

**SUBCONTRACTORS' AFFIDAVIT AND REQUEST FOR PAYMENT**

**RATCLIFF CONSTRUCTION COMPANY, LLC**

FROM: \_\_\_\_\_ SUBCONTRACT/P.O. # \_\_\_\_\_  
\_\_\_\_\_ PAYMENT REQUEST # \_\_\_\_\_  
\_\_\_\_\_ DATE: \_\_\_\_\_

PROJECT: \_\_\_\_\_

Office use only	
<input type="checkbox"/>	Payment Release Verification
<input type="checkbox"/>	Insurance Certificate
<input type="checkbox"/>	Executed Contract/PO
<input type="checkbox"/>	Lien Waivers
<input type="checkbox"/>	Supplier/Sub List
<input type="checkbox"/>	HOLD PAYMENT

STATEMENT OF CONTRACT AMOUNT

1. ORIGINAL CONTRACT AMOUNT \$ \_\_\_\_\_

2. AUTHORIZED CHANGES  
ADD \$ \_\_\_\_\_  
DEDUCT \$ ( \_\_\_\_\_ ) \$ \_\_\_\_\_ -

3. ADJUSTED CONTRACT AMOUNT \$ \_\_\_\_\_ -

4. VALUE OF WORK COMPLETED TO DATE \$ \_\_\_\_\_

5. MATERIAL STORED ON SITE \$ \_\_\_\_\_

6. TOTAL COMPLETED & STORED TO DATE \$ \_\_\_\_\_ -

7. LESS AMOUNT RETAINED 10 % (\$ \_\_\_\_\_ )

8. TOTAL COMPLETED - LESS RETAINAGE \$ \_\_\_\_\_ -

9. LESS PREVIOUS PAYMENT REQUESTS  
(PAID IN FULL OR TO DATE) (\$ \_\_\_\_\_ )

10. AMOUNT OF THIS REQUEST (8-9) \$ \_\_\_\_\_ -

11. BALANCE TO FINISH NOT INCLUDING RETAINAGE  
(LINE 3 LESS LINE 6) \$ \_\_\_\_\_ -

CERTIFICATE OF THE SUBCONTRACTOR:

I hereby certify that the work performed and the materials supplied to date, as shown on the above, represent the actual value of accomplishment under the terms of the Contract (and all authorized changes thereto) between the undersigned and Ratcliff Construction Company, LLC. Relating to the above project.

I also certify that payments, less applicable retention, have been made through the period covered by previous payments received from the Contractor to (1) all of my Subcontractors (suppliers) and (2) for all materials and labor used in or in connection with the performance of this Contract. I further certify I have complied with Federal, State and local tax laws, including Social Security laws and Unemployment Compensation laws and Workers/ Compensation laws insofar as applicable to the performance of this contract.

\_\_\_\_\_  
WITNESS

\_\_\_\_\_  
SUBCONTRACTOR/SUPPLIER

\_\_\_\_\_  
WITNESS

BY: \_\_\_\_\_  
(Authorized Representative)

DATE: \_\_\_\_\_

TITLE: \_\_\_\_\_