[Insert date]

[Insert Contractor’s name]

[Insert address line 1]

[Insert address line 2]

|  |
| --- |
| Dear [Insert Contractor’s name] |

|  |  |
| --- | --- |
| **Contract number** | [Insert Contract number] |
| **Project name** | [Insert Project name] |

**Re: Final Certificate – Contractor – Clause 42.8**

I refer to your Final Payment Claim dated [Insert date] submitted in accordance with Clause 42.7 of the *General Conditions of Contract*.

As all obligations under the Contract have been met, I hereby issue the Final Certificate, copy enclosed. A copy has also been sent to the Principal.

[Delete before sending. Delete all of the above as appropriate].

**OR:**

I refer to my letter dated [Insert date] regarding issue of Practical Completion.

As no Final Claim has been received from you for the above contract within the required time frame set out in Clause 42.7 of the *General Conditions of Contract* and as set out in my letter dated [Insert date] you are barred from making any claim which you could have made against the Principal.

However, as you have met all obligations under the Contract and as required by Clause 42.8 of the *General Conditions of Contract*, it is my opinion that the sum of $[Insert value] is owing to you by the Principal on account of the Contract. This sum will be forwarded to you shortly.

**OR:**

I refer to my letter dated [Insert date] regarding issue of Practical Completion.

As no Final Claim has been received from you for the above contract within the required time frame set out in Clause 42.7 of the *General Conditions of Contract* and as set out in my letter dated [Insert date] you are barred from making any claim which you could have made against the Principal.

As you have not met all the obligations under the Contract, I cannot issue the Final Certificate. The defects and/or omissions yet to be addressed are as follows:

[Insert details of outstanding defects or omissions]

Yours sincerely

[Insert name]

**Administrator**

Encl ()

Cc: Principal's Representative

[Delete before sending. Blind copies are left to your own discretion]

|  |  |  |
| --- | --- | --- |
| B/c: | File no. | [Enter file number] |

1. **Administrator’s Representative** – [Insert name]

[Insert address line 1]

[Insert address line 2]

For your information.

1. **Inspector** – [Insert name]

[Insert address line 1]

[Insert address line 2]

For your information.

1. **Administration Officer** – [Insert name]

[Insert address line 1]

[Insert address line 2]

For your information.

1. **Program Coordinator** – [Insert name]

[Insert address line 1]

[Insert address line 2]

For your information.

1. **ARMIS Coordinator** – [Insert name]

[Insert address line 1]

[Insert address line 2]

For your information.

[Insert name]

**Administrator**

[Insert date]