

Sample For Formatting Purposes Only
All Requests Must Comply with MGL c. 30, Sec. 39F

DIRECT PAYMENT REQUEST FORMAT
SUBSTANTIAL COMPLETION

Date: _____

Certified Mail No.: _____

Office of the General Counsel - Direct Payment Claims
Division of Capital Asset Management & Maintenance
One Ashburton Place, 15th Floor
Boston, MA 02108

Re: Facility Name and Mass. State Project No.

Dear Sir/Madam:

This is a direct payment request submitted on behalf of **[company name and sub-trade]** pursuant to Massachusetts General Laws Chapter 30, Section 3 9F. The petitioner has a subcontract with the general contractor. The petitioner has substantially completed the subcontract work on **[Date]** and has not received payment from the general contractor within the last 70 days. Therefore, pursuant to G.L. c.30 §39F(1)(d), a demand of[\$_____] is hereby made for direct payment from the awarding authority as detailed in the following breakdown:

General Contractor: _____ Subcontractor: _____

Base Contract Amount \$ _____

Approved Change Order(s)
(List Change Order nos. separately) \$ _____

Extras (List extras separately) \$ _____

Retainage Withheld \$ _____

Payments Received \$ _____

Amount Due: \$ _____

Very truly yours,

Signature

Print Name

Title

Commonwealth of Massachusetts

_____,SS
(County)

(Date)

Then personally appeared the above-named [Name **of Affiant**] , who, after being duly sworn, did state the he/she is the [Title] of [Name **of Company**] and that the information contained within the foregoing **Demand for Direct Payment** is true and correct, is a free act and deed, and that a copy of same was sent by certified mail to the general contractor (certified mail receipt no. _____) on the same date the original was forwarded to the awarding authority.

Notary Public, State of Massachusetts

My commission expires: _____

cc: general contractor (via certified mail)

**THIS DOCUMENT IS PROVIDED FOR FORMATTING PURPOSES ONLY. DO NOT
SUBMIT IT AS YOUR REQUEST FOR DIRECT PAYMENT.**

Sample For Formatting Purposes Only
All Requests Must Comply with MGL c. 30, Sec. 39F

DIRECT PAYMENT REQUEST FORMAT
PERIODIC PAYMENT

Date: _____

Certified Mail No.: _____

Office of the General Counsel - Direct Payment Claims
Division of Capital Asset Management & Maintenance
One Ashburton Place, 15th Floor
Boston, MA 02108

Re: Facility Name and Mass. State Project No.

Dear Sir/Madam:

This is a direct payment request submitted on behalf of **[company name, address and sub-trade]** pursuant to Massachusetts General Laws Chapter 30, Section 39F(1)(i). As of this writing we have not received payment from the general contractor.

The petitioner has a subcontract with the general contractor, **[general contractor's name]**. The petitioner has not received payment on a periodic estimate submitted to the general contractor for labor performed and materials furnished by the petitioner.

CHOOSE EITHER (A) OR (B)

A. The general contractor has received payment for said labor and materials but has failed to make payment to the subcontractor when due.

OR

B. The general contractor has not submitted a periodic estimate for the value of said labor performed and/or materials furnished by the petitioner when due, less any amount specified in any court proceedings barring such payment and also less any amount claimed due from the petitioner by the general contractor.

Therefore, a demand of \$_____ is hereby made for direct payment from the authority as detailed in the attached breakdown. The subcontract work is completed.

Subcontractor Periodic Estimate No.(s)

Period of Estimate(s)

(Dates)

Amount Due:

\$ _____

(A detailed breakdown of the work and dollars claimed is one of the requirements of the statute. Please provide same and a copy of the respective periodic estimate(s) to supplement your breakdown.)

Very truly yours,

Signature

Print Name

Title

Commonwealth of Massachusetts

_____,ss
(County)

(Date)

Then personally appeared the above-named [**Signatory**], who, after being duly sworn, did state the he/she is the [**Title**] of [**Name of Company**] and that the information contained within the foregoing **Demand for Direct Payment** is true and correct, is a free act and deed, and that a copy of same was sent by certified mail to the general contractor (certified mail receipt no. _____ on the same date the original was forwarded to the awarding authority.

Notary Public, State of Massachusetts

My commission expires: _____

cc: general contractor (certified mail)

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