



APPLICATION FOR PAYMENT

PROJECT ID

TA LIESY CONSTRUCTION LLC dba LIESY CONSTRUCTION 12042 SE SUNNYSIDE RD. # 475, CLACKAMAS, OR 97015 O 503-761-6259 F 503-761-1378 CCB 196471 WA-TALIELC882QR

This Application for Payment, your Invoice, Conditional Waiver, and if required, Unconditional Waiver must be submitted to our office by the 25th of the month for which you are billing, for work projected through the end of the month. Request for payment will not be processed from your invoice alone. List only Change of Contracts approved by Liesy Construction. Refer to your Subcontract Agreement or CPO Conditions of Purchase for details.

Subcontractor:		Phone:
Address:		Fax:
		Contact:
Application No.:	Subcontractor Use:	AGC/CPO No.:
For Period from:	to:	Submit Date:

CSI or CC # and Description	Original Contract or Change of Contract Amount	% Comp	Amount Completed to Date	Previous Applications	This Application	Cost Code
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TOTALS:						

Pending Change Orders	
Description	Amount

Total Work Completed to Date

Retainage

Total, Less Retainage

Less Previous *Net* Requests

Amount Due This Request

Balance of Contract Including Retainage

SUBCONTRACTOR APPROVAL

PROJECT MANAGER APPROVAL

ADMIN APPROVAL _____

CONTRACTOR USE ONLY - HOLD PAYMENT FOR

Signed Subc

Cond Waiver - Sub

Certified Payroll

COI - Liability Ins

As-Builts

OTHER:

Signed CPO

Uncond Waiver - Sub

Safety Mtg Logs

COI - WC Ins

O&M's

Signed CC

Cond Waiver - Supplier

Safety Policy

Bond - Sub

Warranty - Sub

 Signed Pay App

___Uncond Waiver - Supplier

___Warranty - Mfg