

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

FOR THE MONTH OF JULY 2015

Date: August 18, 2015

CONTRACTOR: Allied Pacific Builders, Inc.

ADDRESS: 94-260 Pupuole Street

City, State ZIP: Waipahu, HI 96797

Contract No. 63440

DAGS Job No. 12-20-2663

PROJECT TITLE: Hawaii State Hospital Reroof Buildings
CONTRACT

Basic Contract Amount \$ 2,532,311.00

FOR INSPECTION BRANCH USE	
<input type="checkbox"/> SUBMITTAL REGISTER	<input type="checkbox"/> COMMENCEMENT REQUIREMENTS
DUE MONTHLY:	<input checked="" type="checkbox"/> PROJECT SCHEDULE
<input checked="" type="checkbox"/> DAILY REPORTS	<input checked="" type="checkbox"/> PAYROLL AFFIDAVIT
MONTHLY ESTIMATE CHECKLIST	
<input checked="" type="checkbox"/> PROJECT NAME AND LOCATION	<input checked="" type="checkbox"/> CONTRACT NUMBER
<input type="checkbox"/> AS NEEDED - WASTE REDUCTION PROGRESS REPORT	<input type="checkbox"/> ALL SIGNATURES
SPECIALTY / MISC:	
<input type="checkbox"/> AIR CONDITION ACCEPTANCE	<input type="checkbox"/> PAINT ACCEPTANCE

CHANGE ORDERS

Total \$ -

Adjusted Contract Amount \$ 2,532,311.00

WORK ACCOMPLISHED

		<u>Basic Contract</u>	<u>Change Order</u>	<u>Total</u>
Completed to Date	34.70%	\$ 878,720.00	\$ -	\$ 878,720.00
Retained	REDUCED <input type="checkbox"/>	\$ 49,825.00	\$ -	\$ 49,825.00
Amount Subject to Payment		\$ 828,895.00	\$ -	\$ 828,895.00
Payments to Date		\$ 488,150.00	\$ -	\$ 488,150.00
Payments Now Due		\$ 340,745.00	\$ -	\$ 340,745.00

Payment No. **FINAL** 2

Remarks: For projects already Accepted and/or Completed, delete Statement Of Contract Time and add. <input type="checkbox"/> Project Acceptance Date <input type="checkbox"/> Project Completion Date	FOR OFFICE USE ONLY

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 As a preferred contractor, I have submitted all apprenticeship approval forms.

1. Computed and Checked by:

[Signature] SEP 17 2015
 3. Recommended Project Inspector or Engineer Date

[Signature] SEP 17 2015
 4. Recommended Area Engineer/Architect Date

[Signature] SEP 17 2015
 5. Approved Branch/Chief or District Engineer Date

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

[Signature] SEP 18 2015
 for State Public Works Administrator Date

Allied Pacific Builders, Inc.
 Name of Contractor
[Signature] William Afcar/President 8/31/15
 By signature / Title Date

