MATERIALS/EQUIPMENT PURCHASED AND

STORED ON- SITE

TO: Enter Name of Person

Enter Title

FROM: Enter Name of Person

Enter Title

# Project Information

Contract Number: Enter Contract Number

Project Name: Enter Project Name

Project Address/Location: Enter Address

Material Information

This document is submitted in accordance with the Contract for the above referenced project and accompanies payment application number Enter invoice no. for the purposes of payment of materials/equipment purchased exclusively for use on the above reference project.

The undersigned stipulates that the following described material(s) has/have been purchased/fabricated for the exclusive use in this Project:

Storage Name & Location: Enter Name & Location

Contact: Enter Name Telephone: Enter Number Email: Enter Email

Enter detailed description of equipment/materials

The material is separated from other like material and is physically identified as Town of Miami Lakes (“Town”) Property for use only on the above named Project. The material is stored at the Project site and the Town may inspect the equipment or materials at any time. Any stored materials rejected by the Town or Consultant shall be replaced by the Contactor. It is expressly understood and agreed that this information is for the sole purpose of payment for the above materials/equipment before they are incorporated into, the Project described above.

It is further understood that payment made on account of said materials/equipment not incorporated into the Work does not relieve the Contractor from the sole responsibility and liability for proper insurance coverage, or for replacing said materials/equipment that may be subsequently damaged, lost, or rejected for non-compliance with the Contract prior to or during installation, or prior to final acceptance by the Town.

By signing below the Contractor certifies that that insurance has been obtained to cover these materials, naming the Town as an additional insured.

# Contractor Information

Name of Contractor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_