



**CONSTRUCTION PHASE
APPLICATION /CERTIFICATION FOR PAYMENT** NO:-->

**For Official
City of Chandler
Use Only**

City of Chandler Project Title:	_____
City of Chandler Project No.:	_____
Federal / ADOT No(s):	_____
Covering the Period From:	_____ to: _____
City of Chandler Contact:	_____

Record ID: _____
Date: _____

Contractor Information:

PO Number:	_____	Invoice:	_____
Name:	_____	Phone:	_____
Address:	_____	Email:	_____
Remit to Address:	_____		
Contact:	_____		

Consulting Engineer Information:

Name:	_____	Phone:	_____
Address:	_____	Email:	_____
Contact:	_____		

Application is made for payment as shown below and on the attached Payment Schedule Summary Sheet in accordance with the Contract Documents

Original Contract Price: \$ _____ -

Change Orders:

Number	Date Approved	Amount
_____	_____	\$ _____ -
_____	_____	_____
_____	_____	_____
_____	_____	_____

* % of time elapsed	_____
* % of contract complete	_____
* required field	

1. Adjusted Contract Price (Original Contract Price + Total Change Orders Amount):	\$	_____ -
2. Total Percent Complete to Date:	_____ %	
3. Total Amount Due to Date (as referenced on attached Progress Summary):	\$	_____ -
4. Total Percent Retained to Date:	_____	
5. Total Amount Retained to Date:	\$	_____ -
6. Total Amount Earned to Date (Total Amount Due-Retained to Date):	\$	_____ -
7. Total Previous Certificates for Payment:	\$	_____ -
8. Federal Penalties (Per City): Deduct Penalties (-) or Credit Reimb (+):	\$	_____ -
9. Current Payment Due: #6 minus (-) #7, plus (+) or minus #8= Amount Due This Pay App:	\$	_____ -

Contractor's Certification

The undersigned contractor certifies that the work covered by this Application for Payment has been completed in accordance with the Contract Documents; that all amounts have been paid by him for work which previous Certificates of Payment were issued and payments received from the Owner, and that the current payment requested as shown is current, accurate and complete.

Authorized Signature _____ Date _____

Consultant's/Engineer's Certification

The Consultant/Engineer has reviewed this Application; accompanying data; and schedules and, having made on-site observation of the work consistent with his assigned responsibilities, certifies that the best of his knowledge and belief the quality of the quality of the work performed is in accordance with the Contract Documents; that the work has progressed as indicated herein; and that the Contractor is entitled to payment in the amount shown above.

Authorized Signature _____ Date _____

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Approved |

Project Manager _____ Date _____	PO# _____
	Budget Account #'s _____
Project Owner _____ Date _____	Budget Account #'s _____

Email Signed PDF Copy to: CapitalProjects.Payables@chandleraz.gov

or Submit to: Capital projects, Public Works & Utilities, PO Box 4008, MS407, Chandler AZ 85244

Revised 5-1-2019