## FORM A: QUALIFICATION APPLICATION (See B6)

1.	Contract Title	REQUEST FOR QUALIFICATIONS FOR THE PROVISION ( COMMERCIAL REAL ESTATE SERVICES	)F
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 The Applicant is:	Postal Code
	(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 re Applicant for purposes of the Bid.	present the
		Contact Person Title	
		Telephone Number Facsimile Number	
4.	Request	I/We wish to be considered as a pre-qualified Propone Provision of Commercial Realty Services for the City of Winni	
5.	Qualification	I/We have completed Form B: Qualification Questionnaire hereto.	, appended

6.	Addenda	The Applicant certifies that the following add and agrees that they shall be deemed to form	
7.	Signatures	In witness whereof the Applicant or the Applic officials have signed this	cant's authorized official or
		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

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	•			
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 Comp	leted:		

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

Location of Property:			
Brief Description of P	roperty:		
Approx. Value of Sale	e (not commission):		
Previous Owner:		Date Completed:	
Contact:	Phone No	Fax No	
Email			
_ocation of Property:			
Brief Description of P	roperty:		
Approx. Value of Sale	e (not commission):		
		Date Completed:	
Previous Owner:			
Previous Owner:		Date Completed: Fax No	
Previous Owner: Contact: Email	Phone No	Date Completed: Fax No	
Previous Owner:  Contact:  Email  Location of Property:	Phone No	Date Completed: Fax No	
Previous Owner:  Contact:  Email  Location of Property:	Phone No	Date Completed: Fax No	
Previous Owner:  Contact:  Email  Location of Property:  Brief Description of Property	Phone No roperty:	Date Completed: Fax No	
Previous Owner:  Contact:  Email  Location of Property:  Brief Description of Property  Approx. Value of Sale	Phone No roperty:	Date Completed: Fax No	

3.	Any Real Estate transactions performed for the City during the past five (5) years (may include current projects).
	Location of Property:
	Name of Agent or Broker:
	Brief Description of Transaction:
	Date Completed:
	Location of Property:
	Name of Agent or Broker:
	Brief Description of Transaction:
	Date Completed:
	Location of Property:
	Name of Agent or Broker:
	Brief Description of Transaction:
	Date Completed:

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