

1649 W. Shoreline Dr., Suite 201 Boise, Id 83702 Phone: (208) 345-8944 Fax: (208) 429-1480 info@ekcconstruction.com

LEWFOR EKC USE ONLY	BILLING #	DATE
Job #		
		AUTH. BY
ORIGINAL		
APPROVED CO		
ADJ CONTRACT		
BILLED PRIOR		
GROSS BAL		

PLEASE CALL YOUR PROJECT MANAGER IF YOU HAVE ANY QUESTIONS REGARDING THIS FORM OR ITS COMPLETION.

		Original Contract \$
EKC Job#	EKC Job Name	Change Order#
		Change Order#
		Change Order#
Subcontractor Name		Change Order#
		Change Order#
		Change Order#
Draw #	Period Ending	Change Order#
		Change Order#
		Total Contract To Date

** The Following "Current Period Work" and "Job To Date Work" Columns must equal on the bottom line "Net Amount of this Application"

	CURRENT PERIOD WORK	JOB TO DATE WORK
VALUE OF WORK PERFORMED (PER SCHEDULE OF VALUES ATTACHED)	\$	\$
VALUE OF MATERIALS STORED	\$	\$
TOTAL WORK	\$	\$
LESS (5%) RETAINAGE	\$	\$
NET AMOUNT EARNED TO DATE	\$	\$
LESS PREVIOUS APPLICATIONS NET		\$
NET AMOUNT OF THIS APPLICATION NO	\$	\$

CONDITIONAL WAIVER AND RELEASE UPON PAYMENT

e i	the Subcontract Ag	eement as amended	by change orders. If	this is the final application for	sent the actual value of accomplishment payment, Subcontractor agrees that the further claims for change orders,
		-	-		for a total amount
5 1		1 1 2	e		ment or materials furnished to EKC ,
INC through the period ending r	oted above, the chee	ck being made payab	le to the undersigned	l or the undersigned and any jo	bint payee, and when the check has been top notice or bond right the undersigned
has on the job of					
EKC JOB #					
KNOWN AS					
LOCATED AT					
	e			1	to EKC CONSTRUCTION, INC. OR id party should verify evidence of
payment to the undersigned.			crore any recipient o		
COMPANY NAME				_	
DATED	//				
SIGNED BY				_	
TITLE:				_	
NOTE: This form of release is to	be used by a party v	who applies for a pay	ment when the payn	nent check has not yet cleared	the bank. This release only

becomes effective when the check, properly endorsed has cleared the bank.