

STATE OF MONTANA

DEPARTMENT OF MILITARY AFFAIRS

CONSTRUCTION AND FACILITIES MANAGEMENT OFFICE

1956 Mt. Majo St. • P.O. Box 4789 • Fort Harrison, MT 59636-4789 Phone: 406 324-3100 • Fax: 406 449-5148

CERTIFICATE OF SUBSTANTIAL COMPLETION

Project Address:		Date:
Project Location:		
Agency:		
Addross:		
-		
Contact #:		
T. MONTANA DEDA	DIMENT OF MULTARY AFFAIRS	
_	RTMENT OF MILITARY AFFAIRS AND FACILITIES MANAGEMENT OFFICE	
	T., P.O. BOX 4789	
FORT HARRISON		
	,	
Architect/Engineer:		_
Contractor:		Contract Date:
		Amount:
PROJECT OR DESIGNATED PORTION	SHALL INCLLIDE:	
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Definition of Date of Substantial Completion

The Date of Substantial Completion of the Work or designated portion thereof is the Date certified by the Architect/Engineer when construction is sufficiently complete, in accordance with the Contract Documents, so the Owner can occupy or utilize the Work or designated portion thereof for the use for which it is intended, as expressed in the Contract Documents.

A list of items to be completed or corrected, prepared by the Contractor and verified and amended by the Architect/Engineer, is attached hereto. The failure to include any items on such list does not alter the responsibility of the Contractor to complete all the Work in accordance with the Contract Documents. The warranty period is defined as commencing with Substantial Completion (or with each Substantial Completion if there is more than one) of the Project, or any portion thereof, and continuing for one (1) calendar year from the date of Final Acceptance of the entire project unless otherwise modified in writing as part of the Substantial Completion or Final Acceptance.

	Architect/Engineer	Signature	Date
The Contractor will compl Substantial Completion.	ete or correct the Work on the list of ite	ems attached hereto withindays from t	the above Date of
The Owner accepts the V	Contractor Vork or designated portion thereof as s	Signature Substantially complete and will assume full po	
at on			
Time	Date		
State of Montana Dep	artment of Military Affairs,		
-	ilities Management Office		
	Owner	Signature	Date

The responsibilities of the Owner and the Contractor for security, maintenance, heat, utilities, damage to the Work and insurance will be as follows (use attachments as necessary):