



ATTACHMENT D-5
TAX FORM

**TO BE SUBMITTED ON YOUR COMPANY'S LETTERHEAD
AT TIME OF FINAL BILLING**

To: Metric Construction
55 Henshaw Street
Boston, MA 02135

From: _____

Re: Metric Project Number _____
Project Name/Location _____

The total contract amount for the above mentioned project is \$ _____

We pay for the state sales tax at the time of original purchase for all materials.

Recorded by: _____

Title: _____