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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 Code	
		Email Address of Bidder			
		Facsimile Number			
	(Mailing address if different)	Street or P.O. Box			
		City	Province	Postal Code	
		GST Registration Number (if ap	plicable)		
		The Bidder is:			
	(Choose one)	a sole proprietor			
		a partnership			
		a corporation			
		carrying on business und	er 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.			

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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 of the Work	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- Declaration	The 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.	
9.	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	

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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.	6100 Half Mask (S)	E2.2	Each	150			
2.	6200 Half Mask (M)	E2.3	Each	1100			
3.	6300 Half Mask (L)	E2.4	Each	150			
4.	Multi-gas/Vapour/P100	E2.5	Each	1400			

Name of Bidder