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4.

Request

FORM A: QUALIFICATION APPLICATION (See B7

1. Contract Title REQUEST FOR QUALIFICATION FOR WORK ON PRIVATE SEWER SERVICES IN ACCORDANCE WITH SECTION 37 OF SEWER BY-

		LAW 92/2010				
2.	Applicant					
		Name of Applicant				
		Street				
		City	Province	Postal Code		
		Email Address of Bidder				
	(Mailing address if different)	Facsimile Number				
	(maining address in americally	Street or P.O. Box				
		City	Province	Postal Code		
		GST Registration Number (if applicate	ole)			
		The Bidder is:				
	(Chanas ana)	a sole proprietor				
	(Choose one)	a partnership				
		a corporation				
		carrying on business under th	e above name.			
3.	Contact Person	The Applicant authorizes the following contact person to represent the Applicant for purposes of the Bid.				
		Contact Person	Title			
		Telephone Number	Facsimile Number			

I/We wish to be considered as a pre-qualified Bidder for the Provision of

Work on Private Sewer Services for the City of Winnipeg.

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5.	Definitions	All capitalized terms used in the Contract shall have the meanings ascribed to them in the General Conditions.		
6.	Qualification	I/We have completed Form B: Qualification Questionnaire, appended hereto.		
7.	Addenda	The Applicant certifies that the following addenda have been received and agrees that they shall be deemed to form a part of the Contract:		
		No Dated		
8.	Signatures	In witness whereof the Applicant or the Applicant's authorized official or officials have signed this		
		, 20		
		Signature of Applicant or Applicant's Authorized Official or Officials		
		(Print here name and official capacity of individual whose signature appears above)		
		(Print here name and official capacity of individual whose signature appears above		

FORM B: QUALIFICATION QUESTIONNAIRE

REQUEST FOR QUALIFICATION FOR WORK ON PRIVATE SEWER SERVICES IN ACCORDANCE WITH SECTION 37 OF SEWER BY-LAW 92/2010

	Related experience of principals and keep Work (B11.4)	ey personnel of this organization w	ho will be performing the
	Name	Licenced Sewer and Water Contractor Yes/No	Years Experience
	(a) Note: Applicants may attach page.	a statement of experience, for eac	h person, on a separate
2.	Sewer projects performed during the p	ast five (5) years (may include curr	ent projects in progress).
	Project & Location:		
	Description:		
	Project Value:		
	Owner:	Date Completed:	
	Contact: Phone	e No Fax i	No
	Consultant (architect, engineer, etc): _		
	Contact:	Phone:	
	Project & Location:		

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Owner:		Date Completed:					
Contact:	Phone No	Fax	No				
Consultant (architect	, engineer, etc):						
Contact: Phone:							
Project & Location: _							
Project Value:							
Owner:		Date Completed:					
Contact:	Phone No	Fax	No				
Consultant (architect, engineer, etc):							
Contact:		Phone:					
	ee (3) non City of Winnipeg c						
of organization, proje address is available).			Telephone	F-mail			
		Contact Name	Telephone	E-mail			
of organization, proje address is available).			Telephone	E-mail			
of organization, proje address is available).			Telephone	E-mail			
of organization, proje address is available).			Telephone	E-mail			

4. Does this organization have an approved Health and Safety program in accordance with The Workplace Safety & Health Act (Manitoba)?

Yes / No

3.

If Yes, Applicants may include information on their Health and Safety Program on a separate sheet of paper.

5. In accordance with B9.4, does this organization have the Certificate of Recognition (COR), SECOR or a report or letter to that effect from an independent reviewer acceptable to the City.