



ASSUMPTION CERTIFICATION

19T# _
65M# _

LOCATION INFORMATION

Project: _____

Address: _____

Site Plan *Check one* Commercial
Institutional
Residential

Subdivision *List legal description, lot or civic number affected and streets* _____

For multiple units, the Owner must provide a list of civic addresses and street names as to which this certificate applies to.

INSPECTION REPORT

Name of Landscape Contractor: _____

Description of Work Completed: _____

Landscape architect's statement:

I hereby certify that the One Year Warranty Period which commenced _____ has expired and that all plant material is in a healthy and vigorous state, with the exceptions noted below: The following material(s) have been replaced under warranty and are subject to an extended warranty for a period of ONE YEAR. (Enter N/A where not applicable). ***I hereby certify that all Tree Collars and T-Post have been removed.***

_____ Value of Work / Materials under Extended Warranty

_____ Signature of Landscape Architect

_____ Name in Print

_____ Signature of Applicant / Agent

_____ Name in Print

_____ Date of Inspection

O.A.L.A. Stamp

Item Under Extended Warranty: _____
