**Utility Item Certification / Final Acceptance**

|  |  |
| --- | --- |
| PIN: |       |
| County: |       |
| Federal Project No.: |       |
| State Project No.: |       |
| Contract No.: |       |
| Utility Company: |       |
| Utility Inspector: |       |

**Instructions:** Please check appropriate box (or boxes) and fill out required information. For **Installed Item Certification**, attach **Summary of Installed Utility Items** sheet(s) for each project number and submit each estimate period as directed by the TDOT Project Supervisor**.**

**[ ]  Installed Item Certification**

On behalf of the above utility company, I certify that the materials used for the item(s) listed on the following page(s) meet and were installed in accordance with all applicable specifications.

Any pertinent shop drawings or engineering changes have been approved.

|  |  |
| --- | --- |
| UTILITY INSPECTOR: |  |
|  | Signature and Date |
|  |  |
| ESTIMATE PERIOD: | FROM: |       | TO: |       |

**[ ]  Final Acceptance of Work**

I certify that the utility relocation work is complete and is accepted by the above utility company.

|  |  |
| --- | --- |
| UTILITY INSPECTOR: |  |
|  | Signature and Date |
|  |  |

**SUMMARY OF INSTALLED UTILITY ITEMS**

|  |  |
| --- | --- |
| PIN: |  |
| County: |  |
| Federal Project No.: |  |
| State Project No.: |  |
| Contract No: |  |
| Utility Company: |  |
| Utility Inspector: |  |

|  |  |
| --- | --- |
| LOCAL GOVT. / CEI INSPECTOR: |  |
|  | Signature |
|  |  |
| ESTIMATE PERIOD: | FROM: |       | TO: |       |

|  |  |  |  |
| --- | --- | --- | --- |
| **Item Number** | **Description** | **Unit** | **Installed Quantity** |
|       |       |       |       |
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