

## City of Port St. Lucie Utility Systems Department

Email: UtilEng@cityofpsl.com

## **Utility Acceptance Turnover Checklist**

Project Name		PSLUSD Project No.	
The Complete package	shall be submitted elec	stronically as a single PDF file.	
Documentation			EOR Initials
1. Contractor's Affidav	it & Release of Lien (	PSLUSD Doc. 85-402)	
2. PSLUSD Water/Was 85-406 and/or 85-407)(or		uction Completion (PSLUSD Doc.	
☐Sample Point Map	(if applicable)		
☐Pressure Tests (if a	applicable)		
☐Bacteriologic Test			
☐Record Drawings	· ,		
3. Owners Affidavit (PS	SLUSD Doc. 85-404)		
4. Bill of Sale (PSLUSD I	Ooc. 85-400)		
5. Material and Installa	tion Warranty for a m	inimum of One Year (PSLUSD Doc.	85-405)
6. Miscellaneous			
Overtime Fees			
Re-Inspection Fees			
Other: Explain			
Other			
Engineer of Record	Name Printed	Signature	Date
Linguiscer of Necord	Name i mileu	Oignature	Date