



FAIR WAGE POLICY COMPLIANCE FORM
(Pursuant to Procedures 3(c))

_____ certifies that this contract _____
(Contractor's Name) *(Contract Number)*

was completed in compliance with the City of Greater Sudbury's Fair Wage Policy and Provincial Fair Wage Schedule.

COMPANY NAME: _____

ADDRESS _____

TELEPHONE: _____ **FAX #:** _____ **E-MAIL:** _____

NAME AND POSITION OF PERSON SIGNING: _____
(Please Print)

SIGNATURE: _____
"I have the authority to bind the Corporation/Company/Partnership"

DATE: _____
