DSA Closeout CheckLIST

|  |  |  |  |
| --- | --- | --- | --- |
| CoLLEGE: |  | DSA #: |       |
| Contract# |       | Project # |       |
| A/E: |       | DescriptioN: |       |
| CPT: |       | PI: |       |

**Inspection Card Projects Forms are Uploaded to DSAbox/Non-Inspection Card Project Forms sent to Cathy NeVille at PMO Office**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date Completed** | **On File** | **N/A** | **Description** | **Comment or Form Change** |
|       | [ ]  | **[ ]**  | **[ ]** Non-Inspection Card **[ ]**  Inspection Card |       |
|       | **[ ]**  | **[ ]**  | DSA approved plans & specs |       |
|       | **[ ]**  | **[ ]**  | DSA approved addenda |       |
|       | **[ ]**  | **[ ]**  | Form 102(IC) filed by Architect for all prime Contractors |       |
|       | **[ ]**  | **[ ]**  | DSA-5 for PI filed/uploaded/approved by DSA Field Engineer |       |
|       | **[ ]**  | **[ ]**  | Pre-Construction Kick Off Meeting Agenda/Meeting Minutes |       |
|       | **[ ]**  | **[ ]**  | PI filing of “Semi-Monthly reports” (DSA-155) |       |
|       | **[ ]**  | **[ ]**  | “Field Trip Notes” corrected and approved by DSA |       |
|       | **[ ]**  | **[ ]**  | All Change Orders/ CCD’s approved by DSA |       |
|       | **[ ]**  | **[ ]**  | All Prime Contractors submitted Final Verified Reports DSA- 6  |       |
|       | **[ ]**  | **[ ]**  | PI Submitted “Final Verified Report” DSA-6 to DSA |       |
|       | **[ ]**  | **[ ]**  | Testing Lab submitted Final Lab Affidavit DSA-291 |       |
|       | **[ ]**  | **[ ]**  | Testing Lab submitted Final Geotechnical Report DSA-293 |       |
|       | **[ ]**  | **[ ]**  | Architect submitted Final Verified Report DSA-6A/E to DSA |       |
|       | **[ ]**  | **[ ]**  | “Weighmaster’s” Certification from Contractor |       |
|       | **[ ]**  | **[ ]**  | Recorded Notice of Completion |       |
|       | **[ ]**  | **[ ]**  | Final Document Package to DSA (non-inspection card) |       |
|       | **[ ]**  | **[ ]**  | Final costs to District for payment |       |
|       | **[ ]**  | **[ ]**  | Receipt of “Final DSA Certification” Letter |       |

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| **Design Consultant / Contractor** | **By** | **Authorized Representative Signature/Date** |
|       |  |  |
| **College Project Team**  | **By** | **Authorized Representative Signature/Date** |
|       |  |  |
| **Program Management Office**  | **By** | **Authorized Representative Signature/Date** |

THE DSA CLOSEOUT CHECKLIST UNDER THIS CONTRACT HAS BEEN REVIEWED AND FOUND, TO THE DESIGN CONSULTANT, CONTRACTOR, COLLEGE PROJECT TEAM , AND THE PROGRAM MANAGER’S BEST KNOWLEDGE, INFORMATION AND BELIEF, TO BE SUBSTANTIALLY COMPLETE.