SPECIFICATIONS FOR
TENDER #0171-0918
SUPPLY & INSTALLATION OF
ONE CARDIAC ULTRASONOGRAPHY SYSTEM
FOR
WESTERN HEALTH

CLOSING DATE:  1st May 2009
CLOSING TIME:  11:00 AM (Newfoundland Time)
1.0 General Provisions

1.1 Intent

This invitation to Tender is intended for the Supply & Installation of One Cardiac Ultrasonography System for the Western Regional Health Authority (Western Health) at the Western Memorial Regional Hospital.

This Tender is concerned with the acquisition of One Cardiac Ultrasonography System for the Western Memorial Regional Hospital with consideration of the following:

- Ongoing service and maintenance support.
- All manuals, documents and initial supplies.
- The right to reproduce any printed materials supplied with the product for the purpose of using the product.
- Training and training manuals.
- Future enhancement availability.

1.1.1 Western Health reserves the right to order additional units at the same price for a period up to and including 31 December 2011.

1.2 Client Background

Western Health was established in 2005 and is responsible for the delivery of Health and Community Services in the Western Region.
1.3 **Vendor Response**

1.3.1 Vendor’s tender must contain an Executive Summary which shall contain:
   a. A brief description of the product being quoted.
   b. The name, title and address of the Vendor’s representative responsible for the preparation of the Tender.

1.3.2 All prices quoted for goods and services must be specified in Canadian dollars, FOB Western Memorial Regional Hospital. All Tenders will be held to be valid for ninety (90) days following the Tender closing date.

1.3.3 Tenders must be received in full on or before the exact closing time and date indicated. **TENDERS RECEIVED AFTER THAT TIME WILL NOT BE CONSIDERED.**

1.3.4 All costs relating to the work and materials supplied by the Vendor in responding to this Invitation to Tender must be borne by the Vendor.

1.4 **Release of Information**

1.4.1 **While Tender is Open:**

The names of individuals or companies who have picked up the tender documents will **not** be released.

1.4.2 **At Tender Opening:**

Only the names of the bidders will be read out.

1.4.3 **After Tender Opening:**

1. No further information will be released until after the contract is awarded.
2. After award, only the name and bid price of the successful bidder will be made available.
3. Information will be made available for a 90 day period only.
4. Successful Awards will be posted on Web Site.
1.4.4 **FYI, Statements that are included as part of our Tender calls:**

While bidders are welcome to attend the public opening, please be advised that it is not our policy to release bid information. Only the names of the bidders will be released.

1.5 **Communication During Tendering**

1.5.1 All communications with Western Health with respect to this invitation to Tender must be directed in writing to the attention of:

Mr. John Piercey  
Regional Director, Materials Management  
Western Health  
P.O. Box 2005  
Corner Brook, Newfoundland  
A2H 6J7  
Tel: (709) 637-5511  
Fax: (709) 634-2649  
Email: johnpiercey@westernhealth.nl.ca

1.5.2 Western Health may, during the assessment period, request meetings with the Vendors to clarify points in the Tender. No changes by the Vendor will be permitted after the Tender closing date.

1.5.3 Faxed Tender responses will be accepted with the condition that the original Tender documents are received at Western Health’s Materials Management Department no later than **Five** working days following the Tender closing date.

1.5.4 All bids must be sent in a sealed envelope clearly marked with Tender Name and Number to: Materials Management Department, Western Health, Western Memorial Regional Hospital, Lower Level, P.O. Box 2005, Corner Brook, NL A2H 6J7.

1.5.5 Bids submitted by electronic transmission (e-mail) **will not be accepted**.

1.5.6 Companies submitting fax Tenders are doing so at their own risk and the fax Tender must be at the public opening as specified in the Tender information. This Authority will not be responsible for in-house courier services if companies submit quotations by fax machine. The time stated on the fax Tender will become null and void since it is the responsibility of the company placing the Tender to have their Tender at the public opening, therefore, this Authority will not be responsible for any damages or liabilities.
1.5.7 In order to contribute to waste reduction and promote environmental protection, the Western Health will endeavour to acquire goods and services that support these principles, therefore, product(s) quoted should include:

- maximum level of post-consumer waste and/or recyclable content
- minimal packaging
- minimal environmental hazards
- maximum energy efficiency
- potential for recycling
- disposal costs
- must not reduce the quality of the product required or affect the intended use of the product
- must not significantly impact the acquisition cost

1.5.8 Are the quoted price(s) on this tender (where applicable) available to our employees?

Yes ☐ No ☐ N/A ☐

Administratively the Western Integrated Health Authority will not be involved in ordering, servicing, warranty and payment; the employee(s) would deal directly with the company.

1.6 Tender Acceptance

1.6.1 Any acquisitions resultant from this invitation to Tender shall be subject to the Public Tendering Act.

1.6.2 The Tenders shall be opened in the Private Dining Room at The Western Memorial Regional Hospital on the scheduled date and time.

1.6.3 Any Tender may be accepted in whole or in part. The lowest Tender may not necessarily be accepted and Western Health reserves the right to cancel the Tender call. Western Health shall not be held responsible or liable for the payment of any costs that are incurred by the bidder in preparing a Tender in response to this invitation to Tender.

1.7 Warranty

The Vendor shall warrant that the product supplied to Western Health shall equal the published specifications.
The Vendor shall provide no less than a 1-year warranty on the system. The Vendor agrees to provide free of charge all parts and labour necessary to repair the system during the first year of operation.

2.0 **General Specifications/ Applications:**

The system must be dedicated cardiac & vascular including TEE's, exercise/pharmaceutical stress echos, and paediatric echos. The system must utilize a digital platform with high resolution, high detail imaging. A true broadband beam former, real-time, M-mode and duplex Doppler ultrasound system capable of the following scanning is required:

- Cardiac – Adult & Paediatric
- Vascular
- 2D Mode
- M Mode
- Color Doppler
- Pulsed Wave Doppler
- Continuous wave Doppler
- Duplex Doppler

**Data Acquisition**

- Optimized cardiovascular application presets
- High precision data acquisition
- User defined pre-sets.

1. **User Interface & Ergonomics**

1.1. The system must be physically compact and easy to maneuver.
Compliance: Yes ☐ No ☐ Comment ______________________

1.2. The keyboard and monitor shall allow for movement to minimize repetitive stress issues with users. The system shall be ergonomically designed to meet the needs of most employees.
Compliance: Yes ☐ No ☐ Comment ______________________

1.3. The system shall have backlight keys or provide an integrated light for ease of use in darkened work areas. The backlighting shall be bi-color to further simplify ease of use and indicate function selected.
Compliance: Yes ☐ No ☐ Comment ______________________
1.4. The system shall include a high resolution 17" or greater LCD flat panel monitor to allow for both excellent image viewing as well as for ease of workflow and productivity.
Compliance: Yes ☐ No ☐ Comment _________________________

1.5. The system shall have at least three active probe ports in a convenient access location to maximize the availability of needed probes.
Compliance: Yes ☐ No ☐ Comment _________________________

1.6. The system shall have integrated and easy to use transducer cable holders to prevent cables from dragging or entangling on the floor.
Compliance: Yes ☐ No ☐ Comment _________________________

1.7. To allow for ease of movement the system shall have independent swivel wheels with secure braking and locking mechanisms.
Compliance: Yes ☐ No ☐ Comment _________________________

1.8. The system shall have integrated mounting for a CD-RW/DVD-R rather than the peripherals mounted on the top of the system.
Compliance: Yes ☐ No ☐ Comment _________________________

2. Productivity

2.1. System shall allow for customizable report pages with institution name and logo.
Compliance: Yes ☐ No ☐ Comment _________________________

2.2. System shall have the capability to quickly and efficiently back up data on the ultrasound system with appropriate data tags.
Compliance: Yes ☐ No ☐ Comment _________________________

2.3. In addition to imaging presets, the system shall provide a one-button optimization feature that automatically optimizes imaging parameters based on the actual image data. This feature will analyze and adjust internal the TGC curves achieve uniform brightness throughout the image. This feature shall operate in B-mode, including with compound imaging on, color, B-Flow and PW Doppler modes.
Compliance: Yes ☐ No ☐ Comment _________________________

2.4. The system shall offer spatial compounding when in color Doppler mode.
Compliance: Yes ☐ No ☐ Comment _________________________
2.5. System shall have image management features that store images by patient and include the ability to review images from different exam dates.
Compliance: Yes ☐ No ☐ Comment __________________________

2.6. The system shall offer customized annotations and reports.
Compliance: Yes ☐ No ☐ Comment __________________________

**Scanning Parameters**

2.7. The system shall include a true digital beam former with the ability to transmit, receive and process acoustic data.
Compliance: Yes ☐ No ☐ Comment __________________________

2.8. The system shall possess the ability to control speckle through the use of a speckle reducing algorithm that enhances borders, reduces speckle artifact and improves detail and contrast resolution in gray scale with compatibility in Color mode, B-Flow, and side-by-side display.
Compliance: Yes ☐ No ☐ Comment __________________________

2.9. The system shall provide scan depths from a minimum of 2 cm. to a maximum to at least 36 cm.
Compliance: Yes ☐ No ☐ Comment __________________________

2.10. The system shall possess harmonics imaging abilities.
Compliance: Yes ☐ No ☐ Comment __________________________

2.11. **B-Model/M-Mode Imaging:**

2.11.1 The system shall provide at least 256 gray scales levels on the display.
Compliance: Yes ☐ No ☐ Comment __________________________

2.11.2 The system shall provide user selectable levels of frame averaging of persistence for noise reduction.
Compliance: Yes ☐ No ☐ Comment __________________________

2.11.3 The system shall provide user control over the displayed dynamic range.
Compliance: Yes ☐ No ☐ Comment __________________________

2.11.4 The system shall provide user-selectable gray scale maps and the ability to program and save user programmable maps.
Compliance: Yes ☐ No ☐ Comment __________________________
2.12. **Color Flow/Power Doppler:**

2.12.1 Color Flow/Power Doppler shall be available on all probes.
Compliance: Yes ☐ No ☐ Comment ________________

2.12.2 The system shall provide a user controlled mechanism to easily control the size and position of the color flow/power doppler Region of Interest (ROI) including independent control of its height and width.
Compliance: Yes ☐ No ☐ Comment ________________

2.12.3 The system shall have a large range of velocity scales that can be easily adjusted by the user.
Compliance: Yes ☐ No ☐ Comment ________________

2.12.4 The system shall have selectable wall filters.
Compliance: Yes ☐ No ☐ Comment ________________

2.12.5 The system shall provide selectable levels of frame averaging of persistence for color flow and power doppler.
Compliance: Yes ☐ No ☐ Comment ________________

2.12.6 The system shall provide a variety of user selectable display maps including, as a minimum, transparent and opaque maps, power maps, variance maps, and topographic maps.
Compliance: Yes ☐ No ☐ Comment ________________

2.12.7 The system shall include a non-directional velocity color mode – i.e. symmetric color map.
Compliance: Yes ☐ No ☐ Comment ________________

2.12.8 The system shall provide the user with a frame rate/resolution control (line density) that varies the acoustic beam density.
Compliance: Yes ☐ No ☐ Comment ________________

2.12.9 The system shall provide a user selectable control to vary the color flow/power doppler frequency.
Compliance: Yes ☐ No ☐ Comment ________________
2.13. **Spectral Doppler (PW):**

2.13.1 Doppler mode shall be available on all probes.  
Compliance: Yes ☐ No ☐ Comment ________________

2.13.2 The doppler cursor shall be user-steerable with linear transducers.  
Compliance: Yes ☐ No ☐ Comment ________________

2.13.3 The system shall provide the user with control to either have doppler with real time B-Mode, doppler with periodic B-Mode update or doppler with frozen B-Mode scanning.  
Compliance: Yes ☐ No ☐ Comment ________________

2.13.4 The system shall provide stereo audit of the doppler spectral signal.  
Compliance: Yes ☐ No ☐ Comment ________________

2.13.5 The system shall provide the user with control during timeline replay to review the spectrum only (i.e. – frozen B-Mode) or with the spectrum and B-Mode together and synchronized.  
Compliance: Yes ☐ No ☐ Comment ________________

2.13.6 The system shall provide the user with the ability to add a spectral peak and spectral mean trace onto the spectrum in both real time or after freezing the image.  
Compliance: Yes ☐ No ☐ Comment ________________

2.13.7 The system shall provide a high pulse repetition frequency (HPRF) mode.  
Compliance: Yes ☐ No ☐ Comment ________________

3. **Measurements and Calculations**

3.1. The system shall provide digital calipers for at least the following measurements:

- Depth & Distance
- Circumference
- Area
- Volume
- Velocity
- Time

Compliance: Yes ☐ No ☐ Comment ________________
3.2 The system shall provide a comprehensive set of cardiac calculations and summary reports.
Compliance: Yes ☐ No ☐ Comment __________________________

4. Image Archive and Networking

4.1 The device should be capable of storing images onto optional media.
Compliance: Yes ☐ No ☐ Comment __________________________

4.2 The system shall include storage on a dedicated hard drive for local image storage in the event PACS is down.
Compliance: Yes ☐ No ☐ Comment __________________________

4.3 The system shall include 128 Mbytes of memory for CINE storage and provide at least 60 seconds of clip review.
Compliance: Yes ☐ No ☐ Comment __________________________

4.4 The system shall provide the ability to sort images stored on board, based on either patient name or exam date.
Compliance: Yes ☐ No ☐ Comment __________________________

4.5 The device should store images in DICOM and JPG or AVI formats.
Compliance: Yes ☐ No ☐ Comment __________________________

5. DICOM Connectivity:

5.1 The system shall support the following DICOM service classes:

<table>
<thead>
<tr>
<th>SPECIFICATION</th>
<th>COMPLIANT (YES / NO)</th>
<th>COMMENTS</th>
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<tbody>
<tr>
<td>The system must have DICOM Verification Service Class (VSC)</td>
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<td>The system must have DICOM Query/Retrieve Service Class (Q/RSC)</td>
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<td>The system must have DICOM Storage Service Class (Both SCU &amp; SCP)</td>
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<td>The system must have DICOM Storage Commitment Service Class (Storage Commitment SC)</td>
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<td>The system must have DICOM Print Management Service Class (PM SC)</td>
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The system must have DICOM Modality Worklist Management Service Class (MWM SC)

The system **must** capable of interfacing with Meditech HIS/RIS

The system **must** be able to fully integrate with GE PACS

Vendor must provide DICOM conformance statement upon request

All costs associated with connectivity of system to the GE PACS and HIS/RIS is the responsibility of the vendor (interface, licenses, software and hardware)

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<th>5.2 Media Exchange.</th>
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<td>Compliance: Yes ☐ No ☐ Comment ________________</td>
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<tr>
<th>5.3 The system shall support the sending of image data to a DICOM destination device with a single keystroke.</th>
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<td>Compliance: Yes ☐ No ☐ Comment ________________</td>
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<tr>
<th>5.4 The systems shall offer multiple compression formats to maximize storage capability (non-compressed, multiple glossy JPG compression, loss-less JPG compression and Run Length Encoding compression).</th>
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<td>Compliance: Yes ☐ No ☐ Comment ________________</td>
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6.0 **Required Transducers:**

The following list of transducers is a guideline to enable the most versatile performance of the unit. It is known that vendors may have different names on transducer and as a result similar types or name of transducers maybe quoted.

- Wide Band, multi-frequency phased array probe (both adult & paediatric)
- 2 MHZ pencil probe
- TEE Adult Cardiac
- Vascular linear array probe
Specify transducers and frequency ranges that are included in this quote.

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<tr>
<th>TRANSDUCER</th>
<th>FREQUENCY</th>
<th>APPLICATION</th>
<th>PRICE</th>
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**Clinical Analysis Packages:**

- Full cardiac package including stress echo  
  Compliance: Yes ☐ No ☐
- Vascular/Doppler analysis  
  Compliance: Yes ☐ No ☐
- Echo Cardiography with send capability to PACS  
  Compliance: Yes ☐ No ☐

**ADDITIONAL EQUIPMENT TO BE INCLUDED IN QUOTED PRICE**

**Scanning Bed:**

- The vendor **must** include in the quoted price a patient bed designed specifically for cardiac scanning. The scanning bed must have;
  1. Height adjustment (hydraulics)
  2. Easy movement
  3. Lockable wheels
  4. Patient side rails on both sides which can be lowered and/or removed
  5. An ergonomic design to facilitate ease of scanning in particular for echocardiography

**Scanning Chair:**

- The Vendor **must** include in the quoted price an ergonomic technologist chair.

*(Selection of Scanning Bed & Chair to be mutually agreed between purchaser and Vendor).*
Hard Copy Devices and Accessories:

- Disk-link-direct digital storage of single frames to internal hard drive.
  Compliance: Yes ☐  No ☐  Comment ____________________________

- The most current device to record echocardiography studies such as DVD recorder. Please provide pricing for this feature.
  Compliance: Yes ☐  No ☐  Comment ____________________________

- Unit must be able to send dynamic data to PACS for playback on PACS.
  Compliance: Yes ☐  No ☐  Comment ____________________________

Networking:

- The system must be compatible with the G.E PACS system and PACS ready.
  Compliance: Yes ☐  No ☐  Comment ____________________________

- All costs of integration of the Ultrasound system to the G.E PACS and the RIS is the responsibility of the vendor. These costs must be identified and included in the tender response and price quote.
  Compliance: Yes ☐  No ☐  Comment ____________________________

- The system must be PACS/ DICOM 3.0 compatible/ compliant at all levels of DICOM.
  Compliance: Yes ☐  No ☐  Comment ____________________________

Ergonomics:

- Please list any outstanding ergonomic feature of the quoted system:
  __________________________________________
  __________________________________________

Service:

- The system shall have an on board error log that runs continuously and is accessible by service to help diagnose problems.
  Compliance: Yes ☐  No ☐  Comment ____________________________

- The system shall provide an on board modem in order to allow the manufacturer’s service organization to monitor system performance, run diagnostics, and transfer images for the purpose of problem identification, resolution and the reduction of down time from a remote location.
  Compliance: Yes ☐  No ☐  Comment ____________________________

- The manufacturer shall provide a toll free help service including the ability, via a modem, to allow real time monitoring of user keystrokes from a remote location by the individual providing the help.
  Compliance: Yes ☐  No ☐  Comment ____________________________
Warranty:

- Must provide one year full warranty including parts and labor.
  Compliance: Yes ☐ No ☐ Comment ________________

- All software update and enhancements must be provided free of charge during the warranty period.
  Compliance: Yes ☐ No ☐ Comment ________________

- State time of delivery after receipt of order: ________________

- Specify time required to complete installation ________________

- State the cost of a one year full service contract. ________________

- State the cost of a five year full service contract. ________________

End-User Support and Education:

- The manufacturer shall supply on-site applications training at the time of system delivery and shall incur all applicable costs for training and travel expenses.
  Compliance: Yes ☐ No ☐ Comment ________________

- Please provide details on the proposed training:
  • Number of on-site training hours __________
  • Number of hours of follow-up training __________
  • Please describe additional training packages or opportunities and associated costs

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____________________________

SYSTEM EVALUATION:

- The vendor(s) must provide the quoted ultrasound system for an on site evaluation for a mutually agreed period of time at the Western Memorial Regional Hospital.
  Compliance: Yes ☐ No ☐ Comment ________________
OPTIONS

Please quote the following items separate from the ultrasound system price.

Clinical Echocardiography Workstation:

▶ Please provide a quote for a clinical workstation to allow for the digital management of echocardiography studies. The system should provide the capabilities for viewing, analyzing and reporting echocardiography studies and shall be able to integrate a variety of software applications.

▶ The system shall be able to copy and save on removable media (CD, DVD, MOD) for DICOM interchange as well as MPEG files, Jpeg, and AVI formats.

▶ The system shall create MPEG image files and attach an MPEG viewer to enable images to be view on conventional PCs running Windows 2000 and XP.

▶ A DICOM Media Reader shall be included.

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▶ Please quote and identify any other options not included in this tender response.

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Bid Price:

Price of One Ultrasound system as quoted: _____________ (excluding Tx).
Less trade in value of current systems (if applicable) _____________ (excluding Tx)
Total Cost less trade in Value (if applicable) _____________ (excluding Tx)

▶ Please include descriptive literature with your bid.
▶ Please provide three copies of the tender response.

Optional 2nd Unit:

▶ Please provide a quotation on a similar Cardiac Echo Unit without the TEE and Stress Echo capabilities.
7.0 **Information Systems Interface**

The quoted system shall have the capability of residing on Western Health’s data network.

- Must use true TCP/IP for system communications. Systems must be able to run in an IP routed environment and must not depend on bridging traffic between sites.
- Must identify # of IP addresses required by the system.
- If remote access into WRHA network is required in order to provide support for the system, it must have strong security controls. Describe your network requirements and security mechanisms for remote access (outside the Corporate WAN).
- Provide an overview of any user tools (e.g. web-based portal) available to Western Health for monitoring the status of the equipment and for potentially modifying or servicing same.

8.0 **Presentation / Training / Service**

8.1 **Presentation**

A presentation of the Tender and / or a demonstration of the product / system shall be provided, if requested, at the Vendor’s expense.

8.2 **Training**

The Vendor shall provide on-site training to staff in the use of the **Ultrasonography System**. All costs associated with this training shall be included in the total Tender price. The length of such training shall be what is reasonably required to train the users of the equipment and shall be documented.

8.3 **Service**

8.3.1 The Vendor shall confirm in writing that Parts and Labour will be available for the quoted system for not less than nine (9) years after the warranty period.

8.3.2 The Vendor shall provide as an option, pricing for a one-year Service Contract including all parts and labour.

8.3.3 The Vendor shall provide all Service and Parts manuals required to service the equipment.

8.3.4 The Vendor shall agree to provide as an option factory training for One in-house Biomedical Technologist, employed by Western Health, for the purpose of maintaining the **Ultrasonography System**. Such training shall be equal to the training provided to the Vendors own service staff. All costs associated with this training,
including travel, accommodations, meals and tuition shall be included in the Tender price.

9.0 **Product History and Vendor Reputation**

9.1 The Vendor shall provide a list of three (3) organizations where a similar Unit has been installed. Include a contact person for each organization.

10.0 **Financial Considerations**

10.1 All applicable taxes shall be indicated in the Tender.

10.2 The cost for installation, initial set-up and programming shall be included in the Tender price.

10.3 All costs for training shall be included in the Tender. This includes any travel, meals and accommodation.

10.4 **Terms of Payment**

The Authority agrees to pay the full invoiced amount within 30 days following acceptance of the installed system by Western Health. Acceptance testing will be completed within 30 days following the complete installation of the system.

11.0 **Vendor Confirmation** (please sign)

I confirm that our Tender meets or exceeds the specifications detailed in this invitation to Tender. I also confirm that all specifications are included in the quoted price. Any items that are optional are noted accordingly.

Signed __________________________

Title __________________________

Company Name __________________________

Address __________________________

Phone __________________________

Tender Price $ ________________ Tax Extra Yes ____ No ____
## TENDER CHECKLIST

**TENDER #0171-0918**

**DID YOU INCLUDE**

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>Has Tender submission been signed</td>
<td></td>
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<tr>
<td>Copy of required tender documents</td>
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<tr>
<td>Copy of brochures (if requested)</td>
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<td>Copy of WCB letter of good standing (if required)</td>
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<td>Copy of proof of insurance (if required)</td>
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<td>Amount of tax noted on request for quotation form</td>
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<tr>
<td>Optional pricing for training included</td>
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**NOTE:** Tender responses may be rejected if you answer “No” to any of the above questions.