Claimant

Name:	Name:
ABN: Address:	ABN: Address:
PAYMENT SCHEDULE NO.	
Contract / Job Ref:	
Site Address:	
Payment Claim No:	
Date of Payment Claim:	
Date when Payment Claim was given:	
Total Amount of Payment Claim (ex GST):	
<u>Detailed breakdown of S</u>	<u>Scheduled Amount</u>
Original Contract Works completed in this claim	
Variations completed in this claim	
Total Works Completed in this Claim (ex GST)	
Less Deductions (see below/attached for details)	
Scheduled Amount of this Claim (ex GST)	
This Payment Schedule is issued pursuant to the above Industry Fairness (Security of Payment) Act 2017.	e contract and section 76 of the <i>Building</i>
Signed:	
By:	
Position:	
Date:	
Reasons for Withholding Payment	
Reasons for Deductions	Amount Deducted

Respondent