

PINAL COUNTY PROGRESS PAY REQUEST NUMBER:

FINAL PAYMENT? (Y/N)

PROJECT #:	CONTRACT #:	PROJECT DESCRIPTION:							
CONTRACTOR, FOREMAN NAME AND ADDRESS:				NOTICE TO PROCEED DATE:	START DATE:	CONTRACT TIME (CALENDAR DAYS)	COMPLETION DATE:	TIME ELAPSED:	% TIME USED:
ADDITIONAL TIME APPROVED BY BOS (DAYS):	ADJUSTED COMPLETION DATE:	PAYMENT PERIOD:			CONTRACT AWARD AMOUNT:	TOTAL AMOUNT CHANGE ORDERS APPROVED BY BOS:	ADJUSTED CONTRACT AMOUNT:	% JOB COMPLETED:	
		to							

ITEM NO.	DESCRIPTION	UNIT OF MEASURE	UNIT COST	QTY PER CONTRACT	TOTAL CONTRACT LINE COST	QUANTITY THIS PERIOD	QTY COMPLETED TO DATE	VALUE COMPLETED THIS PERIOD	VALUE COMPLETED TO DATE
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									

SUBMITTED: _____ (a) TOTAL COST \$ _____

CONTRACTOR _____ DATE _____ (b) RETAINED (10 % or 5%) \$ _____

APPROVED: _____ (c)=(a)-(b) TOTAL LESS RETAINED \$ _____

ENGINEER/PROJECT MANAGER _____ DATE _____

APPROVED: _____ (d)= PREVIOUS PAYMENTS \$ _____

COUNTY ENGINEER OR PUBLIC WORKS DIRECTOR _____ DATE _____ (e)=(c)-(d) DUE THIS ESTIMATE \$ _____