## FORM A: REQUEST FOR INFORMATION APPLICATION

1.	Document Title	PROVISION OF STRUCTURAL FIRE FIGHTING HELMETS FOR TRIAL AND EVALUATION			
2.	Respondent				
		Name of Respondent			
		Usual Business Name of Respondent (if different from above)			
		Street			
		City Province	Postal Code		
		Email Address of Respondent			
		Facsimile Number			
	(Mailing address if different)	Street or P.O. Box			
		City Province	Postal Code		
		GST Registration Number (if applicable)			
	(Choose one)	The Respondent is:			
		a sole proprietor			
		a partnership			
		a corporation			
		carrying on business under the above name.			
3.	Contact Person	The Respondent hereby authorizes the following represent the Respondent for purposes of the Information			
		Contact Person Title			
		Telephone Number Email Address			

4.	Addenda	The Respondent certifies that the following addenda have been received and agrees that they shall be deemed to form a part of the Information Submission:		
		No Dated		
5.	Indigenous Self- Declaration	The City is requesting that Respondents identify if their business is at least 51% owned by one or more Indigenous persons of Canada.		
		YES, 51% or more Indigenous ownership		
		NO, it is not		
		This information is being gathered for statistical purposes only and will not be used for purposes of evaluation.		
6.	Signatures	he Respondent or the Respondent's authorized official or officials have gned this		
		, 20		
		Signature of Respondent or Respondent'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 B15.2)									
UNIT	UNIT PRICES								
ITEM NO.	DESCRIPTION	SPEC. REF.	UNIT	APPROX. QUANTITY	Unit Price				
1.	Structural Fire Fighting Helmet optional accessories included	B16.3	each	5					
2	Additional/Optional Accessories (list below)	B16.3							
a.			each	5					
b.			each	5					
C.			each	5					
d.			each	5					
Name of Proponent									