Contractor: Address: Project:

APPLICATION FOR PAYMENT

Application No: Date: Period To:

CONTRACT STATUS

1. Original Contract Sum	
2. Net Change by Change Orders	
3. Contract Sum to Date (Line 1 ± 2)	
4. Total Completed & Stored to Date	
5. Retainage (____ %)	

PAYMENT SUMMARY

6. Total Earned Less Retainage (Line 4 less 5)	
7. Less Previous Certificates for Payment	
8. Current Payment Due	
9. Balance to Finish, Including Retainage	

Item No.	Description of Work	Scheduled Value	Work Completed		Materials Stored	Total Completed & Stored	% Complete	Balance to Finish	Retainage
			From Previous	This Period					
	TOTALS								

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR SIGNATURE

Date: _____

ARCHITECT / ENGINEER SIGNATURE

Date: _____

OWNER SIGNATURE

Date: _____