

FORM F-3.1

VERIFIED LIST OF SUB-SUBCONTRACTORS AND SUPPLIERS

(To be updated and submitted by Subcontractor, monthly, with each Application for Payment.)

Commonwealth of Pennsylvania :

SS:

County of _____ :

The undersigned hereby verifies that the list attached hereto as Schedule A, which has been dated and signed by the undersigned for identification, is an accurate and full list of the names and addresses of all subcontractors, sub-subcontractors, materialmen, vendors or suppliers who have furnished labor and material on the Project and who have provided a partial release of lien in connection with the present requisition for payment. To the extent the undersigned does not have any subcontractors, sub-subcontractors, materialmen, vendors or suppliers working on the Project at this time, the undersigned may simply indicate "N/A" on the attached form.

The undersigned acknowledges that if an accurate list is not provided, the undersigned shall be directly liable in damages to the CONTRACTOR or to the Owner, including, but not limited to, court costs and the reasonable legal expenses, including attorney's fees, which may be incurred by the CONTRACTOR or the Owner, or both, in defending or causing the discharge of a lien claim asserted by a party whose name has been omitted from the attached list.

Further, SUBCONTRACTOR agrees to indemnify, defend and hold harmless Owner, Owner's lenders and CONTRACTOR, and their respective successors and assigns, from and against any and all claims, damages, costs, judgments, liabilities, demands, suits, and expenses (including reasonable attorneys' fees) arising from, or directly or indirectly relating to: (a) any false statement made herein or the breach of representation or warranty set forth herein and/or (b) any mechanic's lien claim filed against the Project by any sub-subcontractor, materialman, vendor, or supplier claiming to have a Contract with SUBCONTRACTOR, including, without limitation, the parties identified herein.

SUBCONTRACTOR: _____

Signature: _____

Name: _____

Title: _____

Date: _____

NOTARY:

Subscribed and sworn to before me this _____

day of _____ 20____.

Notary Public of _____

My Commission expires _____

FORM F-3.1

VERIFIED LIST OF SUB-SUBCONTRACTORS AND SUPPLIERS (Cont'd)

(To be updated and submitted by Subcontractor, monthly, with each Application for Payment.)

MONTHLY SCHEDULE A TO VERIFIED LIST OF SUB-SUBCONTRACTORS AND SUPPLIERS
REGARDING PAYMENT APPLICATION NO. _____

Name	Address	Telephone No.	Brief Description of Work
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

(Add additional pages if required)

Signature: _____

Date: _____