

**Disclaimer: The forms provided on this website are intended only as GUIDELINES and are provided as examples of the type of form that may be used. The Clerk cannot advise whether a form is appropriate for your circumstance. To ensure that you are using the appropriate form and that it is completed correctly, The Clerk recommends that you seek legal counsel.**

**CONTRACTOR'S FINAL PAYMENT AFFIDAVIT**

State of Florida  
County of Indian River

Before me, the undersigned authority, personally appeared \_\_\_\_\_,  
*name of affiant*

who, after being first duly sworn, deposes and says of his or her personal knowledge the following:

1. He or she is the \_\_\_\_\_, of \_\_\_\_\_,  
*title of affiant name of contractor's business*  
which does business in the State of Florida, hereinafter referred to as the "Contractor."

2. Contractor, pursuant to a contract with \_\_\_\_\_,  
*name of owner*  
hereinafter referred to as the "Owner," has furnished or caused to be furnished labor, materials, and services for the construction of certain improvements to real property as more particularly set forth in said contract.

3. This affidavit is executed by the Contractor in accordance with section 713.06 of the Florida Statutes for the purposes of obtaining final payment from the Owner in the amount of \$ \_\_\_\_\_.

4. All work to be performed under the contract has been fully completed, and all lienors under the direct contract have been paid in full, except the following listed lienors:

NAME OF LIENOR	AMOUNT DUE
_____	_____

Signed, sealed, and delivered this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

By \_\_\_\_\_,  
*name of affiant title of affiant*  
\_\_\_\_\_  
*name of contractor's business*

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

By: (printed name of person signing above) \_\_\_\_\_  
 Personally Known OR  Produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Notary Printed Name

Seal: