

For Payment # _____

- a. Value of material in storage at end of this period. (Col. 9 Total) \$ _____
- b. Less value of materials lost, missing, or rejected. (See Table II below) \$ _____
- c. Net value of materials in storage at end of this period. (a - b) \$ _____
- d. Percentage payable under contract. (See Contract Specifications) _____%
- e. Amount due for materials in storage. (c x d) \$ _____

Table I:

Item No.	Description	Place of Storage

The above materials or equipment is stored at the location(s) indicated above and I have inspected the above materials or equipment while at the location(s) specified and I find that:

- (a) The materials or equipment stored is the same as indicated on paid invoices submitted to The Department of Design and Construction for payment of such materials or equipment.
- (b) The quantities of materials or equipment in storage is the same as indicated under Column 7 on the reverse side of this form, except as indicated below in Table II.
- (c) The material or equipment in storage is tagged "Property of the City of New York"

Contractor's Representative

Department of Design and Construction

Print Name

Signature

Title

CPM/RE: _____
Print Name

Signature

Title

Date: _____

Date: _____

Table II:

Material or Equipment Lost, Missing, or Rejected at the Time Inspection was Made.

Invoice No.	Vendor	Item No.	Description	Requisitioned Amount
Total				