

CONSTRUCTION INVOICE

State Project Reference: _____

Invoice #: _____

Date: _____

Billing Period: _____ to _____

Contractor Information:

Name: _____

Address: _____

License #: _____

Agency / Owner:

State Dept: _____

Project Name: _____

Location: _____

SCHEDULE OF VALUES & PROGRESS BILLING

Description of Work	Scheduled Value	Previous Application	This Period	% Complete	Balance to Finish

Total Completed to Date: \$ _____

Less Retainage (____ %): \$ _____

Total Earned Less Retainage: \$ _____

Less Previous Certificates: \$ _____

CURRENT PAYMENT DUE: \$ _____

CONTRACTOR CERTIFICATION

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, and that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued.

Signature: _____ Date: _____

Printed Name/Title: _____

Required Attachments: [] Certified Payroll [] Lien Waivers [] Progress Photos [] Subcontractor Invoices