



# RELEASE OF RETAINAGE FORM

Date \_\_\_\_\_

## Contract Management

Office of School Facilities-Construction  
1450 N. E. 2nd Ave., Room 322  
Miami, Fl. 33132

GENERAL CONTRACTOR'S NAME \_\_\_\_\_

SCHOOL NAME \_\_\_\_\_

PROJECT NAME \_\_\_\_\_

PROJECT NO. \_\_\_\_\_

The referenced project has been inspected and, except as noted on the punch list, we are recommending payment to the contractor including;

- Check (✓) one:  Total release of retainage
- Release retainage in the amount of \$\_\_\_\_\_
- Reduce retainage deduction from future payment to 5%
- Release 5% retainage for the initial 50% of project in the amount of \$\_\_\_\_\_

**Contract Close Out Documents Status:**

**See Attached**

RECORD INFORMATION			
Contract Award Date	_____	Original Completion Date	_____
Adjusted Completion Date	_____	Acceptance Date	_____
Punch List Completion Date	_____	Warranty Date	_____

Signature \_\_\_\_\_  
Contractor

Date \_\_\_\_\_

Signature \_\_\_\_\_  
Office of the Project Architect

Date \_\_\_\_\_

Signature \_\_\_\_\_  
Project Manager

Date \_\_\_\_\_

Signature \_\_\_\_\_  
Executive Director

Date \_\_\_\_\_

Signature \_\_\_\_\_  
Construction Officer/Designee

Date \_\_\_\_\_

cc: Contractor  
Department of Facilities Design & Quality Control - **Warranty Section**