

Agency-Wide Rev. 05/30/25 RCRP_053025

Project ID	Contract Registration Number	Work Order Number	Change Order Number
Project Address			
ayment Number	Payment Period From	Payment Period To	Submission Date
This requisition for	payment is being:		
	rned for the following reasons:		
	documentation. (See attached Docu	ment Checklist)	
□ Incomplete prep	aration of forms.		
□ Clarification of s	ubmitted information. Please clarify:		
□ Change Order/T	ask or Work Order is not registered.		
□ Insurance has ex	pired.		
□ Time Extension is	s not Approved.		
☐ Other. (Provide e	explanation.)		
PM/EIC	Print Name	Title	
	Signature	Date (MM/DD/YY)	

Program Unit/Section/Borough Office