

Lump Sum Payment Schedule

Project Details

Project Name: _____

Client Name: _____

Contractor: _____

Date: ____ / ____ / ____

Schedule of Lump Sum Payments

Payment No.	Due Date	Description / Milestone	Amount (USD)
1	____ / ____ / ____	Initial Deposit	_____
2	____ / ____ / ____	Completion of Phase 1	_____
3	____ / ____ / ____	Completion of Phase 2	_____
4	____ / ____ / ____	Final Payment (Upon Completion)	_____
Total Contract Amount			_____

Authorized Signatures

Client Representative: _____ Date: ____ / ____ / ____

Contractor Representative: _____ Date: ____ / ____ / ____

Important Notes

- All payment dates and milestones should be mutually agreed upon by both parties before signing.
- Lump sum schedules are typically not subject to adjustment except in cases of approved change orders.
- Failure to adhere to payment schedule may result in work suspension or additional charges.
- Please review all contract terms relating to payment methods, taxes, and late fees before finalizing.