

FORM A: BID
(See B9)

1. Contract Title REMOVAL AND REPLACEMENT OF CARPET AND WINDOW COVERINGS – WINNIPEG FIRE PARAMEDICS TRAINING CENTRE – 2546 MCPHILLIPS STREET

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 applicable)

(Choose one) The Bidder is:

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 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..

5. Offer The Bidder hereby offers to perform the Work in accordance with the Contract for the Total Bid Price, 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 Purchase Order from the Award Authority 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 sixty (60) 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)

FORM B: PRICES

(See B10)

REMOVAL AND REPLACEMENT OF CARPET AND WINDOW COVERINGS
WINNIPEG FIRE PARAMEDICS TRAINING CENTRE – 2546 MCPHILLIPS STREET

LUMP SUM PRICE

TOTAL BID PRICE (GST extra) (in figures) \$ _____

Name of Bidder