



State of Idaho
DIVISION OF PUBLIC WORKS
Design-Builder
REQUEST FOR PAYMENT
SUBMIT ONE ORIGINAL

DPW PROJECT NO.

Code #	AMOUNT
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CC

Date

DPW USE ONLY

Name and Location of Project

Name and Address of Design-Builder

Request No.

For Period

TO

ANALYSIS OF CONTRACT AMOUNT TO DATE

- | | | |
|---|----|-----------|
| (1) Original Contract Amount | \$ | _____ (1) |
| (2) Net Amount of Change Orders through CO# _____ | \$ | _____ (2) |
| (3) Adjusted Contract Amount (Line 1 + Line 2) | \$ | _____ (3) |

ANALYSIS OF WORK PERFORMED (Attach Pay Estimate Breakdown)

- | | | |
|--|----|-----------|
| (4) Value of Work Performed - <i>not</i> subject to retainage | \$ | _____ (4) |
| (5) Value of Work Performed - subject to retainage | \$ | _____ (5) |
| (6) Less Amount Retained Per Contract Terms (_____ % of line 5 above) | \$ | _____ (6) |
| (7) Net Amount Earned to Date (Line 4 + Line 5 - Line 6) | \$ | _____ (7) |
| (8) Less Previous Payments | \$ | _____ (8) |

BALANCE DUE THIS PAYMENT (Line 7 - Line 8) \$ _____ (9)

CERTIFICATION OF DESIGN-BUILDER:

I certify that the foregoing is just and correct and the amount claimed is legally due after showing all just credits and that to the best of my knowledge, the work has been completed in accordance with contract requirements and the established quantities are correct.

Certified by Design-Builder	Date	
Inspected by DPW Field Representative	Date	Final Documents Received (Field Representative)
	Recommended by DPW Project Manager	
Approved by Senior Field Representative	Date	

Original: Fiscal

Copies to: Design-Builder, DPW PM, DPW FR, DPW Contract File

State of Idaho **DIVISION OF PUBLIC WORKS** REQUEST FOR PAYMENT ESTIMATE BREAKDOWN

Request No.	For Period	TO	DPW Project No.			
VALUE OF WORK IS TO REFLECT ONLY ORIGINAL AMOUNT AND AUTHORIZED CHANGE ORDERS. (Change Orders are to be shown as separate line items on this form.)			Contractor may use substitute form only if approved by the Division of Public Works prior to start of Construction			
Item or CO#	Description of Item (1)	Value (2)	% Comp (3)	Value of Work Completed (2)x(3) (4)	Previous Payments (5)	Due this Application (4)-(5) (6)
ALL AMOUNTS BELOW ARE BEFORE RETAINAGES						
TOTAL OF COLUMNS						
DPW FR			Date	Contractor		Date

Use more pages if necessary.