**Payment Schedule Form**

(Your company name here if you have one)

(Your company’s owner name(s)

(Your full address)

(Your phone number)

**PROJECT ADDRESS:**

**CONTRACTOR:**

**CLIENT:**

**Payment Schedule as follows:**

|  |  |  |
| --- | --- | --- |
| **PROPERTY ADDRESS:**123 Any street  | **DATE** | **AMOUNT ($)** |
| **1st Payment (deposit for work)** | January 6 2020 | $4,000 |
| **Milestones and Benchmarks:** |
| **2nd Payment** |  | $18,000 |
| **Milestones and Benchmarks:*** Flooring installed on main floor
* Interior painting completed
* Appliances hooked up and working properly
 |
| **3rd Payment (final payment upon satisfactory approval by the property owner)** |  | $18,000 |
| **Milestones and Benchmarks:*** Bathroom renovation completed
* Kitchen renovation completed
* Flooring installed on 2nd floor
* Exterior painting completed
 |
| **TOTAL: $40,000**Print name: Your name/company  X. Your signature herePrint name: Contractor name/company X. Contractors here |  |  |
| Notes: |