Joint Project- Region lead Town/City– Deficiency Summary

Project Number: Date: Sheet 1 of

Description:

Municipality:

Inspector: Signature: Date:

Town/City Representative: Signature: Date:

☐**Substantial Performance** ☐ **Completion**

☐**Red line drawings have been submitted to Operations**

Item	Description	Cost

Substantial Performance and Completion Certificates will be granted upon meeting the requirements outlined in the GC and GC supplements.

Warranty will commence upon issuance of Completion Certificates as outlined in the GC and GC supplements.

Joint Project- Region lead
Town/City– Deficiency Summary

Project Number: Date: Sheet 2 of

Item	Description	Cost