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 TxCDBG 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

	Actual Date Completed	Exhibit C Date	Mo. Diff from Exhibit C	Revised Schedule	Mo. Diff. from Revised Sch
Contract Start Date:				☐ Approved by TxCDBG ☐ 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 TxCDBG 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 TxCDBG 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.

This form required as of July 2, 2012. All previous versions no longer valid.

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

Add R

-

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: _____

This form required as of July 2, 2012. All previous versions no longer valid.