FORM 6

INTERIM DRAW APPLICATION

Property Owner Name:	
Property Address:	
·····	
Contractor:	
Proceed Order Date: Comple	etion Date:
ORIGINAL CONTRACT AMOUNT	\$
NET CHANGE BY CHANGE ORDER TO DATE	\$
CONTRACT SUM TO DATE	\$
PARTIAL PAYMENT AMOUNT	\$
BALANCE DUE UPON COMPLETION	\$
This certifies that I agree with the above statement and I am willing to authorize partial payment to said contractor in the amount of \$ which I understand is % of my contract amount with	
Owner	Date
Witness	Date
I hereby certify that the work is% complete and authorize payment to the contractor in the amount of \$ which is% of the contract amount.	
Housing Specialist	Date
The undersigned Contractor certifies that the work covered by this Application for Interim Draw has been completed in accordance with the Contract Documents, and that all amounts have been paid or will be paid by the Contractor for all work which this request for payment will be issued.	
Contractor	Date