SUBCONTRACTOR REQUEST FOR PAYMENT
Exhibit I

Ramsey Construction, LLC
823 Specht Avenue, Suite 5
Caldwell, Idaho 83605
(208) 585-3071

SUBCONTACTOR NAME: ____________________
CONTACT: ____________________
ADDRESS: ____________________
PHONE: ____________________

Submit entire application to *office.ramseyconstruction@gmail.com*

PROJECT: ____________
JOB Number: ____________
Cost Code: ____________

Payment Request Number: ____________________
Invoice Number: ____________________
Payment Period: __________ to __________

RAMSEY CONSTRUCTION USE ONLY

The following items must be verified before the payment application is approved.

Progress and Final Payments:

- ☐ Insurance Documents Current in File
- ☐ Signed Subcontract in File
- ☐ Lien Waivers Signed
- ☐ Schedule of Values Verified

Final Payments:

- ☐ O&M, Warranty, As-Built Approved
- ☐ Signed Punch List Received

Notes:________________________________

- ☐ Accounting to talk to Project Manager

Payment Approved: Initials ____________
Date ____________

STATEMENT OF CONTRACT AMOUNT

Original Contract Amount: ____________
Approved Change Orders To Date: ____________
Revised Total : ____________
Base Contract Completed To Date: _______% ____________

Approved Change Orders Completed To Date:
(Attach Schedule of Values as Appropriate)
_______% ____________

Total Gross Billings To Date: ____________
Less Previous Gross Billings: ____________
Gross Invoice This Request: ____________
Less 5% Retention: ____________
Net Invoice This Request: ____________

PAY APPLICATION TERMS AND CONDITIONS - It is agreed and acknowledged that, to the best of the Subcontractor's knowledge and belief, all of the provided information on this form and other pay application forms are true, accurate and complete and that all information provided complies with the Contract Documents. It is understood that failing to properly fill out any of the pay application forms will delay processing until all of the information in provided.