

City of Concord
Post Office Box 308
Concord, North Carolina 28026-0308

For Office Use Only:
Charge to P.O. # _____
Due _____

PROJECT:

Date Notice to Proceed:
Completion Date:
Days Remaining in Contract:
Percent Work Complete:
Percent Time Complete:
Percent Payment Complete:

**APPLICATION FOR PAYMENT NO. _____ SHEET NO. _____ OF
PERIOD FROM: _____ TO:**

CERTIFICATE OF THE CONTRACTOR

To the best of my knowledge and belief, I certify that this periodical estimate is correct and all work has been performed and materials supplied in full accordance with the terms and conditions of the contract documents between the undersigned contractor and the City of Concord.

GROSS AMOUNT OF PARTIAL PAYMENT ----- \$

LESS: RETAINAGE AT _____ PERCENT ---- \$

PREVIOUS PAYMENT ----- \$

LIQUIDATION DAMAGES

_____ DAYS @ \$ _____ ----- \$

OTHER DEDUCTIONS:

_____ ----- \$

_____ ----- \$

TOTAL DEDUCTIONS ----- \$

NET AMOUNT DUE THIS ESTIMATE ----- \$

Name of Contractor: _____ Address:

Signed: _____ Title: _____ Date:

CERTIFICATE OF CONSTRUCTION ADMINISTRATOR/ENGINEER

I certify that I have verified this periodical estimate and that to the best of my knowledge and belief, it is a true and correct statement of work performed and materials supplied under the contract.

Consultant Engineer: _____ Date:

Construction Administrator: _____ Date:

APPROVED AND PAYMENT RECOMMENDED:

CITY OF CONCORD

Signed: _____ Title: _____ Date: