



## Contract Key Contacts Form

1. Sections 1, 3 and 5 shall be completed by an authorized City representative(s)
2. Sections 2 and 4 shall be completed by an authorized representative(s) of the Contractor
3. The form is to be uploaded with the other required contract documents in the City's Bidding System
4. The City will provide a fully completed and duly signed copy of the form back to the Contractor upon execution of the contract.

1. Contract Details	
City of Orillia Contract Number:	City of Orillia Project Number:
City of Orillia Contract Title:	

2. Contractor's Information	
Legal Business Name:	Primary Contact First & Last Name:
Address:	Primary Contact Email:
	Primary Contact Phone:

3. Owner's Information	
Legal Business Name:	Primary Contact First & Last Name:
The Corporation of the City of Orillia	
Address:	Primary Contact Email:
50 Andrew Street South, Suite 300 Orillia, ON, L3V 7T5	
	Primary Contact Phone:
	Copy Provided to the Attention of the Council Services: <a href="mailto:councilservices@orillia.ca">councilservices@orillia.ca</a>

4. Contractor's Consent
<p>The Contractor agrees that any notification forms as required by <i>O. Reg. 303/18: Forms</i> under the <i>Construction Act, R.S.O. 1990, c. C.30</i> will be issued via email between the parties to the email addresses as provided on this form.</p> <p>The Contractor understands that it is their responsibility to provide any updates to the information provided above to the City's Accounts Payable representative, in writing via email to <a href="mailto:ap@orillia.ca">ap@orillia.ca</a>.</p>
Authorized Representative First & Last Name:
Signature:
Date:

5. Owner's Consent
<p>The Owner agrees that any notification forms as required by <i>O. Reg. 303/18: Forms</i> under the <i>Construction Act, R.S.O. 1990, c. C.30</i> will be issued via email between the parties to the email addresses as provided on this form.</p> <p>The Owner understands that it is their responsibility to provide any updates to the information provided above to the Contractor's primary contact, as provided herein, in writing via email.</p>
Authorized Representative First & Last Name:
Signature:
Date: