



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.

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|---|--|
| Check all applicable boxes: <input checked="" type="checkbox"/> Final - Work 100% complete <input type="checkbox"/> Terminating <input type="checkbox"/> Work not completed (indicate at "★" below) <input type="checkbox"/> Building(s) _____ occupied <input type="checkbox"/> Work Stopped | DSA File No. 33-21 DSA Application No. 103840 |
|---|--|

This report includes all construction work through the date of: 8 month 14 day 2002 year

| | |
|--|--|
| School District/Owner Hemet Unified | Project Name (School) Winchester Elementary |
| Scope of Work Perimeter block wall | Contract Amount \$ 75,000. |

| INDICATE IN EACH APPLICABLE CATEGORY | % COMPLETE | INDICATE IN EACH APPLICABLE CATEGORY | % COMPLETE |
|--|------------|---------------------------------------|------------|
| Site work | 100 | Fire Alarm System | 0 |
| Foundation | 100 | Fire Sprinklers & Suppression Systems | 0 |
| Structural Frame | 0 | Access, Gates & Fire Flow | 100 |
| Electrical (including grounding systems) | 0 | Accessible Parking | 0 |
| Plumbing | 0 | Ramps/Elevators/Lifts | 0 |
| Mechanical | 0 | Accessible Restrooms | 0 |
| Finishes | 0 | Accessibility Signage | 100 |

Total Project Completion (estimate total percentage of completion for projects where work is not complete): 100

★List work to be completed (attach additional pages as necessary): all work has been completed per the approved plans

and chnage order

Total Number of Change Orders at Close of Project: 1

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 R. Bunting Jr. Print Name Bill R. Bunting Jr. Date 8-14-02

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

Business Address 12105 Graham St

City Moreno Valley State CA Zip 92557

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:

| | | | |
|---|---|--|--|
| <input type="checkbox"/> DSA San Francisco Bay Area Region 1515 Clay Street, Suite 1201 Oakland, CA 94612 | <input type="checkbox"/> DSA Sacramento Region 1225 R Street Sacramento, CA 95814 | <input type="checkbox"/> DSA Los Angeles Basin Region 311 S. Spring Street, Suite 1301 Los Angeles, CA 90013 | <input checked="" type="checkbox"/> DSA San Diego Region 16680 West Bernardo Drive San Diego, CA 92127 |
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