



Project Completion Summary Sheet

Project Name: _____ **Project No.:** _____

Project Manager: _____ **Phone No.:** _____

City Department: _____

Consultant: _____

Archaeological Services Requested: _____

Review Agency: _____

Project Notice to Proceed: ____/____/____ **Project Completed:** ____/____/____

Project Budget: \$ _____ **Invoice Account No.:** _____

Project Results:

No finding: **Prehistoric materials:** Yes No **Historic materials:** Yes No

Human remains: Yes No **Consultation:** _____ **Repatriation:** _____

Types of Features and Quantities: _____

Report Author: _____ **Date:** ____/____/____

Report Title: _____

Collections: Yes No **Disposition:** _____

Site Map attached: Yes No