**Submit By E-mail (pdf with signature) To**

[contract.management@ieso.ca](mailto:contract.management@ieso.ca)

Capitalized terms not defined herein have the meanings ascribed thereto in the IRP Contract.

If required by the Prescribed Form – Notice of Company Representative submitted pursuant to Section12.1 of the IRP Contract, the Participant is hereby submitting this completed Prescribed Form - Certificate of Incumbency to the Sponsor.

| Date | insert date |
| --- | --- |
| Legal Name of Participant | insert legal name of Participant (the “Participant”) |
| Name of Facility | insert name of Facility |
| Contract Reference Number | insert Contract Reference Number (as specified on the IRP Contract Cover Page) |
| Contract Date | insert Contract Date |

I, the undersigned, do hereby certify for and on behalf of the Participant, in my capacity as an officer of the Person that Controls the Participant, and not in my personal capacity that the following persons are duly appointed directors or officers of the Person that Controls the Participant, holding the respective offices set opposite their names and that the signatures set forth opposite their names are their genuine signatures:

| **Name** | **Office** | **Signature** |
| --- | --- | --- |
|  |  |  |
|  |  |  |
|  |  |  |

And [Name of Individuals Above] has/have the authority to execute on behalf of the Participant the Prescribed Form – Notice of Company Representative.

DATED this [day] day of [month], [year]

Name: [Name]

Title: [Title]

I, [Name], being the [Title] of the Participant hereby certify for and on behalf of the Participant in my capacity as an officer of the Person that Controls the Participant, and not in my personal capacity that [Name of First Signatory] is the duly appointed [Title] of the Person that Controls the Participant and that the signature appearing beside his or her name above is his or her genuine signature.

DATED this [day] day of [month], [year]

Name: [Name]

Title: [Title]