



Humber Teaching

NHS Foundation Trust

PRACTICAL COMPLETION CERTIFICATE

[insert contractors name and address]

Estates Department

Mary Seacole

Willerby Hill

Beverley Road

WILLERBY

HU10 6ED

Tel: [insert mobile no.]

Email: [insert email address]

CONTRACT: [insert project number and name]

In accordance with clause 11 of the Conditions of Contract, I certify that subject to the completion of any outstanding items and making good of any defects, shrinkages and other faults, which appears during the defects liability period, the Works were, in my opinion, practically completed on:-

[insert date]

And that the said defects liability period will end on:-

[insert date]

SIGNED:

DATE:

[insert name and job title]

FOR AND ON BEHALF OF HUMBER TEACHING NHS FOUNDATION TRUST.

