

The Board of Education of School District No. 34 (Abbotsford)

2790 Tims Street, Abbotsford, BC V2T4M7 Te lephone: (604) 8594891 Facsimile: (604) 8528587

REQUEST FOR QUALIFICATIONS

Vendors requesting pre-qualification are required to complete this Vendor Qualification form, which when completed is to be sent by facsimile to the appropriate buyer. Vendors are advised that the pre-qualification process takes time to complete and the Abbotsford School District (No.34) will not be obligated to rush pre-qualification.

Please complete and return by facsimile to (604-) 852-8587.

1. General Information Company name		
Company head office address		
Company head office tel. & fax	Tel.	Fax
Company local address		
(if applicable)		
Company local phone & fax		
Account representative		
Account Representative Email		
Sales Manager		
Sales Manager Email		
Years in business		
Type of business	Manufacturer	Wholesaler
(circle choice)	Distributor	Agency
Ownership structure		
(Limited Company, Partnership,		
Sole Proprietorship)		
Type of products / services offered	•	
	•	
	•	
	•	
Total number of employees		
Total number of technical		
support personnel (if applicable)		
Approx. dollar volume of sales for the past two (2) years	Last Year \$	PreviousYear \$



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2. Qualifications

upport and Service		
• Does your company service the product it sells? If no, please provide service details. Comments	(circle choice) Yes	No
to when the service technician is on site?	(days)hours	
• Is a service technician located in Abbotsford? Where then?	(circle choice) Yes	No
Where then?	plaints, short shipments, returns, e	



1.

5.

6.

products?

Firm

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Provide names of firms and telephone numbers of individuals we can contact. K-12 / Educational institution references are preferred.

Position

Contact

2.					
3.					
inancial :	Stability				
illallolal v	otability				
If requested,	can you provide financial	information to the I	District for the past two y	vears?	
-	this information is availa		•		
•		•			
-					
Bank R	Reference				
Branch					
-					
Address					
Address Phone					
Address Phone					
-					
Phone					
Phone					
Phone Product In		ivery Time			
Phone Product In	ventory and Deli	ivery Time	Contact		
Phone Product In Do you n	ventory and Deli	ivery Time	Contact		
Phone Product In Do you n	aventory and Deli	ivery Time of products? inventory:	Contact		
Phone Product In Do you n Please sta	nventory and Deli naintain a local inventory ate approximate value of	ivery Time of products? inventory:	Contact (circle choice) You	es N	
Phone Product In Do you n Please sta	aventory and Deli	ivery Time of products? inventory:	Contact (circle choice) Y Location ate the value and location	es N	o

What is your standard delivery in working days from time of order placement for commonly ordered

(hours____)days___

Tel. Number



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Insurance and Bonding			
• How much General Liability insurance does your firm have?		5	
• How much Professional Liability insurance is carried?		5	
• Can your company provide a bid bond / performance bond?	(circle choice)	Yes	No
Additional Information			
What other information is not requested here but which you think in evaluating your company?	the Abbotsford Sc	hool Distric	et should conside
Comments			
Please complete and return by facsing temperature and return by facsing temperature.	mile to (604)	852-858	37.