TO OWNER/CLIENT:

Bakersfield City School District 1300 Baker St

Bakersfield, California 93305

FROM CONTRACTOR:

Southcoast Acoustical Interiors, Inc. 14980 Hilton Dr Fontana, California 92336

**CONTRACT FOR:** Acoustical Ceilings

PROJECT:

**BCSD Roosevelt ES Modernization** 

2324 Verde Street

Bakersfield, California 93304

VIA ARCHITECT/ENGINEER:

Stephen Corbin (SC Architect, Inc.) 1601 New Stine Rd #280

Bakersfield, California 93309

**APPLICATION NO: 1** 

**INVOICE NO: 1** 

PERIOD: 01/01/25 - 01/31/25

**SENT TO** PROJECT NO: 03-122920

**ACCOUNTS PAYABLE CONTRACT DATE:** 

DIR ID: 20240542321

Bid Package: RES-02

#### CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract. Continuation Sheet is attached.

1.	Original Contract Sum		\$166,790.00
2.	Net change by change orders	-	\$0.00
3.	Contract Sum to date (Line 1 ± 2)	-	\$166,790.00
4.	Total completed and stored to date (Column G on detail sheet)	-	\$33,379.00
5.	Retainage:	-	
	a. 5.00% of completed work	\$1,668.95	
	b. 0.00% of stored material	\$0.00	
	Total retainage (Line 5a + 5b or total in column I of detail sheet)		\$1,668.95
6.	Total earned less retainage (Line 4 less Line 5 Total)		\$31,710.05
7.	Less previous certificates for payment (Line 6 from prior certificate)		\$0.00
8.	Current payment due:	-	\$31,710.05
9.	Balance to finish, including retainage (Line 3 less Line 6)		\$135,079.95

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS	
Total changes approved in previous months by Owner/Client:	\$0.00	\$0.00	
Total approved this month:	\$0.00	\$0.00	
Totals:	\$0.00	\$0.00	
Net change by change orders:	rs: \$0.00		

The undersigned certifies that to the best of the Contractor's knowledge, information and belief, the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work which previous Certificates for payment were issued and payments received from the Owner/Client, and that current payments shown herein is now due.

CONTRACTOR: Southcoast Acoustical Interiors, Inc.

Date: 2/3/2025 AJ Ortega

Notarial Acknowledgement for this project 

is required □ is not required. If required. Notary Acknowledgment for must be attached to this application for payment.

AMOUNT CERTIFIED:

\$31,710.05

(Attach explanation if amount certified differs from the amount applied for. Initial all figures on this continuation Speet that are changed to confirm the amount certified.) Application and

Adam Wentworth

ARCHITECT:

PROJECT INSPECTO

By:

Ryan Rowl

**OWNER** By:

Jason Sitton

This certificate is not negotiable. The amount certified is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to the rights of the Owner/Client or Contractor under this Contract.

**RECEIVED MOF** 

FEB 1 2 2025

REQ NO: R25011427

SIGNATURE

# CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California	_ }
County of San Bernardino	_ }
On <u>2/3/2025</u> before me,	Denise Patlan, Notary Public (Here insert name and title of the officer)
name(s)(s)are subscribed to the within the she/they executed the same in this	sfactory evidence to be the person(s) whose in instrument and acknowledged to me that ther/their authorized capacity(ies), and that by ment the person(s), or the entity upon behalf of the instrument.
I certify under PENALTY OF PERJUF the foregoing paragraph is true and co	RY under the laws of the State of California that orrect.  DENISE PATLAN T
WITNESS my hand and official seal.	COMM. #2455366 Notary Public - California RIVERSIDE COUNTY My Comm. Exp. Jul. 27, 2027
Notary Public Signature	(Notary Public Seal)
<b>\</b>	A VISTALIGATION OF COLUMN FIRM OF THE FORM
ADDITIONAL OPTIONAL INFORMA	INSTRUCTIONS FOR COMPLETING THIS FORM  This form complies with current California statutes regarding notary wording and,
DESCRIPTION OF THE ATTACHED DOCUMENT	if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.
(Title or description of attached document)	<ul> <li>State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.</li> </ul>
(Title or description of attached document continued)	<ul> <li>Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.</li> </ul>
Number of Pages Document Date	<ul> <li>The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).</li> <li>Print the name(s) of document signer(s) who personally appear at the time of</li> </ul>
CAPACITY CLAIMED BY THE SIGNER  Individual (s) Corporate Officer  (Title) Partner(s) Attorney-in-Fact Trustee(s) Other	notarization.  Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.  The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.  Signature of the notary public must match the signature on file with the office of the county clerk.  Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.  Indicate title or type of attached document, number of pages and date.
	Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

• Securely attach this document to the signed document with a staple.

2015 Version www.NotaryClasses.com 800-873-9865

Document SUMMARY SHEET, APPLICATION AND CERTIFICATE FOR PAYMENT, containing

Contractor's signed Certification is attached.

Use Column I on Contracts where variable retainage for line items apply.

APPLICATION NUMBER: 1

APPLICATION DATE: 2/1/2025

PERIOD: 01/01/25 - 01/31/25

## **Contract Lines**

Α	В	С	D	E	F	G		Н	ı
ITEM	DESCRIPTION OF WORK	SCHEDULED VALUE	WORK COMPLETED		MATERIALS PRESENTLY	TOTAL COMPLETED	%	BALANCE TO	
NO.			FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	STORED (NOT IN D OR E)	AND STORED TO DATE (D + E + F)	(G / C)	FINISH (C - G)	RETAINAGE
1	Submittals	\$2,500.00	\$0.00	\$1,250.00	\$0.00	\$1,250.00	50.00%	\$1,250.00	\$62.50
2	Closeout	\$250.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%	\$250.00	\$0.00
3	Bond	\$1,668.00	\$0.00	\$1,668.00	\$0.00	\$1,668.00	100.00%	\$0.00	\$83.40
4	Bldg. A - Acoustical Ceiling Material	\$10,590.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%	\$10,590.00	\$0.00
5	Bldg. A - Acoustical Ceiling Labor	\$11,690.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%	\$11,690.00	\$0.00
6	Bldg. B - Acoustical Ceiling Material	\$16,295.00	\$0.00	\$16,295.00	\$0.00	\$16,295.00	100.00%	\$0.00	\$814.75
7	Bldg. B - Acoustical Ceiling Labor	\$20,980.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%	\$20,980.00	\$0.00
8	Bldg. C - Acoustical Ceiling Material	\$14,166.00	\$0.00	\$14,166.00	\$0.00	\$14,166.00	100.00%	\$0.00	\$708.30
9	Bldg. C - Acoustical Ceiling Labor	\$18,114.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%	\$18,114.00	\$0.00
10	Bldg. D - Acoustical Ceiling Material	\$14,156.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%	\$14,156.00	\$0.00
11	Bldg. D - Acoustical Ceiling Labor	\$18,106.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%	\$18,106.00	\$0.00
12	Bldg. E - Acoustical Ceiling Material	\$9,588.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%	\$9,588.00	\$0.00
13	Bldg. E - Acoustical Ceiling Labor	\$13,687.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%	\$13,687.00	\$0.00
14	Allowance	\$15,000.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%	\$15,000.00	\$0.00
	TOTALS:	\$166,790.00	\$0.00	\$33,379.00	\$0.00	\$33,379.00	20.01%	\$133,411.00	\$1,668.95

### **Grand Totals**

Α	В	С	D	E	F	G		Н	I	
ITEM	SCHEDULE SCHEDULE	SCHEDULED	WORK CO	MPLETED	MATERIALS PRESENTLY	TOTAL COMPLETED	%	BALANCE TO		
NO.	DESCRIPTION OF WORK	VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	STORED	(NOT IN D OR E) DATE	AND STORED TO DATE (D + E + F)	(G / C)	FINISH (C - G)	RETAINAGE
	GRAND TOTALS:	\$166,790.00	\$0.00	\$33,379.00	\$0.00	\$33,379.00	20.01%	\$133,411.00	\$1,668.95	

# CONDITIONAL WAIVER AND RELEASE ON PROGRESS PAYMENT

NOTICE: THIS DOCUMENT WAIVES THE CLAIMANT'S LIEN, STOP PAYMENT NOTICE, AND PAYMENT BOND RIGHTS EFFECTIVE ON RECEIPT OF PAYMENT. A PERSON SHOULD NOT RELY ON THIS DOCUMENT UNLESS SATISFIED THAT THE CLAIMANT HAS RECEIVED PAYMENT.

Identifying Information
lame of Claimant: Southcoast Acoustical Interiors, Inc.
lame of Customer: Bakersfield City School District
ob Location: Roosevelt ES Mod
Owner: Bakersfield City School District
hrough Date: 01/31/2025
Conditional Waiver and Release
This document waives and releases lien, stop payment notice, and payment bond rights the claimant hat or labor and service provided, and equipment and material delivered, to the customer on this job through the Through Date of this document. Rights based upon labor or service provided, or equipment or material delivered, pursuant to a written change order that has been fully executed by the parties prior to the date that this document is signed by the claimant, are waived and released by this document, unless sted as an Exception below. This document is effective only on the claimant's receipt of payment from the financial institution on which the following check is drawn:
Maker of Check: Bakersfield City School District
mount of Check: \$ 31,710.05
Check Payable to: Southcoast Acoustical Interiors, Inc.
Exceptions
This document does not affect any of the following:  1) Retentions.  2) Extras for which the claimant has not received payment.  3) The following progress payments for which the claimant has previously given a conditional waiver and release but has not received payment:  Date(s) of waiver and release:  Amount(s) of unpaid progress payment(s): \$
Claimant's Signature:
Claimant's Title: Accounting
Date of Signature: 02/03/2025