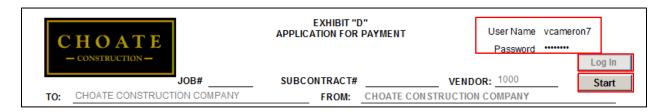
**1.** Click on the link below to access Georgia Pay Application:

GA Pay App:

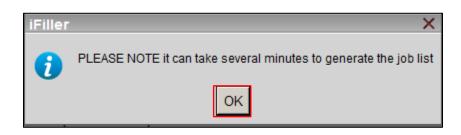
https://eforms.choateco.com/iFiller/iFiller.jsp?fref=f48028a042e6fcb97d64ab90d98cb3a9

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.

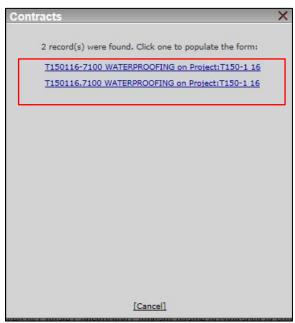
1. In the top right hand corner, type in your User Name & Password. Click Log In. Click Start. Billing cannot be saved for future completion.



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.



## SUBCONTRACTOR ONLINE PAYMENT PROCESS

**3.** 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.

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

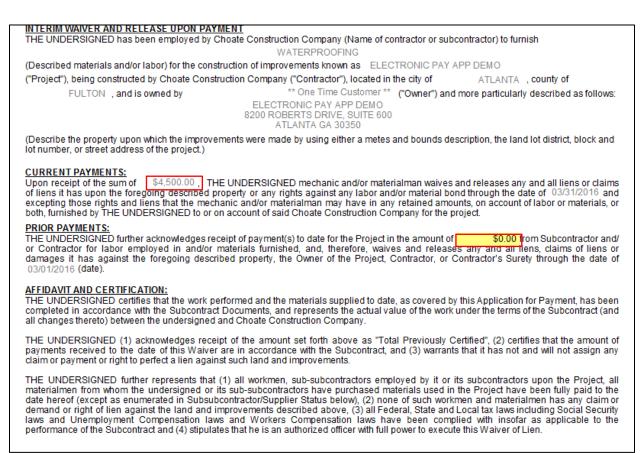
**4.** Enter **Payment Request No**, Enter billing **Period.** Select **Yes** or **No** if you would like to offer a 2% discount for early payment. You can opt in or out after pay application is submitted by contacting the Project Manager.

PAYMENT REQUEST NO: 1	PERIOD: 03/01/2016	TO: 03/31/2016	2% Early Pay Discount? 🔘 Yes 🔿 No
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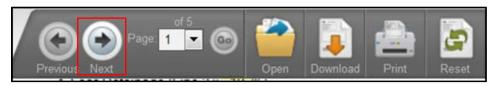
- Enter Value of Work Completed to Date on Line 1. Please note, billings over the Adjusted Contract Amount are not permitted. Contact the Project Manager to resolve any Change Order issues prior to billing.
- 6. Line 4 (retainage percentage), will auto calculate, but can be edited. To edit the percentage or for Retainage billing, click in the yellow percentage box. Delete current content and enter new percentage amount.
- **7.** 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 <mark>.10</mark> %)		\$500.00	
5. Total less retainage (Line 3 - Line 4)		\$4,500.00	
6. Total Previously Certified (Deduct)		\$0.00	
7. NET DUE THIS REQUE ST (Line 5 - Line 6)		\$4,500.00	
*Schedule of Values/Cost Summary must be Attached			

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.



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 PAY	MENT PROCESS
EXHIBIT "D" APPLICATION FOR PAYMENT - GA	SUBCONTRACT#: <u>T150116.7100</u>
GIVEN UNDER HAND AND SEAL THIS <u>18</u> 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
(Witness)	(Company Telephone)
8200 ROBERTS DR., STE 600	
(Witness Address)	(Officer Signature)
ATLANTA, GA 30350	Vanita Cameron
(Witness City, State, Zip)	(Print Name)
Sign	Sign
BY:	
TITLE: Accountant	× DATE:
Attach LW/SOV Save	Sign/Submit

- **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  $\rightarrow$  to go to next page.

### 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 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.

**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.

expenses, and t lack of payment including legal fe This Interim Wai actual delays, a prior to the effec follows: SUB-SUBCONT	erformance surety, if any, Owne the like incurred on the project i by undersigned to a supplier, ees, court or arbitration costs, wil iver and Release does hereby ccelerations, extra work, disrup titve date hereof, expecting only	that are covered by the laborer, materialment ll be the responsibility waive, release and re stions, interferences a	his representation. If n, and/or subsubcon / of the undersigned. elinquish any and all	Contractor has to def tractor, any or all expo	fend any claim resulti	ng from
actual delays, a prior to the effec follows: SUB-SUBCONT	ccelerations, extra work, disrup	tions, interferences a				
		any claime carrenay		ive occurred, or may t	be claimed to have oc	ccurred,
upplying labor	GNED further warrants the foll and/or material to this Project o nd material supplier listed is a s ements.	on subcontractor's bel separate lien waiver, j	half, the value of whi properly executed to	ch is in excess of \$5, waive and release ar	000 dollars. For ea ny claim it may have u	ch sub
NTC S	Sub-Subcontractor or Supplier	Subcontract or PO Amount	Value of Work Completed to Date	Amount Previously Paid	Amount Currently Due	Join Chec
н	ID SUPPLY WHITECAP	2500	500	0	500	
						-

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: F certificate is expired or an certificate ha		ract and in	
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			
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### SUBCONTRACTOR ONLINE PAYMENT PROCESS

**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 2<sup>nd</sup> 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 document(s) on your desktop, click Add, then Close.

Attachments	×
	Browse
Add	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 a company providing this Application for Payment.		
CHOATE CONSTRUCTION COMPANY		
SUBCONTRACTOR		
ВҮ:		
TITLE: Accountant		
DATE:		
Attach LW/SOV Save Sign/Submit		

**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