



ISSUE DATE:

PROJECT # / NAME:

SUBCONTRACTOR: _____

SUBCONTRACT #:

ATTACHMENT D – WAIVER OF MILLER ACT PAYMENT BOND RIGHTS TO CIVIL ACTION

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.

Name of Claimant:

Name of Customer:

Project Location:

Owner:

Through Date:

CONDITIONAL WAIVER AND RELEASE

This document waives and releases all lien, stop payment notice, and payment bond rights the claimant has for 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 listed 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:

Current Progress Payment Amount: \$ _____

Check Payable To:

The claimant has received the following payment(s): \$ _____

This represents all the payments the claimant has received from inception of this project through the date signed below.

EXCEPTIONS

This document does not affect any of the following:

- (1) Retention Amount: \$ _____
- (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): \$ _____

- (4) Contract rights, including (A) a right based on rescission, abandonment, or breach of contract, and (B) the right to recover compensation for work not compensated by the payment.

Claimant's Signature:

Date:

Printed Name & Title