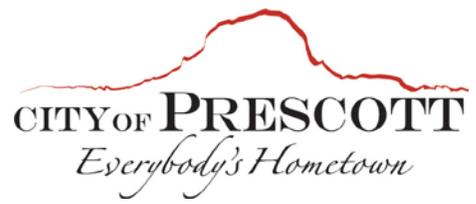


CONTRACT TRACKING SHEET



CONTRACT NO: _____

For Contract Review –

1st Step: City Clerk will assign a contract number (if Council action is required, get number first and include in Council Agenda Memo)

2nd Step: Route Contract and applicable documents through Legal Department

*** Certificate of Liability/Insurance **MUST** be attached. Please include the expiration date.

PROCESS – NOTE: The Legal Department **MUST** review all IGAs, Easements, Lease/Property Acquisition and Development Agreements as well as all Contracts. Must be reviewed and signed off by both Risk Manager & Legal Department prior to any action taken.

Please fill out this form completely or it will be returned to you prior to review, approval, or scanning in OnBase. If a response is not applicable, please use "N/A" - Do Not Leave Any Blanks.

Type (check one):

- Contract
- Change Order/Modification (How many change orders are connected to this contract? _____)
ORIGINAL CONTRACT NO: _____ **for this change order**
- Amendment (How many amendments are connected to this contract? _____)
ORIGINAL CONTRACT NO: _____ **for this amendment**
- IGA Lease/Property Acquisition
- General Services Development Agreement
- Professional Services License Agreement
- Other: please specify: Construction Easement

IDENTIFYING INFORMATION: (Please fill in each field)

| | |
|--|--|
| Requesting Dept., Contact Name, Ext. #: Contractor or Vendor Name, Address, Tel. No.: Project Name Ord/Res No: _____ if applicable | Brief Summary of the Services to be provided: Terms: Start: _____ Expire: _____ Contract Amount: \$ _____ Does contract require Council approval? <input type="checkbox"/> Yes <input type="checkbox"/> No Scheduled Council Date: _____ Does document need to be recorded <input type="checkbox"/> Yes <input type="checkbox"/> No |
|--|--|

ADDITIONAL COMMENTS/INSTRUCTIONS? _____

INSURANCE & BONDS

None Required

| | | | |
|------------------------|-----------------------------------|---------------|-----------------------------|
| Insurance Certificate: | <input type="checkbox"/> Attached | _____ Initial | Date: _____ Exp. Date _____ |
| Bid Bond: | <input type="checkbox"/> Attached | _____ Initial | Date: _____ |
| Performance Bond: | <input type="checkbox"/> Attached | _____ Initial | Date: _____ |
| Payment Bond: | <input type="checkbox"/> Attached | _____ Initial | Date: _____ |

FINAL REVIEW AND APPROVAL: Please initial

| | | |
|--|-------------|-----------------------------|
| <input type="checkbox"/> Legal: _____ | Date: _____ | Contracts/Procured Services |
| <input type="checkbox"/> Risk Mgmt: _____ | Date: _____ | Contracts and Certificates |
| <input type="checkbox"/> City Manager: _____ | Date: _____ | when required |

City Clerk's Office Use

Retention Date: _____ Council approved on: ___/___/___