CON-502D REV. 10/07 STATE OF CONNECTICUT

DEPARTMENT OF TRANSPORTATION

CERTIFICATE OF COMPLIANCE

	Project No:	
	Project Location:	
	Project Name:	
This is to certify that to the best of my kno- completed Project, as identified above, has compliance with the Contract plans, specif	been constructed in substantial	
General Contractor:		
Signature		
Print Name		
Title		
Name of Company		
Date		
Sworn and subscribed by me on this	day of	, 20
	Commissioner of the Notary Public	Superior Court/