



## QUARTERLY PROGRESS REPORT - Form A104

Grant Recipient Name: \_\_\_\_\_

Contract Number: \_\_\_\_\_

Region: \_\_\_\_\_

Quarter Reporting: \_\_\_\_\_

Year: \_\_\_\_\_

### Project Status

Project Status Code: \_\_\_\_\_

Other: \_\_\_\_\_

**STEP Fund:** Is this contract a STEP project?Yes ☐ No ☐

- ☐ Volunteer activity occurred this quarter (see TxDBG contract); documentation of volunteer hours is available in the local file.
- ☐ No volunteer activity occurred during this quarter.

Signature of Chief Elected Official \_\_\_\_\_

**Revised Schedule:** Is the project meeting the original Schedule C milestones?Yes ☐ No ☐

### Milestones

	<u>Actual Date Completed</u>	<u>Exhibit C Date</u>	<u>Mo. Diff from Exhibit C</u>	<u>Revised Schedule</u>	<u>Mo. Diff. from Revised Sch</u>
Contract Start Date:	_____			<input type="checkbox"/> Approved by TxDBG <input type="checkbox"/> Proposed, not yet approved	
All Professional Services Contracts Awarded:	_____			_____	
4-month Conference Call:	_____			_____	
Plans and Specs Completed/Approved by Locality:	_____			_____	
Environmental Review Submitted:	_____			_____	
All pre-construction Special Conditions cleared:	_____			_____	
Wage Rate 10-Day Confirmation:	_____			_____	
Construction Contract Awarded:	_____			_____	
50% of TxDBG funds obligated:	_____			_____	
Construction 50% Complete:	_____			_____	
Construction 75% Complete:	_____			_____	
Construction 90% Complete:	_____			_____	
Construction & Final Inspection Completed:	_____			_____	
Contract End Date:	_____			_____	
Project Completion Report Submitted:	_____			_____	

Note: dates displayed in the Exhibit C Date column are estimated based on the Contract Start Date entered. If these dates differ from the actual contract documents, the executed contract will contain the required date.

Notes / Comments on Current Status:

- ☐ Check this box to request technical assistance or a conference call to further explain the progress of the project.

### Project Schedule Status

- ☐ This project is **on schedule** (within three months) based on the Original Exhibit C Implementation Schedule
- ☐ This project is **on schedule** (within three months) based on a TxDBG approved Revised Implementation Schedule
- ☐ This project is 3 months or more **behind schedule**.

**This project is "On Schedule". Thank you for achieving milestones according to your contract's Project Implementation Schedule, Exhibit C. No local signature is required to complete this report.**

Grant Recipient Name: \_\_\_\_\_ Contract No: \_\_\_\_\_ Qtr:  Year:

## Part II - Projects "Behind Schedule"

### Complete the following questions:

Project Delays: Select reasons (if any) the project has been delayed this quarter and explain below

Date Anticipated  
to be Resolved

Explanation:

List other specific obstacles preventing this project from meeting the milestone target dates:

List specific actions needed to complete the project within the contract period or revised Implementation Schedule (approved by TDA):

Provide estimated date (or month) that all construction under this contract will be complete:

☐ Check this box to request technical assistance or a conference call to further explain the progress of the project.

Signature of Chief Local Elected Official

TxCDBG approval for proposed Revised Implementation Schedule: \_\_\_\_\_