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| **Utility Completion Form (UF-1)** |
| **UTILITY COMPANY INPUT**  |
| Contract No: | Contract Name: | Contract Location: | District: |
|  |  |  |  |
| Name of Utility: | Name of Utility Authorized Representative: |
|  |  |
| Utility Transmittal No:  |  | Date: | Click here to enter a date. |
| Name of Contractor: | Name of Contractor Authorized Rep: |
|  |  |  | UUtility Phase  |
| Force Account Agreement No.  | Force Account Date:  |  (if applicable): |
|  |  |
| Was the work for the utilities completed? | [ ] Yes [ ] No |
| \*Attach all documentation (i.e. Daily Force Accounts and Chargeable Invoices) |
| Start Date: Click here to enter a date. | End Date: Click here to enter a date. |
| If yes, was the work completed within the current approved Utility Duration as referenced in the Force Account agreement?Has all the completed force account paperwork been attached?If yes, have you, the Utility, notified the MassDOT R.E. of completion date and forwarded confirmation, to the Contractor? | [ ] Yes [ ] No[ ] Yes [ ] No[ ] Yes [ ] No |
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| *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* | *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* |
| ***Utility/Authorized Representative Signature*** | *Date* |
|  |
| **CONTRACTOR INPUT**  |  |
| To the best of my (*Contractor Rep*) knowledge, I agree that the Utility has completed their (*Utility*) known scope, for this applicable phase of the Utility work, to allow the Contract Work to progress. | [ ] Yes [ ] No***Note: this form does not serve as a proper notice of delay – see Contract requirements.* If no, has MassDOT been formally notified, via letter, identifying what work is preventing the Contractor from progressing?**  |
| Confirmed Start Date: Click here to enter a date. | Confirmed End Date: Click here to enter a date. |
| If there are no known issues with the Utility’s declared completion of their work – Contractor to sign here. Otherwise, provide (here or attached) a summary of what is not complete and preventing work from progressing and forward to MassDOT and the Utility).  |
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|  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* |  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* |
| ***Contractor/Authorized Representative Signature*** | *Date* |
| *Send To: Name of MassDOT Auth. Representative:* | *Date sent to MassDOT:* |
| Choose Name | Click here to enter a date. |
|  |
| **MassDOT DISTRICT CONFIRMATION**  |  |
| Was the work for the utilities completed? | *[ ] Yes [ ] No* |
| Start Date: Click here to enter a date. | End Date: Click here to enter a date. |
| If yes, was the work completed within the current approved Utility Schedule as referenced in the Force Account? | *[ ] Yes [ ] No* |
| In compliance with agreement duration? | *[ ] Yes [ ] No* |
|  |
| Confirming this is a phase payment? | *[ ] Yes [ ] No* |
| Confirming this is a final payment? | *[ ] Yes [ ] No* |
|  |
| ***CC: Resident Engineer, State Utility Engineer, District Utility Constructability Engineer, District Construction Engineer*** |
|  |
|  |
| ***MassDOT/Authorized Representative Signature*** | *Date* |