

Consultant Services Request Form

Standing Offer Agreement

Project information:

Name of project:

Date:

Account Number:

Project Number:

Work Request Number:

Project Manager:

Ph 905-688-5550 ext.

Client Department:

Type of project:

☐ renovation

☐ new bldg/addition

☐ mech/elect

☐ grounds (exterior)

Location of project:

Building:

Room number(s):

Other location information:

Consultant services required:

☐ architectural

☐ structural

☐ mechanical

☐ electrical

☐ civil

☐ project management

☐ other (describe)

Services are required for the following phases:

☐ Preliminary (schematic) Design

☐ cost estimate required at end of this phase

☐ required completion date of this phase:

☐ Design Development

☐ cost estimate required at end of this phase

☐ required completion date of this phase:

☐ Contract Documents

☐ cost estimate required at end of this phase

☐ required completion date of this phase:

☐ building permit application required

☐ Tender and Award services

☐ required tender date:

☐ Contract Admin/Post Construction Services

☐ required occupancy date of project:

Consultant fee basis:

- ☐ fixed fee to complete the work described herein
- ☐ per diem with upset limit (based on rates included in SOA)
- ☐ per diem (based on rates included in SOA)
- ☐ other (describe):

Project Description/Additional Information:**Consultant Agreement:****The fee will be determined as follows:**

- ☐ fixed fee, amount \$
- ☐ per diem rates as per the SOA,
with upset limit of \$
- ☐ per diem rates as per the SOA

The scope of work will be completed:

- ☐ according to the schedule noted above, or
- ☐ according to the modified dates as agreed
by the Project Manager and noted below:

Consultant:

- ☐ Atkinson Engineering Inc.
- ☐ Chapman Murray Associates Architects Inc.
- ☐ David Premi Architects Inc.
- ☐ Quartek Group Inc.

Project Manager:

Name (print)

Signature

Consultant:

Name (print)

Signature

Date