PARTIAL PAYMENT ESTIMATE

No.

Sheet 1 of 1
Contract
% Complete

Project

From , 200 to , 200

Owner: of

Contractor:

Item No.	Description	Contract Units		Add Units	Deduct Units	Completed			
						Units		Price	Values
	TOTAL								

Value of Completed Work
Less 10% Retained
Value of Material on Hand
Total Value of Work and Material
Total Amount Due to Date
Less Previous Payment
BALANCE DUE THIS PAYMENT

According to the best of my knowledge and belief, I certify that all terms and amounts shown on the face of this Periodic Estimate for Partial Payment are correct; that all work has been performed and/or material supplied in full accordance with that the foregoing is a true and correct statement of the contract amount up to and including the last day of the period covered by this Periodic Estimate; that no part of the "Balance due this payment" has been received, and that the undersigned and his subcontractors have complied with all the labor provisions of said contract.

CONTRACTOR: Date:

I certify that I have checked and verified the above and foregoing Periodic Estimate for Partial Payment; that to the best of my knowledge and belief it is a true and correct statement of work performed and/of material supplied by the contractor; that all work and/or material included in this Periodic Estimate has been inspected by me and/or by my duly authorized representative or assistants and that it has been performed and/or supplied in full accordance with requirements of the reference contract; and that partial payment claimed and requested by the contractor is correctly computed on the basis of work performed and/or material supplied to date.

CONSULTANT (Approved): Date:

OWNER (Authorized Payment): Date: