APPENDIX A – SUBMISSION FORM

Fill out the following form, naming one person to be the Respondent's contact for the RFSQ process and for any clarifications or communication that might be necessary.

Name of Respondent must match the legal name on Canada Revenue Agency (CRA) - Goods and Services Tax (GST)/Harmonized Sales Tax (HST) registration; or proof of business ownership documents (e.g. SIN, Articles of Incorporation).

A1. BIDDER INFORMATION

Full Legal Name of Business name of Respondent (this name will be used on legal agreements if successful)	
HST / GST Registration Number (Leave blank if NOT applicable):	
Street Address:	
City, Province/State:	
Postal Code / Zip Code:	
Phone Number:	
Any Other Relevant Name under which the Respondent Carries on Business (e.g. Operating Name)	
Billing Invoice/Address (if different than the address provided above)	
Phone number(s) (for billing address)	
Respondent Contact Name	
Respondent Contact Title	
Respondent Contact Phone Number	
Respondent Contact Email	
Nova Scotia Registry of Joint Stock Companies (RJSC) Number (as detailed in section 5.1; if your entity is not required to be registered in Nova Scotia include proof of registration from your applicable jurisdiction with your response):	
SIN # (only required if you do not have an HST/GST or NSRJST number):	

A.2 OFFER

The Respondent has carefully examined the RFSQ documents and has a clear and comprehensive knowledge of the Deliverables required. By submitting a proposal, the Respondent agrees and consents to the terms, conditions and provisions of the RFSQ, including the Form of Agreement, and offers to provide the Deliverables in accordance set out in the completed Technical Response (Appendix B).

A.3 MANDATORY SUBMISSION REQUIREMENTS

The Bidder encloses as part of the bid the mandatory submission requirements set out below:

FORM	INITIAL BELOW TO CONFIRM ENCLOSURE
Appendix A - Submission Form	
Appendix E – Technical Response Document	

A.4 ADDENDA

The bidder is deemed to have read and taken into account all addenda issued by the Province.

A.5 NO PROHIBITED CONDUCT

The bidder declares that it has not engaged in any conduct prohibited by this RFx.

A.6 CONFLICT OF INTEREST

For the purposes of this RFSQ, the term "Conflict of Interest" includes, but is not limited to, any situation or circumstance where:

1. in relation to the RFSQ process, the Respondent has an unfair advantage or engages in conduct, directly or indirectly, that may give it an unfair advantage, including but not limited to (i) having, or having access to, confidential information of the Province in the preparation of its proposal that is not available to other Respondents, (ii) communicating with any person with a view to influencing preferred treatment in the RFSQ process (including but not limited to the lobbying of decision makers involved in the RFSQ process), or (iii) engaging in conduct that compromises, or could be seen to compromise, the integrity of the open and competitive RFSQ process or render that process non-competitive or unfair; or
2. in relation to the performance of its contractual obligations under an agreement for the Deliverables, the Respondent's other commitments, relationships or financial interests (i) could, or could be seen to, exercise an improper influence over the objective, unbiased and impartial exercise of its independent judgement, or (ii) could, or could be seen to, compromise, impair or be incompatible with the effective performance of its contractual obligations.

Respondents should disclose the names and all pertinent details of all individuals (employees, advisers, or individuals acting in any other capacity) who participated in the preparation of the proposal; **AND** were employees of the Province within twelve (12) months prior to the Submission Deadline.

If the box below is checked NO, the Respondent will be deemed to declare that (a) there was no Conflict of Interest in preparing its proposal; and (b) there is no foreseeable Conflict of Interest in performing the contractual obligations contemplated in the RFSQ.

Otherwise, if the statement below applies, check the box YES

☐ YES - The bidder declares that there is an actual or potential Conflict of Interest relating to the preparation of its bid, and/or the bidder foresees an actual or potential Conflict of Interest in performing the contractual obligations contemplated in the RFSQ.

If the bidder declares an actual or potential Conflict of Interest by marking the box above YES, the bidder must set out below details of the actual or potential Conflict of Interest:

A.7 BID IRREVOCABLE

The Respondent agrees that its proposal shall be irrevocable for a period of Ninety (90) days following the Submission Deadline

A.8 DISCLOSURE OF INFORMATION

The Respondent hereby agrees that any information provided in this proposal, even if it is identified as being supplied in confidence, may be disclosed where required by law or by order of a court or tribunal. The Respondent hereby consents to the disclosure, on a confidential basis, of this proposal by the Province to the advisers retained by the Province to advise or assist with the RFSQ process, including with respect to the evaluation of this proposal.

A.9 EXECUTION OF AGREEMENT

The Respondent agrees that in the event its proposal is selected by the Province, it will finalize and execute the Agreement in the form set out in Appendix A to this RFSQ in accordance with the terms of this RFSQ.

A.10 NAME OF RESPONDENT REPRESENTATIVE

Please enter your first and last name in the text box provided. By typing in your name, you are acknowledging that this is your signature and you have the authority to bind the Respondent.

You agree you are signing this document electronically and agree that your electronic signature is the legal equivalent of your manual signature and that no further certification or third-party verification of your electronic signature is required in order to be legally binding. You also represent that you have the authority to bind the Respondent.

_____
Name of Bidder Representative

_____
Title of Bidder Representative

_____
Name of Organization

_____
Date