

SUBCONTRACTOR ONLINE PAYMENT PROCESS

1. Click on the link below to access Georgia Pay Application:

GA Pay App:

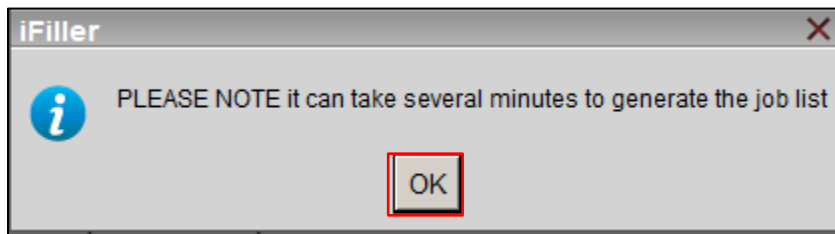
<https://eforms.choateco.com/iFiller/iFiller.jsp?fref=f48028a042e6fcb97d64ab90d98cb3a9>

Please note, Schedule of Values are required. We recommended billing in your accounting system prior to starting Choate's billing. Add the above link to your Favorites for future billings.

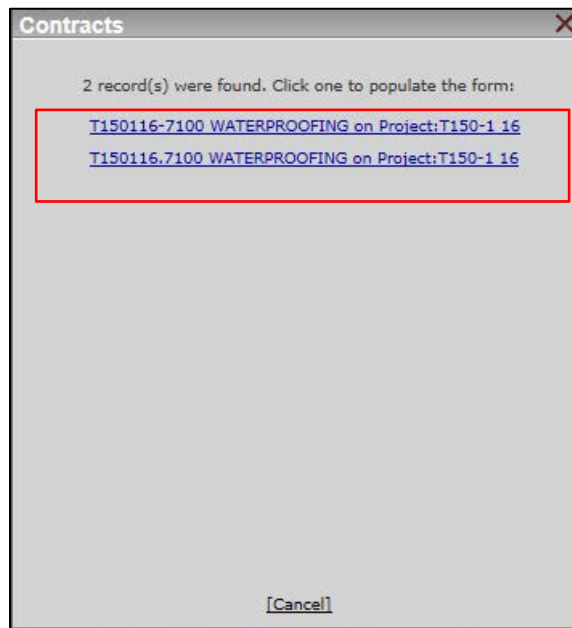
1. In the top right hand corner, type in your **User Name & Password**. Click **Log In**. Click **Start**. Billing cannot be saved for future completion.

The screenshot shows the 'EXHIBIT "D" APPLICATION FOR PAYMENT' form for Choate Construction Company. The form includes fields for 'JOB#', 'SUBCONTRACT#', and 'VENDOR: 1000'. The 'TO:' field is filled with 'CHOATE CONSTRUCTION COMPANY' and the 'FROM:' field is also filled with 'CHOATE CONSTRUCTION COMPANY'. In the top right corner, there are input fields for 'User Name' (containing 'vcameron7') and 'Password' (containing '*****'). Below these fields are 'Log In' and 'Start' buttons. The Choate Construction Company logo is visible on the left side of the form.

2. Click **OK**.



2. A box will open listing all subcontracts/purchase orders for your company. Select the subcontract/purchase order you are billing for.



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- All boxes that are grayed out are prefilled and pull from our Accounting system. All yellow boxes are required and need to be completed. Blue boxes are formula controlled. Change **Bill Type** to Partial Conditional if it's a progress billing or Retainage if it's a retainage billing. Click tab to move to next box. Enter **AP Email** address for notification if a pay app is rejected. **Billing Email** is the email address associated with the Login and will receive notification once a pay app is reviewed or rejected.

		EXHIBIT "D" APPLICATION FOR PAYMENT		User Name vcameron7 Password ***** Log In Start
JOB# <u>T150-1</u>		SUBCONTRACT# <u>T150116.7100</u>		VENDOR: <u>1000</u>
TO: <u>CHOATE CONSTRUCTION COMPANY</u>		FROM: <u>CHOATE CONSTRUCTION COMPANY</u>		
PROJECT: <u>ELECTRONIC PAY APP DEMO</u>		Bill Type: <u>Partial Conditional</u>		
AP EMAIL: <u>vcameron@choateco.com</u>		BILLING EMAIL: <u>vcameron@choateco.com</u>		

- Enter **Payment Request No**, Enter billing **Period**. Select **Yes** or **No** if you would like to offer a 2% discount for early payment. You can opt in or out after pay application is submitted by contacting the Project Manager.

PAYMENT REQUEST NO: <u>1</u>	PERIOD: <u>03/01/2016</u> TO: <u>03/31/2016</u>	2% Early Pay Discount? ☒ Yes ☐ No
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- Enter **Value of Work Completed to Date** on **Line 1**. Please note, billings over the **Adjusted Contract Amount** are not permitted. Contact the Project Manager to resolve any Change Order issues prior to billing.
- Line 4** (retainage percentage), will auto calculate, but can be edited. To edit the percentage or for Retainage billing, click in the yellow percentage box. Delete current content and enter new percentage amount.
- Line 6** (Total Previously Certified), will auto populate, but can be edited. Please note, it may not reflect retainage billing or previous billings that have not been approved.

Original Contract Amount:	\$13,500.00
Approved Change Orders:	\$0.00
Adjusted Contract Amount:	\$13,500.00
1. Value of Work Completed to Date	Cannot exceed Adjusted Contract Amount 5,000.00
2. Materials Stored on Site	
3. Total Complete and Stored to Date (Line 1 + Line 2)	\$5,000.00
4. Less Retainage (Line 3 x .10 %)	\$500.00
5. Total less retainage (Line 3 - Line 4)	\$4,500.00
6. Total Previously Certified (Deduct)	\$0.00
7. NET DUE THIS REQUEST (Line 5 - Line 6)	\$4,500.00
*Schedule of Values/Cost Summary must be Attached	

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8. All job information will prefill and pull from our Accounting System. **Current Payments** amount will pull from **Line 7** of the pay application. **Prior Payments** amount will pull from our Accounting System based on the billing period date, but can be edited.

INTERIM WAIVER AND RELEASE UPON PAYMENT
 THE UNDERSIGNED has been employed by Choate Construction Company (Name of contractor or subcontractor) to furnish
 WATERPROOFING
 (Described materials and/or labor) for the construction of improvements known as ELECTRONIC PAY APP DEMO
 ("Project"), being constructed by Choate Construction Company ("Contractor"), located in the city of ATLANTA, county of
 FULTON, and is owned by ** One Time Customer ** ("Owner") and more particularly described as follows:
 ELECTRONIC PAY APP DEMO
 8200 ROBERTS DRIVE, SUITE 600
 ATLANTA GA 30350
 (Describe the property upon which the improvements were made by using either a metes and bounds description, the land lot district, block and
 lot number, or street address of the project.)

CURRENT PAYMENTS:
 Upon receipt of the sum of \$4,500.00, THE UNDERSIGNED mechanic and/or materialman waives and releases any and all liens or claims
 of liens it has upon the foregoing described property or any rights against any labor and/or material bond through the date of 03/31/2016 and
 excepting those rights and liens that the mechanic and/or materialman may have in any retained amounts, on account of labor or materials, or
 both, furnished by THE UNDERSIGNED to or on account of said Choate Construction Company for the project.

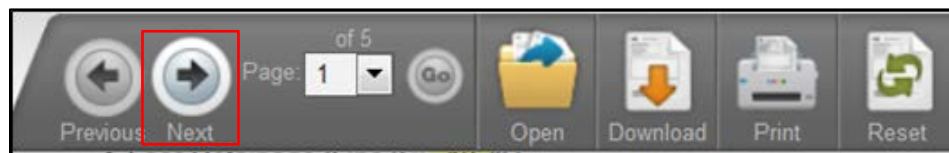
PRIOR PAYMENTS:
 THE UNDERSIGNED further acknowledges receipt of payment(s) to date for the Project in the amount of \$0.00 from Subcontractor and/
 or Contractor for labor employed in and/or materials furnished, and, therefore, waives and releases any and all liens, claims of liens or
 damages it has against the foregoing described property, the Owner of the Project, Contractor, or Contractor's Surety through the date of
 03/01/2016 (date).

AFFIDAVIT AND CERTIFICATION:
 THE UNDERSIGNED certifies that the work performed and the materials supplied to date, as covered by this Application for Payment, has been
 completed in accordance with the Subcontract Documents, and represents the actual value of the work under the terms of the Subcontract (and
 all changes thereto) between the undersigned and Choate Construction Company.

THE UNDERSIGNED (1) acknowledges receipt of the amount set forth above as "Total Previously Certified", (2) certifies that the amount of
 payments received to the date of this Waiver are in accordance with the Subcontract, and (3) warrants that it has not and will not assign any
 claim or payment or right to perfect a lien against such land and improvements.

THE UNDERSIGNED further represents that (1) all workmen, sub-subcontractors employed by it or its subcontractors upon the Project, all
 materialmen from whom the undersigned or its sub-subcontractors have purchased materials used in the Project have been fully paid to the
 date hereof (except as enumerated in Subsubcontractor/Supplier Status below), (2) none of such workmen and materialmen has any claim or
 demand or right of lien against the land and improvements described above, (3) all Federal, State and Local tax laws including Social Security
 laws and Unemployment Compensation laws and Workers Compensation laws have been complied with insofar as applicable to the
 performance of the Subcontract and (4) stipulates that he is an authorized officer with full power to execute this Waiver of Lien.

9. Click the **Next** arrow at the top of the screen to go to the next page.



10. **Exhibit D Page2**, enter the date, month, year of pay application. Go to page 3, enter the title of the person submitting the pay app. Go back to page 2.

SUBCONTRACTOR ONLINE PAYMENT PROCESS

EXHIBIT "D"
APPLICATION FOR PAYMENT - GA

SUBCONTRACT#: T150116.7100

GIVEN UNDER HAND AND SEAL THIS 18 DAY OF September 20 17

		CHOATE CONSTRUCTION COMPANY	
		(Company Name)	
		8200 ROBERTS DR., STE 600	
		(Company Address)	
		ATLANTA GA 30350	
		(Company City, State, Zip)	
		678-892-1200	
		(Company Telephone)	
_____ (Witness)		_____ (Officer Signature)	
8200 ROBERTS DR., STE 600		Vanita Cameron	
(Witness Address)		(Print Name)	
ATLANTA, GA 30350			
(Witness City, State, Zip)			
Sign		Sign	

BY: _____

TITLE: DATE: _____

11. Tab to **Print Name** line, enter the name of the officer. Have an officer come onto your computer to sign the pay application by clicking on the **Sign** button, enter username, password and click submit. Have the witness sign by clicking on the **Sign** button, enter username, password and click submit.

12. Complete the prior payments section by adding the amount paid to date. Click **Next** → to go to next page.

PRIOR PAYMENTS:

THE UNDERSIGNED further acknowledges receipt of payment(s) to date for the Project in the amount of from Subcontractor and/or Contractor for labor employed in and/or materials furnished, and, therefore, waives and releases any and all liens, claims of liens or damages it has against the foregoing described property, the Owner of the Project, Contractor, or Contractor's Surety through the date of 09/30/2017 (date).

AFFIDAVIT AND CERTIFICATION:

THE UNDERSIGNED certifies that the work performed and the materials supplied to date, as covered by this Application for Payment, has been completed in accordance with the Subcontract Documents, and represents the actual value of the work under the terms of the Subcontract (and all changes thereto) between the undersigned and Choate Construction Company.

THE UNDERSIGNED (1) acknowledges receipt of the amount set forth above as "Total Previously Certified", (2) certifies that the amount of payments received to the date of this Waiver are in accordance with the Subcontract, and (3) warrants that it has not and will not assign any claim or payment or right to perfect a lien against such land and improvements.

THE UNDERSIGNED further represents that (1) all workmen, sub-subcontractors employed by it or its subcontractors upon the Project, all materialmen from whom the undersigned or its sub-subcontractors have purchased materials used in the Project have been fully paid to the date hereof (except as enumerated in Sub-subcontractor/Supplier Status below), (2) none of such workmen and materialmen has any claim or demand or right of lien against the land and improvements described above, (3) all Federal, State and Local tax laws including Social Security laws and Unemployment Compensation laws and Workers Compensation laws have been complied with insofar as applicable to the performance of the Subcontract and (4) stipulates that he is an authorized officer with full power to execute this Waiver of Lien.

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13. Exhibit D Page 3, please list any subs/ suppliers associated with this billing. Please note, Lien Waivers may be required from subs/suppliers listed.

EXHIBIT "D"
APPLICATION FOR PAYMENT

SUBCONTRACT#: T150116.7100

With respect to these representations and warranties, the undersigned does hereby agree to indemnify and hold harmless Contractor, its payment and performance surety, if any, Owner and any others whom a claim may be asserted from any and all claims, damages, losses, expenses, and the like incurred on the project that are covered by this representation. If Contractor has to defend any claim resulting from lack of payment by undersigned to a supplier, laborer, materialmen, and/or subsubcontractor, any or all expenses incurred by Contractor including legal fees, court or arbitration costs, will be the responsibility of the undersigned.

This Interim Waiver and Release does hereby waive, release and relinquish any and all claims, acts, events, circumstance, constructive or actual delays, accelerations, extra work, disruptions, interferences and the like which have occurred, or may be claimed to have occurred, prior to the effective date hereof, expecting only any claims currently unresolved for which written notice has been provided to Contractor as follows:

SUB-SUBCONTRACTOR/SUPPLIER STATUS:
THE UNDERSIGNED further warrants the following is a complete listing of all sub-subcontractors and material suppliers that will be supplying labor and/or material to this Project on subcontractor's behalf, the value of which is in excess of **\$5,000** dollars. For each sub-subcontractor and material supplier listed is a separate lien waiver, properly executed to waive and release any claim it may have upon the land and improvements.

NTC	Sub-Subcontractor or Supplier	Subcontract or PO Amount	Value of Work Completed to Date	Amount Previously Paid	Amount Currently Due	Joint Check
	HD SUPPLY WHITECAP	2500	500	0	500	

(Attach additional sheets if necessary)
Waivers or releases from sub-subcontractors and suppliers in the amount shown above must be attached.

14. At the bottom of Exhibit D is the Compliance Box. This will list any compliance items required per the Subcontract/Purchase Order. **Please check for expired dates or unchecked items as this may hold up payment.** Contact Project Admin with any questions. If a sub/supplier has filed a Notice to Contractor, it will be referenced in this table and Lien Waivers are required from sub/supplier.

Compliance Information: Payment may be delayed if insurance certificate is expired or an executed subcontract and insurance certificate have not been received.

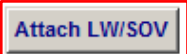
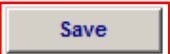
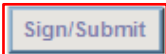
Compliance Item	Supplier	Comp.	Exp Date
W/C Certificate of Insurance		☒	06/30/2011
Executed Contract		☐	
Excess Liability (Umbrella) 1MM		☐	
Sufficient for Subcontract		☐	
Automobile Insurance		☐	
EIFS		☐	
G/L Certificate of Insurance		☒	10/01/2011
G/L Additional Insured		☐	
W-9		☒	
		☐	
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15. Click **Next** to go to the next page. For **Partial Conditional** pay application, **Exhibit E** will prefill with the job/subcontract information. For **Retainage** pay application, **Exhibit F** will prefill with the job/subcontract information. Please print Lien Waiver and send to 2nd tier sub/supplier to sign and return. Once the Lien Waiver(s) from sub/supplier(s) are returned, email Lien Waivers to Project Admin for processing if pay application has been submitted. **Schedule of Values are required.** To attach Schedule of Values and Lien Waivers, click on the  button. Locate the document(s) on your desktop, click Add, then Close.



16. Click **Sign/Submit**. Click **OK** two times, enter your **Username & Password**. Click **Submit** to send the application for payment.

By signing below, I represent that I am an authorized company providing this Application for Payment.		
CHOATE CONSTRUCTION COMPANY		
SUBCONTRACTOR		
BY:	_____	
TITLE:	Accountant _____	
DATE:	_____	
		

17. Once the pay app is submitted for payment, you will receive an email stating the pay app was submitted to Choate with a link to the pay application. If you have any questions, please send an email to ap@choateco.com.

SUBCONTRACTOR ONLINE PAYMENT PROCESS

Application for Payment for ELECTRONIC PAY APP DEMO has been received

Forms@choateco.com

Sent: Wed 3/30/2016 11:52 AM

To: Vanita Cameron

Thank you for submitting an application for payment online for ELECTRONIC PAY APP DEMO on 2016-03-30. If any compliance information on page two is expired or not yet received please submit it to the project administrator as soon as possible. We have received your application for payment and will begin the review process.

To print or save a copy of the application for payment submitted use this link:

<http://CCDCCI:8080/iFiller/iFiller.jsp?mref=35e594f6-a35a-41b7-848c-6410d9b0cf53>

Thank you,

Choate Construction Company