



# CONDITIONS AND REQUEST FOR PAYMENT

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

Fee Simple

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Terms for Payment:**

Owner's request for payment in the amount of: \$5,040.00


Owner's Mailing Address: 13565 E 111<sup>th</sup> St. So., Broken Arrow, OK 74011

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

Check Payable to: Mark Green

**Signature/Date:**

Owner/s:

  
Brooklyn  
\_\_\_\_\_  
\_\_\_\_\_

Date:

10/2/18

\_\_\_\_\_

\_\_\_\_\_

Agent:

Karen L. Pax



Date:

10/12/18

Project:

Florence Street Improvements: Olive-Aspen ST1410 Parcel 3