

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 222	Project Name ITD Passing Lane Safety	Date 11/5/2013
Agreement Administrator Ned Parrish		Progress Report Number KLK566-10	Agreement Number UI-12-03
Consultant			Report/Billing Period (From and To) 10/01/2013-10/31/2013
Certification of Payment Submitted <input type="checkbox"/> Yes <input type="checkbox"/> No	Certification Date	PSA Number	Invoice Number No invoice
Description of Work Accomplished During the Month The project team continued working in analyzing crashes at different passing lane locations. We investigated crashes on 0.5-mile segments of the roads immediately downstream the passing lane zones to identify any merging related crashes. We also compared the crash rates at these merging segments with the crash rate on the 0.5 mile segments downstream from them. The results show that crash rates at the merging sections are, on average, 4.5% higher than the crash rates at the passing lane locations. The results also show that the crash rate at the merging sections are 8.8% higher than the crash rates at the downstream roadway segments. These differences, however, are not statistically significant at the 95% confidence level.			
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 10	Agreement Number UI-12-03
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 10 months	Percent of Agreement Time Elapsed 41.67%	Percent of Work Completed 45%
Original Agreement Amount \$24,788.36	Supplemental(s) \$0.00	Current Agreement Amount \$24,788.36	Payments (Including this Payment) \$21,370.19
Percent of Agreement Dollars Paid 86.21%			
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 None		This Payment Amount \$0.00	

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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