

**CONTRACTOR'S APPLICATION FOR PAYMENT**

Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

FM Number: \_\_\_\_\_

Project: ITD D3 Improvements and Training Center Job # 2417

Payment Request Number: \_\_\_\_\_

Dates: From: \_\_\_\_\_, 20\_\_\_\_ To: \_\_\_\_\_, 20\_\_\_\_

**Statement of Contract Account:**

1. Original Contract Amount:	\$
2. Approved Change Order No(s): _____ (Per attached breakdown) (Net)	\$
3. Adjusted Contract Amount:	\$
4. Value of Work Completed to Date: (Per attached breakdown)	\$
5. Value of Approved Change Order(s) Completed: (Per attached breakdown)	\$
6. Materials Stored Off-Site: (Per attached breakdown and Insurance Certificate for Stored Materials)	\$
7. Total to Date:	\$
8. Less Amount Retained: (_____%)	\$<
	>
9. Total Less Retainage:	\$
10. Total Previously Paid:	\$<
	>
11. Amount Due This Request:	\$

*CERTIFICATE OF THE CONTRACTOR:*

*I hereby certify that the work performed and the materials supplied to date, as shown above, represent the actual value of accomplishment under the terms of the Standard Subcontract Terms (and all authorized changes thereto) between the undersigned and Joint School District No. 2 relating to the above referenced project.*

*I also certify that payments, less applicable retention, have been made through the period covered by previous payments received from the contractor to: (1) all my subcontractors (sub-contractors); and (2) for all materials and labor used in or in connection with the performance of the Standard Subcontract Terms. I further certify that I have complied with Federal, State, and local tax laws, including Social Security laws and Unemployment Compensation laws, and Worker's Compensation laws insofar as applicable to the performance of the Standard Subcontract Terms.*

Date: \_\_\_\_\_ Contractor: \_\_\_\_\_

Subscribed and Sworn Before Me This \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_

Notary Public: \_\_\_\_\_

By: \_\_\_\_\_  
(Authorized Signature)

My Commission Expires: \_\_\_\_\_

TITLE: \_\_\_\_\_