

**Certificate of Functional System
Mechanical Completion/Ready
for Start-up* and Turnover**

A. Functional system no. : _____
Functional system title : _____

The above system is further defined in attachments A, B, C pages.*

Date: _____

We, the undersigned,
....., representing Company
....., representing the Client,

herby declare that we have carried out this day a review of the works comprising the above defined functional system, including the supporting documentation, in particular the quality records.

From this review, we certify the functional system as Mechanically Complete/Ready for Start-up*

- without reserves*
- with the exeptions noted on the attached punchlist pages.*
-

<u>For Company</u>	<u>For the Client</u>
Name	Name
Signature	Signature
Date	Date

B. Furthermore, we declare that care, custody and control of the above defined functional system are transferred this day at hours from Company to the client

- without reserves*
- with the exceptions noted on the attached punchlist pages.*
-

<u>For Company</u>	<u>For the Client</u>
Name	Name
Signature	Signature
Date	Date

C. To: Subcontractor : _____
Subcontract No. : _____

We hereby inform you that you no longer are allowed free access to that part of your works included in the above defined functional system. Any action that you should be required to carry out from the date and time indicated above in Section B, will be subject to prior written approval by Company/to the Client Permit to Work System.*

For Company
Name
Signature
Date

Note: A complete and signed copy with attachments is to be sent to each subcontractor who has contributed to the above defined functional system.

*Delete as required