



**MAINTENANCE PERIOD COMMENCEMENT
CERTIFICATE**

19T# _____
65M# _____

Full
Partial *Only on prior approval from the City*

LOCATION INFORMATION

Project: _____
Address: _____

Site Plan *Check one* Commercial
Institutional
Residential

Subdivision *List legal description, lot or civic number affected and streets* _____

For multiple units, the Owner must provide a list of civic addresses and street names as to which this certificate applies to.

INSPECTION REPORT

Name of Landscape Contractor: _____
Description of Work Completed: _____
Value of Remaining Works: \$ _____ .00 *on partial completion only*
Description of Remaining Works: _____

O.A.L.A. Stamp

Landscape architect's statement:
During the course of construction, I have inspected the site sufficiently to verify that all landscape work has been carried out following approved horticultural practices and has been completed to my satisfaction and is in general accordance with the Landscape Plan APPROVED by the City of Vaughan and/or in accordance with changes as directed and/or approved in writing by the City of Vaughan (listed below). A ONE-YEAR warranty on all plant material, installed as part of this inspection, shall commence from the date listed below.
NOTE: Inspections must include the approved plant material AND planting locations:

Signature of Landscape Architect

Name in Print

Signature of Applicant / Agent

Name in Print

Date of Inspection

Description of Approved Changes: _____