



REQUEST FOR PROGRESS PAYMENT DISBURSEMENT

REQUESTED PROGRESS PAYMENT AMOUNT	EIP FILE NO.
OWNER(S)	OWNER(S)
PROPERTY ADDRESS	CITY, STATE, ZIP CODE

Settlement Charges

- | | |
|-------------------------------------|----------|
| 1. Title Costs | \$ _____ |
| 2. Escrow Services | \$ _____ |
| 3. Assessment Lien Recording Fee(s) | \$ _____ |
| 4. Permit Fee(s) | \$ _____ |
| 5. Disbursement Fee(s) | \$ _____ |
| 6. Other: _____ | \$ _____ |
| 7. Other: _____ | \$ _____ |
| 8. Total Settlement Charges | \$ _____ |

Net Settlement

- | | |
|-------------------------------|----------|
| Assessment Amount | \$ _____ |
| Minus Total Settlement | \$ _____ |
| Net Disbursements to Assessee | \$ _____ |

Required Attachments

- Evidence of onsite inspection
- Invoice, cost statement, or equivalent from contractor for the Requested Progress Payment Amount
- Receipts, statements, purchase orders, or other evidence of actual cost for items not covered in contractor invoice which are part of the Requested Progress Payment Amount
- Other: _____

By submitting this Request for Disbursement, I certify that:

- At least 75% of the materials for which disbursement is requested have been delivered to the property and have been reasonably secured as confirmed by an onsite inspection.
- The Requested Disbursement Amount does not exceed 50% of the Maximum Disbursement amount in the Assessment Contract.
- No stop payment or mechanic's lien notice pertaining to the Improvements has been filed.

I understand that the City will disburse funds on the first business day of the month immediately following the month in which this Request for Progress Payment Disbursement and all Required Attachments is submitted to EIP *provided that* these documents are received by EIP at least five City business days before the end of the month. Otherwise, disbursement will be made on the first business day of the next month. Disbursement will be made to the Owner(s) identified in the Assessment Contract unless the Owner(s) have executed an Assignment of Right to Receive Payment, which is on file with EIP.

OWNER SIGNATURE

OWNER SIGNATURE

NAME (PLEASE PRINT)

DATE

NAME (PLEASE PRINT)

DATE