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 I	D Hwys	10/8/2014				
Agreement Admini	strator		Progress Re	port Number	Agreement Number					
Ned Parrish			KLK565-2	1	UI-13-01					
Consultant					Report/Billing Period (F	rom and To)				
					9/1/2014-9/30/2014	4				
Certification of Pay	ment Submitted	Certification Date	PSA	Number	Invoice Number					
_	No				18					
prediction meth that Idaho-spec	om continued wonds used in the cific SPFs provi	orking on the analysis e project: HSM SPFs v	with calibra nates for al	Idaho-specific SPFs and to tion factors versus Idaho spe I three facility types included	ecific SPFs. The init					
Information Requir	ed from ITD to Avc	oid Delays								
List Changes in So		Requiring a Supplemental	Agreement of	r Time Adjustments Printed Name and Title						
					ncinal Invactigator					
				Ahmed Abdel-Rahim, Prir	icipai irivestigator					

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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	Report Number			Agreement N	lumbor						
Rey Number	Program (Wo	rk Authority)	21	Report Number			UI-13-01	MILLIDEI						
December 1 December 1 December 1			Z I					D D						
Report Reviewed By								Review Date						
The Fellowin was later	- d													
The Following was Initiat	ied													
_														
Status Report														
A completed status r					recom	mended for	payment. Th	ne requeste	ed percentage					
measurements of pro-	ogress to		•				T							
Agreement Time		Time Passed		F		of Agreement Ti	me Elapsed	Percent of Work Completed						
24 months		21 months				87.50%			88%					
Original Agreement Amo		ent Agreement Ar		Payments (Inclu	ding this Payme	nt) Percent of	of Agreement Dollars Paid							
\$65,200.00 \$0.00				,200.00	,	\$42,784.83			65.62%					
Certification of Payment Submitted Certification Date				Fived Fee	This In	voice	To Date		Negotiated					
☐ Yes ☐ No				Fixed Fee	\$		\$	\$						
If There is a Significant \	/ariance Bet	ween the Percen	ntages, Plea	se Explain	•		•							
Consultant Invoice Number	ber			This	Paymer	nt Amount								
18				\$1,5	\$1,539.52									
Progress Pay														
									nd the costs billed					
are project rela	ated and r	epresent the	work ac	complished.	I herel	by approve t	he progress	estimate	for payment.					
Final Paymon	• Loortif	y that all work	k under th	no torms of the	o Aaro	omont has h	oon eatiefac	torily com	pleted, any capital					
									the project reviewed					
or audited and														
Agreement Administrato	r's Signature			Date		Second (econd (Independent) Reviewer's Signature							

ITD RP225 UI-13-01 KLK565

Task 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%				5%					
7	Create Idaho-specific SPFs																		25%	25%	15%	15%				
8	Validate the two crash prediction methods																					50%				
9	Project final report																					25%				