



State of Idaho
 DIVISION OF PUBLIC WORKS
**DESIGN PROFESSIONAL
 REQUEST FOR PAYMENT
 SUBMIT ONE ORIGINAL**

| | | |
|-----------------|--------|--------------|
| DPW PROJECT NO. | | DPW USE ONLY |
| CODE | AMOUNT | |
| AE | | |
| RE | | |
| Date | | |

Name and Location of Project:

Name and Address of Design Professional:

Request No. For Period FROM: TO:

BASIC SERVICES

| DESCRIPTION OF ITEM | AGREEMENT AMOUNT (2) | % COMP (3) | AMOUNT OF SERVICE COMPLETE (4) | PREVIOUS PAYMENTS (5) | DUE THIS APPLICATION (6) |
|--------------------------|-------------------------|---------------|-----------------------------------|--------------------------|-----------------------------|
| | | % | | | |
| | | % | | | |
| | | % | | | |
| | | % | | | |
| | | % | | | |
| | | % | | | |
| | | % | | | |
| A. BASIC SERVICES TOTALS | | % | | | |

REIMBURSABLE EXPENSES

| DESCRIPTION OF ITEM | AGREEMENT AMOUNT (2) | | AMOUNT OF SERVICE COMPLETE (4) | PREVIOUS PAYMENTS (5) | DUE THIS APPLICATION (6) |
|--|-------------------------|--|-----------------------------------|--------------------------|-----------------------------|
| Travel by air/car rental/parking at cost | | | | | |
| Meals at cost not to exceed | | | | | |
| Mileage | | | | | |
| Lodging | | | | | |
| Reproductions/Postage | | | | | |
| B REIMBURSABLE TOTALS | | | | | |

C. TOTAL BASIC AND REIMBURSABLE

| | |
|--|-----------|
| ANALYSIS OF WORK PERFORMED | |
| Amount of Basic Services completed to date (line A4)..... | \$ |
| Amount of Reimbursable Expenses to date (line B4)..... | \$ |
| Total amount of work performed to date (line C4)..... | \$ |
| Less: Amount of previous payment (line C5)..... | \$ |
| BALANCE DUE THIS APPLICATION (line C4 minus line C5)..... | \$ |

CERTIFICATION OF DESIGN PROFESSIONAL
 I certify that the foregoing is just and correct and the amount claimed is legally due after showing all just credits.

| | |
|------------------------------------|------|
| Requested by Design Professional | Date |
| Recommended by DPW Project Manager | Date |
| Approved by Senior Project Manager | Date |