

SUBCONTRACTORS APPLICATION FOR PAYMENT

DATE _____ PERIOD ENDING _____

FCI CONSTRUCTORS, INC.

PROJECT NUMBER _____

PROJECT DESCRIPTION _____

APPLICATION NUMBER _____

SUBCONTRACTOR _____

FCI OFFICE USE _____	APPROVAL _____
VIN # _____	INVOICE _____
INVOICE DATE _____	PAYMENT DATE _____
GL _____	JOB _____
PHASE _____	CODE _____
TYPE _____	

ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	WORK COMPLETED		STORED MATERIALS THIS PERIOD (ATTACH INVOICES)	TOTAL COMPLETED & STORED TO DATE	
			PREVIOUS APPLICATIONS	THIS APPLICATION			%
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
TOTALS							

	TOTAL TO DATE	PREVIOUS APPLICATIONS	THIS APPLICATION
TOTAL COMPLETED AND STORED TO	\$ _____	\$ _____	\$ _____
VALUE OF STORED MATERIALS	\$ _____		\$ _____
SUBTOTAL	\$ _____	\$ _____	\$ _____
LESS 10% RETAINAGE	\$ _____	\$ _____	\$ _____
TOTAL EARNED LESS RETAINAGE	\$ _____	\$ _____	\$ _____
LESS PREVIOUS APPLICATIONS	\$ _____	\$ _____	\$ _____
CURRENT PAYMENT DUE	\$ _____		

RELEASE

I hereby certify that the work performed and the materials supplied to date, as shown above, represent the actual value of accomplishment under the terms of the Contract (and all authorized changes thereto) between the undersigned and FCI CONSTRUCTORS, INC. relating to the referenced project.

I also certify that the payments, less applicable retention, have been made through the period covered by previous payments received from the contractor or (1) all my subcontractors, (sub-contractors) and (2) for all materials and labor used in or in connection with the performance of the Contract. I further certify that I have complied with Federal, State and Local tax laws including Social Security Laws, Unemployment Compensations Laws and Workmen's Compensation Laws insofar as applicable to the performance of the contract.

This release is given in order to induce payment in the amount of \$ _____ (net amount paid to date including this period) and upon receipt of said payment the Subcontractor releases FCI CONSTRUCTORS, INC. from any further liability in connection with all materials, labor and services furnished by the Subcontractor through the pay period indicated.

STATE OF _____

Company Name: _____

Address: _____

COUNTY OF _____

City, State, Zip: _____

Phone: _____

Subscribed and sworn to before me this _____ day of _____, 20____.

Fax: _____

My Commission expires _____

By: _____

Title: _____

Notary Public _____

Date: _____