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 236 | | | ITD Alt Traffic Detection | | 3/9/2015 | | | | | |
| Agreement Admin | istrator | | Progress Rep | ort Number | Agreement Number | | | | | | |
| Ned Parrish | | | KLK569-13 | UI-14-03 | | | | | | | |
| Consultant | | | | | Report/Billing Period (F | From and To) | | | | | |
| | | | | | | | | | | | |
| Certification of Pay | yment Submitted | Certification Date | PSA N | lumber | Invoice Number | | | | | | |
| 🗌 Yes 🗌 | No | | | | 11 | | | | | | |
| Description of Wo | rk Accomplished D | Juring the Month | | | | | | | | | |
| accuracy of ea making adjustr | ch of the system nents to the co | ms has been develope | ed and share tem before t | nalysis for the project. An ed with each vendor. Vend the final testing begins. | initial report documer lors have been given | nting the detection the option of | | | | | |
| Information Requir | | oid Delays y Requiring a Supplemental | Agreement or | Time Adjustments | | | | | | | |
| Consultant's Signa | ature | | | Printed Name and Title | | | | | | | |
| 3 | | | | Ahmed Abdel-Rahim, P | rincipal Investigator | | | | | | |
| | | | | | incipal investigator | | | | | | |

Professional Agreement Invoice and Progress Report

Idaho Transportation Department

This page must be filled out by the Agreement Administrator.

| Key Number | Program (Work Authority) | Progress Report Number | Agreement | Number | | | | |
|---------------------|--------------------------|------------------------|-----------|-------------|--|--|--|--|
| | | 13 | UI-14-03 | , | | | | |
| Report Reviewed By | y . | · · | | Review Date | | | | |
| | | | | | | | | |
| The Following was I | nitiated | | | • | | | | |
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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 | | | Percent | of Agreement Time | Elapsed F | Percent of Work Completed | | | | | |
|------------------------------------|-------------------|--------------------|-----------|-----------------|---------------------|--------------------|---------------------------|--------------|---------------------------|--|--|--|
| 25 months | | 13 months | | | | 52.00% | | 42% | | | | |
| Original Agreement Amount Suppleme | | ental(s) Curr | | ent Agreement A | mount | Payments (Includin | g this Paymen | t) Percent o | of Agreement Dollars Paid | | | |
| \$149,866.99 \$0.00 | | | \$14 | 9,966.99 | | \$56,748.74 | | | 37.84% | | | |
| Certification of Payment Subi | ertification Date | | | | nvoice | To Date | | Negotiated | | | | |
| 🗌 Yes 🛛 🗌 No | | | Fixed Fee | \$ | | \$ | | \$ | | | | |
| If There is a Significant Varia | nce Betwe | en the Percentages | , Plea | se Explain | | | | | | | | |
| | | | | | | | | | | | | |
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| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Consultant Invoice Number | | | | This | This Payment Amount | | | | | | | |
| 11 | | | \$1, | 856.59 | 9 | | | | | | | |

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 RP236 UI-14-03 KLK569

| Task | Task Description | 2014 | | | | | | | | 2015 | | | | | | | | | | 2016 | | | | | |
|------|--|------|-----|-----|-----|-----|-----|-----|-----|------|-----|-----|-----|-----|-----|-----|-----|-----|-----|------|-----|-----|-----|-----|-----|
| Task | | 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 | Literature review | | 25% | 25% | 25% | 15% | | | | | 10% | | | | | | | | | | | | | | |
| 2 | Identify test location and testing procedures | | | | 70% | 25% | | | | | 5% | | | | | | | | | | | | | | |
| 3 | Invite vendors to participate in the study | | | | | 40% | 50% | | | | 10% | | | | | | | | | | | | | | |
| 4 | Develop system architecture | | | | | 25% | 45% | 10% | 5% | 5% | | 5% | | | | | | | | | | | | | |
| 5 | Detection system installation at test intersection | | | | | | 20% | 60% | 5% | 5% | | 5% | | | | | | | | | | | | | |
| 6 | Field data collection | | | | | | | | | | | 5% | 15% | 10% | | | | | | | | | | | |
| 7 | Data analysis | | | | | | | | | | | | | | | | | | | | | | | | |
| 8 | Project final report | | | | | | | | | | | | | | | | | | | | | | | | |