Certification of Construction Compliance

Instructions: Engineer Complete Sections A through D and submit form to the Dutchess County Health Department. See back for further instructions.

SECTION A. PROJECT INFORMATION

Project name ______________________________________________ approved on _____________________

Tax Map # ________________________  Street ___________________  Location _______________________________

☐ Phased certification. Describe which components of the project are being certified:

_________________________________________________________________________________________

SECTION B. EXCEPTIONS or DEVIATIONS from APPROVED PLANS

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

SECTION C. SUPPORTING DOCUMENTATION

☐ "As built" plans are attached.

☐ Other ____________________________________________________________________________________

SECTION D. CERTIFICATION

I, ____________________________________, hereby certify that the above described project was installed under my direction and responsibility and, in my professional opinion, in accordance with the terms and conditions of the Permit to Construct, Certificate of Approval and approved plans, and any amendments thereto.

Inspection dates: _______________________________________

_________________________________  ___________________________________
(Signature)  (Date)

License No. __________________

(seal)
Directions:

SECTION A
Project Name: Use approved name; do not use marketing names.
Location: Town, Village, or City. Do not use post office.
Phased Certification: If only portions of the project are being certified at this time, describe which portions have been installed, inspected, tested and certified. Include maps highlighting portions being certified.
Note: Use the Certification of Fill for Sewage Disposal Systems (HD-5) for certification of fill for individual septic systems.

SECTION B
List any exceptions or deviations from the approved plans. Justify deviations with engineer analysis and/or product specifications. All exceptions and deviations are subject to Dutchess County Health Department review and approval.

SECTION C
Provide "as built" drawings, sample test results, pressure/leakage test results, third party certifications as may be required by the approved plans or any exceptions listed in Section B of this form. List attached supporting documents under "Other".

Comments: