

**APPENDIX G – CITY TEMPLATES**



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**CONTEMPLATED CHANGE NOTICE NO:**

**TO:**

**DATE:**

**FILE NO.:**

**BID OPP. NO.:**

**PRI NO.:**

**PROJECT:**

**DISTRIBUTION:**

**Owner:**

**Contractor:**

**CA:**

**Other:**

**ISSUED BY:**

**REASON:**

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**INSTRUCTIONS TO CONTRACTOR:**

1. Pursuant to the General Conditions prices are requested for the following proposed changes in the Work.
2. Submit an itemized statement to the Contract Administrator no later than \_\_\_\_\_ showing a detailed cost breakdown for each item and identifying each price as an “extra”, “credit”, or “no change” as applicable. Also indicate what impact, if any, this contemplated change will have on the contract schedule.
3. Work on this contemplated change shall not commence until the Authorization for Contract Change is issued, but all other work shall continue in accordance with the Contract Documents.

**Item No.: Description:**



**AUTHORIZATION FOR CONTRACT CHANGE NO.**

**PROJECT  
DESCRIPTION:**

**DATE:  
FILE NO.:  
BID OPP. NO.:  
PRI NO.:**

**CONTRACTOR:**

**DISTRIBUTION:**  
**City Department:**   
**Contractor:**   
**CA:**   
**Other:**

Payment or credit for the following change is hereby authorized:

**DETAILS OF CONTRACT CHANGE:**

\_\_\_\_\_  
for Contract Administrator                      for Contractor                      for City of Winnipeg

The Contract Price is increased/decreased by: \$  
The Contract Time is increased/decreased by:              days  
All other Terms and Conditions of Contract remain unchanged.

Original Contract Price:              \$                      Original Completion Date:  
Previous Additions/Deletions: \$                      Revised Completion Date:  
This Authorization:

Revised Contract Price:              \$



**FIELD WORK AUTHORIZATION NO:** \_\_\_\_\_

**TO:**

**DATE:**

**FILE NO.:**

**BID OPP. NO.:**

**PRI NO.:**

**PROJECT:**

**DISTRIBUTION:**

**Owner:**

**Contractor:**

**CA:**

**Other:**

**ISSUED BY:**

**REASON:**

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**INSTRUCTIONS TO CONTRACTOR:**

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1. This is your authorization to proceed immediately with the work hereinafter described.
2. Payment for the work shall be as set out for each item.

**Description:**

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Approval to Proceed Authorized by Contract Administrator: \_\_\_\_\_ on \_\_\_\_\_.



**REQUEST FOR INFORMATION NO:**

**TO:**

**DATE:**

**FILE NO.:**

**BID OPP. NO.:**

**PRI NO.:**

**PROJECT:**

**DISTRIBUTION:**

**Owner:**

**Contractor:**

**CA:**

**Other:**

**ISSUED BY:**

**REASON:**

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**INSTRUCTIONS TO CONTRACTOR:**

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1. Fill in the information requested section referencing drawing number and specification section where applicable.
2. Submit to Contract Administrator for response.

**Information Requested:**

**Date Response Required:**

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**Response:**

Date Response Sent: \_\_\_\_\_

Response by: \_\_\_\_\_



**FIELD INSTRUCTION (FI) NO:**

**TO:**

**DATE:**

**FILE NO.:**

**BID OPP. NO.:**

**PRI NO.:**

**PROJECT:**

**DISTRIBUTION:**

**Owner:**

**Contractor:**

**CA:**

**Other:**

**ISSUED BY:**

**REASON:**

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**INSTRUCTIONS TO CONTRACTOR:**

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1. These instructions are to supplement or clarify the Contract documents.
2. Neither the Contract Value nor the Contract Time is affected.



**CONSTRUCTION REVIEW NO.:**

**TO:**

**DATE:**

**FILE NO.:**

**BID OPP. NO.:**

**PRI NO.:**

**PROJECT:**

**DISTRIBUTION:**

**Owner:**

**Contractor:**

**CA:**

**Other:**

**ISSUED BY:**

**REASON:**

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This Construction Review is carried out by examination of representative samples of the work and is issued solely to draw your attention to issues of progress and quality or non-conformances with Contract documents.

**Item No. Items Reviewed and Comments**

**Item Status**

Issued by: \_\_\_\_\_

Date: \_\_\_\_\_



**NON CONFORMANCE REPORT NO:**

**TO:**

**DATE:**

**FILE NO.:**

**BID OPP. NO.:**

**PRI NO.:**

**PROJECT:**

**DISTRIBUTION:**

**Owner:**

**Contractor:**

**CA:**

**Other:**

**ISSUED BY:**

**REASON:**

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**INSTRUCTIONS TO CONTRACTOR:**

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1. Contractor is hereby notified that the following identify items of work which are deficient or do not meet the specified criteria.
2. Contractor shall review below noted items and submit remedial measures to the Contract Administrator for approval.

**NCR**

**Item No. Description**

Issued by: \_\_\_\_\_

Date: \_\_\_\_\_





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**Form T-1**  
**CERTIFICATE OF SATISFACTORY CLASSROOM TRAINING**

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We have completed classroom training in the operation and maintenance of the equipment as listed below.

**Project:**

**Equipment Description:**

**Equipment Supply Bid Opp. No.:**

**Equipment Install Bid Opp. No.:**

**Equipment Tag No.:**

**Specification Reference:**

**List of Attendees:**

\_\_\_\_\_  
(Trainer)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Authorized Representative of Contract Administrator)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Authorized Representative of City)

\_\_\_\_\_  
Date

**DAILY CONSTRUCTION REPORT**

**PROJECT DESCRIPTION:**

\_\_\_\_\_  
 Weather \_\_\_\_\_  
 Site Condition \_\_\_\_\_  
 Temperature HI \_\_\_\_\_ LO \_\_\_\_\_  
 Precipitation \_\_\_\_\_ mm

**DATE:** \_\_\_\_\_

**DISTRIBUTION:**

Department \_\_\_\_\_  
 Document control \_\_\_\_\_  
 Contract Administrator \_\_\_\_\_  
 Other \_\_\_\_\_

<b>Bid Op #</b>	<b>Contractors on Site</b>	<b># of Workers</b>	<b>Major Equipment on Site</b>

**Major Activities Started**

**Materials & Equipment Arrived**


**Major Activities in Progress**

**Inspections and Tests conducted**


**Major Activities Completed**

**Safety & Environment**

	Near Miss _____
	First Aid _____
	Medical Aid _____
	LTA _____
	Property _____
	Spills _____

**Problems encountered on site**

\_\_\_\_\_  
 \_\_\_\_\_

**Noteworthy discussions with contractor**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Prepared by** \_\_\_\_\_ **Position** \_\_\_\_\_







**CONSULTANT SCOPE CHANGE ORDER NO.:** \_\_\_\_\_

**PROJECT DESCRIPTION:** \_\_\_\_\_

**Issued by:** \_\_\_\_\_  
(Consultant)

**Prepared by:** \_\_\_\_\_  
(Consultant Project Manager)

**DATE:** \_\_\_\_\_

**FILE NO.:** \_\_\_\_\_

**BID OPP. NO.:** \_\_\_\_\_

**PRI NO.:** \_\_\_\_\_

**DISTRIBUTION:**

City Department: \_\_\_\_\_

F&A: \_\_\_\_\_

Doc. Control: \_\_\_\_\_

Other: \_\_\_\_\_

**Description of Change:**

**Reason for Change**

(Include additional pages if more space required)

**Estimate of Change:**

Discipline	Manhours	Amount	Comments
Direct Costs			
Total Direct		0	
Indirect Costs			
Disbursements			
Total Indirect		0	
<b>Total Direct and Indirect Costs</b>		<b>0</b>	





## Consultant Scope Change Order Log

Project Name \_\_\_\_\_

Project Manager \_\_\_\_\_

File Number \_\_\_\_\_

PRI #	CSCO#	CSCO Description	CSCO Issue Date	CSCO Pricing Req'd by	CSCO Status	CSCO Amount	Capital Cost Impact	OPS Cost Impact	Comments





### ACTION/ISSUE ITEM LIST

Project Name \_\_\_\_\_

Project Manager \_\_\_\_\_

File Number \_\_\_\_\_

Action Item No.	Action Item Description	Requested by	Person Action Assigned to	Date Requested	Date Required	Resolution	Status	Comments
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Water and Waste Department • Service des eaux et des déchets

**CERTIFICATE OF ACCEPTANCE**

REF. GENERAL CONDITIONS FOR CONSTRUCTION CONTRACTS – GC:13 WARRANTY

**PROJECT DESCRIPTION**

PROJECT:
PROJECT NO.
CONTRACT NO. (if applicable)
TOTAL BID PRICE: \$
FINAL CONTRACT AMOUNT: \$
ASSESSED LIQUIDATED DAMAGES: \$

**ACCEPTANCE INSPECTION**

AN ACCEPTANCE INSPECTION FOR THE WORK AS DETAILED IN THE CONTRACT DOCUMENTS AND AGREEMENT BETWEEN THE CITY OF WINNIPEG AND \_\_\_\_\_ (CONTRACTOR)

WAS COMPLETED ON \_\_\_\_\_ AS PER GC:13 OF THE GENERAL CONDITIONS.

**DECLARATION - CONTRACT ADMINISTRATOR (AS PER GC:13 OF THE GENERAL CONDITIONS)**

I (WE) \_\_\_\_\_ (CONTRACT ADMINISTRATOR) HEREBY CERTIFY THAT THE WARRANTY PERIOD EXPIRED ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_ AND THAT THE WORK PERFORMED SATISFACTORILY DURING THE WARRANTY PERIOD, THE CONTRACTOR REMEDIED ALL DEFECTS, DEFICIENCIES OR OTHERWISE IDENTIFIED BY THE CONTRACT ADMINISTRATOR DURING THE WARRANTY PERIOD IN THE MANNER PRESCRIBED AND TO THE SATISFACTION OF THE CONTRACT ADMINISTRATOR, AND SUCCESSFULLY CONCLUDED ALL TESTS REQUIRED BY THE CITY IMMEDIATELY PRECEDING THE CONCLUSION OF THE WARRANTY PERIOD.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**DATE OF CERTIFICATE OF SUBSTANTIAL PERFORMANCE**

YR	MO	DAY
20		

**DATE OF CERTIFICATE OF TOTAL PERFORMANCE**

YR	MO	DAY
20		

**DATE FOR COMMENCEMENT OF WARRANTY PERIOD**

YR	MO	DAY
20		

**DECLARATION – CONTRACTOR (AS PER GC:13 OF THE GENERAL CONDITIONS)**

I (WE) \_\_\_\_\_ (CONTRACTOR) HEREBY CONCUR WITH THIS CERTIFICATE AND ACKNOWLEDGE THAT THIS CERTIFICATE SHALL NOT HOWEVER RELIEVE US FROM OUR RESPONSIBILITIES AS A RESULT OF ANY BREACH OF THIS CONTRACT BY US, INCLUDING BUT NOT LIMITED TO FAULTY OR DEFECTIVE WORK APPEARING AFTER THE CERTIFICATE OF ACCEPTANCE HAS BEEN ISSUED, FAILURE OF THE WORK TO COMPLY WITH THE CONTRACT DOCUMENTS OR THE REQUIREMENT TO COMPLY WITH THE TERMS OF ANY SPECIAL GUARANTEES SET OUT IN THE SUPPLEMENTAL CONDITIONS.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**ACCEPTANCE OF CERTIFICATE OF ACCEPTANCE BY OF OF ENGINEERING SERVICES DIVISION – WATER AND WASTE DEPT.**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_



Water and Waste Department • Service des eaux et des déchets

**CERTIFICATE OF TOTAL PERFORMANCE**

REF. GENERAL CONDITIONS FOR CONSTRUCTION CONTRACTS – GC:12 MEASUREMENT AND PAYMENT

**PROJECT DESCRIPTION**

PROJECT:
PROJECT NO.
CONTRACT NO. (if applicable)
TOTAL BID PRICE: \$
FINAL CONTRACT AMOUNT: \$
ASSESSED LIQUIDATED DAMAGES: \$

**FINAL INSPECTION**

A FINAL INSPECTION FOR THE WORK AS DETAILED IN THE CONTRACT DOCUMENTS AND AGREEMENT BETWEEN THE CITY OF WINNIPEG AND \_\_\_\_\_.

(CONTRACTOR)

WAS COMPLETED ON \_\_\_\_\_ AS PER GC:12 OF THE GENERAL CONDITIONS.

**SUPPORT DOCUMENTATION - THE FOLLOWING DOCUMENTS HAVE BEEN RECEIVED BY THE CITY AS REQUIRED BY THE CONTRACT DOCUMENTS:**

1. A CERTIFICATE FROM THE WORKERS COMPENSATION BOARD (GC:12 OF THE GENERAL CONDITIONS).
2. CERTIFICATES OR LETTERS FROM THE MANUFACTURERS OR THEIR AGENTS OF ANY EQUIPMENT INSTALLED UNDER THIS CONTRACT STATING THAT THEY HAVE INSPECTED THE INSTALLATION AND CERTIFY THAT THE INSTALLATION IS PROPER AND IS IN SATISFACTORY OPERATING CONDITION. THE ITEMS REFERRED TO ARE AS FOLLOWS:  N/A
3. LETTERS OF ACCEPTANCE HAVE BEEN RECEIVED FROM THE FOLLOWING "AUTHORITIES HAVING JURISDICTION" OUTSIDE OF THE CITY OF WINNIPEG:  N/A

**DECLARATION - CONTRACT ADMINISTRATOR**

I (WE) \_\_\_\_\_ (CONTRACT ADMINISTRATOR) HEREBY CERTIFY THAT THE ENTIRE WORK, EXCEPT THOSE ITEMS ARISING FROM THE PROVISIONS OF GC:13 - WARRANTY, HAVE BEEN PERFORMED TO THE REQUIREMENTS OF THE CONTRACT DOCUMENTS.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**DATE OF CERTIFICATE OF SUBSTANTIAL PERFORMANCE**

YR	MO	DAY
20		

**DATE OF CERTIFICATE OF TOTAL PERFORMANCE**

YR	MO	DAY
20		

**DATE FOR COMMENCEMENT OF WARRANTY PERIOD**

YR	MO	DAY
20		

**DECLARATION – CONTRACTOR (AS PER GC:12 OF THE GENERAL CONDITIONS)**

I (WE) \_\_\_\_\_ (CONTRACTOR) HEREBY CONCUR WITH THIS CERTIFICATE AND DECLARE THAT ALL DISPUTES EITHER WITH THE CITY OR WITH ANY OTHER PARTY, ARISING OUT OF THE PERFORMANCE OF THE WORK OR ANYTHING INCIDENTAL THERETO, HAVE BEEN SETTLED.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**ACCEPTANCE OF CERTIFICATE OF TOTAL PERFORMANCE BY OF OF ENGINEERING SERVICES DIVISION – WATER AND WASTE DEPT.**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

# Winnipeg Sewage Treatment Program Integrated Management System



## Risk Register

**DOCUMENT NUMBER: PG-RM-TO-01**

Rev	Prepared by	Reviewed by	Date	Approved by	Date













### III. Assessing Likelihood/probability of Risk Occurrence

Descriptor	Rating	Frequency	Probability
Almost certain	5	Is expected to occur during projects of this type	> 95%
Likely	4	More likely as not, regularly occurs during projects of this type	60% < x < 95%
Moderate	3	As likely as not, might occur at sometime during a project of this type	30% < x < 60%
Unlikely	2	Could occur at some time during the project, rarely occurs on projects of this type	5% < x < 30%
Rare	1	Only occur in exceptional circumstances on projects of this type	< 5%

**Note on the use of Specific Probability Data and Distributions:**

The first step in assessing the likelihood / probability of a risk should always be to apply the project teams engineering judgement and experience, in most cases this approach is all that is required. Specific probability data is available from a variety of sources, however unless the assumptions underpinning such distributions and data hold, the results can be misleading and introduce greater risk. Such data should be checked carefully before it is used.

**Assessment of the Magnitude of Opportunity**

	Insignificant Savings	Minor Savings	Moderate Savings	Major Savings	Significant Savings
	1	2	3	4	5
Cost <sup>1</sup>	< 2% of Project Budget <sup>2</sup>	< 5% of Project Budget <sup>2</sup>	< 10% of Project Budget <sup>2</sup>	< 15% of Project Budget <sup>2</sup>	> 20% of Project Budget <sup>2</sup>
Time <sup>2</sup>	Time savings <½ day	Time savings ½ – 1 day	Time savings >1 day, < 1 week	Time savings >1 week, < 1 month	Time savings >1 month
Other <sup>4</sup>					
<b>Notes</b> 1 - Project Manager to replace with project specific values 2 – Use Target Cost where the project is subject to a Target Cost 3 – Replace with project specific values 4 - To be defined by the Project Manager if required					

**Assessment of the Magnitude of Threat**

Descriptor	Negligible	Moderate	Substantial	Severe	Disastrous
	Small effect on costs	Moderately effects costs	Considerably affects cost	Serious threat to the organization, public etc.	The impact is totally unacceptable to the organization
	1	2	3	4	5
Safety	Negligible – No injury, near miss	Minor – minor cuts, bruises, muscle strain	Serious – broken bones, muscle and ligament injuries	Serious / permanent injury / illness	Catastrophic – Single or Multiple fatalities
Financial Impact upto a maximum value (re-work / loss etc..) <sup>1</sup>	< 2% of Project Budget <sup>2</sup>	< 5% of Project Budget <sup>2</sup>	< 10% of Project Budget <sup>2</sup>	< 15% of Project Budget <sup>2</sup>	> 20% of Project Budget <sup>2</sup>
Schedule, impact on critical path <sup>2</sup>	Not likely to impact dates	Likely to absorb float between planned dates and target dates	≤ 1 month	≤ 2 month	> 2 month
Environment	Negligible Environmental effect	Nuisance / minor but reversible Environmental harm	Moderate but short term Environmental harm	Localised, long term Environmental harm	Extensive long term Environmental harm
Regulatory	negligible, near miss	report required to regulatory body	Inspection by Manitoba Env safety officer etc..	CEC review	Clean Environment Commission (CEC) Hearing

Image / Reputation	Single Public Enquiry	Multiple Public Enquiries and / or informal Councillor and / or MP Request	Moderate Media Political – Formal Council and / or MP Request / Moderate Public Impact	Provincial Government, Major Political & Media Scrutiny / Major Public Impact	Federal Investigation
Moral	No Impact	Grumblings at wter cooler	Moderate / Increasing Absenteeism	Major Negative / Loss of Staff / “Go Slow”	Catastrophic Negative / walk out
Legal	No Liability	Written Claim Damages < \$10,000	Damages > \$10,000 < \$250,000	Damages >\$250,000 < \$1,000,000	Damages >\$1,000,000
Other <sup>4</sup>					

**Notes**

- 1 - Project Manager to replace with project specific values
- 2 – Use Target Cost where the project is subject to a Target Cost
- 3 – Replace with project specific values
- 4 - To be defined by the Project Manager if required

<i><b>Total Severity</b></i>	<i><b>Category</b></i>	<i><b>Response</b></i>
20-25	Critical	Expected cost to the project is unacceptably high. This risk must be eliminated or transferred before proceeding with the project.  Attempt to avoid or transfer risk
10-20	Serious	Expected cost is high compared to total project cost. It probably is cost effective to eliminate or transfer this risk.
5-10	Important	Consider eliminating or transferring. If accept then manage proactively.
0-5	Acceptable	Accept and manage

<b>Date</b>	<b>Change</b>	<b>By</b>
10/19/2012	Added project name	NWA
10/20/2012	Added calculation in column AA and AB	NWA