# OWNER'S CERTIFICATION OF COMPLETION AND COMPLIANCE WITH REHABILITATION CONTRACT, SPECIFICATIONS AND CHANGE ORDERS

This is to certify that **Vuloria Trice**, Owner(s) of property; located at **149 NW 10<sup>th</sup> Avenue Delray Beach, FL 33444** do state that the City of Delray Beach Housing Rehabilitation Program, through **Louminel General Contractors LLC.,** Contractor, has completed to satisfaction all outlined repairs and services called for in the rehabilitation contract and any subsequent Change Orders.

I/We further state and certify that to the best of our knowledge all the repairs and services called for in the above-mentioned rehabilitation contract and any subsequent Change Orders have been completed in compliance with the City of Delray Beach Housing Rehabilitation Program specifications.

I/We certify that all obligations undertaken by the City of Delray Beach Housing Rehabilitation Program have been fulfilled. Further, the City of Delray Beach Housing Rehabilitation Program is under no obligation to provide additional repairs, improvements or services.

I/We further certify **Louminel General Contractors LLC**, shall be under no further obligation to provide additional repairs, improvements or services other than those provided under the one (1) year warranty guarantee called for under the original contract agreement by and between **Louminel General Contractors LLC**, Contractor, and the City of Delray Beach Housing Rehabilitation Program.

I/We hereby agree to notify promptly the above listed Contractor and the City of Delray Beach Neighborhood Services Division of any defects in workmanship or materials provided in the above-mentioned contract and subsequent Change Orders which may become evident during the warranty period.

I/We further state that this certification is given freely of our own volition.

(Owner)

(Date)

(Owner)

(Date)

## CITY OF DELRAY BEACH CERTIFICATE AND RELEASE

CONTRACT ENTERED INTO THE \_\_\_\_\_ DAY OF \_\_\_\_2024\_ BETWEEN Louminel General Contractors LLC AND Vuloria Trice and FOR THE REHABILITATION OF RESIDENTIAL PROPERTY AT 149 NW 10<sup>th</sup> Avenue Delray Beach, FL 33444 LOCATED IN THE CITY OF DELRAY BEACH, FLORIDA.

#### LEGAL DESCRIPTION:

The North 50 Feet Lot 1, Block A, West Side Heights, according to the Plat recorded in Plat Book 13 page 61 as recorded in the Public Records of Palm Beach County, Florida; said land situate, lying and being in Palm Beach County, Florida

Parcel Identification Number: 12-43-46-17-26-001-0012

KNOW ALL MEN BY THESE PRESENTS:

- 1. The undersigned hereby certifies that there is due from and payable by the Owner to the Contractor under the Contract and duly approved Change Orders and modifications the balance of \$ \_\_\_\_\_
- The undersigned further certifies that all work required under this Contract including work required under Change Order Number \_\_\_\_\_ has been performed in accordance with the terms thereof, and that there are no claims of laborers or mechanics for unpaid wages arising out of the performance of this Contract.
- 3. That in consideration of the payment of the amount stated in paragraph 1 hereof, the undersigned does hereby release the Owner from any and all claims arising under or as authorized by this Contract and duly approved Change Orders.

IN WITNESS WHEREOF, the undersigned has signed this instrument this \_\_\_\_\_\_ day of \_\_\_\_\_\_, 2024. The affiant further states that the matters and things stated therein are, to the best of his/her knowledge and belief, true.

Contractor Signature

#### STATE OF FLORIDA COUNTY OF PALM BEACH

The foregoir	ng instrument was ack	nowledged before me,	
this	day of	, 2024 by	, who
personally a	ppeared (known) to m	e or who produced	
#		as identification	and who did (did not) take an
oath.			

Signature of Person taking Acknowledgement

Stamp & Serial No.

SEAL

Name (Type/Print or Stamp) Notary

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### WARRANTY FOR REHABILITATION

Reference is made to Section 129 and 130 of General Conditions as incorporated into and made part of our Contract dated \_\_\_\_\_\_\_, 2024 for the rehabilitation of your property at: 149 NW 10<sup>th</sup> Avenue, Delray Beach, FL 33444.

As required thereby in connection with the performance of work under the Contract, you are advised that I warrant that all materials, fixtures and equipment furnished by me and my subcontractors were new and of good quality and of good title. Should any defects appear within a year from the date of the final acceptance which occurred on \_\_\_\_\_\_, and should such defects be caused by faulty materials, fixtures, equipment or work, I shall promptly remedy these defects and pay for any damage to other work resulting therefrom. It is requested that you give notice to observed defects with reasonable promptness.

A separate guaranty is being furnished for each of those facilities specified to be guaranteed in the General Conditions.

**Contractor Signature** 

Contractor Firm Name

Date