

Exhibit - A
SINGLE-FAMILY REHAB - HARD COST

CITY OF MIAMI
Department of Community Development
COVER LETTER

Homeowner's Name: _____

Contractor's Name: _____

House Address: _____

Contract Amount: _____

Attention: Fiscal Assistant

We request payment in the amount of \$ _____ for Draw # _____ per attached AIA form.

Authorized Signature

Date signed

Enclosure: FORM AIA

PROPERTY OWNER

I/We hereby agree that the work stated by the contractor has been completed and payment approved to the contractor in accordance with Agreement and contingent upon inspection and concurrence by the City Inspector. It is understood that the actual amount disbursed will be based on the findings of that inspection.

Owner's Signature: _____ Date: _____

Owner's Signature: _____ Date: _____

-----**FOR CITY USE ONLY**-----

COMMUNITY DEVELOPMENT- INSPECTORS

_____ hereby certified that the work for draw # _____ was inspected
(NAME)
on _____ and \$ _____ of work has been completed.

Inspector Approval Date

.....
COMMUNITY DEVELOPMENT- FINANCE:

PROJECT 91- _____ TASK _____ SUB TASK _____ AWARD _____

EXPENDITURE _____ ORGANIZATION 910101

FUND _____ IDIS _____ VENDOR # _____ SERVICING # _____

AVAILABLE BUDGET IN : ORACLE \$ _____ IN IDIS \$ _____

APPROVED BY:

FISCAL DATE SERVICING DATE CONTRACT DATE