



(SECTION III) CERTIFICATION BY HILLSBOROUGH COUNTY AND REPRESENTATIVES

Based on on-site observations and the data comprising this Application for Payment, the undersigned certifies that the Work has progressed to the point indicated herein and to the best of my knowledge, information and belief is in accordance with the Contract Documents and that the CONTRACTOR is entitled to payment of the amount certified herein.

Hillsborough County INSPECTOR:	_____	DATE	_____
Hillsborough County RESIDENT ENGINEER:	_____	DATE	_____
Hillsborough County PROJECT MANAGER:	_____	DATE	_____
Hillsborough County SECTION MANAGER*:	_____	DATE	_____

(\*applicable if Project Manager is a temporary employee, consultant, or 50% of payment application; otherwise N/A)

COUNTY REPRESENTATIVE:

PROFESSIONAL CONSULTANT:	_____	DATE	_____
BY:	_____		

(See Instructions on Back)

**HILLSBOROUGH COUNTY'S CONSTRUCTION APPLICATION  
FOR PAYMENT INSTRUCTION**

The purpose of this form is to facilitate the summary information for Hillsborough County's Construction Application for Payment. This form will be completed by the Contractor each time payment is requested for a project. This Application for Payment will be accompanied by a Schedule of Values (which provides line-item detail information for the project), Attachment 1, and Attachment 2.

**SECTION I:** This section will be completed by the Contractor. The Contractor will provide the information as indicated on the form.

**SECTION II:** This section will be completed by the Contractor. In this section, the Contractor will provide certification about the information provided in Section I. The certification will be provided in accordance with the construction Contract Documents.

**SECTION III:** This section will be completed to provide approval by Hillsborough County staff and/or its representative(s). Under the approval section by Hillsborough County staff: signature/approval by a County Project Manager will always be provided. However, the signature for the Resident Engineer or the Inspector will only be provided if the County is responsible for these functions. When the County is not responsible for these functions, the approval will indicate "N/A".

Under the approval section by Hillsborough County's Representative: signature/approval will be provided by a Construction Manager when applicable. Additionally, signature/approval may also be provided by a Professional when applicable. When there is no Construction Manager or Professional responsible for such activities then the approval will indicate "N/A".

Contractor Signature

PROJECT: \_\_\_\_\_  
CIP NO: \_\_\_\_\_ BID NO: \_\_\_\_\_

**ATTACHMENT 2**

PAGE ONE OF \_\_\_\_\_ PAGE(S)

CONTRACTOR: \_\_\_\_\_  
\_\_\_\_\_

APPLICATION NO.: \_\_\_\_\_  
APPLICATION DATE: \_\_\_\_\_

FOR PERIOD FROM: \_\_\_\_\_  
TO: \_\_\_\_\_

<u>Name of Entity</u>	<u>Relationship</u>	<u>Amount in Dispute</u>	<u>Corresponding line item reference to Schedule of Values</u>	<u>Explanation</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

-or-

This page [ ] is [ ] is not applicable.

\_\_\_\_\_  
Contractor Signature

## PAGE OF PAGES

APPLICATION NO. \_\_\_\_\_  
APPLICATION DATE: \_\_\_\_\_  
FOR PERIOD FROM: \_\_\_\_\_  
TO: \_\_\_\_\_

[illegible]