Appendix B1: Qualification Form

To: Procurement Manager
City of Hamilton
120 King Street West, 9th Floor
Hamilton L8P 4V2
(the "City")

Project Number: C14-02-17

Pier 8 Development Opportunity

Legal Name of Company: ____________________________

Business Address: ________________________________
(include street, city, province and postal code)

Head Office Address: ______________________________
(if different than above, include street, city, province and postal code)

Telephone Number: _______________________________

Fax Number: ________________________________

Email Address: ________________________________

Date: ________________________________
1. Addenda

I/We acknowledge that by providing a signed Prequalification Submission, I/we have ensured that I/we have received, examined and provided for all addenda to this Request for Qualifications in my/our Prequalification Submission.

2. Interpretation

I/We confirm that I/we have received no oral communication, representation, information, instruction or advice (collectively referred to as “representation”) from any officer, employee, agent, or any other person acting on the behalf of or at the direction of the City which in any way amends or modifies the content of this Request for Qualifications and any addenda thereto. I/We further acknowledge that I/we have carefully reviewed, understand and agree to the communication provisions described on the Communications Notice of the Request for Qualifications.

I/We acknowledge and agree that I/we have not assumed that any information concerning our operations, business or personnel or any other information required to be provided by me/us when submitting my/our Prequalification Submission is known to the City, regardless of whether such information may be actually previously known to the City or not.

I/We confirm that the information provided in this Prequalification Submission by me/us is true, complete, in such detail as required and remains current at the time of submitting the Prequalification Submission.

per: __________________________________________

(Signature) A.S.O.

__________________________________________

(Please print name)

I have the authority to bind the Company