ITD 0771 (Rev. 10-06) itd.idaho.gov

## **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				Project Name		Date					
	ITD RP 225			ITD Prediction Models for II	D Hwys	3/8/2013					
Agreement Admini	strator		Progress Re	port Number	Agreement Number						
Ned Parrish			KLK565-2		UI-13-01						
Consultant					Report/Billing Period (F	Period (From and To)					
					02/01/2013-02/28/2013						
Certification of Pay	ment Submitted	Certification Date	PSA	Number	Invoice Number						
	No				1						
Description of Wor	k Accomplished D	uring the Month									
defining the pro covering issues	oject approach i s such as crash The project tear	for site selection for the reporting threshold in	e study. Th Idaho con	documentation the HSM cras ne project team reviewed Ida npared to other neighboring s for available highway sectior	ho's crash reporting states and crash as	guidelines signment					
Summary of Work	Completed to Date	e (Milestones Completed an	nd Dates)								
See Gantt Cha		o (Milestories Completed an	la Balco)								
ooo cana cna											
Information Requir	ed from ITD to Avo	oid Delays									
List Changes in So	cope or Complexity	Requiring a Supplemental	Agreement o	r Time Adjustments							
o. oagoo o.	rope of Complexity	rioquiii.g a Guppioiiioiiiai	, .g								
				T							
Consultant's Signa	ture			Printed Name and Title							
				Ahmed Abdel-Rahim, Principal Investigator							

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## **Professional Agreement Invoice and Progress Report**

Idaho Transportation Department

## This page must be filled out by the Agreement Administrator.

Key Number	Imber Program (Work Authority) Progress Report Number Agreement Number										
Rey Number	riogiaiii (wo	rk Authority)	2	report Number			JI-13-01	Turnio I			
Report Reviewed By											
Report Reviewed by							Re	eview Date			
The Following was Initia	tod										
The Following was milia	ieu										
Status Report											
A completed status i					recomm	ended for pa	yment. The	requeste	ed percentage		
measurements of pr	ogress to t		•								
*		Time Passed	d	F		greement Time	Elapsed Pe	· ·			
16 months 2 m		2 months				2.50%			8%		
Original Agreement Amount Supplemental(s)		` ,	Curre	ent Agreement Ar	Amount Payments (Including this Payme			nt) Percent of Agreement Dollars Pa			
\$65,200.00 \$0.00			\$65,200.00		\$1,588.46			02.44%			
Certification of Payment	Submitted	Certification Dat				ice	To Date		Negotiated		
☐ Yes ☐ No			Fixed				\$		\$		
If There is a Significant \	Variance Bet	ween the Percer	ntages, Plea	se Explain	•						
Consultant Invoice Number					Payment A	mount					
1					\$1,588.46						
Progress Pay	ment:	certify that th	ne Agree	ment provisio	ons have	been review	ed, the invo	ice amo	unt checked,		
progress is su	bstantiate	d, significant	material	expenses ha	ave supp	ort documer	ntation (rece	ipts), an	d the costs billed		
are project rela	ated and r	epresent the	work ac	complished.	I hereby	approve the	progress e	stimate f	or payment.		
					_						
									oleted, any capital		
assets acquire or audited and									the project reviewed		
oi audited allu	COSIS VEI	m <del>c</del> u ioi wolf	ν ρεποιπ	eu. Thereby	арргоче	ııılaı payılle	an unuer the	Ayıeen	iioiit.		
Agreement Administrator's Signature Date			Date		Second (Inc	lependent) Rev	iewer's Sig	nature			

## ITD RP225 UI-13-01 KLK565

Task	Tools December	2013											2014			
	Task Description		Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
1	Document the HSM crash estimation procedure	30%	30%													
2	Project approach for site selection		20%													
3	Document the study methodology															
4	Collect crash and roadway characteristic data															
5	Data analysis															
6	Project final report															