

The following procedures help TRICO to process your billing for payment on the contract. Please submit your billings in the format and according to the procedures described herein so we can get your payment to you as soon as possible. If you have any questions regarding any of the information we need, please call Robyn Tokunaga, (360) 610-4893.

1. Billing Package

Your billing for work performed under this contract must be submitted on the following TRICO forms, which are included herein, and when combined together are called the Billing Package:

- Application for Payment
- Schedule of Values
- Interim Waiver and Lien Release

You are welcome to submit your firm's internal billing forms as an attachment to the Billing Package. However, we do not require them.

2. Billing Deadline

Submit your billing package via **EMAIL** to our Accounts Payable Department at ap@tricompanies.com (We kindly ask that you do not post mail invoices as this will slow down the process.) Invoices must be submitted to TRICO by 5:00PM on the 25th day of the month.

3. Application for Payment

- Your first Application for Payment should be Application for Payment No. 1, the second No. 2 and so on.
- The period ending should be the last day of the month such as June 30 or July 31.
- The Change Order amount should equal the sum of all change orders issued and approved by TRICO. Do not include change orders that have not been approved.
- Be sure that the form is signed and dated.

4. Schedule of Values

- The Schedule of Values should include a detailed breakdown of the Exhibit D – Contract Amount, including, but not limited to, areas and phases of work, labor & materials and equipment.
- The amount billed for each line should either be what is actually complete at the time of the billing or an amount projected to be complete through the end of the month.
- Do not adjust the contract items on your schedule of values for Change Orders. Each approved Change Order should be listed as a new item.
- TRICO Subcontractor PO number should accompany each application for payment
- Schedule of Values to be approved by TRICO Project Manager prior to first billing

5. Interim Waiver and Lien Release

- The Interim Waiver and Lien Release must accompany each billing.
- The Conditional Waiver and Release should match the net payment that will be made to you for the month. This will be Item 8 on your Application for Payment form.
- The Unconditional Waiver and Lien Release should match the total of all amounts previously paid to you on the contract.
- If your Application for Payment is adjusted through the review process, you will be required to submit a new Interim Waiver and Lien Release.
- Be sure to have a corporate officer sign and date these documents.



APPLICATION FOR PAYMENT

(Due to TRICO's Accounts Payable email ap@tricocompanies.com by the 25th of each month, projecting work through month end)

TO: TRICO Companies LLC

 P.O. Box 409

 Burlington, WA 98233

FROM: Vendor Name

 Street Address

 City, State and Zip Code

(Please fill in Remit Address)

TRICO JOB NAME: _____
TRICO PO OR SUBCONTRACT#: _____

DATE: _____

We hereby submit our Application for Payment No. _____ for Contract work performed on the above project through the period ending _____, 20_____.

		TRICO ADJUSTMENTS MADE DO NOT WRITE IN THIS SPACE
1. Original Contract Amount		
2. Change Orders Approved to Date		
3. Total Contract and Change Orders Approved to Date		
4. Value of Work Completed to Date (a)		
5. Less 5% Retention _____	< >	
6. Net Total Billing Less Retention (line 4 less line 5)		
7. Less Previous Billings (including those unpaid)	< >	
8. Current Payment Due (b)		

(a) From Schedule of Values

(b) Lien Release Required for this Amount

The Undersigned Subcontractor/Supplier certifies that to the best of its knowledge, information and belief, the work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Subcontractor/Supplier for labor, materials and permits for which previous Applications for Payment were issued and payments received from the Contractor, and that current payment shown herein is now due.

The undersigned further certifies that it has incurred no costs during the period covered by this application for extra or changed work, nor for delays or acceleration; and will make no claim therefor, except for written claims submitted in writing to TRICO Companies, LLC prior to the date of this application, or for other claims identified and reserved in the amounts listed below.

By (sign): _____ Dated: _____
 Print: _____ Title: _____

REQUEST FOR PAYMENT DETAIL

Please Reference Exhibit D – Contract Amount

Contract Item #	Cost Code	Type	Description	Unit Qty	U/M	Price	Contract Amount	% Complete	Completed To Date	Previously Completed Work	Amount Billed This Period
Totals							\$	%	\$	\$	\$

INTERIM WAIVER AND LIEN RELEASE

FROM

(name of firm giving release)

(business address)

(city, state, zip)

(contact person)

(contact telephone)

CONDITIONAL WAIVER AND RELEASE

Upon receipt of a check from _____ in the
sum of \$ _____ for
labor, services, equipment, materials furnished on the
above referenced project and when the check has been
properly endorsed and has been paid by the bank upon
which it is drawn, this document shall be effective to
release any and all claims and rights of lien and/or all
claims or rights of claims of any nature whatsoever which
the undersigned has on the above referenced project,
through _____ (date) only and
does not cover retention or items furnished after that date.

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS
OF THE STATE OF WASHINGTON THAT THE ABOVE IS A
TRUE AND CORRECT STATEMENT.

Signature:

(authorized corporate officer/partner/owner)

(title)

Dated this _____ day of _____, 20____ at

(city
and state)

PROJECT

(project name)

(project address)

(city, state, zip)

(contract / job number)

UNCONDITIONAL WAIVER AND RELEASE

The undersigned does hereby acknowledge that the
undersigned has been paid and has received progress
payment in the sum of (total paid to date)
\$ _____ for
labor, services, equipment, materials furnished on the
above referenced project and does hereby release any and
all claims and rights of lien which the undersigned has on
the above referenced project, of any nature whatsoever.
The release covers all payment for labor, services,
equipment, materials furnished and/or claims to the above
referenced project through _____
(date) only and does not cover retention or items furnished
after that date.

NOTICE: THIS DOCUMENT WAIVES RIGHTS
UNCONDITIONALLY AND STATES THAT YOU HAVE BEEN
PAID FOR GIVING UP THOSE RIGHTS. THIS DOCUMENT IS
ENFORCEABLE AGAINST YOU IF YOU SIGN IT, EVEN IF YOU
HAVE NOT BEEN PAID.

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS
OF THE STATE OF WASHINGTON THAT THE ABOVE IS A
TRUE AND CORRECT STATEMENT.

Signature:

(authorized corporate officer/partner/owner)

(title)

Dated this _____ day of _____, 20____ at

(city
and state)