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 fo	<u> </u>	2/5/2015						
Agreement Admin	istrator		Progress Re	port Number	Agreement Number							
Ned Parrish			KLK565-2	5	UI-13-01							
Consultant					Report/Billing Period (From and To)							
					1/1/2015-1/31/2015							
Certification of Pa	yment Submitted	Certification Date	PSA I	Number	Invoice Number							
☐ Yes ☐] No				21							
-	rk Accomplished D	=										
for final report	review. ITD rev		ck to the pr	s been approved by ITD. roject team by the first we		Il allow more time						
Information Requi	red from ITD to Avo	oid Delays										
List Changes in S	cope or Complexity	Requiring a Supplemental	Agreement or	r Time Adjustments								
Consultant's Signa	ature			Printed Name and Title								
				Ahmed Abdel-Rahim, Principal Investigator								

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Idaho Transportation Department

This page must be filled out by the Agreement Administrator.

Key Number	Program (Ma	wis Assibanias	Drogress I	Panart Number			Agreement Number								
Rey Number	er Program (Work Authority) Progress Report Nui 25							JI-13-01	vumber						
December 1 December 1 December 1	eport Reviewed By						,								
Report Reviewed By								R	eview Date						
The Fellowin was 1989	- d														
The Following was Initiat	iea														
_															
Status Report															
A completed status r					recon	nmend	ed for pa	yment. The	requeste	ed percentage					
measurements of pr	ogress to	•	•												
Agreement Time Time F				F	Percent	•	ment Time	Elapsed Pe	ercent of W	rk Completed					
26 months	25 months				96.15				93%						
Original Agreement Amo	` '		ent Agreement Ar	mount	-		g this Payment)	·							
\$65,200.00 \$0.00			\$65	,200.00		\$48,17	73.15		73.89%						
Certification of Payment Submitted Certification			е	Fived Fee	This Invoice			To Date		Negotiated					
☐ Yes ☐ No				Fixed Fee	ee \$			\$		\$					
If There is a Significant \	/ariance Bet	ween the Percen	ntages, Plea	se Explain											
Consultant Invoice Numl	ber			This	Payme	ent Amou	nt								
21				\$2,3	\$2,309.28										
Progress Pay	/ment:	certify that th	ne Agree	ment provisio	ns ha	ve bee	n review	ed, the invo	oice amo	ount checked,					
										d the costs billed					
are project rela	ated and r	epresent the	work ac	complished.	I here	by app	rove the	progress e	estimate	for payment.					
	4	41 - 4 - 11								alata I a a a a a a a a a a a a					
										oleted, any capital the project reviewed					
or audited and															
			. ponon		appi C		payiiio	απαστ απ							
Agreement Administrato	r's Signature			Date		5	Second (Ind	lependent) Rev	viewer's Sig	nature					

ITD RP225 UI-13-01 KLK565

Task	Task Description		2013												2014										2015		
	ask Description		Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb
1	Document the HSM crash estimation procedure	30%	30%	25%	10%	5%																					
2	Project approach for site selection		20%	20%	40%	20%																					
3	Document the study methodology				50%	20%	20%	10%																			
4	Collect crash and roadway characteristic data				30%	20%	20%		20%							10%											
5	Data analysis							25%	15%	15%	10%	10%	10%	5%		10%											
6	Interim report										10%	15%	10%	25%	20%	10%	5%										
7	Create Idaho-specific SPFs																		25%	25%	15%	15%					
8	Validate the two crash prediction methods																					50%	40%				
9	Project final report																					25%	25%	35%			