Certificate of Substantial Completion Form

For Construction Projects delegated to the Campus

Project Name: _____
Campus: _____
SBC No. _____

Campus Unit : _____

Date of Sealed Contract Documents: _____

Final Construction Cost: _____

Description of work completed and use includes: (attach additional pages if necessary):

Date of Completion: _____

The work performed in accordance with the Approved Contract Documents has been reviewed and found, to the best of the Designer's knowledge, information, and belief, to be substantially completed.

Designer	By	Date of Issuance

The campus/unit performed work is satisfactorily complete and is acceptable to all user entities.

Campus / Unit Business Officer	Date
Director of Facilities Services or Physical Plant	Date

Approved Project Completion:

Capital Projects, Director of Design and Construction	Date