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FORM A: BID (See B8)

1.	Contract Title	PROVISION OF LABOR	RATORY TESTING FOR CITY F	POOLS	
2.	Bidder				
		Name of Bidder			
		Usual Business Name of Bidd	al Business Name of Bidder as it appears on Invoice (if different from above)		
	(Mailing address if different)	Street			
		City	Province	Postal Code	
		Email Address of Bidder			
		Facsimile Number			
		Street or P.O. Box			
	(Choose one)	City	Province	Postal Code	
		GST Registration Number (if a	applicable)		
		The Bidder is:			
		a sole proprietor			
		a partnership			
		a corporation			
		carrying on business un	der the above name.		
3.	Contact Person	The Bidder hereby authorizes the following contact person 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 and D3.			

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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 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.	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)

PROVISION OF LABORATORY TESTING FOR CITY POOLS

UNIT PRICES

ITEM NO.	DESCRIPTION	SPEC. REF.	UNIT	APPROX. QUANTITY	UNIT PRICE	AMOUNT
1.	Pseudomonas aeruginosa	E1.4(a)	Each	500		
2.	Total Coliform and HPC in Water	E1.4(b)	Each	1000		
3.	Heterotrophic Plate Count	E1.4(c)	Each	1000		
4.	Calcium Hardness	E1.7(a)	Each	1		
5.	Magnesium Hardness	E1.7(b)	Each	1		
6.	Total Hardness	E1.7(c)	Each	1		
7.	Free Available Chlorine	E1.7(d)	Each	1		
8.	Total available Chlorine	E1.7(e)	Each	1		
9.	Ph	E1.7(f)	Each	1		
10.	Total Dissolved Solids	E1.7(g)	Each	1		
11.	Cyanuric Acid Content	E1.7(h)	Each	1		
12.	Total Alkalinity	E1.7(i)	Each	1		
13.	Surcharge for testing done on Saturday, Sunday or Statutory Holidays	E1.9	Each	30		
ТОТА	L BID PRICE (GST and MRST extra)	(in figures) \$				

Name of Bidder	