|  |  |
| --- | --- |
| **CLPA** |  |
| **Primary Contact** |  |
| **Project Name** |  |
| **MCA Number** |  |
| **Supplemental Agreement Number** |  |
| **Key Number** |  |
| **CLPA Contact Number** |  |
| **Contract Execution Date** |  |
| **Contract Completion Date** |  |
| **Procurement Type** |  [ ]  **Direct Appointment** [ ]  **Informal Selection** [ ]  **Formal Selection** |

|  |  |
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| **Contract Closeout Form** | **Date**       |
| **Final Invoice received** | **Date**       |
| **All Services under the contract have been completed** |  **YES** [ ]  **NO** [ ]  |
| **All deliverables have been received and accepted** |  **YES** [ ]  **NO** [ ]  |
| **Final invoiced amounts are appropriate** |  **YES** [ ]  **NO** [ ]  |
| **Consultant Evaluation form completed and submitted to contractor** |  **YES** [ ]  **NO** [ ]  |

|  |  |
| --- | --- |
| **Satisfactory Contract Completion**  |  **YES** [ ]  **NO** [ ]  **If no, why?**       |
| **Recommend Full Certification** | **YES** [ ]  **NO** [ ]  **If no, why?**       |
| **Additional Comments:**       |

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| **Reviewed by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **ODOT Local Agency Liaison**  | **Date**  |