

University of Illinois

DATE: _____

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

- UNASSIGNED CONTRACTOR
- PROFESSIONAL SERVICES CONSULTANT (PSC)
- CONSTRUCTION MANAGER (CM)

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

PROJECT NAME: _____ PROJECT #: _____

APPLICANT NAME & ADDRESS: _____

City: _____ State: _____ Zip: _____

CONTRACT DIVISION: _____

VENDOR REFERENCE: _____

APPLICATION #: _____

PAY PERIOD: // TO //

ENCUMBRANCE # _____

FINAL PAYMENT? Y N

BANNER VENDOR NUMBER: _____

1.0 CURRENT CONTRACT/AGREEMENT AMOUNT

| | |
|---|----------|
| 1.1 Applicant's Accepted Base Bid and Alternates or Fee as applicable | \$ _____ |
| 1.2 Authorized Change Orders/Amendments for Applicant's Added Work: _____ + | \$ _____ |
| 1.3 Authorized Change Orders/Amendments for Applicant's Deleted Work: _____ - | \$ _____ |
| 1.4 TOTAL (1.1 through 1.3) | \$ _____ |

2.0 CURRENT PAYMENT DUE

| | |
|--|----------|
| 2.1 Total Value of Applicant's Work Completed to Date | \$ _____ |
| 2.2 Less _____ % retained (round to nearest dollar): - | \$ _____ |
| 2.3 Less Payments Previously Certified - | \$ _____ |
| 2.4 Current Payment Due to Applicant | \$ _____ |

3.1 Applicant'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: _____
Authorized Representative

Date _____

3.3 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: _____
Authorized Representative

Date _____

3.2 Construction Manager's Certification (if applicable)

CM: _____
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: _____
Authorized Representative

Date _____

3.4 Owner's Representative's Approval

University of Illinois-construction unit responsible for the named project
I approve payment of the amount certified above.

By: _____
Authorized Representative

Date _____

3.0 CERTIFICATIONS & APPROVALS

CFOAPAL (*required fields)

| Chart * | Fund * | Organization * | Account * | Program * | Activity | Location | SEQ # | \$ |
|---------|--------|----------------|-----------|-----------|----------|----------|-------|----|
| | | | | | | | | \$ |
| | | | | | | | | \$ |
| | | | | | | | | \$ |
| | | | | | | | | \$ |
| | | | | | | | | \$ |

AUTHORIZED DEPARTMENT APPROVAL

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

FOR OFFICE OF BUSINESS AND FINANCIAL SERVICES SORT

CHAIRPERSON, BOARD OF TRUSTEES



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