

**CCA-COZZARELL CIRMINIELLO ARCHITECTS, LLC**  
**BCHA-BERTONE COZZARELLI HEALTHCARE ARCHITECTS, LLC**  
187 Washington Avenue, Suite 2-G, Nutley, New Jersey 07110  
973-667-0777 973-661-0277

[Bob@CozzCirmArchitects.com](mailto:Bob@CozzCirmArchitects.com)

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**SCHEDULE – A**

**VALID: June 2021**

**STATEMENT OF RATES FOR ARCHITECTURAL / ENGINEER SERVICES**  
**ABOVE AND BEYOND THE BASIC CONTRACT**

Professional Services performed at our current regular hourly rate (which includes general overhead, benefits, taxes, and insurances) are invoiced as follows:

<b><u>CLASSIFICATION</u></b>	<b><u>HOURLY RATE</u></b>
Principal / Member Owner	\$285.00
Project Architect/Engineer/Construction Manager-Adviser	275.00
Senior ACAD / REVIT Operator	200.00
Architect Designer and Interior Designer	175.00
ACAD/REVIT Operator and Render Designer	150.00
Code Analyst/Spec Writer	125.00
Executive Assistant/Administrator	100.00

The Architect will NOT provide additional extra work or reimbursable expense without the client's knowledge and written approval or directive.

Reimbursable Expenses will include mail postage, messenger services, and travel within or outside of New Jersey by CCA / BCHA and Design Team. Further, all reproduction costs and postage costs incurred for submitting for reviews, permits, bidding, and/or construction sets. These are invoiced at cost plus 25%.

Unscheduled site visits requested by owner will be invoiced \$1,000.00/visit/professional.

Consultants Fees for Additional Work, requested by the client and/or contracted by the client will be invoiced at their invoicing rate plus 25%. Copies of all consultants' invoices will be furnished to the client upon receipt.

For presentations or testimony before Municipal Zoning/Planning Boards, above and beyond the Basic Contract, Commissions, or Courts above those included in the agreement, the charge per day or fraction, thereof, is \$1,000 for Principals.

Fees invoiced are payable upon presentation, unless otherwise determined in writing prior to contracting for services. After thirty (30) days of the invoice date, unpaid balances are subject to a finance charge of 1.5% per month, which is an annual percentage rate of 18% applied to the previous balance without deducting current payments and/or credits appearing on that statement.

The fees and costs provided herein are valid for one (1) year from this date after which time the contract pricing may be revised.

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**SCHEDULE – A (continued)**

**VALID: June 2021**

**PROJECT EXPENSES**

Printing and reproduction of drawings and documents:

Black-line Copies on Bond

8½”x 11”	\$ .15/sheet
8½”x 14”	\$ .75/sheet
11” x 17”	\$ 1.00/sheet
24” x 36”	\$ 6.50/sheet
30” x 42”	\$12.00/sheet

Color Copies High Resolution Paper

8½”x 11”	\$ 2.50/sheet
8½”x 14”	\$ 3.50/sheet
11” x 17”	\$ 5.00/sheet
24” x 36”	\$20.00/sheet
30” x 42”	\$30.00/sheet

Documents sent or received by fax will be invoiced at \$.75/page. All other reimbursable expenses, such as, postage, overnight mailing, courier shipping services and miscellaneous expenses will be invoiced at cost plus 25%.

Auto Expenses (Travel & Tolls to and from site) \$ .55/mile + Tolls

Airfare, lodging and rental cars will be invoiced at cost for standard level accommodations.