**Submit By E-mail (pdf with signature) TO CONTRACT MANAGEMENT**

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

Pursuant to Section 12.1 of the IRP Contract, the Participant is hereby submitting this completed Prescribed Form – Notice of Company Representative to the Sponsor.

| **UPDATING OR REPLACING THE COMPANY REPRESENTATIVE** | |
| --- | --- |
| The Authorized Signatory below is either a signatory of the IRP Contract, a person authorized to receive Notices, or a Company Representative. No other forms are required. | |
| The Authorized Signatory below is neither a signatory of the IRP Contract, a person authorized to receive Notices, nor a Company Representative. A Prescribed Form - Certificate of Incumbency must also be submitted with this form. | |
| 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 | |

| ***NOTE: The current Company Representative will be updated or replaced based on the below.*** | |
| --- | --- |
| Name of Existing  Company Representative | insert name of existing Company Representative |
| Name of Replacement Company Representative, if applicable | insert name of replacement Company Representative, if applicable |
| Title | insert title of Company Representative |
| Mailing Address  Including Postal Code | insert mailing address of Company Representative |
| Telephone |  |
| E-Mail Address | insert email address of Company Representative |

| **AUTHORIZED SIGNATORY** |
| --- |
| Participant: insert legal name of Participant |
| Signature: |
| Name: insert name |
| Title: insert title |
| I have the authority to bind the Participant. |
| Dated this insert day of insert month, insert year |