

Bidders Application Form

Placement on the Bidders List does not guarantee that the company will receive an Invitation to Bid, or a contract from the ADSAB, nor does it imply that the company has any type of procurement relationship with the Board either now or in the future, further, the ADSAB reserves the right to reject all bids when it is in the best interest of the Board.

Please print clearly or type and return to:

Algoma District Services Administration Board

Attention: Debra Nelson, Manager of Finance and Infrastructure

1 Collver Road, Thessalon, POR ILO

or fax to (705) 842-3747

Of Tax to (705) 842-3	141				
Registered Business Name:				No. of Years in Present Business:	
Business Operating Name:					
Mailing Address:					
City/Town:			Postal Code:		
Telephone No:	Fax Number Toll		Toll Free No.:	Toll Free No.:	
Cell No:					
Contact Name:			Email:		
Insurance Company	Policy No.	Lia	bility Coverage	::	
Worker's Compensation No.	HST No.		Bank Name and Address		
Attach most recent clearance certificate.					

FOR USE BY ELECTRICAL OR PLUMBING TRADES LICENSEES ONLY				
Provide a listing of your				
Trades Licenses:		-		
Expiry date(s):				
[]				
Fax or mail a copy of your ti	rades license and certification to addres	ss at the top of this form.		
INDICATE SERVICES AND COMMODITIES YOU WISH TO HAVE BID OPPORTUNITIES FOR - PLEASE BE SPECIFIC.				
1	2	3		
4	5	6		
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Provide three references for work performed in last 12 months.				
1 Name and address of company	2 Name and address of company	3 Name and address of company		
Contact person and phone no.	Contact person and phone no.	Contact person and phone no.		
Products or services provided	Products or services provided	Products or services provided		
THIS SPA	ACE FOR SUPPLIES AND SERVICES USE	ONLY		
Approved Date:	Verified by:			