

Owner: _____

Date: _____

Project Name: _____

MI Project #: _____

Contractor: _____

Change order#: _____

Work by Subcontractor (y or n)? _____ Subcontractor: _____

Complete a separate form for Subcontractor work and Contractor work. For General Contractor Work (G) is \$0.

To be completed by the consultant for conformance with the Master Specifications.

Description of Work:**1. Labour**

| Classification | No. | Hrs. Each | Worker Hours | Payroll Rate | Total |
|----------------|-----|-----------|--------------|--------------|-------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Subtotal (A) | | | | | |

2. Material Supplied by Contractor

| Type | Quantity | Unit Price | Total |
|--------------|----------|------------|-------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Subtotal (C) | | | |

3. Equipment

| Type | Make & Model | Capacity | Diesel/Gas | Hrs. Worked | Rental Rate | Total |
|--------------|--------------|----------|------------|----------------|----------------|-------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Subtotal (K) | | | | | | |

4. Board & Lodging

| Employee | Accomm. | Meals | Subtotal | Hrs. Worked | Reg. Hours | Prorate Ratio | Total |
|--------------|---------|-------|----------|----------------|---------------|------------------|-------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Subtotal (L) | | | | | | | |

| Summary | |
|--|---------------|
| Item | Amount |
| (A) Labour (Actual payroll rates) | |
| (B) Payroll Burden (35% of A) | |
| (C) Materials Supplied by Contractor | |
| (D) SUB TOTAL (A+B+C) | |
| (E) 10% Overhead (10% of D) | |
| (F) SUB TOTAL (D+E) | |
| (G) Profit (Sub Contractor) (G = 5% of F or \$0 if General Contractor only) | |
| (H) SUB TOTAL (F+G) | |
| (I) Profit (Contractor) (10% of H) | |
| (J) SUB TOTAL (H+I) | |
| (K) Equipment | |
| (L) Board and Lodging | |
| Total (J+K+L) | |

Notes:

1. Prorate Ratio = Hrs Worked / Reg Hrs (maximum of 1.0)
2. Rate to be actual payroll rate. Owner will verify these rates with payroll records as per 01610.

Contractor's Representative

Date: _____

Consultant's Representative

Date: _____

NOTE: To be signed daily and submitted with Progress Claim.