

Dispute of Progress Claim No.:	

FORM 4 NOTICE OF DISPUTE OF PROGRESS CLAIM

(Condition 19 of the General Conditions of QBCC Level 2 Renovation, Extension and Repair Contract)

NOTE TO CONTRACTOR: This blank form may be copied for multiple use and must accompany a QBCC Form 3.

NOTE TO OWNER: If you intend to dispute a progress claim, this form must be returned to the Contractor within 5 Business Days of receipt of the disputed progress claim.

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To: (Contractor) (insert name and business address of Contractor)	
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From: (Owner/s) (insert name and postal address of Owner/s)	
Regarding construction at:	
(tick whichever box is applicable)	
(tell miletere box is applicable)	
The Owner rejects <u>all of</u> your progress claim dated: / / for the section of the	
(insert name / description of the Stage from the Payment Sche	dule)
OR	
The Owner rejects <u>part of</u> your progress claim dated: / / for th (day) (month) (year)	e Stage described in_Schedule Item 8 as:
(insert name / description of the Stage from the Payment Sche	dule)
The value of the part of the progress claim that is rejected is: \$	
(inser	t amount)
The reason/s for rejecting all or part of the claim is/are: (set out reason/s)	
SIGNED:	DATED: /
(Owner/Owner's Representative to sign here)	(day) (month) (year)

When form completed, Owner to give the Contractor the original and Owner to retain 2 legible copies.