FORM B: QUALIFICATION QUESTIONNAIRE

1. Door Installation, Repairs, and Modification experience of principals and key personnel of this organization who will be performing the Work.

Name Certificates: Journeyman Carpenter Electrician, Locksmith, etc.		Years Exp.	
Five (5) of the most recent p	rojects (may includ	ent of experience, for each person, on a s	
Description.			
_			
Project Value:			
Owner:	ner: Date Completed:		
Contact:	Phone No	E-Mail	
Project & Location:			
Description:			_
Project Value:			
Owner:		Date Completed:	

Contact:	Phone No		_E-Mail
Project & Location:			
Description:			
Project Value:			
Owner:		Date Completed:	
Contact:	Phone No		_E-Mail
Project & Location:			
Description:			
Project Value:			
Owner:	Date Completed:		
Contact:	Phone No		_E-Mail
Project & Location:			
Description:			
Project Value:			
Owner:	Date Completed:		
Contact:	Phone No.		_E-Mail

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

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Organization	Project Name	Contact Name	Telephone	E-mail

4.	Does this organization have the Certificate of Recogn	nition (COR Written co	onfirmation of a safety and
	health certification meeting SAFE Work Manitoba's S	SAFE Work Certified S	tandard (e.g., COR™ and
	SECOR™ or Independent review) etc.? Dependent of	on the value and risk o	of the Work, the City may
	require the Contractor to have COR or equivalent.	Yes	No

5. Select preferred work categories and Security Clearance levels your company is qualified in bidding by providing a yes or no in the spaces provided.

Work Categories (Yes/No)			
Steel Doors			
Overhead Doors			
Glass Doors			
Gates			
Security Clearance (State Yes/No for each category)			
Work within Pools, Libraries, and Community Centres (requires Level 1 Clearance) See F2			
Work within City of Winnipeg Police Facilities (requires Level 2 Clearance) See F3			
Other facilities with no security clearance required			