



## Waiver Request

Date: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Contact person: \_\_\_\_\_ Phone or Email: \_\_\_\_\_

Final \_\_\_\_\_ Partial \_\_\_\_\_

Select the Plant:

Chicago Materials    Markham Asphalt    DuPage Materials    Route 66 Asphalt    K-Five Hodgkins

Project location: \_\_\_\_\_  
\_\_\_\_\_

Owner: \_\_\_\_\_

County: \_\_\_\_\_

Dollar Amount: \_\_\_\_\_

Invoice(s) waiver refers to: \_\_\_\_\_

Number of originals: \_\_\_\_\_

**PLEASE NOTE: ALL WAIVERS WILL NOT BE RELEASED UNTIL WE HAVE RECEIVED PAYMENT. IF MAILING PAYMENT, WAIVER(S) WILL BE MAILED ONCE PAYMENT HAS BEEN RECEIVED.**

\_\_\_\_\_ Call when ready to exchange check for waiver.

\_\_\_\_\_ Check will be ready for exchange on \_\_\_\_\_, 20\_\_\_\_

Please email this waiver request to Melissa Paz at [melissap@k-five.net](mailto:melissap@k-five.net) or fax it to her attention at 630-257-

6788.