Project No.:       -

Project Name:

 YES NO General

1. [ ]  [ ]  “Project Name” and “Project Manager” are correct.
2. [ ]  [ ]  “Statement No.”, “for the Period ended” and “A/E Agreement Dated” are correct.
3. [ ]  [ ]  “Professional Liability Insurance Policy expiration date” is current.
4. [ ]  [ ]  Includes HUB payment forms Attachment H and/or I from Exhibit H.
5. [ ]  [ ]  Invoice has been stamped to show date received by Business Services.

 **YES NO Basic Services**

1. [ ]  [ ]  Is the “Construction Cost Limitation” (CCL) the same as the prior Pay Application? If no, answer question 6.
2. [ ]  [ ]  Does the CCL reflect the current approved amount? (A/E must attach copy of letter approving increase in CCL.) – Not Applicable
3. [ ]  [ ]  Compensation percentage rate is correct.
4. [ ]  [ ]  Basic Services Fee is correctly calculated (CCL x %)
5. [ ]  [ ]  The percentage complete for each phase of design and/or construction is accurate.
6. [ ]  [ ]  The “Amount Previously Billed” concurs with the prior billing, including any adjustments.

 **YES NO Additional Services & Change Order Services**

1. [ ]  [ ]  All executed Additional Service and/or Change Order Service has been listed by Additional Service Request number and/or Change Order number (on application or attached)
2. [ ]  [ ]  All “Additional Service Requests” and “Change Order Services” have been executed and the amounts indicated are correct.
3. [ ]  [ ]  If “Additional Service Request” is not a Lump Sum, than all required supplemental material is included; including a tabulation of hourly compensation by name, hours, and pay rate by the firm and/or consultants.

 **YES NO Reimbursable Expenses**

1. [ ]  [ ]  Expenses for travel within in the State of Texas are excluded if the principal address of the A/E firm is within Texas. This includes mileage, lodging and meals.
2. [ ]  [ ]  Expenses are listed in an itemized summary and all receipts/invoices are attached (credit card statements are not sufficient).
3. [ ]  [ ]  Travel expense limits from Texas to an Out-of-State location has been verified at the website-[*www.window.state.tx.us/comptrol/san/fm.notices.date.html/fm97/fm97-38a.html*](http://www.window.state.tx.us/comptrol/san/fm.notices.date.html/fm97/fm97-38a.html) and meals are less than or equal to the out-of-state rate and the lodging amounts are less than or equal to 40% above the out-of-state rate.
4. [ ]  [ ]  Automobile rental expenses are for moderate sized cars or smaller. (Related charges such as rental insurance, gasoline, parking, taxi services, and taxes may be reimbursed.)
5. [ ]  [ ]  Airline travel expenses are for coach class with rates near the state contract (web-site http://www.gsc.state.tx.us/travel/index.html). Airline travel and reservations were made at least seven (7) days prior to the departure date, unless specifically authorized otherwise.
6. [ ]  [ ]  Invoices do not include any mark-up on meals, lodging, airline, automobile and related travel expenses.
7. [ ]  [ ]  All expenses for shipping or mailing are directly related to the project.
8. [ ]  [ ]  Expenses for reproductions and printing have been specifically requested by the Owner.
9. [ ]  [ ]  Expenses excludes additional insurance coverage or limits not approved by the Owner.
10. [ ]  [ ]  Expenses excludes telephone charges or fax services.
11. [ ]  [ ]  Expenses excludes alcoholic beverages, laundry, valet service, entertainment.
12. [ ]  [ ]  Expenses exclude invoices billed or paid for on a previous pay application.

###  YES NO Recapitulation

1. [ ]  [ ]  “Net Amounts Due” and “Total to Date” are correct in all sections of Recapitulation and in line with totals on the first page.
2. [ ]  [ ]  The “Total Amount Previously Billed” concurs with the prior billing, including any adjustments.
3. [ ]  [ ]  The invoice is signed by an authorized office of the firm.

If the PM has checked any boxes on the checklist “NO”, the PM shall contact Business Services to discuss resolution prior to forwarding..

Completed By:       Date:

Contract Specialist:       Date: