itd.idaho.gov



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 244         |                            |                       | ITD Using Wider Paveme   | 1/11/2016                   |              |  |  |  |  |  |  |  |
| Agreement Admin     | istrator           |                            | Progress Re           | port Number  | ort Number Agreement Number |              |  |  |  |  |  |  |  |
| Ned Parrish         |                    |                            | KLK571-1              | UI-15-02   |                             |              |  |  |  |  |  |  |  |
| Consultant          |                    |                            |                       |  | Report/Billing Period (F    | From and To) |  |  |  |  |  |  |  |
|                     |                    |                            |                       |  | 12/1/2015-12/31/2           | 015          |  |  |  |  |  |  |  |
| Certification of Pa | yment Submitted    | Certification Date         | PSA N                 | Number   | Invoice Number              |              |  |  |  |  |  |  |  |
| 🗌 Yes 🗌             | ] No               |                            |                       |  | Inv 6                       |              |  |  |  |  |  |  |  |
| Description of Wo   | rk Accomplished D  | uring the Month            | I                     |  |                             |              |  |  |  |  |  |  |  |
| highway cours       | e with varying p   | pavement marking wid       | lth (2 inches         | e been testing for a total of s<br>s, 4 inches and 6 inches). T<br>v sections covering the perio | The project team also       |              |  |  |  |  |  |  |  |
| Summary of Work     | Completed to Date  | e (Milestones Completed an | d Dates)              |  |                             |              |  |  |  |  |  |  |  |
| See Gantt Cha       |                    | oid Delays                 |                       |  |                             |              |  |  |  |  |  |  |  |
|                     |                    |                            |                       |  |                             |              |  |  |  |  |  |  |  |
|                     |                    |                            |                       |  |                             |              |  |  |  |  |  |  |  |
| List Changes in So  | cope or Complexity | Requiring a Supplemental   | Agreement or          | Time Adjustments   |                             |              |  |  |  |  |  |  |  |
| Consultant's Signa  | ature              |                            |                       | Printed Name and Title   |                             |              |  |  |  |  |  |  |  |
| J J                 |                    |                            | Ahmed Abdel-Rahim, Pr | 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      |
|----------------------|--------------------------|------------------------|-----------|-------------|
|                      |                          | 11                     | UI-15-02  |             |
| Report Reviewed By   | /                        | · ·                    | ·         | Review Date |
|                      | viewed By                |                        |           |             |
| The Following was li | nitiated                 |                        |           | •           |
|                      |                          |                        |           |             |
|                      |                          |                        |           |             |
|                      |                          |                        |           |             |
|                      |                          |                        |           |             |
|                      |                          |                        |           |             |
|                      |                          |                        |           |             |
|                      |                          |                        |           |             |
|                      |                          |                        |           |             |

## 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            | ork Completed  |           |                          |        |  |  |  |
|---------------------------------|-------------------|--------------------|------------------|------------|--------------------|----------------|-----------|--------------------------|--------|--|--|--|
| 36 months                       | 11 months         |                    |                  |            | 30.56%             |                | 31%       |                          |        |  |  |  |
| Original Agreement Amount       | ental(s)          | Curre              | ent Agreement Ar | nount      | Payments (Includin | g this Payment | Percent o | f Agreement Dollars Paid |        |  |  |  |
| \$174,000.00                    | \$0.00            |                    | \$17             | 4,000.00   |                    | \$33,029.89    |           |                          | 18.99% |  |  |  |
| Certification of Payment Subr   | ertification Date | <u></u>            |                  |            | nvoice             | To Date        |           | Negotiated               |        |  |  |  |
| 🗌 Yes 🛛 🗌 No                    |                   |                    |                  | Fixed Fee  | \$                 |                | \$        |                          | \$     |  |  |  |
| If There is a Significant Varia | nce Betwe         | en the Percentages | , Plea           | se Explain |                    |                |           |                          | •      |  |  |  |
|                                 |                   |                    |                  |            |                    |                |           |                          |        |  |  |  |
|                                 |                   |                    |                  |            |                    |                |           |                          |        |  |  |  |
|                                 |                   |                    |                  |            |                    |                |           |                          |        |  |  |  |
|                                 |                   |                    |                  |            |                    |                |           |                          |        |  |  |  |
|                                 |                   |                    |                  |            |                    |                |           |                          |        |  |  |  |
|                                 |                   |                    |                  |            |                    |                |           |                          |        |  |  |  |
|                                 |                   |                    |                  |            |                    |                |           |                          |        |  |  |  |
| Consultant Invoice Number       |                   |                    |                  | This       | Payme              | nt Amount      |           |                          |        |  |  |  |
| Invoice #6                      |                   |                    |                  | \$1,0      | \$1,651.10         |                |           |                          |        |  |  |  |

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 |
|-------------------------------------|------|---|
|                                     |      |   |
|                                     |      |   |

| Task | Task description                        | 01/15 | 02/15 | 03/15 | 04/15 | 05/15 | 06/15 | 07/15 | 08/15 | 09/15 | 10/15 11/ | 12/1  | 5 01, | /16 02/16 | 03/16 | 04/16 | 05/16 | 06/16 | 07/16 | 08/16 | 10/16 | 11/16 | 12/16 | 01/17 | 02/17 | 03/17 | 04/17 | 05/17 | 06/17 | 07/17 | 08/17 | 09/17 | 10/17 | 11/17 | 12/17 |
|------|---|-------|-------|-------|-------|-------|-------|-------|-------|-------|-----------|-------|-------|-----------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| 1    | Background and literature review        |       | 50%   | 35%   |       |       |       |       |       |       |           |       |       |           |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| 2    | Roadway segment characteristics         |       | 50%   | 45%   |       |       |       |       |       |       |           |       |       |           |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| 3    | Identify test and control sites         |       |       | 50%   | 45%   |       |       |       |       |       |           |       |       |           |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| 4    | Implement wider pavement marking        |       |       |       | 25%   | 35%   | 25%   | 5%    |       |       |           |       |       |           |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| 5    | Driver simulator pilot tests            |       |       |       |       | 35%   | 50%   | 5%    |       |       | 5%        |       |       |           |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| 6    | Driver simulator final tests            |       |       |       |       |       | 10%   | 15%   | 25%   | 20%   | 10%       | 109   | 6     |           |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| 7    | Driver simulator data analysis          |       |       |       |       |       |       |       |       | 20%   | 10% 30    | % 159 | 6     |           |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| 8    | Driver simulator interim report         |       |       |       |       |       |       |       |       |       | 40        | %     |       |           |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| 9    | Statistical models development          |       |       |       |       |       |       |       |       |       |           |       |       |           |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| 10   | Conduct before and after crash analysis |       |       |       |       |       |       |       |       |       |           |       |       |           |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| 11   | Project final report                    |       |       |       |       |       |       |       |       |       |           |       |       |           |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |