



**SUBCONTRACTOR'S APPLICATION FOR PAYMENT**

Request for partial and/or complete payment of subcontracts shall be made on the form shown below. Progress billings not presented on the form will be returned to the vendor for proper processing and will be considered for payment in the following month. Application for Payments must be in the office of the General Contractor no later than the 20th of the month and must be accompanied by a breakdown detail and any required payroll compliance forms.

SUBCONTRACTOR'S NAME: _____	DATE: _____
PROJECT TITLE: _____	
BILLING PERIOD: From _____ To _____	

ORIGINAL CONTRACT AMOUNT	\$ _____
Approved Change Orders to Date	\$ _____
TOTAL CONTRACT TO DATE	\$ _____
CONTRACT COMPLETION TO DATE PER ATTACHED BREAKDOWN: _____%	\$ _____
Less _____% Retention Held	\$ _____
Due to Date Less Retention Held	\$ _____
Less Previous Applications for Payment	\$ _____
NET AMOUNT DUE THIS REQUEST	\$ _____

FOR OFFICE USE ONLY			
Proj. Man. Approval _____	Certification Received _____	L&I Premiums Paid _____	
Insurance Current _____	Non-Compliance Items _____	Lower-Tier Compliance _____	