

CALIFORNIA DEPARTMENT OF GENERAL SERVICES
DIVISION OF THE STATE ARCHITECT



VERIFIED REPORT **DSA-6**

Rev. 1-02

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"/> Terminating	DSA File No. 33-H6
	<input type="checkbox"/> Work not completed (Indicate at "*" below)	<input type="checkbox"/> Work Stopped	DSA Application No. 104455
	<input type="checkbox"/> Building(s) _____ occupied		

This report includes all construction work through the date of: 4 month 9 day 2003 year

School District/Owner Hemet Unified School Dist.	Project Name (School) Hemet HS
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Scope of Work Fire Alarm Up Grade	Contract Amount \$ 46,600.00
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INDICATE IN EACH APPLICABLE CATEGORY	% COMPLETE	INDICATE IN EACH APPLICABLE CATEGORY	% COMPLETE
Site work	n/a	Fire Alarm System	100
Foundation	n/a	Fire Sprinklers & Suppression Systems	n/a
Structural Frame	n/a	Access, Gates & Fire Flow	n/a
Electrical (Including grounding systems)	n/a	Accessible Parking	n/a
Plumbing	n/a	Ramps/Elevators/Lifts	n/a
Mechanical	n/a	Accessible Restrooms	n/a
Finishes	n/a	Accessibility Signage	n/a

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):

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 Richard Navarro Print Name Richard Navarro Date 4-9-03

Title Project Inspector DSA 1695 (Inspector, Assistant Inspector, Contractor, School District/Owner)

Business Address 11663 Vista Lane

City Yucaipa State CA Zip 92399

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:

- DSA San Francisco Bay Area Region
1515 Clay Street, Suite 1201
Oakland, CA 94612
- DSA Sacramento Region
1226 R Street
Sacramento, CA 95814
- DSA Los Angeles Basin Region
311 S. Spring Street, Suite 1301
Los Angeles, CA 90013
- DSA San Diego Region
16660 West Bernardo Drive
San Diego, CA 92187