

Project Milestone Payment Request

Project Name: _____
Project Reference No.: _____
Client/Company Name: _____
Request Date: ____ / ____ / ____

Milestone Details

Milestone No.	Description	Due Date	Amount	Status
1	Design Phase Completion	____ / ____ / ____	\$_____	Completed
2	Development Phase	____ / ____ / ____	\$_____	In Progress

Total Payment Requested: \$_____
Bank Account Details: _____

Prepared by: _____
Approved by: _____
Date: ____ / ____ / ____

Important Notes:

- This form must be completed and approved prior to processing project milestone payments.
- Supporting documents for completed milestone(s) should be attached where required.
- Ensure all payment amounts and bank details are accurate before submission.
- Retention and tax will be deducted as per contractual terms, if applicable.
- Contact the finance department for any questions regarding payment schedules.