THE IBCS GROUP, INC.
A Risk Management Company

# SCHEDULE OF UNCOMPLETED WORK - BONDED AND UNBONDED

**Name of Contractor:** **Date:**

| Project Name | Start Date | Original/Revised Completion Date | On Time Completion Expected Yes/No | Bonded Yes/No | Contract Price | Estimated Cost When Bid | Billed to Date (include approved change orders) | Cost to Date (include approved change orders) | Revised Cost to Complete |
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| **Totals** | | | | | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |

**Total Uncompleted Work** $0.00
**Bonded**
**Unbonded**
**Total Uncompleted Work by Subcontractors**

| Supplemental Questions | Yes/No |
|---|---|
| Any Contract amounts more than 10% below the 2nd bidder? | No |
| Are any projects behind schedule? | No |
| Are there delays, disputes or performance issues? | No |
| Any in liquidated damages or liquidated damages expected? | No |

**If any answered Yes, please explain:**

**Signed By:**
**Print Name and Title:**
**Date:**

**IMPORTANT! Please fully complete, and submit the report signed and dated**

Home Office:
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Fax: 434-974-5610

The IBCS Group, Inc. ("IBCS") is an Authorized Risk / Claims Manager for the Scarborough Bond and Guarantee Program.

Clear Form