EXHIBIT G

UTILITY OWNER REIMBURSEMENT INVOICE FORM

Utility Owner Name: Address: FEIN #:	CDOT Project No: Sub Account No: Location: Utility Owner Project No:
PSURA Number and Date Executed:	Work Order Number and Date Executed:
This Invoice Number and Date:	Estimated Percentage of Work Completed per this Work Order: %

Please complete for either Lump Sum or Actual Cost

LUMP SUM
Lump Sum: $
Previously Billed: $
This Invoice: $
Remaining: $
Comments:

ACTUAL COST
Actual Cost (Estimated cost not to exceed): $
Previously Billed: $
This Invoice: $
Remaining: $
Comments:

Fully executed Exhibit I (2) (Contractor Utility Relocation Plan Acceptance Letter) must be attached to Final Billing for Design

Fully executed Exhibit F (2) (Contractor Construction Acceptance Letter) must be attached to Final Billing for construction

Reimbursement for Right-of-Way or easement costs shall be invoiced separately.

I, the undersigned, certify on behalf of the Owner that: 1) all bills that support this Invoice/Payment Request are attached; 2) the attached Billing Sheet has been completed in full concerning this Invoice/Payment Request; 3) the Total Current Payment Request described above complies with all applicable PSURA and Work Order terms.

_____ _____ _____

Utility Owner Signature Title Date