CC-05 PROJECT CLOSEOUT

SECTION 1: PROJECT INFORMATION Grantee Name: _____ Project Title: Awarded in FY: CDE Accounting PO#: Project Start Date: _____ Project Completion Date: _____ **SECTION 2: FINANCIAL SUMMARY** (see final CC-06 to complete) Grantee Match %: **Grant Amount Total Requested Remaining Funds BEST Grant Amount Grantee Match Total Project Cost** Other sources of funding secured to support this BEST project (include grants, donations, and any additional district funds): **SECTION 3: PROJECT SUMMARY Project Status:** 100% Complete Punch List/Warranty Ongoing Additional Scope Remaining by District **Total Project Square Footage: Cost per Square Foot: Date of Occupancy** (date students/staff use the building for intended purpose): **Date of Substantial Completion** (date warranties began, if multiple list): All warranties in place? Yes **Length of Warranty:** No **Insurance Updated?** Yes No **Facility Insured Amount:** N/A **High Performance Certification LEED** CHPS **Green Globes Certification Level:** Status: Complete Pending (estimate completion date):

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SECTION 4: RECORDS DOCUMENTATION AND MONITORING

Please review Exhibit C of the Grant Agreement that outlines the Deliverables and Submittals that should be on file with the grantee and shared with CDE, as applicable. Your RPM will review files and follow up as needed.

All applicable deliverables have been completed as outlined in Exhibit C Yes No

Per the grant agreement, grantees are responsible for keeping all project records for 10 years after completion of a project. To document quality control measures that have occurred on the project, please complete the table below as applicable for your project.

	Type of Document (as applicable)	Responsible Firm and Person	Date Approved or Issued	Where is documentation kept?
Architectural				
Plans				
Ie. Construction				
Documents, specs				
Engineering				
Reports Ie. Soil reports, materials testing, etc.				
Permit				
Documents Ie. DFPC, foundation, roof, building, etc.				
Inspection Cards Final				
Occupancy Certificate Ie. Partial/Complete				
Warranty Walkthrough				
НРСР				

SECTION 5: PROJECT OUTCOME (*Grantee/LEA Staff to complete*)

 What were the main deficiencies addressed? (if project addressed multiple facilities, please describe scope a 	t each facility)
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2. What was most successful about your project?

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3.	What, if any, challenges were faced?
4.	How has this project impacted students?
5.	Any advice for future BEST grantees? Or something you wish you knew earlier?
6.	Please share up to 5 pictures of your completed project by emailing as attachments, including one of the permanent BEST sign, as applicable. Complete?
7.	Interested in debriefing about your project with CDE staff further? Yes No
SE	CTION 6: ACKNOWLEDGEMENTS
Ву	signing below, you are acknowledging that you understand the following.
	 No additional funds will be requested for this project and acknowledge that CDE will no longer authorize any requests for funds regarding this project. A five or ten-year (FY25 and later) recapture policy is in place for the work completed through this grant. If property or improvements impacted by the Grant is sold, abandoned, demolished, or extensively renovated in a manner that makes the Project work obsolete within the recapture period, a portion of the grant will be recaptured according to the grant agreement. If a major project was awarded (new facility, major renovation/addition, etc.), the district will begin setting aside funds for Capital Renewal Reserve according to the board policy and as agreed to in the application starting next fiscal year. Printed Name/Title of Authorized Representative:
	Signature of Authorized Representative: Date:

