



Fort Bend County
Construction Inspection Services

Application For Payment Number 9

Fort Bend County
Attn: Mr. Sean Eglinton, P.E.
301 Jackson Street, Suite 401
Houston, Texas 77469

DATE: January 11, 2022
INVOICE NO: 9
CONTRACT AMOUNT: \$513,456.00
DUE DATE: 10-Feb-22
PROJECT: Fort Bend County
Construction Inspection Services
INVOICE PERIOD: November 28, 2021 to January 1, 2022
PO NO: 187123

Remit to: **Brian Smith Construction Inspection, Inc.**
Attn: Brian G. Smith
1802 Calumet
Houston, Texas 77004
Tel: (713) 529-4949

	<u>Previous Invoices</u>	<u>Total to Date</u>	<u>This Invoice</u>	<u>Total to Date</u>
Labor Cost	\$111,200.80	\$117,825.60	\$6,624.80	
		<u>\$0.00</u>	<u>\$0.00</u>	24.93%
Other Direct Costs	\$111,200.80	\$117,825.60	\$6,624.80	
	<u>\$9,600.00</u>	<u>\$10,200.00</u>	<u>\$600.00</u>	
TOTAL CONTRACT	\$120,800.80	\$128,025.60	\$7,224.80	

PROJECT STATUS TO DATE

Total Billed This Invoice: **\$7,224.80**
Previous Invoices Submitted: **\$120,800.80**

Total Billed To Date: \$128,025.60
Less Payments Received: **\$120,800.80**
Total Now Due From Contract: **\$7,224.80**

This invoice is due and payable ten (10) days after owner approval and payment to prime.

SUBMITTED:

APPROVED:

A handwritten signature in blue ink, appearing to read 'Brian G. Smith', is written over a horizontal line.

Brian G. Smith, President
Brian Smith Construction Inspection, Inc.

A handwritten signature in blue ink, appearing to read 'Sean Eglinton', is written over a horizontal line.
Fort Bend County

1/18/2022

Time Sheet Summary
Application for Payment Number 9

Mustafa Jalal

Week Ending	Regular	O/T
12/04/21		
12/11/21		
12/18/21		
12/25/21	37	
01/01/22	40	5
Total Hours	77	5

Week Ending	Regular	O/T
Total Hours	0	0

Labor Summary

EMPLOYEE	CLASSIFICATION	REG. HOURS WORKED	OVERTIME HOURS	Billable RATE	OVERTIME RATE		TOTAL LABOR COST
Mustafa Jalal	Inspector	77	5.0	\$78.40	\$117.60		\$6,624.80
							\$0.00

Audited 8/15/2019

LABOR COST THIS PERIOD

\$6,624.80

OTHER DIRECT COSTS

Vehicle Allowance	Prorated - \$1,000.00 * 50% = 500.00	\$	500.00
Computer w/ internet	Prorated - \$100.00 * 50% = \$50.00	\$	50.00
Cellular Telephone	Prorated - \$100.00 * 50% = \$50.00	\$	50.00
Reproduction Costs		\$	-
Toll Charges		\$	-
Other Miscellaneous Material		\$	-

Total Costs	\$ 600.00
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OTHER DIRECT COST THIS PERIOD	\$	600.00
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TOTAL LABOR AND OTHER DIRECT COSTS

\$7,224.80

Contract Summary

					TOTAL INVOICED	AMOUNT RECEIVED	DATE RECEIVED
INVOICE DATE	INVOICE NO.	BSCI	0%				
5/18/2020	1	\$ 16,135.20	\$ -		\$ 16,135.20	\$ 16,135.20	6/15/2020
6/3/2020	2	\$ 14,136.00	\$ -		\$ 14,136.00	\$ 14,136.00	8/14/2020
7/1/2020	3	\$ 12,568.00	\$ -		\$ 12,568.00	\$ 12,568.00	9/8/2020
5/7/2021	4	\$ 10,206.40	\$ -		\$ 10,206.40	\$ 10,206.40	9/8/2020
5/11/2021	5	\$ 10,764.80	\$ -		\$ 10,764.80	\$ 10,764.80	7/13/2021
6/14/2021	6	\$ 22,289.60	\$ -		\$ 22,289.60	\$ 22,289.60	7/13/2021
6/14/2021	7	\$ 16,997.60	\$ -		\$ 16,997.60	\$ 16,997.60	7/13/2021
7/7/2021	8	\$ 17,703.20	\$ -		\$ 17,703.20	\$ 17,703.20	10/4/2021
1/6/2022	9	\$ 7,224.80	\$ -		\$ 7,224.80		
			\$ -		\$ -		
			\$ -		\$ -		
			\$ -		\$ -		
			\$ -		\$ -		
TOTAL		\$ 128,025.60	\$ -	\$ -	\$ 128,025.60	\$ 120,800.80	\$ 7,224.80
Contract Amount		\$ 513,456.00					
Percent Complete		24.93%					
Balance on Contract		\$ 385,430.40					



Brian Smith
CONSTRUCTION
INSPECTION, INC.

TIME SHEET

NAME: Mustafa jalal JOB TITLE: inspector

DATE: 12/25/2021

EMPLOYEE ID #: _____

PERIOD: 12/19/21 TO 12/25/21

PROJECT NAME / REF. NUMBER

PROJECT NO.	DAYS	Sun.	M	Tu	W	Th	F	Sa	TOTALS
<input checked="" type="checkbox"/> TASK NO./ACTIVITY CODE	DATE	12/19	12/20	12/21	12/22	12/23	12/24	12/25	
Rohan rd	R.T.		9.5						53
<input checked="" type="checkbox"/>	O.T.								
Rohan rd	R.T.			9.00					
<input checked="" type="checkbox"/>	O.T.								
Rohan rd	R.T.				9.5				
<input checked="" type="checkbox"/>	O.T.								
Rohan rd	R.T.					9.00			
<input checked="" type="checkbox"/>	O.T.								
	R.T.								
<input checked="" type="checkbox"/>	O.T.								
	R.T.								
<input checked="" type="checkbox"/>	O.T.								
	R.T.								
<input checked="" type="checkbox"/>	O.T.								
	R.T.								
<input checked="" type="checkbox"/>	O.T.								
	R.T.								
<input checked="" type="checkbox"/>	O.T.								
HOLIDAY							8.00	8.00	
SICK									
VACATION									
OTHER									
TOTAL HOURS									

REMARKS:

EMPLOYEE SIGNATURE MMJ DATE 12/25
SUPERVISOR'S SIGNATURE _____ DATE _____
APPROVAL SIGNATURE _____ DATE _____



Brian Smith
CONSTRUCTION
INSPECTION, INC.

TIME SHEET

NAME: mustafa jalal JOB TITLE: inspector

DATE: 01/01/2022

EMPLOYEE ID #: _____

PERIOD: 12/26/2021 TO 01/01/2022

PROJECT NAME / REF. NUMBER

PROJECT NO.	DAYS	Sun.	M	Tu	W	Th	F	Sa	TOTALS
<input checked="" type="checkbox"/> TASK NO./ACTIVITY CODE	DATE	12/26	12/27	12/28	12/29	12/30	12/31	01/01	
<input checked="" type="checkbox"/> Rohan Rd	R.T.		4	3					7
	O.T.								
<input checked="" type="checkbox"/> Bryan Rd	R.T.		6	6	9	11	1		38
	O.T.						5		
<input checked="" type="checkbox"/>	R.T.								
	O.T.								
<input checked="" type="checkbox"/>	R.T.								
	O.T.								
<input checked="" type="checkbox"/>	R.T.								
	O.T.								
<input checked="" type="checkbox"/>	R.T.								
	O.T.								
<input checked="" type="checkbox"/>	R.T.								
	O.T.								
<input checked="" type="checkbox"/>	R.T.								
	O.T.								
<input checked="" type="checkbox"/>	R.T.								
	O.T.								
<input checked="" type="checkbox"/>	R.T.								
	O.T.								
HOLIDAY									
SICK									
VACATION									
OTHER									
TOTAL HOURS									45

REMARKS:

EMPLOYEE SIGNATURE MMJ DATE 01/01/2022
SUPERVISOR'S SIGNATURE _____ DATE _____
APPROVAL SIGNATURE _____ DATE _____