

7. Signatures

In witness whereof the Applicant or the Applicant's authorized official or officials have signed this

_____ 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)

SEAL

FORM B: QUALIFICATION QUESTIONNAIRE

**REQUEST FOR QUALIFICATIONS OF EMERGENCY RESTORATION CONTRACTORS SPECIALIZING
IN POST LOSS REMEDIATION AND RECONSTRUCTION OF FIRE AND WATER DAMAGE**

1. Restoration experience of principals and key personnel of this organization who will be performing the Work: (B9.4)

Name	Professional Designation – indicate level (eg: Mold Abatement Certificate, Lead Abatement Certificate, Asbestos Abatement Certificate)	Years Experience (Min. 2 yrs required)

(a) Note: Applicants may attach a statement of experience, for each person, on a separate page.

2. Restoration projects performed during the past five (5) years (may include current projects in progress).

Project & Location: _____

Description: _____

Project Value: _____

Owner: _____ Date Completed: _____

Contact: _____ Phone No. _____ Fax No. _____

Consultant (architect, engineer, etc): _____

Contact:

_____ Phone: _____

Project & Location: _____

Description:

Project Value: _____

Owner: _____ Date Completed: _____

Contact: _____ Phone No. _____ Fax No. _____

Consultant (architect, engineer, etc): _____

Contact:

_____ Phone: _____

Project & Location: _____

Description:

Project Value: _____

Owner: _____ Date Completed: _____

Contact: _____ Phone No. _____ Fax No. _____

Consultant (architect, engineer, etc): _____

Contact:

_____ Phone: _____

3. List a minimum of three (3) non City of Winnipeg client references of relevant projects with the name of organization, project name, contact name(s), telephone numbers and E-mail addresses (if email address is available).

Organization	Project Name	Contact Name	Telephone	E-mail

4. Does this organization have an approved Health and Safety program in accordance with The Workplace Safety & Health Act (Manitoba)?

Yes / No

If Yes, Applicants may include information on their Health and Safety Program on a separate sheet of paper.
