

**FORM A: QUALIFICATION APPLICATION**  
(See B6)

1. Contract Title                      REQUEST FOR QUALIFICATIONS FOR THE PROVISION OF  
COMMERCIAL REAL ESTATE SERVICES

2. Applicant

\_\_\_\_\_  
Name of Applicant (Real Estate Broker)

\_\_\_\_\_  
Street

\_\_\_\_\_  
City

\_\_\_\_\_  
Province

\_\_\_\_\_  
Postal Code

\_\_\_\_\_  
Facsimile Number

(Mailing address if different)

\_\_\_\_\_  
Street or P.O. Box

\_\_\_\_\_  
City

\_\_\_\_\_  
Province

\_\_\_\_\_  
Postal Code

The Applicant is:

(Choose one)

a sole proprietor

a partnership

a corporation

carrying on business under the 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

4. Request

I/We wish to be considered as a pre-qualified Proponent for the Provision of Commercial Realty Services for the City of Winnipeg.

5. Qualification

I/We have completed Form B: Qualification Questionnaire, appended hereto.

6. 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
_____	_____
_____	_____
_____	_____

7. Signatures

In witness whereof the Applicant or the Applicant's authorized official or officials have signed this

\_\_\_\_\_ day of \_\_\_\_\_, 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**  
 (See B8)

REQUEST FOR QUALIFICATIONS FOR THE PROVISION OF COMMERCIAL REAL ESTATE SERVICES

1. Experience of Applicant (Licensed Real Estate Broker) and key personnel (Licensed Real Estate Agents) of this organization who will be performing the Work

Name of Applicant (Licensed Real Estate Broker)	Professional Designation	Years Experience
Names of Key Personnel (Licensed Real Estate Agents)	Professional Designation	Years Experience

(a) Note: Applicants may attach a statement of experience, for each person, on a separate page.

2. Commercial Property sales performed during the past five (5) years (may include current projects).

Location of Property: \_\_\_\_\_

Brief Description of Property:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Approx. Value of Sale (not commission): \_\_\_\_\_

Previous Owner: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

Email \_\_\_\_\_

Location of Property: \_\_\_\_\_

Brief Description of Property:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approx. Value of Sale (not commission): \_\_\_\_\_

Previous Owner: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

Email \_\_\_\_\_

---

Location of Property: \_\_\_\_\_

Brief Description of Property:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approx. Value of Sale (not commission): \_\_\_\_\_

Previous Owner: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

Email \_\_\_\_\_

---

Location of Property: \_\_\_\_\_

Brief Description of Property:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approx. Value of Sale (not commission): \_\_\_\_\_

Previous Owner: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

Email \_\_\_\_\_