



Architect or Engineer Certification
For Completed Projects

Date:
CON Number:
Facility Name:
Project Location:

This certification is for completed projects, consistent with approved architectural/engineering Certificate of Need submissions, for final inspection by the Regional Office of the New York State Department of Health.

The architect or engineer for the project to complete the following.

I hereby certify to the New York State Department of Health that:

I have been retained by the facility to provide professional architectural/engineering services that may include construction oversight, on-site inspections, and other required services to ensure the progress, quality, and conformance of the work.

Upon project completion, I have determined the space is in accordance with State Hospital Code 10 NYCRR Part 711, applicable provision of Parts 712-717, and are consistent with programmatic requirements and prior approved drawings. If any components of the project are inconsistent with the required standards, I have identified the changes and reasons for such changes below.

[Empty box for listing changes and reasons]

I understand this certification facilitates the pre-opening inspection, in consort with final, as-built floors plans, for all areas to be inspected, including spaces with no proposed construction, as referenced within the Regional Office's Environmental Documentation Checklist.

Architect or Engineer Professional Stamp

Signature of Architect or Engineer
Name of Architect or Engineer (print)
Professional New York State License Number
Business Address

The **applicant** for the project to complete the following.

The undersigned applicant understands and agrees that, notwithstanding this architectural/engineering certification, the Department of Health shall have continued authority to (a) review the architectural and engineering project documents and/or inspect the work, and (b) withdraw its approval of the application for failure to comply with the State Hospital Code. The applicant is obligated make changes required by the Department to comply with the codes and regulations, whether physical plant construction or alterations have been completed, and understands that the costs of any subsequent corrections necessary to achieve compliance may not be considered allowable costs for reimbursement under 10 NYCRR Part 86.

Authorized Signature for Applicant

Name (print)

Title

Date