

PROGRESS PAYMENT CLAIM

Invoice Number	Application Date	Application Number	Billing Period To

TO (CLIENT)	FROM (CONTRACTOR)	PROJECT DETAILS
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CONTRACT SUMMARY

1. Original Contract Sum	
2. Net Change by Change Orders (Approved)	
3. Contract Sum to Date (Line 1 ± Line 2)	
4. Total Completed & Stored to Date	
5. Retainage Amount	
6. Total Earned Less Retainage (Line 4 less Line 5)	
7. Less Previous Certificates for Payment (Paid to Date)	
8. CURRENT PAYMENT DUE (Line 6 less Line 7)	
9. Balance to Finish, Including Retainage (Line 3 less Line 6)	

DETAILED PROGRESS BREAKDOWN

ITEM	DESCRIPTION OF WORK	SCHEDULED VALUE	PREV. COMPLETED	THIS PERIOD	TOTAL COMPLETED	%	BALANCE TO FINISH
	Totals						

CERTIFICATION AND APPROVAL

<p>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.</p>	<p>In accordance with the Contract Documents, based on on-site observations and the data comprising this application, the Architect/Representative certifies that the Work has progressed as indicated.</p>
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Contractor Signature / Date	Authorized Representative / Date
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