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|  |  | Work completion certificate  DATE | DAY | PLACE |
| COMPANY Profile Lorem ipsum dolor sit amet, consectetuer adipiscing elit. Maecenas porttitor congue massa. Fusce posuere, magna sed pulvinar ultricies, purus lectus malesuada libero, sit amet commodo magna eros quis urna.Nunc viverra imperdiet enim. Fusce est. Vivamus a tellus.Pellentesque habitant morbi tristique senectus et netus et malesuada fames ac turpis egestas. Lorem ipsum dolor sit amet, consectetuer adipiscing elit. Maecenas porttitor congue massa. Fusce posuere, CONTACT PHONE:  678-555-0103  WEBSITE:  Website goes here  EMAIL:  someone@example.com BUSINESS Business -1  Business -2  Business -3  Business -4 |  | To Whom It May concern I hereby affirm, to the best of my knowledge and belief, based on inspections, observations, testing of the [PROJECT] and upon reports submitted by others, that this [Project Name] is substantially complete and operable. The [PROJECT] was completed in accordance with the department’s issued [DETAILS] permit. contractor information [Name]  [Company Name]  [Street Address] [City, ST ZIP Code] Phone [phone] [email] PROJECT NAME Write project name here. Add further details PROJECT DESCRIPTION This space is provided to write project description. Project begin date:Substantial completion date:Physical completion date:Completion date:  **SKILLS** |

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| Certified by  [INCLUDE STAMP] | Date |