

**\*\*NOT FOR RECORDATION PURPOSES\*\***

**LOUISIANA STATE UNIVERSITY**

**DESIGNER'S RECOMMENDATION OF ACCEPTANCE**

*Attach contractor's payment application and, if applicable, punch list.*

To: Planning, Design & Construction

From: \_\_\_\_\_

125 Planning, Design & Construction Bldg.

*Design Firm Name*

*Design Firm Address*

Baton Rouge, LA 70803

*Design Firm City, State, Zip*

Purchase Order #: \_\_\_\_\_

Project Name: \_\_\_\_\_

Contractor: \_\_\_\_\_

Original Contract Amount: \$ \_\_\_\_\_ Final Contract Amount: \$ \_\_\_\_\_

Required Date of Substantial Completion: \_\_\_\_\_ Actual Date of Substantial Completion: \_\_\_\_\_

Liquidated Damages Stipulated In Contract: \$ \_\_\_\_\_ per day

# of Days Overrun/(Underrun): \_\_\_\_\_ days Total Value of Liquidated Damages: \$ \_\_\_\_\_

Total Value of Punch List (ATTACH ITEMIZED PUNCH LIST WITH INDIVIDUAL VALUE FOR EACH ITEM): \$ \_\_\_\_\_

**ADDITIONAL INFORMATION (IF APPLICABLE)**

Final Building Area (Square Feet): \_\_\_\_\_

Roof Manufacturer-Warranty: \_\_\_\_\_ Start: \_\_\_\_\_ End: \_\_\_\_\_

Roofer Name-Guaranty: \_\_\_\_\_ Start: \_\_\_\_\_ End: \_\_\_\_\_

**TO THE BEST OF MY KNOWLEDGE AND BELIEF, THIS PROJECT IS SUBSTANTIALLY COMPLETE IN ACCORDANCE WITH THE PLANS AND SPECIFICATIONS TO THE POINT WHERE IT CAN BE USED FOR THE PURPOSE FOR WHICH IT WAS INTENDED. IT IS RECOMMENDED THAT THE PROJECT BE ACCEPTED.**

\_\_\_\_\_  
*DESIGNER SIGNATURE*

\_\_\_\_\_  
*DATE*

\_\_\_\_\_  
*DESIGNER NAME (PRINT)*

\_\_\_\_\_  
*PROJECT MANAGER SIGNATURE*

\_\_\_\_\_  
*DATE*

\_\_\_\_\_  
*PROJECT MANAGER NAME (PRINT)*

**FOR STATE PROJECTS ONLY**

State Project #: \_\_\_\_\_

Act #: \_\_\_\_\_

Item #: \_\_\_\_\_