CERTIFICATE OF SUBSTANTIAL COMPLETION

Project Description:

BMU Engineering No: BMU Accounting No:

The Work to which this Certificate applies has been inspected by authorized representatives of DEVELOPER and the CONTRACTOR, and that Work is hereby declared to be substantially complete in accordance with the Contract Documents on:

#  BMU Determined Substantial Completion Date

#  Corrective Period in Years

#  Corrective Period Expiration Date

A tentative list of items to be completed or corrected is attached hereto. This list may not be all-inclusive, and the failure to include an item in it does not alter the responsibility of CONTRACTOR to complete all the Work in accordance with the Contract Documents. The items in the tentative list shall be completed or corrected by CONTRACTOR within 30 calendar days of the above date of Substantial Completion.

This certificate does not constitute an acceptance of Work not in accordance with the Contract Documents nor is it a release of CONTRACTOR's obligation to complete the Work in accordance with the Contract Documents.

The CONTRACTOR accepts this Certificate of Substantial Completion and accepts corrective period responsibilities.

Date:

 *(Contractor) (Company Name)*

Date:

 *(Developer) (Company Name)*

Date: Brookings Municipal Utilities

 *(Project Superintendent) (Company Name)*

 TRANSFER OF OWNERSHIP CERTIFICATE

Project Description:

BMU Engineering No: BMU Accounting No:

This Certificate of Ownership Transfer applies to Water Mains, Sewer Mains and their appurtenance installed under the Contract Documents provided by the Designer for the Developer and the Contractor. The Ownership Transfer applies to transmission and distribution water/sewer mains and their appurtenance, but excludes all water/sewer service lines. The water/sewer service lines which are excluded, start at and include the connection at the water/sewer main and continue to the home/business.

Transfer To:

 OWNER

Transfer From:

 DEVELOPER

Constructed By:

 CONTRACTOR

The DEVELOPER accepts this Certificate of Transfer.

Date:

 *(Developer) (Company Name)*

Date: Brookings Municipal Utilities

 *(Water/Wastewater & Engineering (Company Name)*

 *Manager)*

 APPROVED FOR TRANSFER

Date: Brookings Municipal Utilities

*(Date of Ownership (Executive Vice President (Company Name)*

*Transfer) & General Manager)*