

APPLICATION FOR PARTIAL PAYMENT OF CONTRACT



Project Title: 2017 Sanitary Sewer System Maintenance Program - CIPP Slip Lining
Contractor: Hydro-Klean, LLC
Address: 333 NW 49th Place, Des Moines, IA 50313
Finance Budget Code: 650.3650.4452 **Finance Project #** 650.4452
Vendor Project or Invoice #: **PO #**
Original Contract Date: July 3, 2017 **Vendor #** 3700

Date of Council Meeting: November 20, 2017 **PAYMENT REQUEST #** 1
PAYMENT PERIOD: From: July 3, 2017 Through: November 10, 2017

Contract Summary

Original Contract Amount:	\$	102,969.00	
Net change by Change Orders:	\$	31.20	
Contract Amount to Date: (line 1 ± 2)	\$	103,000.20	
Total completed and stored to date:	\$	103,000.20	
Retainage: 5 % of Completed Work:	\$	5,150.01	
Total Earned less Retainage:	\$	97,850.19	
Less previous applications for payment:	\$	-	
SUBTOTAL			\$ 97,850.19
OTHER CHARGES (Attach an itemized list)			\$ -
CURRENT PAYMENT DUE			\$ 97,850.19
Balance to finish, including retainage:	\$	5,150.01	

Contract Time Remaining (If applicable) -

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all the amounts have been paid by the Contractor for work for which previous Certificate(s) for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

Construction Contractor Approval: Hydro-Klean, LLC
Signature: David Jans, CEO Date: 11-13-17

Engineer / Consultant Approval: City of Ankeny
Signature: _____ Date: _____

City of Ankeny Staff Approval:
Signature: Matt Ahrens Date: 11-13-17

Submit to: Matt Ahrens, P.E. - Civil Engineer II - Public Works Department
E-mail: mahrens@AnkenyIowa.gov **Phone:** (515) 963-3536 **Fax:** (515) 963-3535

Date Printed: 11/13/2017

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CONTRACT PRICE DETAIL

[illegible]

TOTAL CONTRACT AND VALUE OF WORK COMPLETED TO DATE

\$ 103,000.20

\$ 103,000.20

0.00%

APPLICATION FOR PARTIAL PAYMENT OF CONTRACT

Previous Applications for Payment

No.	Date	Amount
1		
2		
3		
4		
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7		
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Previous Applications for Payment

No.	Date	Amount
36		
37		
38		
39		
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66		
67		
68		
69		
70		

TOTAL \$ -

Record of Change Orders

No.	Date	Amount
1	November 20, 2017	\$ 31.20
2		
3		
4		
5		
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7		
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10		
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22		
23		
24		
25		

TOTAL \$ 31.20

Contract Time Remaining

Contract Period: [CLICK TO CHOOSE](#)
 Original Contract Date: July 3, 2017
 Original Contract Time: _____
 Added by Change Order: _____
 Contract Time to Date: _____ -
 Time Used to Date: _____
 Contract Time Remaining: _____ -