

CERTIFICATE OF SATISFACTORY INSTALLATION

Form 102 (R1)

I have completed my checks and inspection of the installation of the equipment as listed below and confirm that it is satisfactory and that any defects have been remedied except any as noted below.

Project: _____

Equipment Description: _____

Equipment Supply Bid Op No.: _____

Equipment Install Bid Op No.: _____

Equipment Tag No.: _____

Specification Reference: _____

Outstanding Defects: _____

(Authorized representative of Manufacturer)

Date: _____

(Authorized representative of Installing Contractor)

Date: _____