



Georgia Department of Revenue
Sales Tax Contracting Unit
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REQUEST FOR RELEASE OF RETAINAGE

This form is **ONLY** to be submitted by the nonresident subcontractor: **Date:** _____

This is to certify that retainage funds are being held in escrow on work performed by the named nonresident Subcontractor under the requirements of § 48-8-63 of the Official Code of Georgia Annotated:

1. Subcontractor's Name	
2. Subcontractor's Address	
3. Subcontractor's Sales & Use Tax Number (REQUIRED)	
4. Job Number	
5. Bond Number	
6. Job Location	
7. Period Work was in Progress	
8. General Contractor's Name	
9. General Contractor's Address	

A Retainage Release will not be sent out until the liability has been paid in full.

(Subcontractor's Contact Person)

(Subcontractor's Phone)

(Subcontractor's Email)