



Fort Bend County
Construction Inspection Services

Application For Payment Number 15

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

DATE: July 6, 2022
INVOICE NO: 15
CONTRACT AMOUNT: \$513,456.00
DUE DATE: 5-Aug-22
PROJECT: Fort Bend County
Construction Inspection Services
INVOICE PERIOD: May 29, 2022 - July 2, 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	\$198,636.40	\$219,079.20	\$20,442.80	
		<u>\$0.00</u>	<u>\$0.00</u>	46.06%
Other Direct Costs	\$198,636.40	\$219,079.20	\$20,442.80	
	<u>\$16,200.00</u>	<u>\$17,400.00</u>	<u>\$1,200.00</u>	
TOTAL CONTRACT	\$214,836.40	\$236,479.20	\$21,642.80	

PROJECT STATUS TO DATE

Total Billed This Invoice: **\$21,642.80**
Previous Invoices Submitted: \$214,836.40

Total Billed To Date: \$236,479.20
Less Payments Received: \$198,074.00

Total Now Due From Contract: **\$38,405.20**

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

7/19/2022

Time Sheet Summary
Application for Payment Number 15

Mustafa Jalal

Week Ending	Regular	O/T
06/04/22	40	1
06/11/22	40	14
06/18/22	40	9
06/25/22	40	7
07/02/22	40	9.5
Total Hours	200	40.5

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	200	40.5	\$78.40	\$117.60		\$20,442.80
							\$0.00

Audited 8/15/2019

LABOR COST THIS PERIOD

\$20,442.80

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

\$21,642.80

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	\$ 16,448.80	3/4/2022
2/28/2022	11	\$ 15,939.20	\$ -		\$ 15,939.20	\$ 15,939.20	4/8/2022
4/5/2022	12	\$ 17,389.60	\$ -		\$ 17,389.60	\$ 17,389.60	4/28/2022
5/3/2022	13	\$ 20,858.80			\$ 20,858.80	\$ 20,270.80	6/14/2022
5/31/2022	14	\$ 16,762.40			\$ 16,762.40		
7/5/2022	15	\$ 21,642.80			\$ 21,642.80		
			\$ -		\$ -		
			\$ -	\$ -	\$ 237,067.20	\$ 198,074.00	\$ 38,993.20
	TOTAL	\$ 237,067.20	\$ -	\$ -	\$ 237,067.20	\$ 198,074.00	\$ 38,993.20
	Contract Amount	\$ 513,456.00					
	Percent Complete	46.17%					
	Balance on Contract	\$ 276,388.80					



Brian Smith
CONSTRUCTION
INSPECTION, INC.

TIME SHEET

NAME: mustafa jalal JOB TITLE: inspector

DATE: 06/04/2022

EMPLOYEE ID #: _____

PERIOD: 05/29/2022 TO 06/04/2022

PROJECT NAME / REF. NUMBER

PROJECT NO.	DAYS	Sun.	M	Tu	W	Th	F	Sa	TOTALS
<input checked="" type="checkbox"/> TASK NO./ACTIVITY CODE	DATE	05/29	05/30	05/31	06/01	06/02	06/03	06/04	
Rohan Rd	R.T.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.00
<input checked="" type="checkbox"/>	O.T.								
Bryan Rd	R.T.	00.00	00.00	09.50	08.00	08.00	08.00	06.50	40.00
<input checked="" type="checkbox"/>	O.T.							01.00	01.00
<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			08.00						08.00
SICK									
VACATION									
OTHER									
TOTAL HOURS									49.00

REMARKS:

EMPLOYEE SIGNATURE MMJ DATE 06/04/2022
SUPERVISOR'S SIGNATURE _____ DATE _____
APPROVAL SIGNATURE _____ DATE _____



Brian Smith
CONSTRUCTION
INSPECTION, INC.

TIME SHEET

NAME: mustafa jalal JOB TITLE: inspector

DATE: 06/11/2022

EMPLOYEE ID #: _____

PERIOD: 06/05/2022 TO 06/11/2022

PROJECT NAME / REF. NUMBER

PROJECT NO.	DAYS	Sun.	M	Tu	W	Th	F	Sa	TOTALS
<input checked="" type="checkbox"/> TASK NO./ACTIVITY CODE	DATE	06/05	06/06	06/07	06/08	06/09	06/10	06/11	
Rohan Rd	R.T.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.00
<input checked="" type="checkbox"/>	O.T.							04.00	04.00
Bryan Rd	R.T.	00.00	09.00	09.00	08.00	10.00	04.00	0.00	40.00
<input checked="" type="checkbox"/>	O.T.						06.00	04.00	10.00
<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									54.00

REMARKS:

EMPLOYEE SIGNATURE MMJ DATE 06/11/2022
SUPERVISOR'S SIGNATURE _____ DATE _____
APPROVAL SIGNATURE _____ DATE _____



Brian Smith
CONSTRUCTION
INSPECTION, INC.

TIME SHEET

NAME: Mustafa jalal JOB TITLE: Inspector

DATE: 06/18/2022

EMPLOYEE ID #: _____

PERIOD: 06/12/2022 TO 06/18/2022

PROJECT NAME / REF. NUMBER

PROJECT NO.	DAYS	Sun.	M	Tu	W	Th	F	Sa	TOTALS
<input checked="" type="checkbox"/> TASK NO./ACTIVITY CODE	DATE	06/12	06/13	06/14	06/15	06/16	06/17	06/18	
Rohan Rd	R.T.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.00
<input checked="" type="checkbox"/>	O.T.								
Bryan Rd	R.T.	00.00	10.00	10.00	11.00	08.00	01.00	0.00	40.00
<input checked="" type="checkbox"/>	O.T.						09.00		09.00
<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									49.00

REMARKS:

EMPLOYEE SIGNATURE MMJ DATE 06/18/2022
SUPERVISOR'S SIGNATURE _____ DATE _____
APPROVAL SIGNATURE _____ DATE _____



Brian Smith
CONSTRUCTION
INSPECTION, INC.

TIME SHEET

NAME: Mustafa jalal JOB TITLE: Inspector

DATE: 06/25/2022

EMPLOYEE ID #: _____

PERIOD: 06/19/2022 TO 06/25/2022

PROJECT NAME / REF. NUMBER

PROJECT NO.	DAYS	Sun.	M	Tu	W	Th	F	Sa	TOTALS
<input checked="" type="checkbox"/> TASK NO./ACTIVITY CODE	DATE	06/19	06/20	06/21	06/22	06/23	06/24	06/25	
Rohan Rd	R.T.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.00
<input checked="" type="checkbox"/>	O.T.								
Bryan Rd	R.T.	00.00	7.00	10.00	08.00	10.00	05.00	0.00	40.00
<input checked="" type="checkbox"/>	O.T.						03.00	04.00	07.00
<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									47.00

REMARKS:

EMPLOYEE SIGNATURE MMJ DATE 06/25/2022
SUPERVISOR'S SIGNATURE _____ DATE _____
APPROVAL SIGNATURE _____ DATE _____



Brian Smith
CONSTRUCTION
INSPECTION, INC.

TIME SHEET

NAME: Mustafa jalal JOB TITLE: Inspector

DATE: 07/02/2022

EMPLOYEE ID #: _____

PERIOD: 06/26/2022 TO 07/02/2022

PROJECT NAME / REF. NUMBER

PROJECT NO.	DAYS	Sun.	M	Tu	W	Th	F	Sa	TOTALS
<input checked="" type="checkbox"/> TASK NO./ACTIVITY CODE	DATE	06/26	06/27	06/28	06/29	06/30	07/01	07/02	
Rohan Rd	R.T.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.00
<input checked="" type="checkbox"/>	O.T.								
Bryan Rd	R.T.	00.00	08.00	08.00	09.50	07.00	07.50	0.00	40.00
<input checked="" type="checkbox"/>	O.T.						01.50	08.00	09.50
<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									49.50

REMARKS:

EMPLOYEE SIGNATURE MMJ DATE 07/02/2022
SUPERVISOR'S SIGNATURE _____ DATE _____
APPROVAL SIGNATURE _____ DATE _____