

PROGRESS BILLING / PAY APPLICATION

Contractor: [Company Name]
 [Address]
 [License #]

Invoice #: _____
Date: _____
Period To: _____

Owner / Client:

[Client Name]
 [Project Address]

Project Details:

Project Name: [Project Name]
 Contract ID: [ID Number]

ITEM #	DESCRIPTION OF WORK	SCHEDULED VALUE	PREVIOUS APPLICATIONS		THIS PERIOD		TOTAL COMPLETED TO DATE	%	BALANCE TO FINISH
			QTY	AMOUNT	QTY	AMOUNT			
1.0	Mobilization & General Conditions	\$		\$		\$	\$	%	\$
2.0	Site Clearing & Grubbing	\$		\$		\$	\$	%	\$
3.0	Mass Excavation & Grading	\$		\$		\$	\$	%	\$
4.0	Storm Drainage & Utilities	\$		\$		\$	\$	%	\$
5.0	Sub-Base & Paving	\$		\$		\$	\$	%	\$
TOTALS		\$		\$		\$	\$	%	\$
Total Completed & Stored to Date			\$						

Less Retainage (____%)	(\$)
Total Earned Less Retainage	\$
Less Previous Certificates for Payment	(\$)
CURRENT PAYMENT DUE	\$

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.

Contractor Signature / Date

Architect/Engineer/Owner Approval / Date