

# Progress Billing



Application: \_\_\_\_\_

Period: \_\_\_\_\_

Subcontractor: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Job Location: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## Application for Payment on Contract

Original Contract.....	_____
Net Change by Change Orders...	_____
Contract Sum to Date.....	_____
Total Complete to Date.....	=====
Total Retained.....	_____
Total Earned Less Retained.....	=====
Less Previous Billings.....	_____
Current Payment Due.....	<input style="border: 2px solid black;" type="text"/>
Balance on Contract.....	_____

## Contractor's Certification of Work

The undersigned contractor certifies that, to the best of the contractor's knowledge, the work on the the above named job has been completed in accordance with the plans and specifications to the level of completion indicated on the attached schedule of completion.

Contractor: \_\_\_\_\_ Date: \_\_\_\_\_

Amount Approved: \_\_\_\_\_

Architect  
 By: \_\_\_\_\_ Date: \_\_\_\_\_

