



# PROJECT CLOSE OUT MEETING REQUEST FORM

Project Name: Rainbow Springs Sewer Feasibility

Project Code: UTC000187 Contract Number: 20CF0002704

End-Using Dept.: Utilities

Project Budget: \$200,000.00 ✓

Final Project Costs: \$195,921.00 ✓

Remaining Funds: \$4,079.00 ✓

Funding Restrictions (Grant, Etc.): Grant Funded - \$2,302.00 ✓

Construction Manager Name: N/A

### Documentation Provided

Copy of Dept. Acceptance letter:  Yes  No

Date Final Request for Payment Received: 11/08/2021

Facilities Director/ Project Manager Signature: \_\_\_\_\_

### Administrative Use

Date Meeting Request Received: \_\_\_\_\_

Date of Project Close Out Meeting: \_\_\_\_\_

### Project Completion Certification (To be completed & signed during CPM):

Recommendation for Remaining Project Funds

Transfer balance of Marion County Funds (\$1,777.00) to reserves

Department Signature \_\_\_\_\_ Date: 1/16/24

Procurement Services Signature \_\_\_\_\_ Date: 1/14/24

Facilities Management Signature \_\_\_\_\_ Date: 1/16/24

Administration/Fiscal Signature \_\_\_\_\_ Date: \_\_\_\_\_

Budget Signature \_\_\_\_\_ Date: \_\_\_\_\_