

Professional Agreement Invoice and Progress Report

Idaho Transportation Department



This page must be filled out monthly by the Consultant and forwarded to the Agreement Administrator with the monthly invoice. If necessary, attach additional sheets for continuation.

Key Number	Project Number UI-15-05	Project Name ITD Bicycle & Pedestrian Facility	Date 12/7/2015
Agreement Administrator Brian Shea		Progress Report Number KLK573-5	Agreement Number UI-15-05
Consultant			Report/Billing Period (From and To) 11/1/2015-11/30/2015
Certification of Payment Submitted <input type="checkbox"/> Yes <input type="checkbox"/> No	Certification Date	PSA Number	Invoice Number No Invoice
Description of Work Accomplished During the Month <p>We hired a research assistant and have begun creating the Task 1 Report (i.e. the first deliverable for the project). The report will summarize possible and recommended GIS data structures for archiving bike/ped facilities. During this past month we began documenting data elements found in various design guides such as AASHTO's guidebooks for bicycle and pedestrian facilities. The Task 1 Report will also summarize data collected by other agencies. This past month we investigated the bike/ped data that various agencies make available through their agency webpages. We reviewed webpages for state DOTs (WSDOT, ODOT, UDOT, and MTDOT), MPOs (Puget Sound Regional Council, Spokane Regional Transportation Council, Kootenai MPO, COMPASS, and Wasatch Front Regional Council), and cities (Portland, Seattle, Spokane, and Boise). We plan to contact by phone a selected number of these agencies to obtain more information about how and what they archive concerning bike/ped facilities.</p>			
Summary of Work Completed to Date (Milestones Completed and Dates) <p>We struggled to hire a research assistant due to the delayed start of this project (final budget approvals did not correspond with the start of the semester, making it difficult to line up a research assistant). Consequently, we are somewhat behind in Work Completed, however we are confident that we will soon be back on schedule.</p>			
Information Required from ITD to Avoid Delays <p>We would like to begin planning a meeting in Boise with Brian Shea and the Technical Advisory Committee (TAC). (See next section.)</p>			
List Changes in Scope or Complexity Requiring a Supplemental Agreement or Time Adjustments <p>The proposal specifies the completion of Task 1 and first meeting with the TAC for 1/31/2016. We request to postpone the first meeting to sometime near the end of February at the convenience of Brian Shea and the TAC, i.e. perhaps sometime between 2/22/2016 and 3/4/2016. We anticipate providing an electronic copy of the the Task 1 Report one week prior to meeting.</p>			
Consultant's Signature		Printed Name and Title Michael Lowry, Principal Investigator	

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Key Number	Program (Work Authority)	Progress Report Number 5	Agreement Number UI-15-05
Report Reviewed By			Review Date
The Following was Initiated			

Status Report

A completed status report must accompany all Agreement invoices recommended for payment. The requested percentage measurements of progress to this report are required.

Agreement Time 25 months	Time Passed 6 months	Percent of Agreement Time Elapsed 24.00%	Percent of Work Completed 7%
Original Agreement Amount \$100,000.00	Supplemental(s) \$0.00	Current Agreement Amount \$100,000.00	Payments (Including this Payment) \$12,135.84
Percent of Agreement Dollars Paid 12.14%			
Certification of Payment Submitted <input type="checkbox"/> Yes <input type="checkbox"/> No	Certification Date	Fixed Fee \$	This Invoice \$
		To Date \$	Negotiated \$
If There is a Significant Variance Between the Percentages, Please Explain			
We struggled to hire a research assistant due to the delayed start of this project (final budget approvals did not correspond with the start of the semester, making it difficult to line up a research assistant). Consequently, we are somewhat behind in Work Completed, however we are confident that we will soon be back on schedule.			
Consultant Invoice Number No Invoice		This Payment Amount \$0.00	

Progress Payment: I certify that the Agreement provisions have been reviewed, the invoice amount checked, progress is substantiated, significant material expenses have support documentation (receipts), and the costs billed are project related and represent the work accomplished. I hereby approve the progress estimate for payment.

Final Payment: I certify that all work under the terms of the Agreement has been satisfactorily completed, any capital assets acquired have been delivered or value received, an affidavit of indebtedness received, and the project reviewed or audited and costs verified for work performed. I hereby approve final payment under the Agreement.

Agreement Administrator's Signature	Date	Second (Independent) Reviewer's Signature
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