|  |  |  |  |
| --- | --- | --- | --- |
| Z:\Capital Forms & Templates\NW Logo triple stacked.jpg | NORTHWEST MISSOURI STATE UNIVERSITY  CAPITAL PROGRAMS  **PROJECT WARRANTY NOTICE** | | |
| PROJECT NUMBER | |
| PROJECT TITLE | | | | | |
| PROJECT LOCATION | | | | | |
| WARRANTY NOTICE NUMBER | | | DATE OF ISSUE | | |
| WARRANTY START DATE | | | WARRANTY END DATE | | |
| CONTRACTOR | | | DESIGNER | | |
| **DESCRIPTION OF THE PROBLEM(S)** | | | | | |
|  | | | | | |
| **CORRECTIVE ACTION TAKEN** | | | | | |
|  | | | | | |
| **PROBLEM CORRECTED BY** | | | | | |
| NAME OF INDIVIDUAL SIGNING (PLEASE PRINT) | | SIGNATURE | | | DATE |
| **CORRECTION CERTIFIED BY THE CONTRACTOR’S REPRESENTATIVE** | | | | | |
| NAME OF INDIVIDUAL SIGNING (PLEASE PRINT) | | SIGNATURE | | | DATE |
| **APPROVAL SIGNATURE BY THE NORTHWEST PROJECT MANAGER** | | | | | |
| NAME OF INDIVIDUAL SIGNING (PLEASE PRINT) | | SIGNATURE | | | DATE |

*Revised* 06/01/2020 FILE: Gen #7 Adapted from State of Missouri OA FMDC

COPIES: All Signees, Director of Capital Programs, Director of Facility Services