

ASSET INFORMATION HANDOVER ACCEPTANCE CERTIFICATE

| | |
|------------------------------|--|
| Project Name | |
| Project Number | |
| Contract Name | |
| Contract Number | |
| Purchase Order Number | |
| Contractor Company | |

| | | |
|--|--|---|
| Location of Asset | Corridor | Subdivision |
| | Mileage Range | |
| Asset Information Handover | Full | Partial - See list of assets |
| If Partial, List Assets: | | |
| Asset Information Deficiencies (Deficiency List to accompany this Certificate) | Not Applicable Conditional Acceptance | Date deficiencies are to be rectified by: |

| Applicable Asset Owner(s) (to be completed by the Project Delivery Team) | | | |
|--|--|----|--|
| 1. | | 4. | |
| 2. | | 5. | |
| 3. | | 6. | |

Note: One certificate is signed back from each applicable organizational department.

Signed off by Project Delivery Team Project Manager

| | | | |
|----------------------|--|-------------|--|
| Name | | | |
| Title | | | |
| Business Unit | | | |
| Signature | | Date | |
| Comments | | | |

Asset Owner:

| Asset Information Handover Acceptance Criteria (to be completed by Asset Owner Representative) | | | | | |
|--|--|----------|-----|-------------------------|----------|
| No. | Asset Information | Accepted | | Deficiencies | Comments |
| 1. | Asset documents required to support operation and maintenance of the assets have been handed over for processing to EDRMS | | Yes | No Deficiencies | |
| | | | No | Deficiencies (Attached) | |
| 2. | Asset data to allow maintenance of the asset, managing inventory, and whole life cost management has been handed over to create records in EMMS | | Yes | No Deficiencies | |
| | | | No | Deficiencies (Attached) | |
| 3. | Asset geospatial data to accurately visualize the asset location through the EGIS platform has been handed over | | Yes | No Deficiencies | |
| | | | No | Deficiencies (Attached) | |

Signed off by the Asset Owner Representative of the applicable organizational department

(Signature sections provided to accommodate more than one signatory)

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|----------------------|--|-------------|--|
| Name | | | |
| Title | | | |
| Business Unit | | | |
| Signature | | Date | |
| Comments | | | |

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| Name | | | |
| Title | | | |
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| Signature | | Date | |
| Comments | | | |

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| Name | | | |
| Title | | | |
| Business Unit | | | |
| Signature | | Date | |
| Comments | | | |