



County of Wetaskiwin No. 10

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Strong Proactive Leadership • Safe Progressive Communities

FINAL ACCEPTANCE CERTIFICATE

Development Location: _____ Development Name: _____

Developer: _____

Servicing Agreement Dated: _____ Agreement No.: _____

Contractor: _____

Municipal Improvement: _____

Boundaries of Development Area: AS PER ATTACHED PLAN

Date of Application: _____

PURSUANT OF THE COUNTY OF WETASKIWIN NO. 10 DEVELOPMENT AGREEMENT NO. _____

DATED _____, I _____, OF

THE FIRM _____ "CONSULTING ENGINEERS", HEREBY, CERTIFY

THAT AS OF THE ABOVE DATE, THE SAID MUNICIPAL IMPROVEMENT MEETS ALL THE REQUIREMENTS FOR A FINAL

ACCEPTANCE AS SPECIFIED BY THE SAID SERVICING AGREEMENT, AND I HEREBY RECOMMEND THIS MUNICIPAL

IMPROVEMENT FOR FINAL ACCEPTANCE BY THE COUNTY OF WETASKIWIN.

_____ Date _____

Project Engineer (Consulting Engineering Firm)

_____ Date _____

Signing Office (Consulting Engineering Firm)

Consulting Engineer's Seal

Approved on _____ 20____

_____ County Engineer / Representative

Rejected on _____ 20____

_____ County Engineer / Representative

Cause(s) for Rejection: (See attached report)

I hereby certify that the items listed as reasons for rejection have been corrected.

_____ Date _____

Project Engineer (Consulting Firm)

Approved: _____ Date _____

County Engineer / Representative

Date Maintenance Period to End: _____