

Exhibit 16-US Supplemental Potential Claim Record

FOR AGENCY USE ONLY
Received by: _____ (For Resident Engineer)
Date: _____

TO (RESIDENT ENGINEER)	CONTRACT NUMBER	DATE	IDENTIFICATION NUMBER
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This is a Supplemental Potential Claim Record for additional compensation and/or days submitted as required under the provisions of Section 5-1.43, "Potential Claims and Dispute Resolution," of Standard Specifications. The initial potential claim record was submitted on: _____

The particular nature and circumstances of this potential claim are described as follows:

The basis of this potential claim including all relevant contract provisions and a statement of the reasons these provisions support and provide basis for entitlement of the potential claim is as follows:

The estimated dollar cost of the potential claim including a description of how the estimate was derived and an itemized breakdown of individual costs are attached.

A time impact analysis of the disputed disruption has been performed and is attached. The effect on the scheduled project completion date is as follows:

The undersigned originator (contractor or subcontractor as appropriate) certifies that the above statements and attached documents are made in full cognizance of the California False Claims Act, Government Code Sections 12650-12655. The undersigned also understands and agrees that this potential claim to be further considered, unless resolved, must fully conform to the requirements in Section 5-1.43, "Potential Claims and Dispute Resolution," of the *Standard Specifications* and must be restated as a claim in the contractor's written claim statement in conformance with Section 9-1.17D, "Final Payment and Claims" of the *Standard Specifications*.

SUBCONTRACTOR CONTRACTOR

(Authorized Representative)

For a subcontractor potential claim

This potential claim record is acknowledged, certified, and forward by:

PRIME CONTRACTOR

(Authorized Representative)