OUR PROGRAM STREET ADDRESS CITY, STATE, ZIP PHONE

PRE-CONSTRUCTION CONFERENCE CHECKLIST

Date:	
Property Owner(s): Address:	Rehab Specialist:
	Phone:
Phone:	Fax:
	Pager:
	E-Mail
Contractor Name:	Contract Amount:
Address:	
Phone:	_
Fax:	-
Pager:	_
E-Mail:	_
Items Covered in the Pre-construction Conference	e: w and Agreement on Work Write-Up Selection Sheet
EPA Lead Hazard Information Par	• • • • • • • • • • • • • • • • • • • •
Removal of Furnishings	
Correspondence Procedures	
	duals ()
	ations and Contract Modifications)
e .	luding name of responsible supervisor)
Payments Procedure Review	
Program Regulations and General	
Execute Construction Roles Agree	
Documents Required under the Co	ntract
- Building Permit Applied for - Warranties	
- warrancies	

- Liability Insurance
- Workers Compensation
- Saturday, Sunday, holiday and night work
- **Review of Construction Schedule**
- **Required Progress Inspection Checklist**
- Equal Employment Opportunity Poster given (if over \$10,000)
- Affirmative Action Plans
- Section III Requirements
- Initial Notice of Construction Mortgage (state-specific)
- Notice of Construction Mortgage Requisition (state-specific)

Additional Items Covered in Conference:

I (we) the undersigned, have on this date ______participated in a pre-construction conference prior to the signing of a contract for the rehabilitation of my (our) property. I (We) acknowledge that I (we) understand the terms of the contract, the explanation of the work to be performed by the contractor, the role of the contractor, the role of the construction Specialist, and my (our) responsibilities during the construction phase. I (We) have been given adequate answers to our questions, if any. I (We) further understand and acknowledge that Our Program and its employees, officers, directors, volunteers, agents, and successors and/or assigns, assume no responsibility for the work performed and do not warrant any work performed.

Witness	Homeowner Signature	Date
Witness	Homeowner Signature	Date
the homeowner(s), construction sp procedures to be followed for char and agree that the work performed	that the pre-construction conference we becialist, and the undersigned General nge orders and requests for payment a must meet the standards of performa quirements, Work Write-Up and Age	Contractor. I understand the nd inspections. I understand nce required by Our Program

General Contractor

Date

I, the undersigned, hereby certify that I participated in a pre-construction conference this date.

Our Program

Construction Specialist

Date