

	EMERGENCY VE	HICLE PR	≀s					
	EMERGENCY VEHICLE PREEMPTOR	3 4						
	MOVEMENT	<b>←</b>	<b>\</b>					
		I. D. O.						
	TRAFFIC SI							
TVDE	RELECTRICAL SERVICE REQUIREMENTS   NO. LAMPS   WATTAGE   % OPERATIONS   TOTAL							
TYPE	NO. LAMPS			% OPERATIONS	TOTAL WATTAGE			
SIGNAL (RED)	12	INCAND.	LED 17	0.50	102			
(YELLOW)	12	1 35	25	0.25	75			
( GREEN)	12	1 35	15	0.25	45			
ARROW	4	1 35	12	0.10	5			
PED. SIGNAL	4	90	25	1.00	100			
CONTROLLER	1	100	1 00	1.00	100			
ILLUM. SIGN	SIGN		25	0.05				
VIDEO SYSTEM		150	-	1.00				
					_			
FLASHER LED								
				TOTAL =	427			
ENERGY COSTS	- BILL	ED TO: 1	DOT DIS	TRICT 1				

ENERGY SUPPLY -

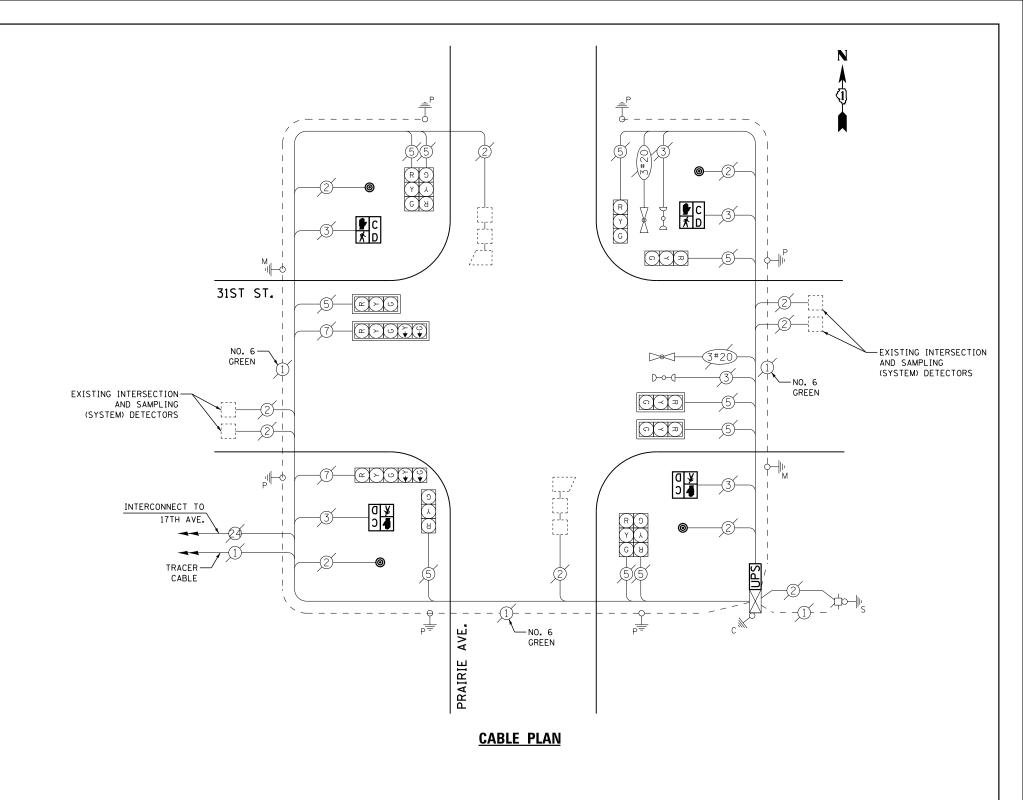
201 WEST CENTER COURT SCHAUMBURG, IL 60196-1096

COMMONWEALTH EDISON

CONTACT ILYAS MOHIUDDIN

708-235-2692

PHONE



## SCHEDULE OF QUANTITIES

<u>LEGEND</u>

DUAL ENTRY PHASE

SINGLE ENTRY PHASE

NUMBER REFERS TO ASSOCIATED PHASE

QUANTITY	<u>UNIT</u>	ITEM
1	EACH	MAINTENANCE OF EXISTING TRAFFIC SIGNAL INSTALLATION
4	EACH	PEDESTRIAN SIGNAL HEAD, LED, 1-FACE, BRACKET MOUNTED WITH COUNTDOWN TIMER
4	EACH	PEDESTRIAN PUSH-BUTTON
1	EACH	MODIFY EXISTING CONTROLLER CABINET
1	EACH	REMOVE EXISTING TRAFFIC SIGNAL EQUIPMENT
1	EACH	UNINTERRUPTABLE POWER SUPPLY, SPECIAL

## REMOVAL OF EXISTING TRAFFIC SIGNAL EQUIPMENT

THE FOLLOWING ITEMS SHALL BE REMOVED BY THE CONTRACTOR AND SHALL BE DISPOSED OF BY THEM OUTSIDE THE RIGHT-OF-WAY AT THEIR EXPENSE. THE SALVAGE VALUE OF THE REMOVED EQUIPMENT SHALL BE REFLECTED IN THE CONTRACT BID PRICE.

- 4 EACH PEDESTRIAN SIGNAL HEAD
- 4 EACH PEDESTRIAN PUSH-BUTTON

TS #3691 BROOKFIELD

USER NAME = _USERNAME_	DESIGNED -	DW	REVISED -	OTATE OF HUMOIO	31ST STREET AT PRAIRIE AVENUE SCHEDULE OF QUANTITIES, CABLE PLAN, PHASE DESIGNATION DIAGRAM AND EMERGENCY VEHICLE PREEMPTION SEQUENCE						F.A. RTE.	SECTION	COUNTY	TOTAL SHEETS	SHEET NO.	
D. C.	DRAWN -	CC	REVISED -	STATE OF ILLINOIS								2014-019TS	соок	90	28	
PLOT SCALE = 20.000 '/ in.	CHECKED -	КММ	REVISED -	DEPARTMENT OF TRANSPORTATION									CONTRAC	T NO. 6	,0Y05	
PLOT DATE = 5/13/2014	DATE -		REVISED -		SCALE: N.T.S.	SHEET NO.	OF	F SH	EETS	STA.	TO STA.		ILLINOIS			