

CC: KLMK

Bruce Clement
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Certificate of Substantial Completion

PROJECT:

(Name and address)
Slidell Memorial Hospital Fitness Park
1353 11th Street, Slidell, Louisiana
70458

PROJECT NUMBER: ~~21234~~ 11202
CONTRACT FOR: General Construction
CONTRACT DATE:

OWNER:
ARCHITECT:
CONTRACTOR:
FIELD:
OTHER:

TO OWNER:

(Name and address)
St. Tammany Parish Hospital
Service District No. 2 dba Slidell
Memorial Hospital
1001 Gause Blvd.
Slidell, Louisiana 70458

TO CONTRACTOR:
(Name and address)
Rotolo Consultants, Inc.
894 Robert Blvd.
Slidell, Louisiana 70458

St. Tammany Parish 2231
Instrmnt #: 1849092
Registry #: 2131848 bdp
03/22/2012 3:57:00 PM
NB X CB MI UCC

Inv# 1839168
Brousier add-slidell square 48 lot 22a

PROJECT OR PORTION OF THE PROJECT DESIGNATED FOR PARTIAL OCCUPANCY OR USE SHALL INCLUDE:

All work as shown on the Plans and Specifications and the Contract Documents.

The Work performed under this Contract has been reviewed and found, to the Architect's best knowledge, information and belief, to be substantially complete. Substantial Completion is the stage in the progress of the Work when the Work or designated portion is sufficiently complete in accordance with the Contract Documents so that the Owner can occupy or utilize the Work for its intended use. The date of Substantial Completion of the Project or portion designated above is the date of issuance established by this Certificate, which is also the date of commencement of applicable warranties required by the Contract Documents, except as stated below:

Warranty

Dammon Engineering, Inc.

Date of Commencement

02/27/2012

BY

[Signature]

02/27/2012

DATE OF ISSUANCE

ARCHITECT

A list of items to be completed or corrected 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. Unless otherwise agreed to in writing, the date of commencement of warranties for items on the attached list will be the date of issuance of the final Certificate of Payment or the date of final payment.

Cost estimate of Work that is incomplete or defective: \$0.00

The Contractor will complete or correct the Work on the list of items attached hereto within Forty Five (45) days from the above date of Substantial Completion.

Rotolo Consultants, Inc.

[Signature]

CONTRACTOR

BY VP of Construction

DATE

3/14/12

The Owner accepts the Work or designated portion as substantially complete and will assume full possession at (time) on (date).

St. Tammany Parish Hospital
Service District no. 2 dba Slidell
Memorial Hospital

[Signature]
BY John William "Bill" Davis
CEO

OWNER

DATE

3-19-12