



S.A. Sullivan Builders, LLC.

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Residential – Commercial Construction

New – Restoration - Renovation

Certificate of Completion

I have reviewed all of the work performed and completed by S.A. Sullivan Builders, LLC, an independent contractor. I certify that all work performed and materials supplied by said contractor are in accordance with the signed Work Authorization, and have been completed to my satisfaction. The undersigned initiates the two-year conditional warranty as explained on the S.A. Sullivan Builders, LLC Warranty Information sheet.

Signed this, the _____ day of _____, _____.

S.A. Sullivan Builders, LLC - Signature

Customer/Insured Signature

S.A. Sullivan Builders, LLC - Printed Name

Customer/Insured Printed Name

Acknowledgement of Deductible Amount (if applies): \$ _____

Deductible Being Waived Description:

Customer Check # _____

Additional comments:

