Owner/Applicant Satisfaction & Payment Request Form

Please complete the following form and submit it to the City of Appleton with documentation that the owner/applicant has paid the contractor(s) and vendor(s) and; therefore, the owner/applicant is requesting reimbursement of up to 50% of eligible project costs up to \$7,000 dollars.

A statement containing a full list of the laborers, vendors and contractors to whom payment was made for the project and the itemized amount of such payments must be attached to this request.

Note: Complete the lien waiver portion of the form for each contractor.

Owner:	Applicant:
Business Name:	Address:
Phone Number:	Payment Requested Per Grant Agreement: \$
Contractor(s):	
Owner & Applicant:	
I/We hereby agree that the work outlined in our Grant Agreement has been completed to mine/our satisfaction and payment has been made to the contractor. I/We are requesting release of the City of Appleton funds in accordance with the Grant Agreement.	
Note: A completed W-9 for the owner/appli	cant that will be issued the reimbursement check must be
received prior to reimbursement being made	
Owner Signature:	Date:
Applicant Signature:	Date:
For City Use Only - Account Number:	
Contractor – Waiver of Lien:	
performed and materials supplied, and includin	(insert contractor/vendor name) hereby waive all son the property located at the address above, including labor ag those of my subcontractors, if any. As the contractor/vendor, I is for non-payment of labor and/or materials should be filed
Contract amount: \$	
Contractor/Vendor Signature:	Date: