

STATE OF HAWAII
 Department of Accounting and General Services
 Division of Public Works
MONTHLY ESTIMATE

FOR THE MONTH OF September

Date: September 23, 2016

CONTRACTOR: Nan Inc
 ADDRESS: 636 Laumaka St
 City, State ZIP: Honolulu, HI 96819

Contract No. 63646 []
 DAGS Job No. 12-10-0758

PROJECT TITLE: State Capitol Building 5th Floor Exterior Wall Replacement and Exterior Repair

CONTRACT

Basic Contract Amount \$ 4,050,980.00

FOR INSPECTION BRANCH USE	
<input checked="" type="checkbox"/> SUBMITTAL REGISTER	<input type="checkbox"/> COMMENCEMENT REQUIREMENTS
DUE MONTHLY:	<input checked="" type="checkbox"/> PROJECT SCHEDULE
<input checked="" type="checkbox"/> DAILY REPORTS	<input type="checkbox"/> PAYROLL AFFIDAV
MONTHLY ESTIMATE CHECKLIST	<input checked="" type="checkbox"/> CONTRACT NUMBER
<input checked="" type="checkbox"/> PROJECT NAME AND LOCATION	<input checked="" type="checkbox"/> ALL SIGNATURES
SPECIALTY / MISC:	<input type="checkbox"/> PROJECT ACCEPTANCE
<input type="checkbox"/> AIR COND & PAINT ACCT DONE	

CHANGE ORDERS

Total \$ 298,731.00

Adjusted Contract Amount \$ 4,349,711.00

WORK ACCOMPLISHED

	<u>Basic Contract</u>	<u>Change Order</u>	<u>Total</u>
Completed to Date	100.00% \$ <u>4,050,980.00</u>	91.22% \$ <u>272,493.00</u>	\$ <u>4,323,473.00</u>
Retained REDUCED []	\$ <u>109,716.00</u>	\$ <u>6,812.00</u>	\$ <u>116,528.00</u>
Amount Subject to Payment	\$ <u>3,941,264.00</u>	\$ <u>265,681.00</u>	\$ <u>4,206,945.00</u>
Payments to Date	\$ <u>3,941,264.00</u>	\$ <u>126,187.00</u>	\$ <u>4,067,451.00</u>
Payments Now Due	\$ <u>-</u>	\$ <u>139,494.00</u>	\$ <u>139,494</u>

Payment No. **FINAL []** 7

Remarks: PROJECT ACCEPTANCE DATE: 9/27/16

1 Computed and Checked by:

Jamesy Lubada OCT 6 2016
 3 Recommended Project Inspector or Engineer Date

[Signature] OCT 6 2016
 4 Recommended Area Engineer/Architect Date

[Signature] OCT 6 2016
 5 Approved Branch Chief or District Engineer Date

The Public Works Administrator certifies that change orders have been issued and the work performed

Scott M. Ojima OCT 07 2016
 State Public Works Administrator Date

2 I certify that the above bill is correct, just, that payment has not been received, and all payroll affidavits have been submitted, are current, or proper deductive exclusions have been made to this request, and least 80% of our workforce resides in Hawaii

Nan Inc
 Name of Contractor

[Signature] 9/27/16
 By signature / Title Date

