



Fort Bend County
Construction Inspection Services

Application For Payment Number 11

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

DATE: March 6, 2022
INVOICE NO: 11
CONTRACT AMOUNT: \$513,456.00
DUE DATE: 5-Apr-22
PROJECT: Fort Bend County
Construction Inspection Services
INVOICE PERIOD: January 30, 2022 to February 26, 2022

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	\$133,074.40	\$147,813.60	\$14,739.20	
		\$0.00	\$0.00	31.24%
Other Direct Costs	\$133,074.40	\$147,813.60	\$14,739.20	
	<u>\$11,400.00</u>	<u>\$12,600.00</u>	<u>\$1,200.00</u>	
TOTAL CONTRACT	\$144,474.40	\$160,413.60	\$15,939.20	

PROJECT STATUS TO DATE

Total Billed This Invoice: **\$15,939.20**
Previous Invoices Submitted: \$144,474.40

Total Billed To Date: \$160,413.60
Less Payments Received: \$128,025.60

Total Now Due From Contract: **\$32,388.00**

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

SUBMITTED:

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

APPROVED:

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

3/21/2022

Time Sheet Summary
Application for Payment Number 11

Mustafa Jalal

Week Ending	Regular	O/T
02/05/22	20	
02/12/22	40	20
02/19/22	40	8.5
02/26/22	40	3.5
Total Hours	140	32

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	140	32.0	\$78.40	\$117.60		\$14,739.20
							\$0.00

Audited 8/15/2019

LABOR COST THIS PERIOD

\$14,739.20

OTHER DIRECT COSTS

Vehicle Allowance	\$	1,000.00
Computer w/ internet	\$	100.00
Cellular Telephone	\$	100.00
Reproduction Costs	\$	-
Toll Charges	\$	-
Other Miscellaneous Material	\$	-
Total Costs	\$	1,200.00

OTHER DIRECT COST THIS PERIOD

\$ 1,200.00

TOTAL LABOR AND OTHER DIRECT COSTS

\$15,939.20

Contract Summary

INVOICE DATE	INVOICE NO.	BSCI	0%		TOTAL INVOICED	AMOUNT RECEIVED	DATE RECEIVED
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	\$ 7,224.80	1/28/2022
1/31/2022	10	\$ 16,448.80	\$ -		\$ 16,448.80		
2/28/2022	11	\$ 15,939.20	\$ -		\$ 15,939.20		
			\$ -		\$ -		
			\$ -		\$ -		
TOTAL		\$ 160,413.60	\$ -	\$ -	\$ 160,413.60	\$ 128,025.60	\$ 32,388.00
Contract Amount		\$ 513,456.00					
Percent Complete		31.24%					
Balance on Contract		\$ 353,042.40					



Brian Smith
CONSTRUCTION
INSPECTION, INC.

TIME SHEET

NAME: mustafa jalal JOB TITLE: inspector

DATE: 02/05/2022

EMPLOYEE ID #: _____

PERIOD: 01/30/2022 TO 02/05/2022

PROJECT NAME / REF. NUMBER

PROJECT NO.	DAYS	Sun.	M	Tu	W	Th	F	Sa	TOTALS
<input checked="" type="checkbox"/> TASK NO./ACTIVITY CODE	DATE	01/30	01/31	02/01	02/02	02/03	01/04	01/05	
Rohan Rd	R.T.	0	4	2	2	1	1	0	10
<input checked="" type="checkbox"/>	O.T.								
Bryan Rd	R.T.	0	4	2	2	1	1	0	10
<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.								
	R.T.								
<input checked="" type="checkbox"/>	O.T.								
HOLIDAY									
SICK									
VACATION									
OTHER									
TOTAL HOURS									20

REMARKS:

EMPLOYEE SIGNATURE MMJ DATE 02/05/2022
SUPERVISOR'S SIGNATURE _____ DATE _____
APPROVAL SIGNATURE _____ DATE _____



Brian Smith
CONSTRUCTION
INSPECTION, INC.

TIME SHEET

NAME: Mustafa Jalal JOB TITLE: inspector

DATE: 02/12/2022

EMPLOYEE ID #: _____

PERIOD: 02/06/2022 TO 02/12/2022

PROJECT NAME / REF. NUMBER

PROJECT NO.	DAYS	Sun.	M	Tu	W	Th	F	Sa	TOTALS
<input checked="" type="checkbox"/> TASK NO./ACTIVITY CODE	DATE	02/06	02/07	02/08	02/09	02/10	02/11	02/12	
Rohan Rd	R.T.	9.0	10.0	5.0	10.5	0.0		0.0	34.5
<input checked="" type="checkbox"/>	O.T.						4.0		4.0
Bryan Rd	R.T.	0.0	0.0	4.0	0.0	1.5			5.5
<input checked="" type="checkbox"/>	O.T.					7.0	5.0	4.0	16.0
	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.								
	R.T.								
<input checked="" type="checkbox"/>	O.T.								
HOLIDAY									
SICK									
VACATION									
OTHER									
TOTAL HOURS									60.0

REMARKS:

EMPLOYEE SIGNATURE MMJ DATE 02/12/2022
SUPERVISOR'S SIGNATURE _____ DATE _____
APPROVAL SIGNATURE _____ DATE _____



Brian Smith
CONSTRUCTION
INSPECTION, INC.

TIME SHEET

NAME: mustafa jalal JOB TITLE: inspector

DATE: 02/20/2022

EMPLOYEE ID #: _____

PERIOD: 02/13/2022 TO 02/19/2022

PROJECT NAME / REF. NUMBER

PROJECT NO.	DAYS	Sun.	M	Tu	W	Th	F	Sa	TOTALS
<input checked="" type="checkbox"/> TASK NO./ACTIVITY CODE	DATE	02/13	02/14	02/15	02/16	02/17	02/18	02/19	
Rohan Rd	R.T.	0.0	0.0	0.0	4.0	2.0	0.0	0.0	6.0
<input checked="" type="checkbox"/>	O.T.								
Bryan Rd	R.T.	0	10	9.5	4.0	2.0	8.0	0.5	34.0
<input checked="" type="checkbox"/>	O.T.							8.5	8.5
<input checked="" type="checkbox"/>	R.T.								
<input checked="" type="checkbox"/>	O.T.								
<input checked="" type="checkbox"/>	R.T.								
<input checked="" type="checkbox"/>	O.T.								
<input checked="" type="checkbox"/>	R.T.								
<input checked="" type="checkbox"/>	O.T.								
<input checked="" type="checkbox"/>	R.T.								
<input checked="" type="checkbox"/>	O.T.								
<input checked="" type="checkbox"/>	R.T.								
<input checked="" type="checkbox"/>	O.T.								
<input checked="" type="checkbox"/>	R.T.								
<input checked="" type="checkbox"/>	O.T.								
HOLIDAY									
SICK									
VACATION									
OTHER									
TOTAL HOURS									48.5

REMARKS:

EMPLOYEE SIGNATURE MMJ DATE 02/20/2022
SUPERVISOR'S SIGNATURE _____ DATE _____
APPROVAL SIGNATURE _____ DATE _____



Brian Smith
CONSTRUCTION
INSPECTION, INC.

TIME SHEET

NAME: Mustafa Jalal JOB TITLE: inspector

DATE: 02/26/2022

EMPLOYEE ID #: _____

PERIOD: 02/20/2022 TO 02/26/2022

PROJECT NAME / REF. NUMBER

PROJECT NO.	DAYS	Sun.	M	Tu	W	Th	F	Sa	TOTALS
<input checked="" type="checkbox"/> TASK NO./ACTIVITY CODE	DATE	02/20	02/21	02/22	02/23	02/24	02/25	02/26	
Bryan Rd	R.T.	0.0	12.0	8.5	7.0	8.0	4.5	0.0	40.0
<input checked="" type="checkbox"/>	O.T.						3.5		3.5
Rohan Rd	R.T.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0
<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.								
	R.T.								
<input checked="" type="checkbox"/>	O.T.								
HOLIDAY									
SICK									
VACATION									
OTHER									
TOTAL HOURS									43.5

REMARKS:

EMPLOYEE SIGNATURE MMJ DATE 02/26/2022
SUPERVISOR'S SIGNATURE _____ DATE _____
APPROVAL SIGNATURE _____ DATE _____