



## ECONOMIC DEVELOPMENT ADMINISTRATION QUARTERLY PERFORMANCE REPORT

EDA Project No. \_\_\_\_\_ Report No. \_\_\_\_\_ Date \_\_\_\_\_

Covering Period from \_\_\_\_\_ Thru \_\_\_\_\_

Grantee \_\_\_\_\_

Grantee's Authorized Representative \_\_\_\_\_

Name & Title

Grantee's Architect/Engineer \_\_\_\_\_

Name & Phone Number

### **CURRENT PROJECT STATUS:**

- |      | YES | NO  |   |
|------|-----|-----|---|
| I.   | ___ | ___ | Is the Grantee's share of expected project costs on hand and immediately available? If no, explain in <i>Narrative</i> section.               |
| II.  | ___ | ___ | Have all land, rights-of-way, and easements necessary for the project been acquired? If no, explain in <i>Narrative</i> section.              |
| III. | ___ | ___ | Are any problems expected in meeting any of the Special Award Conditions to the EDA grant award? If yes, explain in <i>Narrative</i> section. |

### **A. DESIGN:**

Date Architect/Engineer Agreement Executed \_\_\_\_\_.

1. Has design started? \_\_\_ YES Design start date \_\_\_\_\_.

\_\_\_ NO Expected start date \_\_\_\_\_.

2. Is design complete? \_\_\_ YES Completion date \_\_\_\_\_.

P & S approved by EDA? \_\_\_ YES \_\_\_ NO

\_\_\_ NO Expected completion date \_\_\_\_\_.

Percent complete \_\_\_\_\_.

On schedule? \_\_\_ YES \_\_\_ NO (*Narrative*)

### **B. AWARD:**

3. First advertisement for bids date \_\_\_\_\_.

4. Bid opening date \_\_\_\_\_.

5. Contract Award date \_\_\_\_\_.

6. Notice to Proceed issued \_\_\_\_\_.

7. Preconstruction Conference date \_\_\_\_\_.

### **C. CONSTRUCTION:**

8. Has construction started? \_\_\_ YES Start date \_\_\_\_\_.

\_\_\_ NO Expected start date \_\_\_\_\_.

9. Is construction complete? \_\_\_ YES Completion date \_\_\_\_\_.

\_\_\_ NO Expected completion date \_\_\_\_\_.

Percent complete \_\_\_\_\_.

On schedule? \_\_\_ YES \_\_\_ NO (*Narrative*)

10. EDA's original estimated start date is \_\_\_\_\_

11. EDS's original estimated completion date is \_\_\_\_\_

**D. NARRATIVE SECTION (PROBLEMS/DELAYS):**  
*(if more space is required, attach a separate sheet)*

**E. CORRECTIVE MEASURES BEING TAKEN:**  
*(if more space is required, attach a separate sheet)*

Quarterly Performance Report Prepared By:

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Signature

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Typed Name and Title