.96 / \$15.28	\$16.14 / \$17.66	\$11.32	\$12.04	\$14.16

Rates are effective January 1, 2022 through December 31, 2022. For new groups, these rates are good for 24 months from initial enrollment as long as your plan does not change. Contributory plans are subject to underwriting guidelines and require the employer to contribute any amount towards premiums. Please see plan for details





Wellmark Blue Cross and Blue Shield of lows, Blue Cross and Blue Shield of South Dakola are Independent Recesses of the Blue Cross and Blue Shield Association.

ALTERNATE VISION PLAN SUMMARY

Group Name: PRAIRIE CITY CITY OF

Group Number: 00045536

Renewal Effective Date: December 1, 2022

Adult Buy-Up 150

Adult Buy-Up 150

MONTHLY MEMBER PREMIUM

\$12.78

\$204.48

FRAME

\$150 retail allowance, Covered once every 24 months and after materials copay

Out-of-network: up to \$50 allowance

DIAGNOSTIC EYE EXAM In: network: \$10 Copay; Every 12 Months Out-of-network; up to \$35 allowance

Every 12 months

MATERIALS COPAY

\$10

STANDARD PLASTIC LENSES

One pair covered in full after materials copay, every 12 months, single vision, lined bifocal, lined trifocal and

Progressive: Level 1 \$75 Copay, Level 2 \$110 Copay, Allother progressives \$50 allowence + 20% discount Spacialty: Transitions \$70/\$80 Copay, polarized lens \$75 Copay, PGX/PBX \$40 Copay, other lens options up to 20% off

Out-of-network: Standard plastic lenses up to \$25 allowance, lined bifogal up to \$40 allowance, lined trifocal up to \$50 allowance, lentiquiar up to \$80. allowance, progressives up to \$40 allowance

CONTACT LENSES

Covered up to allowance, every 12 months, in lieu of eveglasses

Conventional or disposable: \$150 allowance in-network, up to \$128 out-of-network Medically necessary: Covered in full Out-of-network: Conventional or disposable up

to \$128 allowance, medically necessary up to \$250 allowance

LENS OPTIONS

Covered in full polycarbonate (single vision/multi-focus); out-of-network up to \$10,Covered infull scratch-resistant coating, out of network up to \$5, Covered in full UV coating, out-of-network up to \$6; Covered in full standard anti-reflective coaling, out of network up to \$24, Polerized Lens: \$75 in network copay, PGMPBX: \$40 in: network copay, Other lens options: 20% discount

Adult Buy-Up 80

Adult Buy-Up 80

MONTHLY MEMBER PREMIUM

\$7,18

\$114.88

FRAME

\$80 retail allowance, Covered once every 24 months and after materials copay

Out-of-network: up to \$25 allowance

DIAGNOSTIC EYE EXAM

In-network: \$10 Copay, Every 12 Months Out-of-network: up to \$35 allowance Every 12 months

MATERIALS COPAY

\$25

STANDARD PLASTIC LENSES One pair covered in full after materials copay, every 12 months: single vision, lined bilocal, lined trifocal and

Progressive: \$50 retail allowance, plus 20% off Specialty: Corresponding standard lons

relmbursement, plus 20% off Out-of-network: Standard plastic lenses up to \$25 allowance, lined bifocal up to \$40 allowance, lined trifocal up to \$50 allowance, lenticular up to \$80 allowance, progressives up to \$40 allowance

CONTACT LENSES

Covered up to allowance, every 12 months, in lieu of eyeglasses

Conventional or disposable: \$110 allowance Medically necessary: Covered in full

Out-of-network: Conventional or disposable up to \$80 allowance, medically necessary up to

\$250 allowance

LENS OPTIONS

Up to 20 percent off Usual, Customary and Reasonable polycarbonate, scratch-resistant coating tint and UV protective coating

Avesis Vision is an independent vision insurance company that does not provide Wellmark Blue Cross and Blue Shield products and services. Avests Vision is underwritten by Fidelity Security Life insurance Company, Kansas City, Missouri. Hearing Discount Savings Plan provided by Amplifon Hearing Health Care. Amplifon Hearing Health Care is an independent company that does not provide Wellmark Blue Cross and Blue Shield products or services. Certain retail chain locations do not offer further discounts.

neu quote - 10,000 fortnade in



Interior Trim

Product Quotation

Quotation Number: TLJ-01131 Date: 2022-10-07 10:53:38

Customer Name/Address:	Bobcat Delivering D	Dealer	ORDERS TO BE PLACED WITH: Contract Holder/Manufacturer		
			Clark Equipment Company		
CITY OF PRAIRIE CITY 271925	Marc Capital City Equip	mont Company		duipment Cobcat Compa	
Attn: JOE OGLESBY	Des Moines, IA	ment Company,		Beaton Dr	''y
Po Box 607 203 E. JEFFERSON STREET	5461 NW 2ND ST.			argo, ND 580	78
Prairie City, IA 50228-0607	DES MOINES IA 5	0313-1333		701-241-871	
Prairie City, IA 30220-0007	Phone: (515) 243-			5-608-0681	•
	Fax: (515) 243-053			t: Heather M	lessmer
			Heathe	r.Messmer@	doosan.com
Description		Part No	Qty	Price Ea.	Total
Bobcat UW56		M1225		\$53,265.60	\$53,265.60
Adjustable Vinyl Seats		Hydraulic Dump I	Зох		
All-Wheel Steer		Instrumentation:		d 5" Display	with
Automatically Activated Glow Plu	ıds	Keyless Start, En	gine Ter	nperature ar	d Fuel
Auxiliary Hydraulics		Gauges, Hour me	ter, RPN	/I and Warnir	ng
Variable Flow with dual direct	tion detent	Indicators. Includ	les main	tenance inte	rval
Beverage Holders		notification, fault	display,	, job codes, e	quick start,
Bob-Tach		and security lock			
Boom Float		Joystick, Manual		olled with Lif	t Arm Float
Cargo Box Support		Lift Arm Support			
Cruise Control		Parking Brake, at			.al
Speed Management		Power Steering was Radiator Screen	Ath Tilt s	Steering wine	eei
Enclosed Cab with HVAC		Rear Receiver Hi	tch		
Dual Port USB charger		Seat Belts, Shoul		ness	
Lower Engine Guard Limited Slip Transaxle		Spark Arrestor M			
Engine and Hydraulic Monitor with Sl	uitdown	Suspension, 4-w		ependent	
Front LED Work Lights	14.40 111	Tires: 27 x 10.5-1			
Full-time Four-Wheel Drive	•	Toolcat Interlock			S)
Horsepower Management		Two-Speed Trans	smissio	า	
Roll Over Protective Structur	e (ROPS) . Meets	Machine Warrant	y: 12 Mc	onths, unlimi	ted hours
Requirements of SAE-J1040	& ISO 3471	Bobcat Engine W	/arranty:	: Additional ′	12 Months
 Falling Object Protective Structure (FOPS). Meets 		or total of 2000 hours after initial 12 month warranty			
Requirements of SAE-J1043	& ISO3449, Level I	warranty			
Dome Light					
Deluxe Road Package		M1225-P01-C01	1	\$2,316.00	\$2,316.00
Deluxe Road Package includes:	Backup Alarm, Turn				
Signals, Flashers, Tail Lights, Br	ake Lights, Rear				
olditals, Liasticis, Lan Figure, D.					
view mirror, Side Mirrors, Horn,	Rear work lights,				
view mirror, Side Mirrors, Horn, and headlights	Rear work lights,				
view mirror, Side Mirrors, Horn, and headlights	Rear work lights,	M1225-R03-C02	•	\$1,388.80	\$1,388.80
view mirror, Side Mirrors, Horn, and headlights High Flow Package 29 X 10.5 Trac Tire	Rear work lights,	M1225-R05-C04	1	\$436.80	\$436.80
view mirror, Side Mirrors, Horn, and headlights High Flow Package 29 X 10.5 Trac Tire Heavy Duty Battery	Rear work lights,	M1225-R05-C04 M1225-R07-C02	1	\$436.80 \$77.60	\$436.80 \$77.60
view mirror, Side Mirrors, Horn, and headlights High Flow Package 29 X 10.5 Trac Tire Heavy Duty Battery Attachment Control	Rear work lights,	M1225-R05-C04 M1225-R07-C02 M1225-R08-C02	1 1	\$436.80 \$77.60 \$188.80	\$436.80 \$77.60 \$188.80
view mirror, Side Mirrors, Horn, and headlights High Flow Package 29 X 10.5 Trac Tire Heavy Duty Battery Attachment Control Power Bob-Tach	Rear work lights,	M1225-R05-C04 M1225-R07-C02 M1225-R08-C02 M1225-R14-C03	1 1 1	\$436.80 \$77.60 \$188.80 \$879.20	\$436.80 \$77.60 \$188.80 \$879.20
view mirror, Side Mirrors, Horn, and headlights High Flow Package 29 X 10.5 Trac Tire Heavy Duty Battery Attachment Control Power Bob-Tach Radio Option	Rear work lights,	M1225-R05-C04 M1225-R07-C02 M1225-R08-C02 M1225-R14-C03 M1225-R15-C02	1 1 1 1	\$436.80 \$77.60 \$188.80 \$879.20 \$426.40	\$436.80 \$77.60 \$188.80 \$879.20 \$426.40
view mirror, Side Mirrors, Horn, and headlights High Flow Package 29 X 10.5 Trac Tire Heavy Duty Battery Attachment Control Power Bob-Tach	Rear work lights,	M1225-R05-C04 M1225-R07-C02 M1225-R08-C02 M1225-R14-C03	1 1 1 1 1	\$436.80 \$77.60 \$188.80 \$879.20	\$436.80 \$77.60 \$188.80 \$879.20

Total of Items Quoted Dealer P.D.I. Freight Charges Dealer Assembly Charges Other Charges: Material and Logistics Quote Total - US dollars Notes:	\$59,683.20 \$150.00 \$1,400.00 \$0.00 \$4,934.00 \$66,167.20
*Prices per the Iowa NASPO Construction - SW192 *Terms Net 60 Days. Credit cards accepted. *FOB Destination *State Sales Taxes apply. IF Tax Exempt, please include Tax Exempt Certificate with c *TID# 38-0425350 *Orders Must Be Placed with Clark Equipment Company dba Bobcat Company, Govt Beaton Drive, West Fargo, ND 58078.	
*Quote valid for 30 days	
ORDER ACCEPTED BY:	
SIGNATURE DATE	
PRINT NAME AND TITLE PURCHASE ORDER NUMBER	R
DELIVERY ADDRESS:	
TAX EXEMPT?YESNO Exempt in the State of Tax Exempt ID:	
FEDERAL	

Expiration Date:



Product Quotation

Ouotation Number: AMS-03995 Date: 2021-12-21 09:13:33

Customer Name/Address:	Bobcat Delivering Dealer	ORDERS TO BE PLACED WITH: Contract Holder/Manufacturer
CITY OF PRAIRIE CITY 271925 Attn: JOE OGLESBY Po Box 607 203 E. JEFFERSON STREET Prairie City, IA 50228-0607	Justin Velky Capital City Equipment Company,Des Moines,IA 5461 NW 2ND ST. DES MOINES IA 50313-1333 Phone: (515) 243-3353 Fax: (515) 243-0534	Clark Equipment Company dba Bobcat Company 250 E Beaton Dr West Fargo, ND 58078 Phone: 701-241-8719 Fax: 855-608-0681 Contact: Heather Messmer Heather.Messmer@doosan.com

Description

Bobcat UW56

Adjustable Vinyl Seats **All-Wheel Steer Automatically Activated Glow Plugs Auxiliary Hydraulics**

Variable Flow with dual direction detent

Beverage Holders

Bob-Tach

Boom Float

Cargo Box Support

Cruise Control

Speed Management

Enclosed Cab with HVAC

Dual Port USB charger

Lower Engine Guard

Limited Slip Transaxle

Engine and Hydraulic Monitor with Shutdown

Front LED Work Lights

Full-time Four-Wheel Drive

Horsepower Management

- Roll Over Protective Structure (ROPS). Meets Requirements of SAE-J1040 & ISO 3471
- Falling Object Protective Structure (FOPS), Meets Requirements of SAE-J1043 & ISO3449, Level I

Part No M1225

Qtv Price Ea. 1 \$52,220.80

Total \$52,220.80

Hydraulic Dump Box

Instrumentation: Standard 5" Display with Keyless Start, Engine Temperature and Fuel Gauges, Hour meter, RPM and Warning Indicators. Includes maintenance interval notification, fault display, job codes, quick start, and security lockouts.

Joystick, Manually Controlled with Lift Arm Float

Lift Arm Support

Parking Brake, automatic

Power Steering with Tilt Steering Wheel

Radiator Screen Rear Receiver Hitch

Seat Belts, Shoulder Harness

Spark Arrestor Muffler

Suspension, 4-wheel independent Tires: 27 x 10.5-15 (8 ply), Lug Tread

Toolcat Interlock Control System (TICS)

Two-Speed Transmission

Machine Warranty: 12 Months, unlimited hours **Bobcat Engine Warranty: Additional 12 Months** or total of 2000 hours after initial 12 month

warranty

Dome Light

Total of Items Q	uoted	\$52,220.80
Dealer P.D.I.		\$150.00
Freight Charges		\$816.00
Dealer Assembly	y Charges	\$0.00
Trade-in	2009 Toolcat 2500hrs	(\$10,000.00)
Other Charges:	Material and Logistics	\$3,845.00
Quote Total - US	dollars	\$47,031,80

*Prices per the lowa NASPO Construction - SW192

^{*}Terms Net 60 Days. Credit cards accepted.

^{*}FOB Destination

^{*}State Sales Taxes apply. IF Tax Exempt, please include Tax Exempt Certificate with order. *TID# 38-0425350

^{*}Orders Must Be Placed with Clark Equipment Company dba Bobcat Company, Govt Sales, 250 E Beaton Drive, West Fargo, ND 58078.

^{*}Quote valid for 30 days

City Council,

The Celebration Committee met this month and talked about some things that we feel need changed for 2023 Prairie Days. The main one that will need the council's approval on at this time is the fee charged to the food trucks. Once we have agreed on the new figures to be charged, we are going to start communications with those vendors that were here this year and new vendors that might be interested.

2022 Fees are as follows

2023 Proposed Fees

Fri/Sat

Fri/Sat

w/power \$45

w/power \$100

wo/Power \$35

wo/Power \$90

Fri Only

Fri Only

w/power \$20

w/power \$50

wo/power \$15

wo/power \$40

Sat Only

Sat Only

w/power \$25

w/power \$75

wo/power \$20

wo/power \$65

The reason we feel there is a need to increase the fee is because we had one vendor that did not show and another that did not stay the entire time that they agreed on. We hope that with a larger fee we will not have the same issues.

Please submit this request at the next council meeting so that we can move forward. Thanks for your time and consideration on this matter.

Celebration Committee

JASPER COUNTY BUILDING PERMIT FEE SCHEDULE

The total construction value will be figured by taking the average construction cost per square foot (from the IBC chart) **X** the regional modifier (from the IBC chart) **X** the area of the structure. The cost of the building permits will be based on total construction value using the following chart.

Total Construction Value	<u>Fee</u>
\$1.00 TO \$1,000	\$15.00
\$1,001 TO \$5,000 plus \$5 for each additional \$1,000 or fraction thereof, to and including \$5,000	\$15 for the first \$1,000
\$5,001 TO \$25,000 plus \$8 for each additional \$1,000 or fraction thereof, to and including \$25,000	\$35 for the first \$5,000
\$25,001 TO \$50,000 plus \$6 for each additional \$1,000 or fraction thereof, to and including \$50,000	\$195 for the first \$25,000
\$50,001 TO \$100,000	\$345 for the first \$50,000 plus \$5 for each additional \$1,000 or fraction thereof, to and including \$100,000
\$100,001 TO \$500,000	\$595 for the first \$100,000 plus \$4 for each additional \$1,000 or fraction thereof, to and including \$500,000
\$500,001 and up	\$2,195 for the first \$500,000 plus \$2 for each additional \$1,000 or Fraction thereof.

The method for determining the construction value of the additional listed residential items will be as follows: The square foot of the listed structure, times the Residential Value, times the % multiplier assigned to each listed item.

- 1). Open Decks 8%
- 2). Screened Porches 15%
- 3). In-ground Pools 17%
- 4). Above-ground pools 8%
- 5). 3 Season Porches 50%
- 6). Finished basement 40%
- o). Finished basement 4070
- 7). Unfinished Basement 30%
- 8). Crawlspace 18%
- 9). Attached Garage 40%
- 10). Detached Garage 30%
- 11). Pole Building 23%
- 12). Fences over 6ft. high 8% X lin. Ft.
- 13). Manufactured homes on full basement 50%
- 14). Manufactured homes on pier pads 40%

The building permit for any new construction will include the plumbing, mechanical and electrical permits with no additional charge.

PUBLIC SAFETY REPORTS, COPIES, CD'S, TESTS, RELEASES				
NSF Check Fee	\$30.00			
Police Report	\$15.00			
Fingerprinting	\$15.00			
Video/Audio Tapes	\$30.00			
Photos	\$5.00 per photo for computer print \$20.00 for thumb drive			
Special Event Police Presence	Des Moines Police Department Hourly Rate			
AUTOMATED TRAFFIC ENFORCEMENT TICKETS				
1 – 14 Over the speed limit	\$100.00 per occurrence			
15 + Over the speed limit	\$150.00 per occurrence			
PET LICENSE				
Pet License – spayed/neutered	\$10.00 before April 1			
Pet License - spayed/neutered	\$15.00 after April 1			
Pet License – non-spayed/neutered	\$15.00 before April 1			
Pet License – non-spayed/neutered	\$20.00 after April 1			
ANIMAL IMPOUNDS				
Impound @ Animal Rescue League	Per Jasper County Fee Schedule			
VEHICLE IMPOUNDS				
Impound Release Fee (Cash Only)	\$25.00			
PERMITS				
Block Party/Special Outdoor Event Application (Residential Streets Only)	\$50.00			
Event - Alcohol Served	\$100.00 (first 4 hours) non refundable			
Event – Alcohol Served	\$50.00 (every additional 2 hours) non refundable			
Peddler, Transient Merchants, or Solicitors Application	\$25.00 per day			
License Fee	\$100.00			
License Fee (each additional worker)	\$50.00			

Golf Carts/UTV	\$25.00 per year
COMMUNITY CENTER & EVENT REN	NTAL
Community Center	
Regular Rental (No Alcohol)	\$100.00 per day
Alcohol Rental	\$150.00 per day
Shelter House (No Alcohol)	\$25.00 per day, No charge for non-profits
Garden Square	
Rental (No Alcohol)	\$150.00 per day
Rental (Alcohol)	\$250.00 per day
Recreational Complex (No Alcohol)	
Per Field (includes softball/baseball and soccer)	\$20.00 per hour
Vendor Fee	\$25.00 per day
Complex	\$400.00 per day
Soccer Field includes: 1 large field, 1 medium field and 2 small field.	\$150 per day
Tournaments	Negotiated with Park Board
On-Call Maintenance Fee	\$85.00 per Call Out, \$50 after 2 nd hour.
CITY HALL	
Special Council Meeting	\$75.00 Associated with permits, hearings, etc.
Research	\$20.00 per hour
NSF Check or NSF ACH	\$30.00
Cemetery Lots	\$300.00 (25% to perpetual)-Full \$150.00 (25% to perpetual)-Cremation
Offset Program Admin Fee	\$25.00
Property Lien Admin Fee	\$25.00
Snow Removal	\$50.00 per hour by staff or market value rates *City reserves the right to abate the nuisance by contracting the work out to an independent service provider and/or contractor

Nuisance Abatement	\$50.00 per hour by staff or market value rates *City reserves the right to abate the nuisance by contracting the work out to an independent service provider and/or contractor
Mowing	\$100.00 Surcharge plus \$75.00/hr. labor
Copies	
City Related over 10 pgs (no cost for first 10 pgs)	\$.25 per piece of paper (B&W) \$.50 per piece of paper (Color)
Non-city Related	\$.25 per piece of paper
Faxes	
Local and Toll Free	No charge
Non-city related	\$1.00 per page
UTILITIES	
SOLID WASTE / GARBAGE FEES	
Utility Service Connection Fee	\$100.00
RATES	SEE ORDINANCE
Exchange	\$25.00 (One free exchange per address for upsizing/downsizing. Any additional exchanges will be charged)
Damaged/Missing Container	The current cost to the City.
WATER	
RATES	SEE ORDINANCE
Water Meter	The current cost to the City.
Outside Water Meter	The current cost to the City.
Water Meter Verification	The current cost to the City. (only charged if meter is NOT found defective)
Water Tapping .	\$250.00
Extension Fee	\$30.00 For more than one request in 12 month period from first date of request
Reconnect Daytime	\$30.00 (7:00 a.m. – 3:00 p.m.)
Reconnect After Hours	\$30.00 + \$50.00 after daytime or weekends
SEWER	
RATES	See Ordinance
	· I· · · · · · · · · · · · · · · · · ·

Sewer Tapping	\$225.00
AMBULANCE RATE	
No Transport Non-Emergency	No Charge
Base Rate BLS – Emergency	\$650.00
Base Rate Tier	Cost of the Tier
Mileage	\$20.00 per mile rate
Library	
Library Fines	\$.15 per day
DVD Fines	\$1.00 per day
Printing	B & W = \$0.25 per page Color = \$0.50 per page
Faxing	\$1.00 per page

PERMITS	
ZONING CODE	
Variance Request	\$200.00
Special User Permit	\$200.00
Conditional Use Permit	\$200.00
Site Plan Review	\$200.00
Subdivision Review	Market Value – City reserves the right to seek fees to cover Engineering or Legal fees incurred
BUILDING PERMITS	\$100.00 plus inspection fees
See County Fee Schedule	County Fee Schedule
TRADE PERMITS	
See County Fee Schedule	County Fee Schedule
ACCESSORY BUILDINGS AND OUTBUILDINGS	
See County Fee Schedule	County Fee Schedule

Resolution No. 11-09-22-2

Resolution Approving the 2021-2022 Annual Urban Renewal Report

BE IT RESOLVED by the Council of the City of Prairie C	City:
The Council of the City of Prairie City, Iowa herby appro- Urban Renewal Report in accordance with the rules and re Department of Management.	
Passed and approved this 9th day of November, 2022.	
	Eric Imerman, Mayor
Attest:	
Deb Townsend, Mayor Pro Tem	