

# CERTIFICATE OF WORK COMPLETION

PROJECT:

(NAME AND ADDRESS):

TO [PROJECT OWNER]

The Work performed under this Contract has been reviewed and found, to the Security and Blast Consultant's best knowledge, information and belief, to be fully completed on DD MMM YYYY.

A checklist of the status of the implementation of security measures and items that had been defective and corrected is attached hereto. The failure to include any items on the list does not alter the responsibility of the Security and Blast Consultant to ensure that all Work have been completed in accordance with the Contract Documents.

[S&B Consultant Signatory]

[Date]

[Date]

**Summary Table of Mitigation Measures**
