

APPLICATION FOR PAYMENT

Project: Village of Harrison Fire Rescue Station 70
Contract For: Village of Harrison
Application No.: 742500902
Application Date: 10/25/25
Period To: 10/31/25
Job No.: 7425009
Contract Date: 08/22/25
Customer No.: 1065700
Contract No.: 634501
Via Architect:
Architect's Project No.:

Remit To: IKM Building Solutions
 11217 West Becher Street
 West Allis WI 53227

To: Village of Harrison
 W5298 State Road 114
 Menasha WI 54952

Distribution to:
 OWNER
 ARCHITECT
 CONTRACTOR

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for Payment, as shown below, in connection with the Contract. Schedule of Values is attached.

1. ORIGINAL CONTRACT SUM	662,001.00		
2. NET CHANGE BY CHANGE ORDERS	0.00		
3. CONTRACT SUM TO DATE (line 1 + 2)	662,001.00		
4. TOTAL COMPLETED AND STORED TO DATE (Column G of Schedule of Values)	193,890.00		
5. RETAINAGE:			
a. 5.00 % of Completed Work (Column D + E of Schedule of Values)	9,694.50		
b. % of Stored Material (Column F of Schedule of Values)	0.00		
Total Retainage	9,694.50		
6. TOTAL EARNED LESS RETAINAGE (Line 5a + 5b or Total of Column I of Schedule of Values)	184,195.50		
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 4 less Line 5 Total)	154,128.00		
8. CURRENT PAYMENT DUE (Line 6 from prior Application)	30,067.50		
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)	477,805.50		

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner	0.00	0.00
Total approved this Month	0.00	0.00
TOTALS	0.00	0.00
NET CHANGES by Change Order		

Contract For: IKM Building Solutions

The undersigned Contractor 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 for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR: IKM Building Solutions
 By: *[Signature]* Date: 10/20/25
 State of: Wisconsin County of: Milwaukee
 Notary Public: JEANNETTE WENZEL
 My Commission expires: 02/22/2029
ARCHITECT'S CERTIFICATE FOR PAYMENT
 In accordance with the Contract Documents, based on on-site observations and the data comprising this application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief, the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED \$30,067.50
 (Attach explanation if the amount certified differs from the amount applied for in Line 8. Initial all figures on this Application and on the Schedule of Values shall be changes to conform to the amount certified.)

By: *[Signature]* Architect Date: 11/3/2025
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 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 any rights of the Owner or Contractor under this Contract

[Signature] Sr Project Manager
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