

**PINAL COUNTY
DEPARTMENT OF PUBLIC WORKS
CONSULTANT DESIGN CONTRACT PAYMENT REQUEST**

TO: DIRECTOR, DEPARTMENT OF PUBLIC WORKS, PINAL COUNTY, P.O. BOX 727
31 N. PINAL STREET, (BUILDING F) FLORENCE, AZ. 85232

PROJECT DESCRIPTION: _____ PAYMENT REQUEST NO. _____

Period of Performance _____ to _____

Project No. _____ ADOT Project No. _____ Contract No. _____ Date of NTP _____

FIRM'S NAME _____ Date _____

FIRM'S ADDRESS _____ Tele. No. _____

A. Consultant fee per contract

- | | |
|--|----------|
| 1. Contract Amount (Basic Fee) | \$ _____ |
| 2. Add Allowances and/or Change Orders | |
| _____ \$ _____ | |
| _____ | |
| 3. Total Allowances/Change Orders | \$ _____ |
| 4. Total Contract Amount (including additions) | \$ _____ |

B. Consultant fee earned to date

(Please attach documentation to support changes)

- | | |
|--|----------|
| 1. *Value of work completed _____% × _____ = | \$ _____ |
| (Basic Fee) | |
| (include change orders that increase basic fee) | |
| 2. Add payment for Allowance and/or Change Orders that increase Allowances Attach invoice(s) | |
| _____ | |
| _____ | |
| 3. Total of Allowances and/or Change Orders | \$ _____ |
| 4. Total Earned to Date | \$ _____ |
| 5. Less Amount Previously Requested | \$ _____ |
| 6. Total Requested this Payment | \$ _____ |

Submitted by _____ Date _____
Consultant Project Manager

Checked by _____ Date _____
Project Engineer

Approved by _____ Date _____
County Engineer / Director

NOTE

- All Progress Payments are subject to limitations specified in contract, a Consultant Progress Report must accompany this payment request.