FORM A: BID (See B8)

1.	Contract Title	SUPPLY AND DELIVERY OF HALF MASK RESPIRATORS				
2.	Bidder					
		Name of Bidder Usual Business Name of Bidder as it appears on Invoice (if different from above)				
		Street				
		City	Province Postal Co	de		
		Email Address of Bidder				
		Facsimile Number				
	(Mailing address if different)	Street or P.O. Box				
		City	Province Postal Co	de		
		GST Registration Number (if applicable)				
		The Bidder is:				
	(Choose one)	a sole proprietor				
		a partnership				
		a corporation				
		carrying on business under the above name.				
3.	Contact Person	The Bidder hereby authorizes the following contact person to represent the Bidder for purposes of the Bid.				
		Contact Person	Title			
		Telephone Number	Facsimile Number			
4.	Definitions	All capitalized terms used in the Contract shall have the meanings ascribed to them in the General Conditions.				

- 5. Offer The Bidder hereby offers to perform the Work in accordance with the Contract for the price(s), in Canadian funds, set out on Form B: Prices, appended hereto.
- 6. Commencement The Bidder agrees that no Work shall commence until he/she is in receipt of a notice of award authorizing the commencement of the Work.
- 7. Contract The Bidder agrees that the Bid Opportunity in its entirety shall be deemed to be incorporated in and to form a part of this offer notwithstanding that not all parts thereof are necessarily attached to or accompany this Bid.
- 8. Addenda The Bidder certifies that the following addenda have been received and agrees that they shall be deemed to form a part of the Contract:

No. _____ Dated _____

- 9. Time This offer shall be open for acceptance, binding and irrevocable for a period of thirty (30) Calendar Days following the Submission Deadline.
- 10.Indigenous Self-
DeclarationThe City is requesting that Bidders identify if their business is at least
51% owned by one or more Indigenous persons of Canada.

YES, 51% or more Indigenous ownership

NO, it is not

This information is being gathered for statistical purposes only and will not be used for purposes of evaluation.

11. Signatures The Bidder or the Bidder's authorized official or officials have signed this

_____ day of _____ , 20_____ .

Signature of Bidder or Bidder'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: PRICES (See B9)

SUPPLY AND DELIVERY OF HALF MASK RESPIRATORS

UNIT PRICES

ITEM NO.	DESCRIPTION	SPEC. REF.	UNIT	APPROX. QUANTITY	UNIT PRICE
1.	200LS Half Mask (S)	E 2.2	Each	150	
2.	200LS Half Mask (M)	E 2.3	Each	1100	
3.	200LS Half Mask (L)	E 2.4	Each	150	
4.	GME-P100 (2/pk)	E 2.5	Each	1400	
5.	Filtre Inlet Cap	E 2.6	Each	1400	

Name of Bidder