

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

**MONTHLY ESTIMATE**

FOR THE MONTH OF MAY 2009

Date: June 18, 2009

CONTRACTOR: Diversified Plumbing & Air Conditioning

ADDRESS: P.O. Box 37124

Contract No. 57973 [✓]

City, State ZIP: Honolulu, Hawaii 96837

DAGS Job No. 12-20-2618

PROJECT TITLE: HAWAII STATE HOSPITAL, BUILDINGS E, F, H & I - HOT WATER SYSTEM RETROFIT

**CONTRACT**

Basic Contract Amount \$ 256,789.00

<b>FOR INSPECTION BRANCH USE</b>	
<input type="checkbox"/> SUBMITTAL REGISTER	<input type="checkbox"/> COMMENCEMENT REQUIREMENTS
<b>DUE MONTHLY:</b>	
<input type="checkbox"/> PROJECT SCHEDULE - INITIAL & ONGOING	
<input type="checkbox"/> DAILY REPORTS	<input type="checkbox"/> PAYROLL AFFIDAVITS
<b>MONTHLY ESTIMATE CHECKLIST</b>	
<input checked="" type="checkbox"/> CONTRACT NUMBER	<input checked="" type="checkbox"/> PROJECT NAME & LOCATION
<input checked="" type="checkbox"/> ALL SIGNATURES	

**CHANGE ORDERS**

Total \_\_\_\_\_

Adjusted Contract Amount \$ 256,789.00

**WORK ACCOMPLISHED**

**Basic Contract**

Completed to Date 48.98%	\$ <u>125,782.00</u>	\$ <del>125,782.00</del>	\$ <u>125,782.00</u>
Retained 5%	\$ <u>6,289.00</u>	\$ <del>6,289.00</del>	\$ <u>6,289.00</u>
Amount Subject to Payment	\$ <u>119,493.00</u>	\$ <del>119,493.00</del>	\$ <u>119,493.00</u>
Billing to Date #1	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
Payments Now Due	\$ <u>119,493.00</u>	\$ <del>119,493.00</del>	\$ <u>119,493.00</u>

Payment No. 1

Remarks:

1. Computed and Checked by:

[Signature] 6/22/09  
3. Recommended: Project Inspector or Engineer Date:

[Signature] 6/22/09  
4. Recommended: Area Engineer/Architect Date:

[Signature] JUN 22 2009  
5. Approved: Branch Chief or District Engineer Date:

[Signature] JUN 22 2009  
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.

Diversified Plumbing & Air Conditioning

Name of Contractor

[Signature]  
By signature / Title: Douglas E. Luiz II - Owner 18-Jun-09 Date

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



