



INSPECTION REPORT

Estate/Block Name & Address:			Cost Centre		
			Cat.	Code #	
Contractor		Date	wo	// Bid Call#	
Contract for:					
The estimated date of substantial performance of deficiencies is					
List of Any Deficiencies:	Estimated Values				
, .					
	1			T	
Distribution:	Total Value of Deficiencies:			\$	
BC Housing Contract Administrator	Times (X) 2			\$	
Accounts Payable	Total to be Deducted on Progress Invoice			\$	
Contractor's Signature:			Date	Date:	
Consultant's Signature:			Date	Date:	
BC Housing Approval:		Date:			

JUNE 2001 ADM-85