## FORM A: PROPOSAL (See B8)

1.	Contract Title	PROFESSIONAL CONSULTING SERVICES FOR HURST		
		PUMPING STATION STRUCTURAL REPAIRS – PRELIMINARY		
		DESIGN		

		DESIGN	STRUCTURAL REPAIRS -	PRELIMINARI	
2.	Proponent				
		Name of Proponent (Legal N	ame)		
		Usual Business Name of Proponent as it appears on Invoice (if different from above)			
		Street			
		City	Province	Postal Code	
	(Mailing address if different)	Facsimile Number			
		Street or P.O. Box			
		City	Province	Postal Code	
		GST Registration Number (if	applicable)		
	(Choose one)	The Proponent is:			
		a sole proprietor			
		a partnership			
		a corporation			
		carrying on business ur	nder the above name.		
3.	Contact Person	The Proponent hereby authorizes the following contact person to represent the Proponent for purposes of the Proposal.			
		Contact Person	Title		
		Telephone Number	Facsimile Number		
4.	Definitions	All capitalized terms ascribed to them in the	used in the Contract shall h General Conditions.	ave the meanings	
5.	Offer		offers to perform the Services i es, in Canadian funds, set out i		

6.	Execution of Contract		es to execute and return the Days after receipt of the Con	
7.	Commencement of the Services		es that no Services shall co award from the City author	
8.	Contract	The Proponent 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		The Proponent certifies that the following Addenda have been received and agrees that they shall be deemed to form a part of the Contract	
		No	Dated	
10.	Time		pen for acceptance, binding calendar Days following the	
11.	Signatures	The Proponent or the signed this	e Proponent's authorized of	ficial or officials have
			_ day of	, 20
		Signature of Proponent's Au	roponent or uthorized Official or Officials	S
		(Print here name a	and official capacity of individual w	hose signature appears above)

(Print here name and official capacity of individual whose signature appears above)

Task	Description	Fixed fee a	Allowable Expense b	Total Fees a + b
1	Project Management			
2	Building Assessment			
3	Drainage Assessment			
	Total			

Name of Proponent	

Item No.	Description	Fixed Fee c	Allowable Expense d	Total Fees c + d
			ū.	0 1 4

Name of Proponent
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