

IOR Estimated hours and fees – Worksheet (Estimated Weekly Hours shall include project inspection, meetings & travel time, etc.)

IOR Firm: _____

Name of IOR Inspector: _____

Projects	Estimated Hours/Week from IOR (Average for each month for the duration of the project)
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Project Name	Month	Month	Month	Month	Month	Month	Month
Average Total Monthly Hours							
Estimated Monthly Fees							
Total Fees:							

Hourly rate: _____

DSA App. No.: _____

DSA File No.: _____

Prepared by: _____ Date: _____

Project Cost: _____