



Both the Contractor and the Inspector must submit a separate copy of this form directly to DSA. File this report at completion of project, when services in connection with the project are terminated, when work stops for more than one month, or when any building of the project is occupied.

Check all applicable boxes:	<input checked="" type="checkbox"/> Final - Work 100% complete <input type="checkbox"/> Work not completed (indicate at "*" below) <input type="checkbox"/> Building(s) _____ occupied	<input type="checkbox"/> Terminating <input type="checkbox"/> Work Stopped	DSA File No. <b>33-H13</b> DSA Application No. <b>04-106050</b>
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This report includes all construction work through the date of: 6th month 20th day 2006 year

School District/Owner <b>Moreno Valley Unified</b>	Project Name (School) <b>March Mountain H.S.</b>
Scope of Work <b>Alteration to 1-C.R. Bldg Mech. Units</b>	Contract Amount \$ <b>350,000.00</b>

INDICATE IN EACH APPLICABLE CATEGORY	% COMPLETE	INDICATE IN EACH APPLICABLE CATEGORY	% COMPLETE
Site work		Fire Alarm System	
Foundation		Fire Sprinklers & Suppression Systems	
Structural Frame		Access, Gates & Fire Flow	
Electrical (including grounding systems)	100	Accessible Parking	
Plumbing	100	Ramps/Elevators/Lifts	
Mechanical	100	Accessible Restrooms	
Finishes		Accessibility Signage	
<b>Total Project Completion</b> (estimate total percentage of completion for projects where work is not complete):			<b>100</b>

\*List work to be completed (attach additional pages as necessary): work completed per the approved plans and district approved changes. Duct smoke detectors shut down units. District to connect to existing fire alarm

Total Number of Change Orders at Close of Project: 0

**This section to be completed by Project Inspector or Contractor:**

I know of my own personal knowledge that all construction has, in every material respect, been performed in compliance with the DSA approved documents. I declare under penalty of perjury that I prepared this report and that all statements are true.

Signature *Bill Bunting Jr* Print Name Bill Bunting Jr Date \_\_\_\_\_

Title Project Inspector (Inspector, Assistant Inspector, Contractor, School District/Owner)

Business Address PO Box 610

City Moreno Valley State CA Zip 92556

**Contractor or representative of district performing own work must also complete the following:**

I am an authorized official of \_\_\_\_\_ (Contracting Firm, Corporation, or School District performing work)

working in the capacity of \_\_\_\_\_ (Owner, Partner, President, Vice-president, Superintendent)

with personal knowledge of the work of construction. I have been authorized by said firm or corporation to sign this report.

Submit completed form to the DSA Regional Office where this project was filed:

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|---|---|--|--|
| <input type="checkbox"/> DSA San Francisco Bay Area Region<br>1515 Clay Street, Suite 1201<br>Oakland, CA 94612 | <input type="checkbox"/> DSA Sacramento Region<br>1102 Q Street, Suite 5200<br>Sacramento, CA 95814 | <input type="checkbox"/> DSA Los Angeles Basin Region<br>700 N. Alameda Street, Suite 5-500<br>Los Angeles, CA 90012 | <input checked="" type="checkbox"/> DSA San Diego Region<br>16680 West Bernardo Drive<br>San Diego, CA 92127 |
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