

Department of Engineering

COST ANALYSIS



Contract No. D \_\_\_\_\_ /TA \_\_\_\_\_ By \_\_\_\_\_ Date \_\_\_\_\_

Item \_\_\_\_\_ Description \_\_\_\_\_

Basis of Analysis: _____ per _____	Enclosures: _____
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Payroll Taxes	Summary	Are Fringes Paid in Cash?	Yes	No
FICA	% (1)	Direct Wages		
Worker's Compensation	% (2)	Premium Wages		
N.Y. Unemployment	% (3)	Total Wages		
Fed. Unemployment	% (4)	Payroll Taxes		
Liability Insurance	% (5)	Fringe Benefits		
Disability Benefits	% (6)	Equipment		
	(7)	Materials		
	(8)	Profit & Overhead (1) + (4) + (5) + (7) x %		
Total	% (9)	Total Cost		
Unit Cost	(10)	Production		

\_\_\_\_\_ agrees to  
Prime Contractor  
the above Unit Cost and to complete the above mentioned item per specifications requirements.

By: \_\_\_\_\_ Date \_\_\_\_\_  
\_\_\_\_\_ Title \_\_\_\_\_

Work will be completed by the following Subcontractor:  
\_\_\_\_\_

Notes, Remarks, Qualifications:

The above stated Unit Cost is accepted. Item work should proceed via Agreed price.

The above stated Unit Cost is rejected. Item work should proceed via Force Account procedures.

\_\_\_\_\_ Date \_\_\_\_\_  
Project Engineer

