

**University of Illinois  
CERTIFICATE OF SUBSTANTIAL COMPLETION**

**Project:** \_\_\_\_\_ **Project #:** \_\_\_\_\_  
**Owner:** The Board of Trustees of the University of Illinois  
**Professional Services Consultant:** \_\_\_\_\_

Contractor: \_\_\_\_\_ Inspection Date: \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 \_\_\_\_\_ Owner Possession Date: \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 \_\_\_\_\_  
 Contract Division: \_\_\_\_\_

**INSPECTION**

<u>Inspection Participants</u>	<u>Representing (Firm or Agency)</u>	<u>Areas or Sections Inspected for Occupancy</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**LIST**

A list of items to be completed or corrected by the Contractor prior to final payment has been prepared by the Professional Services Consultant and is attached to this document. Failure to include any uncompleted, faulty or deficient item on the list does not alter the responsibility of the Contractor to complete all Work in accordance with the Contract Documents. Unless otherwise required by the specifications, the Contractor shall guarantee all of the work performed under this contract against defects in material and workmanship in accordance with the Contract Documents and Federal and State laws and regulations.

**POSSESSION**

The above referenced Project area has been inspected and found to be substantially complete and ready for Owner possession and occupancy in accordance with the Contract Documents. The Owner accepts full possession and responsibility for the above designated Project or area at 12:01 p.m. of the Owner possession date. The responsibility of the Contractor for utilities ceases at the stated possession time. The insurance required under the contract remains the responsibility of the Contractor.

**FINAL PAYMENT**

The Contractor shall notify the Professional Services Consultant and the Owner in writing (in accordance to Article 9.7 of the General Conditions) when the Work is fully completed and ready for final inspection. The Professional Services Consultant, upon finding the Work acceptable and the contract fully performed, shall promptly certify final payment to the Contractor in accordance with the Contract Documents.

**CERTIFICATE OF SUBSTANTIAL COMPLETION  
EXTENDED WARRANTIES**

Extended warranties are listed below:

Item	CSI Section	Date of Commencement	Duration	Date of Expiration
1.		/ /		/ /
2.		/ /		/ /
3.		/ /		/ /
4.		/ /		/ /
5.		/ /		/ /
6.		/ /		/ /
7.		/ /		/ /
8.		/ /		/ /
9.		/ /		/ /
10.		/ /		/ /
11.		/ /		/ /
12.		/ /		/ /

Failure to include any item on the extended warranty list does not relieve the Contractor of the responsibility to guarantee the Work in accordance with the Contract Documents. (Attach any bonds or guarantees required by the Contract Documents or documentation of extended warranty dates agreed upon by the undersigned parties.)

**SIGNATURES**

_____ Contractor	_____ Firm
_____ Construction Manager (when applicable)	_____ Firm
_____ Professional Services Consultant	_____ Firm
_____ Facilities Management Representative (UIC only)	_____ Office/Dept
_____ Campus Construction Unit PM	_____ Office/Dept

- Copies: All above signed parties  
 Affirmative Action  
 Risk Management  
 UIUC/UIS Physical Plant Representative  
 UIC Director, Project Management Services, OCP  
 Campus Parking  
 Departmental Representative  
 Project File