



**Building Inspector**  
**Montpelier Planning Department**  
**39 Main Street**  
**Montpelier, VT 05602**  
**Tel: 802/262-6170 FAX: 802/262-6080**  
**Email: [clumbra@montpelier-vt.org](mailto:clumbra@montpelier-vt.org)**

### **Certification of work completed**

This form is to be returned to the Building Inspector prior to the final inspection.  
If more than one contractor works on a system make copies of this form, sign off and attach to the original. **You must call and talk to the Building Inspector to schedule the final inspection.**

**Property Location:** \_\_\_\_\_

#### **Certifications of work completed**

Description of work completed: \_\_\_\_\_  
\_\_\_\_\_

#### **General Contractor Certification:**

All general carpentry, masonry, concrete and structural work is completed and meets all applicable codes, accepted practices and conditions of City of Montpelier Building Permit # \_\_\_\_\_. The structure is ready to be used for the permitted occupancy.

Company: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

#### **Electrical work Certification by Electrical Contractor:**

All electrical work has been completed to applicable codes.

Company: \_\_\_\_\_  
Name: \_\_\_\_\_ Vermont License # \_\_\_\_\_  
Signature: \_\_\_\_\_ License Expiration date: \_\_\_\_\_  
Date: \_\_\_\_\_

#### **Plumbing work Certification by Plumbing Contractor:**

All plumbing work has been completed to applicable codes.

Company: \_\_\_\_\_  
Name: \_\_\_\_\_ Vermont License # \_\_\_\_\_

**Certification of work completed**

**Property Location:**

Signature: \_\_\_\_\_ License Expiration date: \_\_\_\_\_  
Date: \_\_\_\_\_

**Sprinkler Certification by Sprinkler Contractor:**

The fire protection sprinkler system installed and or modified meets all applicable codes, manufacture's installation instructions, conditions of the City of Montpelier Building Permit and is in proper working condition. The sprinkler system was installed and or modified per NFPA \_\_\_\_\_.

Company: \_\_\_\_\_  
Name: \_\_\_\_\_ Vermont License # \_\_\_\_\_  
Signature: \_\_\_\_\_ License Expiration date: \_\_\_\_\_  
Date: \_\_\_\_\_

**Other Fire Suppressions System by suppression system contractor:**

The fire protection system installed and or modified meets all applicable codes, manufacture's installation instructions, conditions of the City of Montpelier Building Permit and is in proper working condition. The fire suppression system was installed and or modified per NFPA \_\_\_\_\_.

Company: \_\_\_\_\_  
Name: \_\_\_\_\_ Vermont License # \_\_\_\_\_  
Signature: \_\_\_\_\_ License Expiration date: \_\_\_\_\_  
Date: \_\_\_\_\_

**Fire Alarm System by Fire Alarm Contractor:**

The fire alarm system installed or modified meets all applicable codes

Company: \_\_\_\_\_  
Name: \_\_\_\_\_ Vermont License # \_\_\_\_\_  
Signature: \_\_\_\_\_ License Expiration date: \_\_\_\_\_  
Date: \_\_\_\_\_

**Heating, Ventilation and Air Conditioning (HVAC) system(s) Certification by HVAC Contractor:**

System(s) installed or modified: \_\_\_\_\_  
The HVAC system(s) was installed or modified per the manufacture's instructions and meets all applicable codes.

Company: \_\_\_\_\_  
Name: \_\_\_\_\_ Vermont License # \_\_\_\_\_  
Signature: \_\_\_\_\_ License Expiration date: \_\_\_\_\_  
Date: \_\_\_\_\_

### Certification of work completed

**Property Location:**

**Owner or Owner's agent Certification:**

The structure is ready for occupancy and I am requesting a final inspection for Certificate of Occupancy.

Name: \_\_\_\_\_ Title (if applicable) \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**You must call and talk to the Building Inspector to schedule the final inspection.**

**Certification of as built valuation**

a. Site work	\$
b. Valuation of building construction	\$
c. Fixed equipment, installed	\$
d. Electrical	\$
e. Plumbing	\$
f. Other fire suppression systems	\$
g. Heating and Air Conditioning	\$
h. Fire alarm system	\$
i. Consulting services	\$
j. Other:	\$
<b>K. TOTAL PROJECT COST</b>	<b>\$</b>
Sprinkler system costs (no Fee)	\$

Value certified by \_\_\_\_\_

Signature \_\_\_\_\_

Original Fee Paid \$ \_\_\_\_\_, Total fee owed based on as built value \$ \_\_\_\_\_

Fee difference + or - \$ \_\_\_\_\_

Final inspection conducted by:

Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_