## FORM A: BID (See B9)

1.	Contract Title	PUCK CHLORINATION	SYSTEM - ST. JAMES CIVIC	CENTRE		
2.	Bidder					
		Name of Bidder				
		Usual Business Name of Bidde	rom above)			
		Street				
		City	Province	Postal Code		
		Email Address of Bidder				
		Facsimile Number				
	(Mailing address if different)	address if different) Street or P.O. Box				
		City	Province	Postal Code		
		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 us ascribed to them in the	sed in the Contract shall have General Conditions and E	ve the meanings		

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5.	Offer	The Bidder hereby offers to perform the Work in accordance with the Contract for the Total Bid Price, in Canadian funds, set out on Form B: Prices, appended hereto.			
6.	Commencement of the Work	The Bidder agrees that no Work shall commence until he/she is in receipt of a Purchase Order from the Award Authority 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 hav agrees that they shall be deemed to form a part of the			
		No Dated			
9.	Time	This offer shall be open for acceptance, binding a period of thirty (30) Calendar Days following the Sub			
10.	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 signatu	re appears above)		
		(Print here name and official capacity of individual whose signatu	re appears above		

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## FORM B: PRICES

(See B10)

## PUCK CHLORINATION SYSTEM - ST. JAMES CIVIC CENTRE

## LUMP SUM PRICE

NO.	DESCRIPTION	SPEC. REF.	UNII	QUANTITY	AMOUNT				
1.	LUMP SUM PRICE		LS	1					
2.	Applicable MRST (PST)		LS	1					
TOTAL BID PRICE (GST extra) (in figures) \$									
				Name of Bidder					