

Interim Payment Certificate

Contract No.:

[Insert Number]

Project Name:

[Insert Project Title]

Certificate No.:

[Insert No.]

Contractor:

[Insert Contractor Name]

Employer/Client:

[Insert Employer Name]

Date of Issue:

[dd/mm/yyyy]

Details of Interim Payment

Description	Amount
Total Value of Work Completed to Date	[Amount]
Less: Previous Payments Certified	[Amount]
Less: Retention (if any)	[Amount]
Less: Advance Recovery (if any)	[Amount]
Total Amount Due this Certificate	[Amount]

Summary Statement

Certified for Payment: **[Insert Amount in Words]**

(Currency: [Insert Currency])

Certified by (Consultant/Engineer):

Signature: _____

Name: [Insert Name]

Date: [dd/mm/yyyy]

Approved by (Employer/Client):

Signature: _____

Name: [Insert Name]

Date: [dd/mm/yyyy]

Important Notes

- This certificate is issued for interim payments and does not indicate final acceptance of the described works.
- Amounts certified are subject to adjustment upon final measurement and agreement.
- Retention and advance recovery are as per the terms of the signed contract.
- All supporting documents verifying the value of completed works must be attached with this certificate.
- Discrepancies, if any, must be notified in writing within the period specified in the contract.