

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1523694
Vendor Name: Integral Construction, Inc.
Invoice Number: 2024478
Invoice Date: 7/31/2024
PO Number: B0002084
Check Number: E0103040
Check Amount: \$ 3,732.00
Check Date: 09/04/2024
Voucher Number: V0845179
Document Type: AP Invoice

Document Below



PO Box 916
Frankfort, IL 60423

Invoice

2024478

Date 7/31/2024

Terms Net 30

Bill To

College of DuPage
425 Fawell Blvd
Glen Ellyn, IL 60137

Project Address

CHC Hotel Lounge Ice Machine Shelf
425 Fawell Blvd
Glen Ellyn, IL 60137
B0002084

P.O. No.

B0002084

Description	Amount
General Requirements	266.00
Millwork	3,300.00
Commercial (GL,WC,Umbrella)	28.00
Fee	138.00

Total

\$3,732.00

Payments/Credits

\$0.00

Balance Due

\$3,732.00

T: 844.317.7403

APPLICATION AND CERTIFICATION FOR PAYMENT

AIA DOCUMENT G702

PAGE ONE OF

PAGES

TO OWNER:
College of DuPage
425 Fawell Boulevard
Glen Ellyn, IL 60137

PROJECT:
CHC Hotel Lounge Ice Machine Shelf
425 Fawell Boulevard
Glen Ellyn, IL 60137

APPLICATION NO: 001

PERIOD FROM: 5/1/2024
PERIOD TO: 7/31/2024

Distribution to:

<input checked="" type="checkbox"/>	OWNER
<input checked="" type="checkbox"/>	ARCHITECT
<input checked="" type="checkbox"/>	CONTRACTOR

FROM CONTRACTOR:
Integral Construction Inc.
PO Box 916
Frankfort, IL 60423

CONTRACT FOR: General Contracting Services

CONTRACT DATE: 5/21/2024 PO# B0002084

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract.
Continuation Sheet, AIA Document G703, is attached.

1. ORIGINAL CONTRACT SUM	\$ 2,932.00
2. Net change by Change Orders	\$ 800.00
3. CONTRACT SUM TO DATE (Line 1 + 2)	\$ 3,732.00
4. TOTAL COMPLETED & STORED TO DATE (Column G on G703)	\$ 3,732.00
5. RETAINAGE:	
a. 0% of Completed Work (Column D + E on G703)	\$0.00
b. 0% of Stored Material (Column F on G703)	\$0.00
c. 0% Total Retainage (Total in Column I of G703)	\$0.00
6. TOTAL EARNED LESS RETAINAGE (Line 4 Less Line 5 Total)	\$ 3,732.00
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)	\$ -
8. CURRENT PAYMENT DUE	\$ 3,732.00
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6)	\$ -

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the contractor for Work for which previous Certificate for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR: Integral Construction Inc.

By: Lisa Minetti Date: 8/5/2024
Lisa Minetti, Controller

State of: ILLINOIS
Subscribed and sworn to before me this 5th
Notary Public: Melissa Samborski
My Commission expires: 11/16/2026

County of: WILL
day of August, 2024.



CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to the payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED \$ \$3,732.00
(Attach explanation if amount certified differs from the amount applied for. Initial all figures on this application and on the Continuation Sheet that are changed to conform with the amount certified.)

OWNER: College of DuPage
By: _____ Date: _____
Name: _____ Title: _____

ARCHITECT:
By: _____ Date: _____
Name: _____ Title: _____

herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner of Contractor under this Contract.

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
001 Millwork Upgrade - 12" Drawers	\$800.00	
TOTALS	\$800.00	\$0.00
NET CHANGES by Change Order	\$800.00	

APPLICATION AND CERTIFICATE FOR PAYMENT,
containing Contractor's signed Certification, is attached.
In tabulations below, amounts are stated to the nearest dollar.
Use Column I on Contracts where variable retainage for line items may apply.

001 REV N NUMBER: 001
APPLICATION DATE: 7/31/2024
PERIOD TO: 7/31/2024
GC's PROJECT NO: 24-999-009
PROJECT NAME: CHC Hotel Lounge Ice Machine Shelf

A ITEM NO. (as listed on sworn statement)	B DESCRIPTION OF WORK		C SCHEDULED VALUE	E		F MATERIALS PRESENTLY STORED (NOT IN D OR E)	G		H BALANCE TO FINISH (C-G)	I RETAINAGE
				D WORK COMPLETED FROM PREVIOUS APPLICATION (D+E)	THIS PERIOD		TOTAL COMPLETED AND STORED TO DATE (D+E+F)	% (G/C)		
1.00	General Requirements	Integral Construction Inc.	\$266.00	\$0.00	\$266.00	\$0.00	\$266.00	100.00%	\$0.00	\$0.00
2.00	Millwork	Integral Construction Inc.	\$3,300.00	\$0.00	\$3,300.00	\$0.00	\$3,300.00	100.00%	\$0.00	\$0.00
3.00	Insurance	Integral Construction Inc.	\$28.00	\$0.00	\$28.00	\$0.00	\$28.00	100.00%	\$0.00	\$0.00
5.00	Fee	Integral Construction Inc.	\$138.00	\$0.00	\$138.00	\$0.00	\$138.00	100.00%	\$0.00	\$0.00
	PAGE TOTALS		\$3,732.00	\$0.00	\$3,732.00	\$0.00	\$3,732.00	100.00%	\$0.00	\$0.00

THE AFFIANT, Lisa Minetti, being first duly sworn, on oath deposes and says that he/she is the Controller of Integral Construction Inc., PO Box 916, Frankfort, Illinois 60423, that has contracted with the College of DuPage, 425 Fawell Boulevard, Glen Ellyn, IL 60137, the Owner. For General Contracting on the following described premises in said county, to-wit:

CHC Hotel Lounge Ice Machine Shelf

That, for the purpose of said contract, the following persons have been contracted with, and have furnished, or are furnishing and preparing materials for, and have done or are doing labor on said improvement. That there is due and to become due them, respectively, the amounts set opposite their names for materials or labor as stated. That this statement is a full, true and complete statement of all such persons, the amounts paid and amounts due or to become due to each.

	Name and Address	Type of Work	Contract Amount	%	Work Complete \$	Retention	Net Previously Paid	Net Amount This Payment	Balance To Complete
1.00	Integral Construction Inc. PO Box 916 Frankfort, IL 60423	General Requirements	\$266.00	100.00%	\$266.00	\$0.00	\$0.00	\$266.00	\$0.00
2.00	Integral Construction Inc. PO Box 916 Frankfort, IL 60423	Millwork	\$3,300.00	100.00%	\$3,300.00	\$0.00	\$0.00	\$3,300.00	\$0.00
3.00	Integral Construction Inc. PO Box 916 Frankfort, IL 60423	Insurance	\$28.00	100.00%	\$28.00	\$0.00	\$0.00	\$28.00	\$0.00
5.00	Integral Construction Inc. PO Box 916 Frankfort, IL 60423	Fee	\$138.00	100.00%	\$138.00	\$0.00	\$0.00	\$138.00	\$0.00
TOTAL			\$3,732.00	100.00%	\$3,732.00	\$0.00	\$0.00	\$3,732.00	\$0.00
AMT OF ORIGINAL CONTRACT			\$2,932.00				WORK COMPLETED TO DATE		\$3,732.00
CHANGE ORDERS			\$800.00				LESS % RETAINED		\$0.00
TOTAL CONTRACT AND EXTRAS			\$3,732.00				PREVIOUSLY PAID		\$0.00
CREDITS TO CONTRACT			\$0.00				AMOUNT OF THIS PAYMENT		\$3,732.00
ADJUSTED TOTAL CONTRACT			\$3,732.00				BALANCE TO BECOME DUE		\$0.00

It is understood that the total amount paid to date plus the amount requested in this application shall not exceed ____% of the cost of work completed to date.

I agree to furnish Waivers of Lien for all materials under my contract when demanded.

Signed

Lisa Minetti, Controller
Integral Construction Inc.

Subscribed and sworn to before me this

5th

day of

August

, 2024.

Notary Public

The above sworn statement should be obtained by the owner before each and every payment.



WAIVER OF LIEN TO DATE

STATE OF ILLINOIS } ss
COUNTY OF WILL

Gty # _____

Escrow# _____

TO ALL WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by College of DuPage

to furnish General Contracting Services

for the premises known as CHC Hotel Lounge Ice Machine Shelf

of which College of DuPage is the owner.

THE undersigned, for and in consideration of three thousand seven hundred thirty-two and 00/100
\$3,732.00 Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, do(es)
hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics'
liens, with respect to and on said above described premises, and the improvements there-on, and on the material, fixtures, apparatus,
or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor,
services, material, fixtures, apparatus, or machinery, furnished to this date by the undersigned for the above-described premises,
INCLUDING EXTRAS.*

*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT

Signed this 5th day of August, 2024.

Signature Lisa Minetti Title: Controller

CONTRACTOR'S AFFIDAVIT

STATE OF ILLINOIS } ss
COUNTY OF WILL

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Lisa Minetti
Controller of Integral Construction Inc.

who is the contractor for the General Contracting Services work on the
building located at 425 Fawell Boulevard, Glen Ellyn, IL 60137

owned by College of DuPage

That the total amount of the contract including extras is \$3,732.00 on which has received payment of
\$0.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that
there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have
furnished materials or labor, or both, for said work and all parties having contracts or sub contracts for specified portions of said work
or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned
include all labor and material required to complete said work according to plans and specifications.

NAMES	WHAT FOR	CONTRACT PRICE	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Integral Construction Inc.	General Contracting Services	\$ 3,732.00	\$ -	\$ 3,732.00	\$ -
TOTAL LABOR AND MATERIALS TO COMPLETE		\$ 3,732.00	\$ -	\$ 3,732.00	\$ -

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material,
labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 5th day of August, 2024.

By: Lisa Minetti

Subscribed and sworn before me this 5th day of August, 2024.

Seal:



Signature: Melissa Samborski

Melissa Samborski <msamborski@buildintegral.com>

[External] COD CHC Lounge Ice Machine Shelf - payment application #001

Melissa Samborski <msamborski@buildintegral.com>

Tue, Aug 6, 2024 at 07:17 PM UTC

CC: Gorgone, Jay <gorgonej@cod.edu>, Christopher Osinski <cosinski@buildintegral.com>, Joseph Zinchuk <jzinchuk@buildintegral.com>, Lisa Sheehan <lsheehan@buildintegral.com>

BCC:

CAUTION: This email originated from outside of COD's system. Do not click links, open attachments, or respond with sensitive information unless you recognize the sender and know the content is safe.

Hello,

Please find the first&final payment application #001 for the **COD CHC Hotel Lounge Ice Machine Shelf** project attached to this email. This billing includes a G702 Certificate for Payment, G703 Schedule of Values, Contractor's Sworn Statement, and an overall Main Waiver for work through 7/31/24.

Please review and let us know if this meets your approval and/or if you have any questions

Melissa Samborski | Project Accountant

PO Box 916 | Frankfort, Illinois 60423

D: 331-258-4740 | O: 844-317-7403 | F: 844-317-7402

***** NEW MAILING ADDRESS Effective 2/9/24 - Integral Construction Inc., PO Box 916, Frankfort, IL 60423 *****

Please send all future correspondence to PO Box.

2 attachments

COD CHC Hotel Lounge Ice Machine Shelf - Draw #001 signed.pdf

image001.png