

MANUFACTURER'S CERTIFICATE OF PROPER INSTALLATION

Project Name:			
Owner:		City of Ocala Contract:	
System:		Grant Project Number:	
I hereby cert	tify that the above referen	ced system has been:	
Instal	lled in accordance with mar	nufacturer's recommendations	i.
Inspe	ected, checked, serviced, and	d adjusted.	
Electr	rical and mechanical connec	ctions meet applicable codes	and safety standards.
Syste	m has been performance to	ested and meets or exceeds s	pecified requirements.
Comments:			
required to assure		rtify that I am authorized to hed is complete and operat te.	
Manufacturer:			
Signature of Manuf	acture Authorized Represe	entative: Da	te: