

ROEBUCK BUILDINGS CO., INC.  
 P O Box 130  
 ROEBUCK, SC 29376  
 Phone 864.576.6330  
 Email accounting@rbcg.com

**SUBCONTRACTOR APPLICATION FOR PAYMENT**

Project Name: \_\_\_\_\_  
 Subcontractor: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Application Date: \_\_\_\_\_  
 Invoice Number: \_\_\_\_\_  
 Period From: \_\_\_\_\_  
 Period Ending: \_\_\_\_\_  
 Subcontract No.: \_\_\_\_\_

**FOR ROEBUCK BUILDINGS USE ONLY**

Original Contract Sum.....	_____	Vendor No	_____
Net Change by Change Orders..... ( List Change Orders on Continuation Sheet )	_____	Job No	_____
Contract Sum to Date.....	_____	Cost Code	_____ S
Total Completed & Stored to Date..... (Total in Column 5 on attached Schedule of Values)	_____	\$	_____
Retainage 10%..... (Total in Column 6 and 7 on attached Schedule of Values)	_____	Amount	_____
Total Earned Less Retainage.....	_____	\$	_____
Less Previous Applications for Payment.....	_____	Retainage	_____
Current Payment Due.....	_____	Proj Manager	_____
		Date Due	_____

We, or I, certify that all bills due for labor, subcontracts and materials for all items of work on the above project on which applications have heretofore been issued have been paid.

We, or I, make this affidavit for the purpose of procuring from Roebuck Buildings Co., Inc. a payment of \$ \_\_\_\_\_ upon the contract for labor, subcontracts, and materials. All funds drawn from this payment will be used to retire debts pertaining to this project. The undersigned, upon receipt of the above payment does hereby waive, release and relinquish any and all claims, demands, and right of lien for all work, labor, material, machinery, and other goods, equipment, services done, performed, and furnished to Roebuck Buildings Co., Inc. on the above listed project.

**Roebuck Buildings Co., Inc reserves the right to require lien waivers from all of your suppliers.**

**Subcontractor:**

By: \_\_\_\_\_

Date: \_\_\_\_\_

State of:

County of:

SWORN TO and Subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Notary Public : \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

Subcontractor Application for Payment Continuation Sheet

Application Date \_\_\_\_\_  
 Invoice Number \_\_\_\_\_  
 Subcontract Number \_\_\_\_\_

1  Line Item	2  Brief Description of Work	3  Contract Amount	4  % Com- pleted	5  Total Value Total Due Before Retention	6  Gross Previous Invoices	7  Due on this Inv Before Retention Col. 5 minus Col. 6
10						
20						
30						
40						
50						
60						
70						
80						
90						
100						
110						
120						
130						
140						
150						
160						
170						
180						
200						
210						
220						
230						
240						
250						
260						
270						
280						
290						
300						
	Subtotal or Total					
	Retention - Prior & Current					
	Prior & Current Payments					
						DUE