



EXHIBIT "A"

CITY OF SEATTLE
SEATTLE CITY LIGHT DEPARTMENT
700 Fifth Avenue, Suite 3300
Seattle, WA 98104-5031

AUTHORIZATION FOR PROFESSIONAL SERVICES

TO:

The City of Seattle, Seattle City Light Department, hereby requests and authorizes _____
_____, to perform the following services:

Project Title: _____
Project #: _____ Summit #: _____ Activity #: _____
Charge To: Unit _____

SCOPE:

Compensation to be based on Seattle City Light's Consultant Services Contract for _____
dated _____. The total cost to perform the work described under
"Scope" shall not exceed \$_____. A breakdown of costs is attached to this Work
Authorization.

Subconsultant(s) Utilized for this Project [if applicable]:

\$ _____ Firm Name: _____
Contact Person: _____
Telephone No.: _____

\$ _____ Firm Name: _____
Contact Person: _____
Telephone No.: _____

Estimated Starting Date: _____ Estimated Completion Date: _____
Estimated Total Labor Hours: _____

Approved:

Approved:

By: _____
Title: _____
Date: _____

By: _____
Title: _____
Date: _____

Distribution:
Original – SCL Contract Administrator
Copy – Consultant
Copy – Project Manager