



## CONDITIONS AND REQUEST FOR PAYMENT

**Conditions:** (List physical conditions required for acceptance):

Fee simple \_\_\_\_\_

Double wide driveway entrance \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Terms for Payment:**


Owner's request for payment in the amount of: \$1,800.00

Owner's Mailing Address: 21911 E. 69th St. S, Broken Arrow  
OK 74014

Owner Requests Check: ☒ Be mailed to above address by Certified Mail  
☐ Be delivered by Agent

Check Payable to: Jane Green

**Signature/Date:**

Owner/s:  Date: 10/3/18  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Agent: Karen L Pax Date: \_\_\_\_\_

Project: Washington: Olive-Garnett ST1616 Parcel 12a