DCM Form C-10
Revised July 2022

DCM (BC) No. _____

PSCA Projects: PSCA No. _____

Application No. _____

Date: _____

# APPLICATION and CERTIFICATE for PAYMENT

*Attach DCM Form C-10SOV: Schedule of Values*

| | |
|---|---|
| TO OWNER:<br>Entity Name:<br>Address: | PROJECT: |
| FROM CONTRACTOR: Company Name & Address, which must exactly match co. name & payment address spelling as registered in State of AL Accounting & Resource System (STAARS) or AL Buys to avoid rejection:<br>STAARS or AL Buys Vendor #: | ARCHITECT / ENGINEER:<br>Firm Name:<br>Address: |

| | |
|---|---|
| A. Total Original Contract | $ |
| B. Fully Executed (fully signed) Change Order(s) Numbers __ through __ | +$ _____ |
| C. Total Contract To Date | $ |

| | | |
|---|---|---|
| 1. Work Completed to Date per attached Schedule of Values *(Form C-10SOV's Column F Total)* | | $ |
| 2. Materials Presently Stored *(When this amount is greater than $0.00, attach Form C-10SM: Inventory of Stored Materials, or similar list)* | | +$ _____ |
| 3. Total Work Completed to Date & Materials Presently Stored *( _____% of Contract To Date)* | | $ |
| 4. Less Retainage *(If Total Work Completed to Date & Materials Presently Stored (#3) is less than or equal to 50% of Total Contract to Date (C), Retainage = #3 x 0.05. Once #3 exceeds 50% of C and up until project is complete, Retainage = C x 0.025. $0 is retained on final payment application, see last bullet point below Instructions.)* | Final pay app? ☐ Yes. | −$ _____ |
| 5. Total Due | | $ |
| 6. Less Total Previous Payments Billed *(Must exactly match #5 Total Due from previous payment application. # 6 is $0.00 if there is no previous payment application)* | | −$ _____ |
| 7. Balance Due This Estimate | | $ |

## CONTRACTOR'S CERTIFICATION

The undersigned Contractor certifies that to the best of his knowledge, information, and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by him for Work for which previous Certificates for Payments were issued and payments received from the Owner and that current payment shown herein has not yet been received.

By: _____ Date: _____
Contractor's Signature

Name & Title _____

Sworn and subscribed before me this _____ day of _____
Day Month, Year

Seal:

_____
Notary Public's Signature

## ARCHITECT'S / ENGINEER'S CERTIFICATION

In accordance with the Contract Documents, the Architect/ Engineer certifies to the Owner that, to the best of the Architect's/ Engineer's knowledge and belief, the Work has progressed to the point indicated herein, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the amount approved.

By _____
Architect's / Engineer's Signature

Name & Title _____

Date _____

## INSTRUCTIONS

- PSCA-funded projects, and State Agency-owned projects: Two copies of pay. app., each with original signatures and all attachments required.
- Date of first payment application cannot precede the Notice to Proceed's Begin Date.
- Pay. app. must exactly match an attached DCM Form C-10SOV: Schedule of Values.
- A change order must be fully executed before inclusion on a payment application.
- Contractor's signature date cannot precede the payment application date.
- Contractor and Notary signee dates must match.
- Progress schedules must be included with non-final payment applications.
- One payment application per month may be submitted.
- On a final payment application, the following is required for release of retainage: all change orders must be fully executed (signed by all parties and approval authorities) and included in B., the Certificate of Substantial Completion for entire work is fully executed, and all other close-out requirements per General Conditions Article 34 are completed.

## APPROVAL

_____
Owner Entity

By _____
Signature

Name & Title _____

Date _____