

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

FOR THE MONTH OF October 2013

Date: October 22, 2013

CONTRACTOR: HSI MECHANICAL, INC.

ADDRESS: 227 PUUHALE RD.

City, State ZIP: HONOLULU, HI 96819

PROJECT TITLE: LEIOPAPA A KAMEHAMEHA BLDG
CONTRACT

Contract No. 61260 [/]

DAGS Job No. 62-10-0660

Basic Contract Amount \$ 2,112,430.00

CHANGE ORDERS

Total \$ 21,000.00

Adjusted Contract Amount \$ 2,133,430.00

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

WORK ACCOMPLISHED

| | | <u>Basic Contract</u> | | <u>Change Order</u> | | <u>Total</u> |
|---------------------------|-------------|-----------------------|--------|---------------------|----|--------------|
| Completed to Date | 35.06% | \$ 740,645 | 61.90% | \$ 13,000.00 | \$ | 753,645 |
| Retained | REDUCED [] | \$ 39,934.00 | | \$ 650.00 | \$ | 40,584.00 |
| Amount Subject to Payment | | \$ 700,711 | | \$ 12,350.00 | \$ | 713,061 |
| Payments to Date | | \$ 669,937.00 | | | \$ | 669,937.00 |
| Payments Now Due | | \$ 30,774 | | \$ 12,350.00 | \$ | 43,124 |

Payment No. FINAL [] 4

Remarks:

1. Computed and Checked by

Samuel L. Kudo OCT 31 2013
 3. Recommended: Project Inspector or Engineer Date

D. Moore OCT 31 2013
 4. Recommended: Area Engineer/Architect Date

Clyde K. Kuroki NOV 6 2013
 5. Approved: Branch Chief or District Engineer Date

Jim K. Hata NOV 06 2013
 The Public Works Administrator certifies that change orders have been issued and the work performed.
 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. []
 As preferred contractor, I have submitted all apprenticeship approval forms.

HSI MECHANICAL, INC.

Name of Contractor [Signature]

By signature / Title: Fred Moore, President 10/22/2013
 Date

STATE OF HAWAII
DEPARTMENT OF ACCOUNTING AND GENERAL SERVICES
DIVISION OF PUBLIC WORKS
Monthly Payment Slip

PAYMENT NO.: 4

PROJECT TITLE: LEIOPAPA A KAMEHAMEHA BLDG - REPLACE ROOF, AC
 CHILLER, COOLING TW, PUMPS & RISERS

BILLING MONTH: October-13

DAGS JOB NO.: 6 2-10-0660

CONTRACT NO.: 61260

CONTRACTOR: HSI MECHANICAL, INC.

VENDOR CODE: 24689301

| Original Contract Payment | | Suffix: 1, 2 | | |
|----------------------------------|--------------------|----------------------|------------------|-------------------|
| <u>Suffix</u> | <u>Fund Symbol</u> | <u>Amount Earned</u> | <u>Retainage</u> | <u>Amount Due</u> |
| 02 | B11-427M | \$34,192.00 | \$3,418.00 | \$30,774.00 |
| | | | | |
| | | | | |
| Totals: | | \$34,192.00 | \$3,418.00 | \$30,774.00 |

| Change Order Payment | | Suffix: 3 | | |
|-----------------------------|--------------------|----------------------|------------------|-------------------|
| <u>Suffix</u> | <u>Fund Symbol</u> | <u>Amount Earned</u> | <u>Retainage</u> | <u>Amount Due</u> |
| 03 | B11-427M | \$13,000.00 | \$650.00 | \$12,350.00 |
| | | | | |
| | | | | |
| Totals: | | \$13,000.00 | \$650.00 | \$12,350.00 |

| | | | |
|---------------------|-------------|------------|-------------|
| Grand Total: | \$47,192.00 | \$4,068.00 | \$43,124.00 |
|---------------------|-------------|------------|-------------|

Verified By Y Xu DATE 11/7/13

(This Section for Administrative Services Office Use Only)

Vendor Code 24689301

Cost Code 3A1

Voucher No. 11073N32

Verified By Pr NOV 15 2013