THE METROPOLITAN SEWERAGE DISTRICT OF BUNCOMBE COUNTY

Incinerator Sand Transport System Replacement, Project No. 2024036 Purchase Order No. APPLICATION NO.: _____ DATE NOTICE TO PROCEED:_____ COMPLETION DATE: DAYS REMAINING IN CONTRACT: _____ PERCENT COMPLETE: CONTRACTOR: ADDRESS: **ORIGINAL CONTRACT AMOUNT:** APPROVED CHANGE ORDER AMOUNT: **REVISED CONTRACT AMOUNT:** TOTAL WORK COMPLETED TO DATE: TOTAL MATERIALS STORED ON SITE: TOTAL EARNED THIS APPLICATION: LESS RETAINAGE (%): **SUBTOTAL** LESS PREVIOUS PAYMENTS: **CURRENT PAYMENT DUE: CONTRACTOR'S REPRESENTATIVE** TITLE **DATE** MSD APPROVAL: INSPECTOR DATE CONSTRUCTION DIRECTOR DATE PROJECT ENGINEER DATE

AFFIDAVIT OF PAYMENT OF CLAIMS

BY:		
This day	, perso	onally appeared before,
a Notary F	Public in and	for the County of
, State of		and being by me
first duly sworn, states that all subcontractors and supp	liers of labor and n	naterials have been paid
all sums due them as of	(date), for work	performed or materials
furnished in the performance of the contract between	een Metropolitan	Sewerage District and
, Contractor, dated _		.
for the construction of the Incinerator Sand Trans		
2024036 or arrangements have been made by	the Contractor	satisfactory to such
subcontractors and suppliers with respect to the payr		•
by the Contractor.		, e
by the Contractor.	(CONTED A CITO	. .)
	(CONTRACTO	OK)
	By:	
	Title:	
CWODN TO AND CUDCCDIDED before me this the	dov. of	, 2025.
SWORN TO AND SUBSCRIBED before me this the _	day of	
My Commission Expires	1	Notary Public
(SEAL)		