State of Idaho
DIVISION OF PUBLIC WORKS

CONTRACTOR REQUEST FOR PAYMENT
SUBMIT ONE ORIGINAL
(For use with a construction manager)

DPW PROJECT NO.
BID PACKAGE NO.

Code #	AMOUNT
CC	
Date	

DPW USE ONLY

Name and Location of Project

Name and Address of Contractor

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 from Column 4 of Estimate Breakdown $ _____ (4)

(5) Less Amount Retained Per Contract Terms (_____*% of Line 4 above*) $ _____ (5)

(6) Net Amount Earned to Date $ _____ (6)

(7) Less Previous Payments $ _____ (7)

BALANCE DUE THIS PAYMENT (*Line 6 - Line 7*) $ _____ (8)

CERTIFICATION OF CONTRACTOR:
I certify that the foregoing is just and correct and the amount claimed is legally due after showing all just credits.

Certified by Contractor	Date

I certify that I have inspected the above work, that to the best of my knowledge it is in accord with contract requirements and that the estimated quantities are correct.

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

Original: Fiscal   Copies to: Contractor, DPW FR, DPW PM, DP, CM, 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					
	SUBTOTAL:					
	CO#:					
	CO#:					
	CO#:					
	CO#:					
	SUBTOTAL:					
GRAND TOTALS:						

DPW FR	Date	Contractor	Date

Use more pages if necessary.