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REQUEST FOR PAYMENT AND PARTIAL WAIVER OF LIEN

PROJECT NAME: _____ CONTRACT NO: _____

SUBCONTRACTOR: _____ LOCATION _____

Subcontractor warrants and acknowledges that there are no additional costs or claims for any extras or additions for labor or materials on the described location performed to date, except as stated and further certifies that all work performed or materials installed are in accordance with the approved plans and specifications on the contract. The undersigned certifies that all sub-subcontractors, laborers, and material suppliers with regard to the project have been fully paid and that no sub-subcontractors, laborers, or material suppliers have any claims, demands or claims of lien against said premises or Contractor's bonds, and the undersigned Subcontractor does hereby agree to indemnify and hold harmless Contractor, BIGGS CONSTRUCTION COMPANY, INC. against any loss or damage, including a reasonable attorney's fee, which it may sustain by reason of placing or filing of liens against said real estate by Subcontractor's laborers or materialmen for amounts due them for services performed to date or the assertion of any claim against Contractor's bonds. This agreement constitutes a partial release of lien to the extent of all monies due and owing, including any extras up to date hereof, and further is given in accordance with Florida's Construction Lien Law and Subcontractor certifies that this request for payment constitutes a sworn affidavit inducing Contractor to make the payment requested. **SUBCONTRACTOR CERTIFIES THAT THIS REQUEST FOR PAYMENT IS FOR ALL WORK PERFORMED AND ALL LABOR, MATERIALS AND EQUIPMENT FURNISHED ON THE REFERENCED PROJECT THROUGH THE PERIOD ENDING _____ AND THAT THIS REQUEST REPRESENTS (%) OF ITS SUBCONTRACT OR PURCHASE ORDER.**

PERIOD ENDING AND % OF SUBCONTRACT MUST BE FILLED IN OR DRAW WILL NOT BE PROCESSED

Witness the hand and seal of the undersigned this _____ day of _____, _____

Name of Company: _____ Street Address: _____

By: _____ City: _____

Title: _____ State: _____

1st Witness: _____ 2nd Witness: _____

SIGNATURE MUST BE NOTARIZED OR WITNESSED BY TWO PERSONS OR DRAW WILL NOT BE PROCESSED

Before me, the undersigned authority, personally appeared _____, who, by me being first duly sworn, did acknowledge that he or she is the _____ of _____, and such as has the authority to execute this document and that the facts stated herein are true. Signed: _____

Dated this _____ day of _____, 20___. My Commission Expires: _____

STATE OF _____ COUNTY OF _____ Notary Public Seal:

	SUBCONTRACTOR USE	OFFICE USE ONLY
a) Work Completed To Date	\$ _____	\$ _____
b) Value of Stored Materials (Attach Worksheet)	\$ _____	\$ _____
c) Total Completed and Stored (a+ b)	\$ _____	\$ _____
d) Less _____ % Retainage	\$ _____	\$ _____
e) Net Earned To Date (c - d)	\$ _____	\$ _____
f) Less Previous Payments	\$ _____	\$ _____
g) Amount This Request	\$ _____	\$ _____
h) Amount of Original Contract	\$ _____	\$ _____
i) Net Approved Change Orders #1 through	\$ _____	\$ _____
j) Contract Amount (h + i)	\$ _____	\$ _____
k) Percentage of Completion (j ÷ c)		%