



**SOQUEL CREEK WATER
DISTRICT**
5180 Soquel Drive
Soquel CA 95073

Mailing Address:
Post Office Box 1550
Capitola, CA 95010

SUBMITTAL AND SHOP DRAWING TRANSMITTAL

DATE:	PROJECT NAME:	CWO:	CONTRACTOR:	CONTRACTOR'S JOB No.	SUBMITTAL No.	PAGE NO. 1 of
ITEM No.	DESCRIPTION (NAME, TYPE, SIZE, CAPACITY, ETC.)	SOURCE	No. OF COPIES	REFERENCE SECTION	ACTION CODE	REVIEWED BY
1						
2						
3						
4						
5						
6						
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8						
9						
10						

THIS CERTIFIES THAT ALL ITEMS SUBMITTED HEREWITH HAVE BEEN CHECKED BY THE CONTRACTOR, ARE IN ACCORDANCE WITH THE CONTRACT DOCUMENTS, EXCEPT AS NOTED, AND ARE APPROVED BY THE CONTRACTOR FOR USE IN THIS PROJECT.

CONTRACTOR

DATE

ACTION CODE

- | | |
|----------------------------|--|
| 1 - NO EXCEPTIONS TAKEN | A. CONSTRUCTION/INSTALLATION SHALL PROCEED ONLY WHEN ACTION CODE IS 1 OR 2 |
| 2 - MAKE CORRECTIONS NOTED | B. ACTION CODED 3 SHALL BE RESUBMITTED |
| 3 - AMEND AND RESUBMIT | C. REVIEW IS FOR CONFORMANCE WITH THE CONTRACT DOCUMENTS AND DOES NOT RELIEVE THE CONTRACTOR FROM RESPONSIBILITY FOR |
| 4 - REJECTED; SEE COMMENTS | ALL REQUIREMENTS OF THE CONTRACT DOCUMENT |

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ITEM No.	DESCRIPTION (NAME, TYPE, SIZE, CAPACITY, ETC.)	SOURCE	No. OF COPIES	REFERENCE SECTION	ACTION CODE	REVIEWED BY
11						
12						
13						
14						
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CONTRACTOR

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