PROGRESS ESTIMATE

North Dakota Department of Transportation, Construction Services
SFN 59209 (3-2020)

Number

Contract Number		PCN		DOT RR No. or #
FHWA Authorization Date	Contract Date	Covering Period From	To	Project
Vendor				County

Address			Type	
City	State	ZIP	Contract Amount	Length

1. TOTAL WORK DONE TO DATE	
2. AUDIT ADJUSTMENT increase/(decrease)	
3. SUBTOTAL (line 1 plus or minus line 2)	
4. RETAINAGE % TO DATE	
5. PREVIOUS RETAINAGE (line 4, previous estimate)	
6. RETAINAGE THIS ESTIMATE (line 4 minus line 5)	

LIQUIDATED DAMAGES: (LD's)

7. DAYS TO DATE @ $ /DAY	
8. DAYS ON PREVIOUS ESTIMATE	
9. DAYS THIS PERIOD	
10. TOTAL DUE TO DATE (line 3 minus line 4, minus line 7)	
11. PREVIOUS PAYMENTS (line 10, previous estimate)	
12. PAYMENT DUE THIS ESTIMATE (line 10 minus line 11)	

DISTRIBUTION

Funding Source				
Funding Percent (optional)				
a. Total Work Done to Date (distribution of line 1 above)				
b. Audit Adjustment inc/(dec)				
c. Subtotal (distribution of line 3 above)				
d. Retainage (distribution of line 4 above)				
e. Less LD's (line 9 above)				
f. Total Due to Date (distribution of line 10 above)				
g. Less Previous Payments (distribution of line 11 above)				
h. Payment Due this Estimate (distribution of line 12 above)				

ASSIGNMENTS:

REMARKS:

CERTIFIED AS TO FORM, QUANTITIES OF WORK, PRICE, AND EXTENSIONS

Preparer's Signature	Date	District Engineer or Designee	Date
Organization/Title		DOT Central Office Check	

ESTIMATE APPROVED

Division Director/Engineer or Designee	Date