

OWNER VALUATION VERIFICATION

OWNER AFFIDAVIT	
By signing below, I authorized the following to be true and accurate.	
VALUATION VERIFICATION	
Project Name:	_____ Date: _____
Project Location/Address:	_____
Contractor:	_____
Job Valuation*:	_____
	<small>*Project valuation including owner furnished equipment.</small>
Owner/Authorized Representative:	_____
	Signature
Print Name:	_____
Title:	_____
OPTIONAL DETAILS	
Job Number:	_____
WBS#:	_____