## **REQUEST FOR CONTRACT CLEARANCE**

			Revenue Divisio PO Box 20
For Office Use Only		Regina, Canada S4	
Verification #	Date Receive	d	Toll Free: 1-800-667-6102 ext. 09 Fax: 306-798-304
	•••	] 	contractorclearance@gov.sk.
Contractor Informa	ation (the compa	iny that did the work)	
SK PST Account # (If not lice	enced, complete an <u>A</u>	Application for Vendor's Licence)	Fax Number
Company Name			
Address (If multiple address	ses, use the branch I	ocation that completed the work)	)
City		Province	Postal Code
Authorized Contact Damag	(First Q   ast Name)		T:41a
Authorized Contact Person	(FIRST & Last Name)		Title
Email Address			Phone Number
I certify that I am authorized to complete this Request on behalf of the business named. By prov			
			h the Ministry of Finance. I understand that it is my
Contract, Purchase Order, c	or other Reference N	lumber (if applicable)	
Project Title or Building Name		Proje	ect Location (City, Town, or Land Location)
Scope of Work Performed (e	e.g. supply and install p	lumbing and heating)	
Supply Labour 🛛 🗌 & Material	Labour/ Install Only	<u>Note</u> : Clearances are not in Please refer to the <u>Suppler</u>	issued for contracts that only supply material. <u>mentary Worksheets</u> for additional information.
Date Work Commenced in S	SK (mmddyyyy)	Date All Work Completed in SK (m	nmddyyyy) Total Contract Value (excl. all taxes & incl. all change orders and holdbac
Is this a Progress Clearan	nce?	Drogross Dariad (and draw to any	
		Progress Period (mmddyyyy to mm	nddyyyy) Progress Value (excl. taxes)
	-	Total Progress Billed to Date (exc	cl. taxes)
a	Contractor/P	rincipal Information (th	e company that hired the contractor)
<u>Customer/General</u>			
Customer/General		Ph	none Number
		Ph	none Number

Provincial Sales Tax (PST) has been paid. If you require assistance in calculating the PST due, please refer to the <u>Supplementary Workshe</u>ets.