

SURA MONTHLY PROGRESS REPORT FORM

- Reports are due on the last Wednesday of the month.
- Send Reports to Eric Paull (epaull@watrust.com) as a Word .docx (not pdf).

Date of Monthly Report: 10-17-2016
Project Name Schweitzer Cut Off Fiber Conduits
SURA recipient to be paid: Avista Utilities
Mailing address: Peggy George, Avista, 100 N. Lincoln Ave.
Sandpoint, ID 83864
Grant Administrator Name : Bruce Robertson
Administrator Email : brobertson@sandpointidaho.gov
Administrator Phone: 208-255-1877
Contract #:
Physical address of Project: Schweitzer Cut Off Boyer Rd to Boyer Ave
Project Brief Description: Installation of Fiber Optic Conduits on the south side of Schweitzer Cut Off Road

Total SURA Funds Invoiced:*
Previous Invoices: \$736.72
Current Invoice: \$8,962.12
Project Total: \$9,698.84

Invoiced funds apply to which elements of the project?: Installation of conduit in a shared trench.

Numbers of Hours Worked this Month:** None

Completion Status: (A short paragraph is sufficient.) The project is complete.

Tasks to be completed next month: None.

*do not include leveraged or in-kind funds.

**report hours that are associated with SURA funds, not leveraged or in-kind funds

REVISED 05-05-2016
 OVH Rates Effective 05-01-2016
 Labor Rates Effective 04-01-2016

AVISTA UTILITIES - - WA/ID CAPITAL FORM
 GAS CHARGES

BILL TO: CITY OF SANDPOINT
 ATTN: BRUCE ROBERTSON
 MAILING ADDRESS: 1123 LAKE STREET
 CITY, ST., ZIP CODE: SANDPOINT, ID 83864
 TELEPHONE NO:

Damage Claim MSC-22
 Misc Bill MSC-37
 Advance Payment Required

INCIDENT DATE
 Additional Charges
 Corrected Charges

AVISTA JOB AND/OR KEY#: _____
 JOB DESCRIPTION: INSTALL FIBER CONDUIT FOR CITY IN JOINT GAS MAIN DITCH

POLICE REPORT NUMBER: _____
 JOB LOCATION: _____
 DATE WORK PERFORMED: 7/18/2106
 SPECIAL INSTRUCTIONS: _____
 INSURANCE INFORMATION: _____

INSURANCE COMPANY NAME: _____ THEIR CLAIM NUMBER: _____ THEIR FAX NUMBER: _____

Costs Charged to Account:				Description of Expense:		Invoice No.		Damage Claim: R -			Rep:	
PROJECT NUMBER	TASK	EXP TYPE	ORG	LABOR Position Title	Hours	Regular Reg Rate	Sub Total	OT Hours	Overtime - Damages & Misc. OT Rate	Sub Total	Amount	Total
93001230	107500	115	Z57									
							Gas Totals			\$0.00		
											Total Gas Labor Charges	\$0.00
				TRANSPORTATION Equipment Number				Miles	Hours	Rate		
93001230	107500	115	Z57									
											Total Gas Transportation Charges	\$0.00
				MATERIAL Description								
93001230	107500	115	Z57	Enter items on "PG 2 - Material Charges"								
											Total Gas Materials	\$0.00
											Total Material Charges	\$0.00
				OTHER (LOADED ITEMS - MSC BILLS ONLY) Description				Must Enter a Qty	Must Enter a Cost	Loading Rate		
93001230	107500	115	Z57									
											Subtotal Gas Other "Loaded" Items	\$0.00
				GAS LOSS CALCULATION						Qty		
93001230	107500	115	Z57									
				OTHER (MISC ITEMS)				Must Enter a Qty	Must Enter a Cost			
93001230	107500	115	Z57	1378 FT DITCH				1.00	\$2,530.57		\$2,530.57	
				2-2" CONDUITS				1.00	\$5,512.00		\$5,512.00	
				2-2" CONDUITS TILLBERG DRIVE				1.00	\$172.05		\$172.05	
				10-2" SWEEPS INSTALLED				1.00	\$27.50		\$27.50	
											Subtotal Gas Other Misc Items	\$8,242.12
											Total Other Expense	\$8,242.12

Office/Dept: SANDPOINT
 Date Submitted for Billing: 10/12/2016

Accounting Use Only		SUBTOTAL
Tax Code		\$8,242.12
City		\$0.00
		TOTAL
		\$8,242.12

REVISED 05-05-2016
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Damage Claim MSC-22
 Misc Bill MSC-37
 Advance Payment Required

INCIDENT DATE
 Additional Charges
 Corrected Charges

AVISTA JOB AND/OR KEY#
 JOB DESCRIPTION

CROSSING TO JAIL; CROSSING TO MADDIE LN, SCHWEITZER CUTOFF PROJECT

POLICE REPORT NUMBER:

JOB LOCATION:

DATE WORK PERFORMED:

9/13/2016

SPECIAL INSTRUCTIONS:

INSURANCE INFORMATION:

INSURANCE COMPANY NAME THEIR CLAIM NUMBER THEIR FAX NUMBER

Costs Charged to Account:				Invoice No.	Damage Claim: R -						Rep:				
PROJECT NUMBER	TASK	EXP TYPE	ORG	Description of Expense			Regular			Overtime - Damages & Misc			Amount	Total	
				LABOR Position Title	Hours	Reg Rate	Sub Total	OT Hours	OT Rate	Sub Total					
93001230	107000	115	Z57												
Gas Totals											\$0.00	\$0.00			
Total Gas Labor Charges												\$0.00			
				TRANSPORTATION			Miles	Hours	Rate						
93001230	107000	115	Z57	Equipment Number											
Total Gas Transportation Charges												\$0.00			
				MATERIAL											
93001230	107000	115	Z57	Description											
				Enter items on "PG 2 - Material Charges"									\$0.00	\$0.00	
				OTHER (LOADED ITEMS - MISC BILLS ONLY)			Must Enter a Qty	Must Enter a Cost	Loading Rate						
93001230	107000	115	Z57	Description											
Subtotal Gas Other "Loaded" Items												\$0.00			
				GAS LOSS CALCULATION			For Gas Loss Calculation Read Comment			Qty					
93001230	107000	115	Z57												
				OTHER (MISC ITEMS)			Must Enter a Qty	Must Enter a Cost							
93001230	107000	115	Z57	CONDUIT - NORTH BOYER BY JAIL			1.00	\$180.00				\$180.00			
				BORE - NORTH BOYER BY JAIL			1.00	\$360.00				\$360.00			
				CONDUIT - CROSSING AT MADDIE LANE			1.00	\$180.00				\$180.00			
Subtotal Gas Other Misc Items											\$720.00	\$720.00			
Total Other Expense												\$720.00			

Office/Dept. SANDPOINT
 Date Submitted for Billing: 10/17/2016

Accounting Use Only		SUBTOTAL
Tax Code		\$720.00
City		\$0.00
		TOTAL \$720.00