FORM A: PROPOSAL (See B8)

1.	Contract Title	PROVISION OF FIREWALL HEALTH CHECK		
2.	Bidder			
		Name of Bidder		
		Street		
		City Province	Postal Code	
		Facsimile Number		
	(Mailing address if different)	Street or P.O. Box		
		City Province	Postal Code	
		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 represen the Bidder for purposes of the Proposal.		
		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 and D3.		
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.	Execution of Contract	The Bidder agrees to execute and return the Contract no later than seven (7) Calendar Days after receipt of the Contract, in the manner specified in C4.1.		

7.	Commencement of the Work	The Bidder agrees that no Work shall commence until he is in rece a notice of award from the Award Authority authorizing commencement of the Work.		
8.	Contract	The Bidder agrees that the Request for Proposal 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 Proposal.		
9.	Addenda	e Bidder certifies that the following addenda have been received and rees that they shall be deemed to form a part of the Contract:		
		No Dated		
10.	Time	This offer shall be open for acceptance, binding and irrevocable period of sixty (60) Calendar Days following the Submission Deadlin		
11.	Signatures	n witness whereof the Bidder or the Bidder's authorized official officials have signed this		
		, 20	·	
	(If no corporate seal) Signed and sealed in the presence of:	Signature of Bidder or Bidder's Authorized Official or Officials		
	(Witness)			
		(Print here name and official capacity of individual whose signature appears a	bove)	
	(Witness)			
		(Print here name and official capacity of individual whose signature appears a	bove)	

FORM B: PRICES

(See B8.5)

PROVISION OF FIREWALL HEALTH CHECK

(in words)					
TOTAL BID PRICE (GST and MRST extra) (in figures) \$					
LUMP SUM PRICE					