**APPENDIX B – MANDATORY REQUIREMENTS**

## **MANDATORY REQUIREMENT – FORM 1 – PROPONENTS DECLARATION**

**Proponent’s Information**

Proponent must provide all requested information below; if any information is not provided, the Proposal may be disqualified at DNSSAB’s sole discretion.

|  |  |
| --- | --- |
| Company Name: |  |
| Company Address: |  |
| Company’s Contact Person: |  |
| Contact Email |  |
| Contact Phone |  |

**Acknowledgment of Addendums**

We acknowledge receipt of \_\_     \_\_ addendums and agree that the addendum/addenda form part of the RFP. I am aware that failure to acknowledge the correct amount of Addendum(s) may result in the disqualification of my Proposal at DNSSAB’s sole discretion.

**Proponent's Declaration**

Please initial beside each statement with which you agree. For DNSSAB's purpose, only those Proponents who have accepted (initialed) each statement of the Proponent's Declaration will be considered; failure to agree to any statement may disqualify your Proposal at DNSSAB’s sole discretion.

|  |  |
| --- | --- |
|  | I/WE have reviewed all documents associated with this RFP and agree to all its terms and conditions. |
|  | I/WE declare that the Proposal submitted has been made entirely in accordance with the terms and conditions outlined in the RFP. |
|  | I/WE declare that this Proposal is the only Proposal submitted by us and that no other Proposal was submitted, by us, using a different name, subsidiary, or by any other means. |
|  | I/WE declare that this Proposal offers a single Solution and does not contain multiple Solutions and/or Pricing strategies based on distinct acceptance periods or conditions. |
|  | I/WE declare that this Proposal was submitted by a Proponent (and all Participating Entities) who is not an Opposing Party in legal action against the DNSSAB. |
|  | I/WE declare that this Proposal is made without collusion, connection, knowledge, comparison of figures or arrangement with any other Proponent, Company, firm or persons making a submission and is in all respects fair and without collusion for fraud. |
|  | I/WE declare that the Proponent's Company empowers the undersigned to negotiate all matters with DNSSAB's representatives relative to this RFP and any future Contract, and the person named below has the authority to submit this Proposal on behalf of the Proponent’s Company. |
|  | I/WE declare that no persons associated with the Proposal have initiated communication about this RFP after it was issued and before the Closing Date or before one or more Contracts are entered in respect of the Scope of Work, which is its subject, with any member of DNSSAB’s Personnel and/or the media. |
|  | I/WE declare that no person associated with the Proposal has been convicted of a criminal offence, including but not limited to fraud or theft. |
|  | I/WE declare that no person associated with the Proposal has been convicted of any quasi-criminal offence pursuant to applicable legislation or regulations, including but not limited to the Occupational Health and Safety Act, as amended, where the circumstances of that conviction demonstrate a disregard on the part of the Proponent for the health and safety of its workers, DNSSAB’s employees, and/or the general public. |
|  | I/WE declare that no person associated with the Proposal has committed professional misconduct, acts, or omissions that adversely reflect on the commercial integrity of the Proponent. |
|  | I/WE declare that if any future Contract is to be negotiated with DNSSAB regarding the subject matter herein, the negotiations and the Contract shall be governed, construed and enforced under the laws of the Province of Ontario and the federal laws of Canada. |
|  | I/WE, including Non-Resident Proponent, shall comply with all Federal, Provincial (Ontario) and Municipal Laws, Acts, Ordinances, regulations, and By-Laws that in any way pertain to the Scope of Work outlined in this RFP or to the employee of the Proponent. |
|  | I/We, including Non-Resident Proponent, shall charge applicable HST for Ontario. |
|  | I/WE agree that any and all employees or personnel subject to the provision of the Goods and/or Services completed in the Solution will be properly trained under the Occupational Health and Safety Act, that every supervisor appointed is a 'competent person' as defined in the Act, and all work shall comply with the Act's regulations. |
|  | I/WE agree to hold DNSSAB safe and harmless from any property damage; or claims by individuals or third parties, including any legal costs incurred by DNSSAB in connection therewith, on a solicitor/client basis, due to defective, damaged or unsuitable goods and/or services. |

**DECLARATION OF A CONFLICT OF INTEREST (***if applicable, provide details below***)**

|  |
| --- |
|  |

**DECLARATION OF A JOINT SUBMISSION (***if applicable, provide details below***)**

|  |
| --- |
|  |

**Completed by:**

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Company |  | Authorized Signature |
|  |  |  |
| Name |  | Title |

*I HAVE THE AUTHORITY TO BIND THE CORPORATION*

## **MANDATORY REQUIREMENT - FORM 2 – INSURANCE**

Proponents must submit the following document(s) with this form. Failure to provide the required documentation will result in disqualification, and your Proposal will receive no further consideration at DNSSAB's sole discretion.

|  |  |  |
| --- | --- | --- |
| **YES** | **NO** |  |
|  |  | I/WE have submitted a copy of a current Business License or Letters of Incorporation. |
|  |  | I/WE have submitted verification of Commercial General Liability Insurance coverage of at least $5,000,000.00 per occurrence. |
|  |  | I/WE have submitted verification of Errors and Omission Insurance coverage of at least $2,000,000.00 per occurrence. |

**Completed by:**

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Company |  | Authorized Signature |
|  |  |  |
| Name |  | Title |

*I HAVE THE AUTHORITY TO BIND THE CORPORATION*

## **MANDATORY REQUIREMENT – FORM 3 – PARTICIPATING ENTITIES**

Participating Entity agreements made by the Proponent will not release the Proponent from any obligation to DNSSAB concerning the performance of its obligations under the Contract. DNSSAB will not be responsible for payment to the Proponent's Participating Entities if the Proponent defaults on its responsibilities. The Proponent is responsible for communicating this information to its Participating Entities.

**Proponent's Declaration**

Please initial beside the statement which best describes how Participating Entities are associated with your Proposal:

|  |  |  |
| --- | --- | --- |
|  | **Yes** | If Participating Entities are associated with this Proposal, provide details using the table below. |
|  | **No** | If by own forces, state so here (initial) |

*If Yes above, provide a list of all Participating Entities you will be using to undertake the work (add as many rows as necessary) and include their role and the amount, in dollars, allocated from your Proposal that will be expensed to the Participating Entity.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Listing of Participating Entities** | | | | |
| **Type** | **Responsibility** | **Amount ($)** | **Company Name and Address** | **Contact Person** |
| Affiliate  Associate  Dealer  Distributor  Partner  Consultant  Sub-consultant  Contractor  Reseller  Sub-contractor  Sub-processor  Subsidiary  Third-party service provider  Other \_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |
| Affiliate  Associate  Dealer  Distributor  Partner  Consultant  Sub-consultant  Contractor  Reseller  Sub-contractor  Sub-processor  Subsidiary  Third-party service provider  Other \_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |

**Completed by:**

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Company |  | Authorized Signature |

|  |  |  |
| --- | --- | --- |
| Name |  | Title |

*I HAVE THE AUTHORITY TO BIND THE CORPORATION*