

DRAFT



Notice of Completion of Public Works Contract

Department Use Only	
Assigned to	Date Assigned

Date 12/10/2020	Form Version	Revision Reason
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Awarding Agency Information			
Company Name Port of Skamania County		UBI Number 601-585-752	
Address PO Box 1099	City Stevenson	State WA	Zip Code 98648
Contact Name Cindy Bradley	Phone Number 509-427-5484	Email Address accounting@portofskamania.org	

Prime Contractor Information			
Company Name Hafford Construction LLC		UBI Number 604-375-838	
Address 5212 NE 99th St.	City Vancouver	State WA	Zip Code 98665
Contact Name Jeff Hafford	Phone Number 360-624-2320	Email Address jhafford172@gmail.com	

Project Information			
Project Name Port Office Remodel	Contract Number 2020-2	Affidavit ID Number	
Jobsite Address 212 SW Cascade Ave	City Stevenson	State WA	Zip Code 98648
Date Awarded 09/24/2020	Date Work Commenced 09/24/2020	Date Work Completed 12/07/2020	Date Work Accepted 12/15/2020
Is this a Federally Funded Transportation Project? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, attach the Contract Bond Statement			
Have Subcontractors been used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, complete Addendum A			
<input type="checkbox"/> Contract/Payment Bond Waived? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Retainage Bond Waived? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Detailed Description of Work Completed			

DOR Tax Information	
Calculated Amount 25000.00	Liquidated Damages
Additions (+) 62.63	Amount Disbursed 24292.90
Reductions (-)	Amount Retained 2506.55
<b>Sub-Total</b> 25062.63	Other
Sales Tax Amount 1929.82	Sales Tax Rate 193.00
<b>Total</b> 26,992.45	<b>Total</b> <del>\$0.00</del> 26,992.45
Both totals must be equal - If multiple sales tax rates, attach a list	

Apprentice Utilization Information	
Was apprentice utilization required? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Engineer's Estimate: N/A
Utilization %:	If utilization did not meet or exceed 15%, was a Good Faith Estimate approved? <input type="checkbox"/> Yes <input type="checkbox"/> No

Comments
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The Disbursing Officer must submit this completed notice immediately after acceptance of the work done under this contract. No payment shall be made from the retained funds until receipt of all release certificates and affidavits.

Complete and submit for by email to all three agencies below



