



Cerritos Community College District

Certificate of Substantial Completion/Certificate of Partial Substantial Completion

Bid No.

Construction Process

Bid No. / Project:

Date:

Architect/Engineer:

Contract No.

Project Manager:

Contractor:

(Check Applicable Box)

CERTIFICATE OF SUBSTANTIAL COMPLETION:

Contract Completion Date: _____
Substantial Completion Date: _____
Intended Occupancy Date: _____
Project or Specified Area Shall Include: _____

CERTIFICATE OF PARTIAL SUBSTANTIAL COMPLETION:

Contract Completion Date: _____
Substantial Completion Date: _____
Intended Occupancy Date: _____
Project or Specified Area Shall Include: _____

SIGNATURE APPROVALS:

PROJECT ARCHITECT/ENGINEER AND DSA PROJECT INSPECTOR CERTIFICATIONS:

I have inspected the subject project and, to the best of my knowledge and ability, the Work is found to be substantially complete. Substantial Completion is the stage in the progress of the Work when the Work or designated portion thereof is sufficiently complete in accordance with the approved Contract Documents so that the Owner can occupy or utilize the Work for its intended use. Date of Substantial Completion or Partial Substantial Completion or the Project as designated above is also the date of commencement of applicable warranties by the approved Contract Documents.

A list of items to be completed or corrected is attached. Failure to include any items on such list does not relieve the responsibility of the Contractor to complete all Work in accordance with the approved Contract Documents.

Architect/Engineer of Record:

Name (Type or Print) Authorized Representative (Signature) Date



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Inspector of Record

Name (Type or Print)

Authorized Representative (Signature)

Date

Cerritos Community College - Owner:

The Director of the Physical Plant concurs with Partial or Substantial Completion for the purpose of operations and maintenance of the completed Work.

Director of the Physical Plant

Name (Type or Print)

Authorized Representative (Signature)

Date

Contractor Acceptance:

The Contractor will complete or correct the Work on the list of items attached hereto within ____ calendar days from the above date of Substantial Completion.

Name (Type or Print)

Authorized Representative (Signature)

Date

Program Manager:

Number of dates subject to Liquidated Damages:

Project Manager:

Name (Type or Print)

Authorized Representative (Signature)

Date

Cerritos Community College - Owner:

Name (Type or Print)

Authorized Representative (Signature)

Date

Remarks:

Attached: Punch List Dated: _____