|  |  |
| --- | --- |
| Certificate of Completion | |
| Company Name (503) 555-0167 | Date: |

**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 guidelines.

### PROJECT MANAGER 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.

### Construction begin date:

### Substantial completion date:

### Physical completion date:

### Completion date:

Signature