

SUBCONTRACTOR APPLICATION FOR PAYMENT

Subcontractor Name: _____ Contact Person: _____
 Telephone: _____ Fax: _____
 Project Name _____
 Billing Period Beginning: _____ Through: _____

The undersigned certifies that to the best of their knowledge, information, and belief, the Work covered by this Subcontractor Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Subcontractor for Work for which previous Applications for Payments were issued and payments received, and that current payment shown herein is now due.

Scheduled Value	Work Completed Previous Application	Work Completed this period	Stored Materials (Attach supplier invoice)	Completed and Stored Project to Date	%
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Original Contract (from page 2)	\$	\$	\$	\$	\$	
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Approved Change order (from page 3)	\$	\$	\$	\$	\$	
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Total Contract and Change Orders	\$	\$	\$	\$	\$	
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		Less ___% retained	\$	
		Total earned less retained	\$	
		Less previous application	\$	
		Amount Due	\$	

Signature: _____ Date: _____
 Printed Name: _____ Title: _____

FOR DOUGLAS COMPANY USE ONLY

Notes:

Approvals:

Vendor # _____
 Job # _____

Rev. Contract Amount	\$
Balance to Complete	\$
Curr. Ret. Bal.	\$
Gross	\$
Retention	\$
Net	\$

**SUBCONTRACTOR APPLICATION FOR PAYMENT
Schedule of Values**

Subcontractor Name: _____

Project: _____

Billing for Period: _____

Location: _____

Through: _____

Item No	Description of Work Items	Scheduled Value	Work Completed Previous Application	Work Completed this period	Stored Materials (Attach supplier invoice)	Completed and Stored Project to Date Amount	% B/C/D
	Original Contract	(A)	(B)	(C)	(D)	(B/C/D)	
Total Original Contract(to page 1)		\$	\$ -	\$	\$ -	\$	

Note: Provide a detailed breakdown of original contract schedule of values. If space is needed, attach additional pages.

SUBCONTRACTOR APPLICATION FOR PAYMENT

Subcontractor Name: _____

Project: _____

Billing for Period: _____

Location: _____

Through: _____

Change Order #	Description of Work Items	Scheduled Value	Work Completed Previous Application	Work Completed this period	Stored Materials (Attach supplier invoice)	Completed and Stored Project to Date Amount	% B/C/D
		(A)	(B)	(C)	(D)	(B/C/D)	
	Approved Change Orders						
Total Approved Approved Change Orders (to pg 1)		\$	\$	\$	\$	\$	

Note: Provide detailed breakdown of each issued Change Order by the respective change order number.
Do not include unapproved change requests.