

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 ITD RP 225	Project Name ITD Prediction Models for ID Hwys	Date 11/5/2014
Agreement Administrator Ned Parrish		Progress Report Number KLK565-22	Agreement Number UI-13-01
Consultant			Report/Billing Period (From and To) 10/1/2014-10/31/2014
Certification of Payment Submitted <input type="checkbox"/> Yes <input type="checkbox"/> No	Certification Date	PSA Number	Invoice Number 19
Description of Work Accomplished During the Month The project team continued working on the analysis to develop Idaho-specific SPFs and to validate and compare the two crash prediction methods used in the project: HSM SPFs with calibration factors versus Idaho specific SPFs. The first draft of the final report should be distributed to ITD by Mid November 2014.			
Summary of Work Completed to Date (Milestones Completed and Dates) See Gantt Chart			
Information Required from ITD to Avoid Delays			
List Changes in Scope or Complexity Requiring a Supplemental Agreement or Time Adjustments			
Consultant's Signature		Printed Name and Title Ahmed Abdel-Rahim, Principal Investigator	

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Key Number	Program (Work Authority)	Progress Report Number 22	Agreement Number UI-13-01
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 24 months	Time Passed 22 months	Percent of Agreement Time Elapsed 91.67%	Percent of Work Completed 89%
Original Agreement Amount \$65,200.00	Supplemental(s) \$0.00	Current Agreement Amount \$65,200.00	Payments (Including this Payment) \$44,324.35
Percent of Agreement Dollars Paid 67.99%			
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			
Consultant Invoice Number 19		This Payment Amount \$1,539.52	

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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ITD RP225 UI-13-01 KLK565

Task	Task Description	2013												2014											
		Jan	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%	25%	15%	15%			
8	Validate the two crash prediction methods																				50%	40%			
9	Project final report																				25%	25%			