## Appendix I – Work Product Acceptance Form

WORK PRODUCT	ACCEPTANCE FORM FOR ITS CONTRACT No Dat	e:
Vendor Name Statement of Submission		
Contractor certifies that by submitting this form, that Contractor has completed the work assignment per the standards set forth in ITS Contract No NYS ITS, by executing this form, acknowledges that the work assignment was completed to the standards set forth in ITS Contract No. C000771 and accepts the final work product. The completed form must be submitted with the Invoice in order to receive payment.		
Vendor Details		
Submitted by: Name Title		
Signature of Vendor		
Response Date/Time:		
Resolution: Date/Time		
Location of Work		
Scope of Work		
Test Results		
NYS Statement of Acceptance		
Accepted by:		
Name		
Title		
Signature:		Date: