



State of Idaho  
 DIVISION OF PUBLIC WORKS  
**Construction Manager  
 as General Contractor**  
**REQUEST FOR PAYMENT**  
 SUBMIT ONE ORIGINAL

DPW PROJECT NO.

Code #	AMOUNT
<b>CC</b>	
Date	

DPW USE

Name and Location of Project

Name and Address of Construction Manager

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 – **not** 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 CONSTRUCTION MANAGER:**

***I certify that the foregoing is just and correct and the amount claimed is legally due after showing all just credit 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 Construction Manager	Date	
Inspected by DPW Field Representative	Date	Final Documents Received (Field Representative)
Recommended by DPW Project Manager	Date	
Approved by Senior Field Representative	Date	

