NOTICE OF ACKNOWLEDGEMENT OF PRIME CONTRACTOR FOR SAFETY DESIGNATION

DATE ISSUED:	PROJECT SITE LOCATION(S) (refer to attached plan or drawing, if applicable):
CITY BUSINESS UNIT:	
CITY REPRESENTATIVE:	PROJECT TITLE:
CONTRACTOR:	RFx Number:
CONTRACTOR'S SAFETY DESIGNATE:	CONTRACTOR'S PROJECT SITE DESIGNATE (if applicable):

1. Pursuant to the provisions of the Occupational Health & Safety Legislation, the *Contractor's Representative* hereby acknowledges the *Contractor* will act in the role of designated *Prime Contractor for Safety* for the *Project Site*.
2. By executing this Acknowledgement, the *Contractor* agrees to actively manage, coordinate and monitor the *Work* performed at the *Project Site* to ensure all requirements of Occupational Health & Safety Legislation are met. This Acknowledgement must be completed in full prior to the actual commencement of any *Work* at the *Project Site* (except for the return of Prime Contractor status section, to be completed when Prime Contractor status changes), and a copy of the completed Acknowledgement must be posted on the *Project Site*.
3. Should the individual named in this Acknowledgement as *Contractor's Representative* leave the employment of the *Contractor*, or is no longer responsible for the *Project*, or otherwise changes, then a new Acknowledgement must be completed, executed and posted.
4. If the *Project Site* is large or geographically spread over a large area, then additional Acknowledgments must be posted in conspicuous locations around the *Project Site*. If a *Project* has multiple locations, then an Acknowledgement must be posted at each location.
5. If the *Project Site* location changes, then a new Acknowledgement must be completed, executed and posted.
6. By signing this Acknowledgement, the *Contractor* agrees that no change to the designation of *Prime Contractor for Safety* shall be effective without having obtained the prior written authorization of The City's Representative.

PRIME CONTRACTOR STATUS ASSUMED BY THE CONTRACTOR	**PRIME CONTRACTOR STATUS RETURNED TO THE CITY OF CALGARY**
DATE ASSUMED:	DATE RETURNED:
AUTHORIZATION	**AUTHORIZATION**
CONTRACTOR'S REPRESENTATIVE	**CONTRACTOR'S REPRESENTATIVE**
PRINT NAME DATE	PRINT NAME DATE
TITLE	TITLE
SIGNATURE I have the legal authority to bind the Contractor.	SIGNATURE I have the legal authority to bind the Contractor.
CITY REPRESENTATIVE	**CITY REPRESENTATIVE**
PRINT NAME DATE	PRINT NAME DATE
SIGNATURE	SIGNATURE

Note: All italicized terms and expressions used on this Form X 711 are defined in The City of Calgary's most recent *Standard General Conditions*. In the event that there is a conflict in the defined terms, the meanings as ascribed in the *Agreement* shall prevail.

ORIGINAL: Business Unit File
COPY TO: *Contractor*; ESM; Supply Management; Law Department – Paralegal (Corporate Services, Mail Code # 8053)

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