**STATE OF WISCONSIN DEPARTMENT OF TRANSPORTATION**

**BUREAU OF AERONAUTICS**

**Construction Progress and Inspection Report**

|  |  |
| --- | --- |
| Contractor: | Airport: |
| Subcontractor: | Project #: |
|  | Project Description: |
|  | Type of Inspection: |
| Equipment on Job: | Attendance (name & title): |
| No. of People Working: |  |
| Adequacy of: |  |
| Testing: |  |
| Progress: |  |
| Inspection: |  |
| Current Work in Progress: | |
| Comments and Recommendations:  **FINAL INSPECTION CHECKLIST ATTACHED USE OTHER SIDE IF NECESSARY** | |
| By: | Date: |

cc: Contractor: (contractor)

Owner: (owner)

Consultant: (consultant)

Equal Rights Officer: Shannon Clary – WisDOT - BOA**Final Inspection Checklist**

A. List Contract Change Orders:

B. Contract time status: Type of Contract - Working Days / Calendar Days / Completion Date

Days in contract including modifications for CCO’s - \_\_\_\_\_\_\_\_\_\_\_

Days worked to date - \_\_\_\_\_\_\_\_\_

Days liquidated damages = \_\_\_\_\_\_\_ days X $ \_\_\_\_\_\_\_\_ per day = $\_\_\_\_\_\_\_\_\_\_

Time extension requested:  YES  NO

C. Other pay adjustments: Punch list work remaining:  YES  NO

Punch list attached \_\_\_\_\_\_\_ Dollars of work remaining $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Retainer: Current amount - $ \_\_\_\_\_\_\_\_\_\_\_\_\_

Retainer can be reduced to - $ \_\_\_\_\_\_\_\_\_\_\_\_\_

Liens:  YES  NO

Concrete strength pay reductions & / or increase:  YES  NO

Describe:

Concrete thickness pay reductions:  YES  NO

Describe:

Bituminous concrete pay reductions & / or increase:  YES  NO

Describe:

Additional pay adjustments:

D. Materials certifications supplied:  YES  NO

Certifications needed:

E. Operation & Maintenance manuals provided:  YES  NO

F. Affidavit of Employment Compliance:  YES  NO

1. Partial acceptance of any work  YES  NO

Describe accepted work & start of warranty:

Is warranty a standard 1 year?  YES If not describe:

H. Final pay quantities:  in agreement  agreement needed

I. Equipment: Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Model: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Serial No.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

J. Other comments: