City of Columbus, Ohio

Contractor Progress Payment Certification

		ject Nu		
	F		Name:	
Contractor: Estimate Number:				Estimate Date:
	LStill	iate in		LStilliate Date.
go	od faith b	elief tha	ereby verify bat all items r	duly authorized representative of the Contractor for the ased on personal knowledge or reasonable investigation and epresented by this estimate were constructed in reasonably t Documents.
fai		ly comp	pensation for	ution of this document by the Contractor acknowledges full, the work represented by this estimate. Any exception to the
su		ll be p	aid monies	the Contractor certifies that all subcontractors and material due from this Progress Payment in accordance with the
	Ref. No	Item	Quantity	Reason for exception
\mathbb{C}_{0}	ntractor si	anature		Title Date

Instructions:

Project Number: Show the project number on the contract.

Project Name: Show the project name as it appears on the signed contract.

Contractor: Show the Contractor's full company name.

Estimate Number: Show the estimate number that this certification corresponds to. Show the estimate date that this certification corresponds to.

The first sentence should denote the printed or typed name of the authorized Contactor's project representative (as listed on the form CA-D-10).

The same authorized representative will provide the signature, title and dates on the form.

Only the duly authorized Contractor personnel (as provided by the form CA-D-10) are approved to sign the Contractor Progress Payment Certification.