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| moseal | STATE OF MISSOURI  OFFICE OF ADMINISTRATION  DIVISION OF FACILITIES MANAGEMENT, DESIGN AND CONSTRUCTION  **CERTIFICATE OF PARTIAL OCCUPANCY/SUBSTANTIAL COMPLETION** | | | | | |
| PROJECT NUMBER | |
| **This Certificate of Partial Occupancy/Substantial Completion applies to all or the following specified parts of the Work under the Contract Documents thereof.** | | | | | | | | |
| PROJECT TITLE | | | | | | | | |
| LOCATION/SITE/AGENCY | | | | | | | | |
| DESIGNATED PORTION | | | | | | | | |
| DATE OF PARTIAL OCCUPANCY | | | | | DATE OF SUBSTANTIAL COMPLETION | | | |
| DEFINITIONS | | | | | | | | |
| Partial Occupancy/Substantial Completion Reference General Conditions  “Partial Occupancy/Substantial Completion shall be construed to mean the completion of the Work, including the submittal and approval of specified Operation Manuals, Balance Reports, Keys, Record Drawings for that portion of the project being accepted, except minor items listed and attached to this Document, which in the opinion of the Director, or his designated Representative, will not interfere with the satisfactory use of the Facilities for its intended purpose”. However, this does not relieve the Contractor or his Surety of the requirements concerning final completion and of Article 5 – General Guarantee. | | | | | | | | |
| DATE OF PARTIAL OCCUPANCY/SUBSTANTIAL COMPLETION | | | | | | | | |
| The date of Partial Occupancy of the designated portion/Substantial Completion of the Work is the date certified by the Design Consultant, and approved by the Director, when construction of the designated portion is sufficiently complete to comply with the terms of the Contract and requirements stated in the definition above. | | | | | | | | |
| **OUTSTANDING/INCOMPLETE ITEMS** | | | | | | | | |
| A list of items to be completed or corrected prepared by the Contractor and verified / amended by the Design Consultant and Construction Representative is attached hereto. The failure to include any items on such list does not alter the responsibility of the Contractor to complete all Work in accordance with the Contract Documents. The date of commencement of Warranties for items on the attached list will be the date of Substantial Completion, unless otherwise agreed to in writing. | | | | | | | | |
| **RESPONSIBILITIES OF THE OWNER AND CONTRACTOR** | | | | | | | | |
| SECURITY, MAINTENANCE, HEAT, UTILITIES, DAMAGE TO WORK AND INSURANCE SHALL BE AS FOLLOWS: | | | | | | | | |  |  |
| The Contractor will complete or correct the work on the list of items attached hereto within      working days from the Partial Occupancy or Substantial Completion date established jointly by the Contractor, Design Consultant, and Construction Representative shown above. | | | | | | | | |
| **CONTRACTOR** | | | | | | | | |
| FIRM NAME | | | NAME OF INDIVIDUAL SIGNING (PLEASE PRINT) | | | RECOMMENDED/APPROVAL SIGNATURE | | DATE |
| DESIGN CONSULTANT | | | | | | | | |
| The construction performed under this Contract has been inspected and found to be complete/substantially complete as defined in the Contract Documents to the point the Owner can occupy the designated portion or all thereof. | | | | | | | | |
| FIRM NAME | | | NAME OF INDIVIDUAL SIGNING (PLEASE PRINT) | | | APPROVAL SIGNATURE | | DATE |
| USER AGENCY - OPTIONAL | | | | | | | | |
| **USER AGENCY REPRESENTATIVE** | | NAME OF INDIVIDUAL SIGNING (PLEASE PRINT) | | APPROVAL SIGNATURE | | | | DATE |
| **APPROVAL** | | | | | | | | |
| The Director of the Division of Facilities Management, Design and Construction or his authorized Representative accepts the designated portion or Work thereof as complete or substantially complete. | | | | | | | | |
| **FMDC CONSTRUCTION REPRESENTATIVE** | | NAME OF INDIVIDUAL SIGNING (PLEASE PRINT) | | APPROVAL SIGNATURE | | | | DATE |
| **SECTION LEADER** | | NAME OF INDIVIDUAL SIGNING (PLEASE PRINT) | | APPROVAL SIGNATURE | | | | DATE |

*Revised* 06/16 ORIGINAL: FILE/Closeout Documents

COPIES: All Signees, PMU SOSA, Project Manager