DATE

Project: PROJECT NUMBER

Vendor Name

Address

Address

Attention: Contact Name

The Region of Peel (Region) would like to take this opportunity to thank you for your submission concerning **Document NUMBER – PROJECT TITLE.** Your tender has been considered for acceptance.

Three (3) copies of the contract documents will be couriered to your attention for your signatures and corporate seal.

Please have the following documents returned to the attention of the undersigned by DATE:

1. Three (3) copies of the contract documents, with your signatures and corporate seal on the Agreement Form.
2. A letter from the Workplace Safety & Insurance Board stating that you have complied with the requirements of the *Workplace Safety & Insurance Act* as of the contract signing date.
3. Certificate of Insurance on the Region form provided in the tender documents, in the amounts as outlined in: (UPDATE TO REFERENCE THE APPLICABLE LOCATION IN TENDER).

A minimum of $5,000,000.00 General insurance coverage, minimum $5,000,000.00 Automobile insurance (INSURANCE TYPES AND AMOUNTS VARY BY PROJECT. MUST MATCH WHAT IS IN AGREEMENT AND PROCUREMENT DOCUMENTS. MODIFY AS NEEDED)

1. Three (3) copies of the Performance Bond and Labour and Material Payment Bond, in the amount as outlined in the contract document (50 per cent of the total contract amount) using the form from <http://ontariocourtforms.on.ca/en/construction-lien-act-forms/>
2. Please forward to Accounts Payable at the address noted on the bottom of the form the Accounts Payable Application for Vendor Direct Deposit.

Upon review and acceptance of these documents, a Vendor Contract will be issued.

If you have any questions regarding the requested documentation, please contact the undersigned at 905-791-7800, extension XXXX or xxxx.xxxx@peelregion.ca.

(SIGNATURE OF REGION PM)

(NAME OF REGION PM)

Project Manager, (GROUP)

(SECTION)

cc: Manager

 Purchasing Analyst

 Consultant (if applicable)