# PUBLIC HOUSING ADMINISTRATION

###### ADMINISTRATION BUREAU

CONSTRUCTION CHECKLIST

# PART I: REGISTER INFORMATION

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| CM AVP |  |  | | |
| □ □ | Program Manager: |  | | |
| □ □ | Project Name: |  | | |
| □ □ | Project Number: |  | | |
| □ □ | Construction Contractor: |  | | |
| □ □ | Certification Period: | ##/##/## - ##/##/## | | |
| □ □ | Certification Number: | ## | | |
| □ □ | Total Certification Amount Gross: | $ | Net: | $ |

# PART II: ENGINEER APPROVAL

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| □ | Contract approved date: | ##/##/## | □ | Change Orders (If approved): | | | ## |
| □ | Original completion date: | ##/##/## | □ | Adjusted completion date: | | ##/##/## | |
| □ | Previous Certification balance: | $ , , . | □ | Photos | | | |
| □ | Total Certification Amount Gross: | $ , , . |  | Net: | $ , , . | | |
| □ | Liquidated damages amount: |  | □ | Breakdown | | | |
| □ | Project’s Contractor signature | | □ | Project’s Designer signature | | | |
| □ | Project’s Inspector signature | | □ | CPM & Claim Digger | | | |
| □ | PM representative signature | | □ | PM Payroll Compliance Certification | | | |
| □ | PM certification that work is completed during the period as per drawings and specifications | | | | | | |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CM/PM SUPERVISING ENGINEER SIGNATURE DATE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRPHA PROJECT ENGINEER SIGNATURE DATE

# PART III: FISCAL MONITOR APPROVAL

|  |  |  |  |
| --- | --- | --- | --- |
| □ | PRPHA Engineer’s Signature | □ | Set of Copies: |
| □ | Obligated Funds Availability | □ | Original Certification |
| □ | Certifications | □ | Certification’s Amount VS Certification |

Form AVP-500703A

Rev. June 2017

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fiscal Monitor Signature Date