



ECONOMIC DEVELOPMENT ADMINISTRATION
QUARTERLY PROGRESS REPORT

EDA Project No. _____ Report No. _____ Date _____

Covering Period from _____ Thru _____

Recipient _____

Co-Recipient _____

Authorized Representative _____

Name & Title

Recipient'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 Section E.
- II. ___ ___ Have all land, rights-of-way, and easements necessary for the project been acquired? If no, explain in Section E.
- III. ___ ___ Are any problems expected in meeting any of the Special Award Conditions to the EDA grant award? If yes, explain in Section E.
- IV. ___ ___ Have any Primary Beneficiaries been lost, changed, or added to the project? If yes, explain in Section E.

A. DESIGN: *(Provide tentative dates if actual dates are not known)*

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 *(Section E)*

B. AWARD: *(Provide tentative dates if actual dates are not known)*

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: *(Provide tentative dates if actual dates are not known)*

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 *(Section E)*

10. EDA's original/amended estimated construction start date is _____

11. EDA's original/amended estimated construction completion date is _____

D. NARRATIVE SECTION:

(Provide summary of reporting period activities - if more space is required, attach a separate sheet)

E. PROBLEMS/DELAYS & CORRECTIVE MEASURES BEING TAKEN:

(Provide a summary of problems, delays, issues and corrective measures being taken - if more space is required, attach a separate sheet)

Prepared By (Signature)

Date

Prepared By (Typed or Written Name & Title)