# Proof of payment to subcontractors

**Statutory Declaration**

**Project Name:** [insert project name]

**Contract Number:** [insert contract number]

|  |  |  |
| --- | --- | --- |
| **To:** | [insert name] (ACN [insert ACN]) of [insert address]  and | ("***Principal***") |
|  | [insert name] (ACN [insert ACN]) of [insert address] | ("***Superintendent***") |
| **From:** | [insert name] (ACN [insert ACN]) of [insert address] | ("***Contractor***") |
| **In the matter of:** | the contract for the construction of the [insert description of the project] entered into between the *Principal* and the *Contractor* dated [insert date of *Contract*] | ("***Contract***") |
| **Period covered by this progress payment claim:** | from: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ("***Payment Period***") |

I, [insert name] of [insert address], [insert occupation], do solemnly and sincerely declare as follows:

1. I am an employee duly authorised to make this statutory declaration on behalf of the *Contractor*;

2. all employees who are, or have been, engaged by the *Contractor* in connection with the *Contract* have been paid their full remuneration for work done during the *Payment Period* including any superannuation or redundancy payments (if applicable) and in accordance with any applicable award or industrial agreement;

3. subject to clause 4(d), all consultants, suppliers and subcontractors who are, or have been, engaged by the *Contractor* in connection with the *Contract* have been paid in full all amounts that have become payable to them under the terms of their agreement with the *Contractor* during the *Payment Period*;

4. as at the end of the Payment Period:

|  |  |  |
| --- | --- | --- |
| (a) | the total amount payable by the Contractor to all subcontractors in respect of work under the Contract is: | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| (b) | the amount paid by the Contractor to all subcontractors in respect of work under the Contract is: | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**The Statutory Declaration Witness and the person making**

**this statutory declaration must sign or initial this page**

**Declarant: ……… Witness: ………**

|  |  |  |
| --- | --- | --- |
| (c) | the amount claimed by all subcontractors in respect of work under the Contract which is disputed by the Contractor as being due and payable is: | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| (d) | the amount referred to in paragraph 4(c) of this statutory declaration is disputed as, at the date of this statutory declaration, on the following grounds:  [insert grounds for dispute] |  |

**[Note: select jurisdiction from the list below and delete remaining jurisdictions as appropriate.]**

[VICTORIA]

**And I** acknowledge that this declaration is true and correct, and I make it in the belief that a person making a false declaration is liable to the penalties for perjury.

|  |  |  |  |
| --- | --- | --- | --- |
| *Declared* ***at***  ***this day of 20***  ***Before me:*** |  |  |  |
| ***Signed*** |
|  |  |  |  |
| ***Signature of person before whom the declaration is made*** |  |  | ***Name of Declarant*** |
|  |  |  |  |
| ***Name, qualification and contact address of person before whom the declaration is made*** |  |  |  |

**The Statutory Declaration Witness and the person making**

OFFICIAL

**this statutory declaration must sign or initial this page**

**Declarant: ……… Witness: ………**

[For Victoria Only]

[If the statutory declaration refers to another document, you **must** sign and attach this certificate to that document identifying it as an exhibit to the statutory declaration]

# Certificate identifying exhibit

## Exhibit “ “

***[describe exhibit]***

This is the exhibit marked “ ” to [*name of person making the declaration*]’s statutory declaration dated ……………:

|  |  |
| --- | --- |
| **………………………………………** | **…………………** |
| ***[Signature of person making the declaration]*** | ***[Date]*** |
| **………………………………………** | **…………………** |
| ***[Signature of authorised statutory declaration witness]*** | ***[Date]*** |

***[Full name and personal or professional address of authorised statutory declaration witness in legible writing, typing or stamp]***

**A person authorised under section 30(2) of the Oaths and Affirmations Act 2018 to witness the signing of a statutory declaration.**

**[AUSTRALIAN CAPITAL TERRITORY]**

I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the *Statutory Declarations Act* 1959, and I believe that the statements in this declaration are true in every particular.

Signature of declarant

*Declared* ***at on of 20***

***Before me:***

***Signature of witness***

***Full name of witness***

***Address of witness:***

***Qualification of witness***

**[NORTHERN TERRITORY]**

**And I make** this solemn declaration by virtue of the *Oaths, Affidavits and Declarations Act* 2010 and conscientiously believing the statements contained in this declaration to be true in every particular and knowing that it is an offence to make a statutory declaration that is false in any material particular.

|  |  |  |  |
| --- | --- | --- | --- |
| *Declared* ***at***  ***this day of 20***  Before me: |  |  |  |
| ***Signature of declarant*** |
|  |  |  |  |
| ***Signature of witness (over age of 18 years)*** |  |  |  |
|  |  |  |  |
| ***Name and contact address or telephone number of witness*** |  |  |  |

NOTE: A person wilfully making a false statement in a statutory declaration is liable to a penalty of $2,000 or imprisonment for 12 months, or both.

**[NEW SOUTH WALES]**

**And I make** this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the *Oaths Act* 1900.

|  |  |  |  |
| --- | --- | --- | --- |
| *Declared* ***at***  ***this day of 20***  Before me: |  |  |  |
| ***Signature of declaran***t |
|  |  |  |  |
| ***Signature of person before whom the declaration is made*** |  |  |  |
|  |  |  |  |
| ***Full name, qualification and address of person before whom the declaration is made*** |  |  |  |

And as a witness, I certify the following matters concerning the person who made this declaration (**declarant**):

[\**strike out the text that does not apply*]

1. \*I saw the face of the declarant.  
*OR*  
\*I did not see the face of the declarant because he/she was wearing a face covering, but I am satisfied that he/she had a special justification for not removing it.

2. \*I have known the person for at least 12 months.  
*OR*  
\*I confirmed the person's identity using the following identification document:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Identification document relied on  
(may be original or certified copy)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Signature of person before whom the declaration is made

**[QUEENSLAND]**

**And I make** this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the *Oaths Act* *1867*.

|  |  |  |  |
| --- | --- | --- | --- |
| *Taken and declared* ***before me at***  ***on the day of 20*** |  |  |  |
| ***Signature of declarant*** |
|  |  |  |  |
| ***Signature of person before whom the declaration is made*** |  |  |  |
|  |  |  |  |
| ***Full name and qualification of person before whom the declaration is made*** |  |  |  |

**[SOUTH AUSTRALIA]**

**And I make** this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the *Oaths Act 1936*.

|  |  |  |  |
| --- | --- | --- | --- |
| *Declared* ***at***  ***this day of 20***  Before me: |  |  |  |
| ***Signature of declarant*** |
|  |  |  |  |
| ***Signature of person before whom the declaration is made*** |  |  |  |
|  |  |  |  |
| ***Title of person before whom the declaration is made*** |  |  |  |

**[TASMANIA]**

**I make** this solemn declaration under the *Oaths Act* 2001.

|  |  |  |  |
| --- | --- | --- | --- |
| *Declared* ***at***  ***on 20***  ***Before me:*** |  |  |  |
| ***Signature of declarant*** |
|  |  |  |  |
| ***Justice, Commissioner for Declarations or authorised person*** |  |  |  |

**[WESTERN AUSTRALIA]**

**This declaration** is true and I know that it is an offence to make a declaration knowing that it is false in a material particular.

**This declaration is made** under the *Oaths, Affidavits and Statutory Declarations Act* 2005 at   
  
**\_\_\_\_\_\_\_\_\_\_\_\_\_\_** on **\_\_\_\_\_\_\_\_\_\_\_\_\_** by **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Signature of person making declaration**

in the presence of:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Signature of authorised witness**

|  |  |
| --- | --- |
| Name of authorised witness: |  |
| Qualification of witness: |  |