3. ANNEX B - PRICING FORM

The respondent is required to complete and sign the below all in accordance with Appendix C – Pricing

60 Ton Trane Chiller and Outdoor Condenser replacement at Sylvia Richa	ordson Care Facility		
ITEM: Chiller and Condensers , associated components, installation and commissioning	\$		
ITEM: Coil protection coating	\$		
Total Fixed Tender Sum	\$		
TOTAL FIXED TENDER SUM (WORDS)			
Contract Period (weeks to	(weeks to complete)		
HVAC Maintenance Contracts at Sylvia Richardson Care Fa	cility		
Location	Total Cost		
Sylvia Richardson Care Facility			
Total Fixed Tender Sum	\$		
Contract Period: 3 year period TBD upon award date of contract			
TOTAL FIXED TENDER SUM (WORDS)			

Labor Rates

Name:

	Regular rate	Overtime rate
Supervisor	\$	\$
Senior AC Technician	\$	\$
Junior AC Technician	\$	\$
Plumber	\$	\$
Electrician	\$	\$
Laborer	\$	\$
Emergency call out rat	e \$	
Name: Signature:		
Name: Block letters:		
On Behalf Of: Company name:		
Date:		
	e returned with your	proposal. Failure to do so may cause for rejectors on sibility of the proponent to acknowledge re
Items:		Included: (x)
 Submission F Pricing Form References 	Form	
 Technical Pro Local Benefit Certificate of 	s	
Name: Signature:		

Block letters:	 	 	
On Behalf Of: Company name:			
Date:	 	 	