



**CONTRACT SUMMARY  
TO ACCOMPANY REQUESTS FOR CONTRACT APPROVAL  
BEFORE SUBMISSION TO CLERK OF COUNCIL**

**Requesting Department or Agency:** \_\_\_\_\_

**Name of Contact Person:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Initials of Sponsoring Councilmember(s):** \_\_\_\_\_

**PROVIDE THE FOLLOWING CONTRACT DETAILS**

**1. The purpose and need for the contract:** \_\_\_\_\_

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

**2. The parties involved:** \_\_\_\_\_

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

**3. The obligations, expectations, and deliverables of the parties involved:** \_\_\_\_\_

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

**4. The duration of the contract:** \_\_\_\_\_

**5. The cost and any fiscal implications of the contract for the City:** \_\_\_\_\_

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

**6. Describe disadvantaged business enterprise (DBE) participation:** \_\_\_\_\_

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

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