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 I	D Hwys	7/10/2014					
Agreement Adminis	strator		Progress Re	port Number	Agreement Number						
Ned Parrish			KLK565-1	UI-13-01							
Consultant					Report/Billing Period (F	rom and To)					
					6/1/2014-6/30/2014						
Certification of Pay	ment Submitted	Certification Date	PSA	Number	Invoice Number						
🗌 Yes 🛛	No				Invoice - 16						
Description of Worl	k Accomplished D	uring the Month									
ITD has approv 2014.	ed the no-cost	extension for the proj	ect and the	work scope modification rec	quest. The new end	date is December					
Idaho-specific S	SPFs, and Tas			e project scope: Task 7: Use o crash prediction methods (
Summary of Work	Completed to Date	e (Milestones Completed ar	nd Dates)								
See Gant Chart	•		la Dalos)								
Information Require	ed from ITD to Avo	oid Delays									
List Changes in Sc	ope or Complexity	Requiring a Supplemental	Agreement o	r Time Adjustments							
Consultant's Signat	ture			Printed Name and Title							
				Ahmed Abdel-Rahim, Prir	ncipal Investigator						

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Idaho Transportation Department

This page must be filled out by the Agreement Administrator.

Key Number	Program (Work Authority)	Progress Report Number	Agreement I	Number		
		18	UI-13-01			
Report Reviewed By	•		Review Date			
The Following was Ini	tiated					

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		Time Passed		F	Percent	of Agreement Time	Elapsed F	Percent of Work Completed					
24 months	18 months				75.00%		83%						
Original Agreement Amount	ental(s)	ent Agreement A	mount	Payments (Includin	g this Payment) Percent c	of Agreement Dollars Paid						
\$65,200.00 \$0.00			\$65,200.00			\$36,516.11			56.01%				
Certification of Payment Sub	ertification Date		-	nvoice	To Date		Negotiated						
🗌 Yes 🛛 🗌 No			Fixed Fee	\$		\$		\$					
If There is a Significant Varia	nce Betwe	een the Percentages	, Plea	ise Explain									
Consultant Invoice Number						This Payment Amount							
16	\$38	\$386.23											

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

ITD RP225 UI-13-01 KLK565

Task T	Task Description	2013									2014														
			Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
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%						
8	Validate the two crash prediction methods																								
9	Project final report																								