



SUB INVOICE # \_\_\_\_\_

**SUBCONTRACTOR PAYMENT REQUISITION**

Project Name \_\_\_\_\_

Vericon Subcontract No. \_\_\_\_\_

Period \_\_\_\_\_ To \_\_\_\_\_

Date \_\_\_\_\_

Send To: [invoices@vericonbuilds.com](mailto:invoices@vericonbuilds.com)

**OR**

Accounts Payable Dept.  
 Vericon Construction Company  
 1063 Route 22 East  
 Mountainside, NJ 07092  
 Tel: 908-873-0022 / Sandy

Name \_\_\_\_\_

Address \_\_\_\_\_

**NO EXTRAS MAY BE REQUISITIONED WITHOUT AN APPROVED CHANGE ORDER**

		A	B	C	D	E	F
		ORIGINAL CONTRACT AMOUNT	TOTAL WORK COMPLETED TO DATE	TOTAL GROSS AMOUNT PREVIOUSLY BILLED	( B - C ) GROSS AMOUNT CURRENTLY BILLED	( D x 10% ) RETAINAGE THIS INVOICE	( D - E ) NET THIS INVOICE
<b>BASE CONTRACT ONLY</b>	→	_____	_____	_____	_____	_____	_____
<u>CHANGE ORDER #</u>	<u>EXTRA #</u>	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
						<b>TOTAL</b>	_____

The undersigned contractor hereby certifies that the work performed and the materials described in this Application for Payment conform with all requirements of the contract (and all authorized changes thereto) between the undersigned contractor and Vericon Construction Company ("Vericon") relating to the above referenced project and that the description represents the actual value of accomplishment.

The undersigned contractor further certifies that all payments due for work covered by prior Applications for Payment, less applicable retention, have been made to: (1) all my subcontractors (including sub-subcontractors); and (2) all suppliers of material and/or labor used in or in connection with the performance of this contract. The undersigned contractor further certifies that it is in full compliance with all Federal, State and Local laws, and that all Social Security, Unemployment Worker's Compensation, welfare, pension fund and/or fringe benefits or premiums of any nature due in connection with this contract have been fully paid and are current as of the date of this Application for Payment, except as noted on the reverse side of this Application for Payment.

Furthermore, in consideration of the payments received, and upon receipt of the amount requested in this Application for Payment, the undersigned contractor, including all of its subcontractors, materialmen and laborers do hereby waive, release and relinquish all claims or rights to file a mechanic's and/or construction lien related to the work and/or materials covered by this Application for Payment, which the undersigned contractor may now have upon the premises described above and the undersigned contractor further agrees to execute and return to Vericon any and all documents required by Vericon in order to remove any claim or lien which the undersigned contractor or any of its subcontractors, materialmen or laborers have or may file in a public office within three (3) days of receipt. To the extent any of the terms contained herein conflict with the Terms of the Master Subcontract Agreement between the undersigned contractor and Vericon, it is agreed that the terms of the Master Subcontract Agreement shall control.

**RETAINAGE MUST BE INVOICED SEPARATELY UPON COMPLETION OF JOB**

OFFICER OF SUBCONTRACTOR	NAME	TITLE	DATE
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