

CONDITIONAL WAIVER AND RELEASE ON PROGRESS PAYMENT

Project Name IDEA Bluff Springs Phase 2

Job No. A-0909.000

On receipt by the signer of this document of a check from \_\_\_\_\_ (maker of check) in the sum of \$ \_\_\_\_\_ payable to \_\_\_\_\_ (payee or payees of check) and when the check has been properly endorsed and has been paid by the bank on which it is drawn, this document becomes effective to release any mechanic's lien right, any right arising from a payment bond that complies with a state or federal statute, any common law payment bond right, any claim for payment, and any rights under any similar ordinance, rule, or statute related to claim or payment rights for persons in the signer's position that the signer has on the property of Idea Public Schools (owner) located at 2115 West Pike Blvd, Weslaco, Texas 78596 (location) to the following extent: IDEA Bluff Springs Phase 2 (job description).

This release covers a progress payment for all labor, services, equipment, or materials furnished to the property or to \_\_\_\_\_ (person with whom signer contracted) as indicated in the attached statement(s) or progress payment request(s), except for unpaid retention, pending modifications and changes, or other items furnished.

Before any recipient of this document relies on this document, the recipient should verify evidence of payment to the signer.

The signer warrants that the signer has already paid or will use the funds received from this progress payment to promptly pay in full all of the signer's laborers, subcontractors, materialmen, and suppliers for all work, materials, equipment, or services provided for or to the above referenced project in regard to the attached statement(s) or progress payment request(s).

Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

By: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

SUBSCRIBED AND SWORN TO BEFORE ME this the \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

NOTARY PUBLIC, in and for the State of Texas

Signature: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

NOTARY STAMP