

<b>APPLICATION FOR PAYMENT NO.</b>	Check One: PARTIAL      FINAL																		
OWNER: El Paso Water Utilities Public Service Board 1154 Hawkins Blvd. El Paso, Texas 79925	PROJECT: _____ BID NO.: _____ PURCHASE ORDER: _____																		
ORIGINAL CONTRACT AMOUNT: \$ _____ NET CHANGE BY CHANGE ORDERS: \$ _____ THROUGH CHANGE ORDER NO. _____ CONTRACT SUM TO DATE: \$ _____																			
NOTICE TO PROCEED: _____ CONTRACT COMPLETION DATE: _____ CONTRACT TIME: _____ Calendar Days REVISED COMPLETION DATE: _____ REVISED: _____ Calendar Days SUBSTANTIAL COMPLETION DATE: _____ ELAPSED TIME: _____ Calendar Days FINAL COMPLETION DATE: _____																			
<table style="width:100%; border:none;"> <tr> <td style="width:30%;">WORK COMPLETED:</td> <td style="width:20%;">\$ _____</td> <td style="width:50%;"><i>See Attached Pay Item Schedule</i></td> </tr> <tr> <td>MATERIALS STORED:</td> <td>\$ _____</td> <td><i>Attach Invoices, Documentation</i></td> </tr> <tr> <td>TOTAL EARNED:</td> <td>\$ _____</td> <td></td> </tr> <tr> <td>LESS RETAINED:      %</td> <td>- \$ _____</td> <td></td> </tr> <tr> <td>LESS PREVIOUS PAYMENTS:</td> <td>- \$ _____</td> <td></td> </tr> <tr> <td><b>NET DUE THIS ESTIMATE:</b></td> <td><b>\$ _____</b></td> <td><i>Attach Certified Payroll This Period</i></td> </tr> </table>		WORK COMPLETED:	\$ _____	<i>See Attached Pay Item Schedule</i>	MATERIALS STORED:	\$ _____	<i>Attach Invoices, Documentation</i>	TOTAL EARNED:	\$ _____		LESS RETAINED:      %	- \$ _____		LESS PREVIOUS PAYMENTS:	- \$ _____		<b>NET DUE THIS ESTIMATE:</b>	<b>\$ _____</b>	<i>Attach Certified Payroll This Period</i>
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CONTRACTOR'S CERTIFICATION:  The undersigned CONTRACTOR certifies that (1) all previous progress payments received from OWNER on account of work done under the contract referred to above have been applied to discharge in full all obligations of CONTRACTOR incurred in connection with work covered by prior applications for payment; and (2) title to all materials and equipment incorporated in said work or otherwise listed in or covered by this application for payment will pass to owner at time of payment free and clear of all liens, claims, security interests and encumbrances (except such as covered by bond acceptable to OWNER).  CONTRACTOR: _____ By: _____ Title: _____ Date: _____																			
RECOMMENDED:  CONSTRUCTION MANAGER: _____  By: _____  Date: _____	APPROVED:  By: _____  Title: _____  Date: _____																		

**CONTINUATION SHEET**

*AIA DOCUMENT G703*

AIA Document G702, APPLICATION AND CERTIFICATE FOR PAYMENT, containing Contractor's signed Certification is attached.

APPLICATION NUMBER: \_\_\_\_\_

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

In tabulations below, amounts are stated to the nearest dollar.

PERIOD TO: \_\_\_\_\_

Use Column I on Contracts where variable retainage for line items may apply.

ARCHITECT'S PROJECT NO: \_\_\_\_\_

A	B	C	D	E	F	G		H	I
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	WORK COMPLETED		MATERIALS PRESENTLY STORED (NOT IN D OR E)	TOTAL COMPLETED AND STORED TO DATE (D+E+F)	% (G+C)	BALANCE TO FINISH (C-G)	RETAINAGE
			FROM PREVIOUS APPLICATION (D+E)	THIS PERIOD					