**Exhibit C - Service Order and Authorization to Proceed,**

**Plan Check and/or Preliminary Code Assessment Review**

[DATE]

True North Compliance Services Inc.

Attn: Isam Hasenin, Pe, CBO

3939 Atlantic Ave., #224

Long Beach, CA 90807

Dear Mr. Hasenin,

[Project Name], [Project Number]

[University ]

Service Order & Authorization to Proceed Number [insert]

In accordance with the provisions of the Systemwide Master Enabling Agreement Number XXXXXX, you are hereby authorized to provide [insert as appropriate].

[Provide Plan Check Review for the subject project]

[Provide Preliminary Code Assessment Review for the subject project]

☐ [Provide Preliminary Code Assessment Review]

☐ [Provide Preliminary Access Compliance Code Assessment Review]

* Per fee schedule,
* Hourly with a Not to Exceed limit of: ,
* Fixed fee amount of: .

The Service Provider shall not perform services in excess of this Service Order without prior written authorization to proceed from the University.

Service Provider shall report to:

[CSU University Name]

[University Department]

[Executive Dean or designated University project manager]

[University Address]

[University Project Manager’s Phone Number]

The total amount to be expended under this Service Order shall not exceed [written and numerical dollar value] inclusive of reimbursables, regardless of Service Provider’s cost in performing these services. Service Provider shall submit all invoices with the Agreement and Service Order & Authorization to Proceed number on each invoice to the project manager named above.

Questions regarding this authorization shall be directed to the above-named project manager.

Approved: Fund Certified:

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[Name] [Name]

[Department Head] [Accounting/Fiscal Officer]

[Department] [Department]