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| Attention | | | Type here | | | | |
| Sender's name | | | Type here | | | | |
| Sender's telephone number (if transmission errors) | | | Type here | | | | |
| Month / Year of Progress Claim | | | Type here | | | | |
| In accordance with Clause 6.2 of the *General Conditions of Contract* (C7545) the following is submitted for your consideration and payment: | | | | | | | |
| Lump Sum Amounts | | | | | | | |
| Item / Code | Description | Original Contract  Amount ($) | | Total Claimed  to date ($) | | Previous Claim ($) | This Claim ($) |
| PM | Project Management | Type here | | Type here | | Type here | Type here |
| DP | Preliminary Design | Type here | | Type here | | Type here | Type here |
| RSA2 | Road Safety Audit – Stage 2 | Type here | | Type here | | Type here | Type here |
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| Total – Lump Sum Amounts | | Type here | | Type here | | Type here | Type here |
| Total – As Ordered / Hourly Rates | | Type here | | Type here | | Type here | Type here |
| Total – Approved Variations | | Type here | | Type here | | Type here | Type here |
| **GRAND TOTAL**\* excludes GST | | Type here | | Type here | | Type here | Type here |

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| Submission | | |
| For and on behalf of the Consultant | | |
| Name / Position | Signature | Date |
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| As Ordered / Hourly Rate Amounts | | | | |
| Code /  HRO Number | Maximum  Amount  ($) | Total Claimed  to Date  ($) | Previous Claim ($) | This Claim ($) |
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| Approved Variations | | | | | |
| VO Number | Price Basis | Estimated Amount ($) | Total Claimed  to Date  ($) | Previous Claim ($) | This Claim ($) |
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