

DEPARTMENT OF ADMINISTRATIVE SERVICES (DAS)

Office of School Construction Grants & Review (OSCG&R)

REQUEST FOR REVIEW OF FINAL PLANS FORM SCG-042

STATUTORY REF.: C.G.S. Sections 10-282, 10-283, 10-291, 10-294, 10-292

Oxford Public Schools	Oxford Middle School Great Oak Road Oxford, CT 06478		STATE PROJECT NUMBER: 108-0043 N
			PHASE NUMBER: II of II - Technology
Estimated date* to begin con	struction July 13	, 2020. Estimated date to com	nplete construction August 1, 2020.
* NOTE: Construction must b	egin within 2 ye	ears of grant commitment date	to maintain grant eligibility.
Certification of Approval	dates:		_
		Final Plans & Prof. Cost Estimate	Site Approval (if applicable)
Local Board of Education			
School Building Committee			
	proved for this p	project on the dates shown al	ORMAT II for this project, dated April 20, 2020 , bove.
Chairperson's Name (Type o	r print)	Signature	** Date
For the School Building Comr	nittee:		
Chairperson's Name (Type o	r print)	Signature	 Date
** Signature dates can	not precede t	he date on the submitted pl	ans.
For the Project Architect/Engi	neering Firm:	/	
Tecton Architects, pc		Let. Hab	860-548-0802
Firm Name (Type or print)		Signature	Telephone No.
	professional co		eligible and Limited Eligible Costs Worksheet Copies of all the above referenced documents
Superintendent's Name (Type	e or print)	Signature	 Date

NOTE: NO PHASE OF THIS SCHOOL CONSTRUCTION PROJECT SHALL GO OUT TO BID, AND NO PURCHASE ORDER OVER \$10,000.00 SHALL BE ISSUED, UNTIL YOU HAVE RECEIVED WRITTEN NOTIFICATION FROM THE STATE DEPARTMENT OF ADMINISTRATIVE SERVICES (DAS) INDICATING APPROVAL OF FINAL PLANS, PROJECT MANUAL, AND COST ESTIMATE.

FORM SCG-042 Request for Review of Final Plans

State Project No. 108-0043 N

Project Name: Oxford Middle School

Name of Contact Person:	Telephone:	Date:				
Tecton Architects c/o Justin Hopkins	860-990-6498	April 20, 2020				
Certifications of Local Approval:						
I certify that I have local jurisdiction over the State Building Code and that the plans and project manual dated						
April 20, 2020 for the above referenced project comply with all applicable building codes.						
Local Building Official's Name Signature		Date				
20, 2020 for the above referenced project comply with	h all applicable fire codes.					
Local Fire Marshal's Name Signature		Date				
I certify that I have local jurisdiction over the State Health Code and that the plans and project manual dated April 20, 2020 for the above referenced project comply with all applicable health codes.						
Local Health Official's Name Signature		Date				
I certify that I have local jurisdiction over Section 504 Accessibility Standards (UFAS). I further certify that the above referenced project comply with all applicable accessible.	ne plans and project manual dated					

Date

Local Federal 504 Official's Name

NOTES: 1.) THE CERTIFICATIONS OF LOCAL APPROVAL NOTED ABOVE MUST BE OBTAINED, AND ARE REQUIRED TO BE PROVIDED, PRIOR TO RECEIVING APPROVAL-TO-BID BY THE STATE DEPARTMENT OF ADMINISTRATIVE SERVICES (DAS) FOR THIS PROJECT. IF THESE CERTIFICATIONS CANNOT BE OBTAINED LOCALLY, PLEASE CONTACT THE DAS, OFFICE OF SCHOOL CONSTRUCTION GRANTS & REVIEW (OSCG&R) FOR ASSISTANCE.

Signature

- 2.) THE OFFICE OF SCHOOL CONSTRUCTION GRANTS & REVIEW (OSCG&R) APPROVED PROJECT PLANS, PROJECT MANUAL AND COST ESTIMATE MUST BE KEPT ON FILE AT THE LOCAL BOARD OF EDUCATION OFFICE UNTIL THE FINAL GRANT PAYMENT HAS BEEN MADE AND THE DAS AUDIT IS COMPLETE ON THIS PROJECT.
- 3.) ORIGINAL SIGNATURES ARE REQUIRED ON THIS FORM. IF ORIGINAL SIGNATURES ARE NOT AVAILABLE AT THE PLAN REVIEW MEETING, MAIL OR OVERNIGHT DELIVER THIS COMPLETED FORM TO: The Office of School Construction Grants & Review 450 Columbus Blvd., Suite 1503 Hartford, CT 06103