

Request for Letter of Certification (MC-8)

District: _____ Contract ID: _____ Date: _____

Select Date

Fed/State Project Number: _____

FEMA?

Project Name: _____

Price Reductions by Line Item (Include Estimate and Amount):

DMIR Reductions by Line Item (Include Estimate and Amount):

Additional Notes:

Corrections Contact Name: _____

Corrections Contact Email: _____

Sampling Checklist Included yes

Pending Change Order no

Submit Form Clear Form

You must use Adobe Acrobat/Bluebeam etc., not the web browser.

This form mails to: DOH.MC8@wv.gov