

**CERTIFIED CLAIM
MONTANA DEPARTMENT OF TRANSPORTATION**

**CERTIFICATION OF EACH PART OF A CLAIM IS AN ABSOLUTE
PREREQUISITE TO A CLAIM BEING CONSIDERED BY THE DEPARTMENT
DO NOT ALTER THE LANGUAGE OF THIS FORM!**

PROJECT NAME

PROJECT NUMBER

Anyone knowingly presenting a claim, any part of which is found to be false or fraudulent, is subject to the criminal penalties of §45-7-210, MCA, and civil liabilities of §17-8-403, MCA, in addition to criminal and civil penalties applicable under Federal law.

The Contractor understands and agrees that, under its contract with the Department, it must certify any claim. Failure to fully certify the claim as required herein is a failure to utilize the Department's procedure for dispute settlement, and bars further administrative or judicial review of the claim.

Understanding the above, and with the intent to obtain the claimed amount from the State, the Contractor by the undersigned certifies that:

- a this claim is made in good faith;
- b the Contractor has fully reviewed the claim and its supporting data, including its project records (and the project records of any Subcontractor work associated with the Contractor's claim) to ensure that any personnel and equipment items listed in the claim are properly included;
- c the supporting data are accurate and complete to the best of the Contractor's knowledge and belief, and support that all personnel and equipment items listed in the claim are properly included;
- d no part of the claim is false or fraudulent; and,
- e the amount requested, as shown on the attached pages, accurately reflects the contract adjustment for which the Contractor believes the State is liable, and is a complete statement of the claim.

Name of Contractor

By: _____
Contractor's Representative

Date

Representative's Title

TO: _____, Project Manager
Montana Department of Transportation

Date of Notice of Claim (reference 105.16.1): _____

Project Name: _____ No: _____

A notice is required for each separate claim that may be filed (only one claimed condition or event per Notice). Attach additional pages if required.

In accordance with Subsection 105.16, notice is hereby given of the following claim for additional compensation, additional time, etc., for this Project:

1. **Statement of Claim.** (State the basis for the claim.)

2. **Conditions.** (Fully describe the physical condition, Project Manager's orders, directives or actions, or other conditions that directly contribute to the claimed problem.)

3. **Date of Contractor's Discovery of the above-stated Condition:** _____
Explain and include all documentation showing the progression and history of the disagreement into a claim, including correspondences. _____

4. **Plans and Specifications.** (Fully describe the specifications that are in conflict or are unclear or ambiguous; or the conflicts or errors in the plans that are related to the claimed problem.)

5. **Other Condition or Occurrence.** (Describe fully.)

The following portions of work and operations will be affected (attach pages if needed):

CSB105_16_2 (5-7-09)

1. **Portions of work.** (Fully describe the contract items, and locations by station or structure.)

2. **Operations.** (Fully describe specific operations that will be affected for each location involved. **Immediately submit a revised operation schedule showing the impact on the activities.**)

Contractor's objections are: (State in detail the specific objections to performing work for the compensation stated in the contract, or within the time required, or other objections.)

The Contractor believes the nature and amount of the adjustment in compensation or extension of time that is due or may be due is as follows: (Describe fully and specifically.)

Signature & Date

Title

Contractor Submitting the Notice

Contractor Superintendent & Date

Only claims from the Contractor will be accepted. The Notice may not be submitted by a Subcontractor. The Contractor cannot pass a Subcontractor's claim through to the Department.

Note:

Use of a downloaded form is deemed an agreement by the user that the form will be used exactly as-is. Do **not** alter the form in any way as the Department's specifications and procedures rely upon the language of the standard forms. If a submitted form is altered in any way, the form will be rejected and it will be a breach of contract. The alteration may be brought to the attention of the Transportation Commission.