# CDBG Project Completion / Final Inspection

(Note: CDBG contracts may have more than one activity, please submit a completed form for each.)

CDBG Grantee: _____

CDBG Contract Number: _____

CDBG Certified Grant Administrator (as applicable): _____

Project Activity: _____

_____

Contractor & Company Name: _____

Construction/Activity Completion Date: _____

Final Inspection Date: _____

**Certifications**:

To the best of my knowledge, this is to certify that all work/improvements made on this CDBG project has been completed in accordance with the grant application, grant agreement, and bid specifications, authorized change orders, and that there are no pending issues. This certification is for the benefit of all parties of said improvements.

Print Name of Chief Elected Official: _____

*Signature Chief Elected Official:* _____ *Date:* _____

Print Name of Engineer/Architect: _____

Print Name of Associated Firm: _____ Phone _____

*Signature Engineer/Architect:* _____ *Date:* _____

Print Name of Inspector/ Other: _____ Phone _____
(*as applicable*)

*Signature Inspector/Other:* _____ *Date:* _____