University of Illinois **DATE: / /**

Banner Doc #	
Address Sequence:	
Address Code:	
Check Print Location:	
1099?	Y N
Encl?	Y N
OBFS Approval:	

PAYMENT APPLICATION: PART IA - PAYMENT CERTIFICATE for *(mark appropriate box)*

☐ **CONTRACTOR w/ ASSIGNED SUBCONTRACTOR(S)**
☐ **ASSIGNED SUBCONTRACTOR**

PROJECT NAME: _____ **PROJECT #:** _____
APPLICANT NAME & ADDRESS: _____
City: _____ **State:** _____ **Zip:** _____
CONTRACT DIVISION: _____
VENDOR REFERENCE: _____ **ENCUMBRANCE #** _____
APPLICATION #: _____ **FINAL PAYMENT?** ___ **Y** ___ **N**
PAY PERIOD: ___/___/___ **TO** ___/___/___ **BANNER VENDOR NUMBER:** _____

1.0	**CONTRACTOR'S TOTAL CONSTRUCTION CONTRACT SUM AND ALL CHANGE ORDERS**	$_____
	(*total of attached SWC) (N/A to Assigned Subcontractor's Payment Application)*	
2.0	**CURRENT CONTRACT/AGREEMENT AMOUNT**	
2.1	Applicant's Accepted Base Bid and Alternates:	$_____
2.2	Authorized Change Orders for Applicant's Added Work: _____ +	$_____
2.3	Authorized Change Orders for Applicant's Deleted Work: _____ -	$_____
2.4	TOTAL (***2.1 through 2.3***)	$_____
3.0	**CURRENT PAYMENT DUE**	
3.1	Total Value of Applicant's Work Completed to Date	$_____
3.2	Less _____% retained (round to nearest dollar): -	$_____
3.3	Less Payments Previously Certified -	$_____
3.4	Current Payment Due to Applicant	$_____

4.0 CERTIFICATIONS & APPROVALS

4.1 Assigned Subcontractor's Certification
I certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By: _____ Date: _____
Authorized Representative

4.2 Contractor's Approval
Contractor: _____
I agree that the Assigned Subcontractor's progress and performance to date on this project is satisfactory and approve payment of the certified amount.
IF CONTRACTOR'S PAY APPLICATION: I also certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By: _____ Date: _____
Authorized Representative

4.3 Professional Services Consultant's Certification *
PSC: _____
Based on the contract documents, my own observations of the progress of the work and the data comprising the above application, I certify to the Owner that the work has progressed to the point indicated, that the quality of the work appears to be in accordance with the contract documents, and that the Applicant is entitled to payment of the amount certified by him as being currently due.

By: _____ Date: _____
Authorized Representative (Place "N/A" on line if not applicable)

4.4 Owner's Representative's Approval *
University of Illinois-construction unit responsible for the named project
I approve payment of the amount certified above.

By: _____ Date: _____
Authorized Representative (Place "N/A" on line if not applicable)

* Certification only required for Contractor's Payment Application

CFOAPAL **(*required fields)**

Chart *	Fund *	Organization *	Account *	Program *	Activity	Location	SEQ #	$
								$
								$
								$

AUTHORIZED DEPARTMENT APPROVAL		FOR OFFICE OF BUSINESS AND FINANCIAL SERVICES	SORT
	WE, THE UNDERSIGNED, HEREBY CERTIFY THAT THE PAYEE HAS SIGNED A STATEMENT, AS REQUIRED BY THE ILLINOIS PROCUREMENT CODE, AND THAT THE ABOVE BILL IS CORRECT AND PAYABLE FROM THE APPROPRIATION SHOWN.		
	X _____ **AUTHORIZED CERTIFIER**	_____ **CHAIRPERSON, BOARD OF TRUSTEES**	

Distribution: ☐University of Illinois construction unit responsible for the named project ☐Professional Services Consultant ☐Contractor ☐Applicant

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