CONTRACT CONTROL FORM

PRELIMINARY REVIEW

Project:

655460

CCN: 201200389 **Existing** Contact Person: Pamela Lujan Type of Agreement: Certificate of Completion & Acceptance Description/Project Name: BCIP to MDC Transmission Line Developer: Bernalillo County 6-13:13 - Closed____ Contract Amount \$N/A SIA Contract Period: Contract Amount \$ SIA Contract Period: _____ Contract Amount \$_____SIA Contract Period: Contract Amount \$ S/W Contract Period: _____ DRAFT CONTRACT: Rec d by Legal: _____ Rejected/Returned to Dept.: ____/___ /_____Approved: _____Initials: _____ Returned to Legal: FINANCIAL GUARANTY: Letter of Credit No. ____ Date: ____ Attached: Yes ___ No. __ Initial ____ Other: Type _____ Date: ____ Attached: Yes __ No. __ Initial ___ FINAL CONTRACT REVIEW APPROVALS REQUIRED: Date Delivered Returned to Dept. Approved By Approval Date **Utility Div** Hydrology Div Transportation Div DRC Chairman Legal Dept City Engineer County Clerk CAO DISTRIBUTION: Date: By: User Department Vendor City Clerk Treasury Other: _____