

TRANSPARENCE ÉQUITÉ SAINE CONCURRENCE

#### **Public contracts**

Authorization to enter into a public contract/subcontract

To help you fill out this form, a Companion Guide is available on the *Autorité des marches publics* (the "AMP") website, at www.amp.quebec.

Part 1 – General information					
1.1 Type of application					
Please check the reason you are filling out this form:					
☐ Application for issuance of an authorization to enter into a public contract/subcontract	t				
Part 2 – Identity and contact information of the applicant					
2.1 Full name and Quebec enterprise number (NEQ)					
Please state the full name and NEQ of the enterprise applying for authorizati contract/subcontract (the "Applicant") as they appear in the register maintained by the Equébec (Québec enterprise registrar). If it is a sole proprietorship, please state your last na Applicant has a French name and an English name, please state both names:	Registraire des entreprises du				
Name of the Applicant	NEQ (if applicable)				
2.2 Language of correspondence					
☐ French					
□ English					



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#### 2.3 Address of head office<sup>1</sup>

No.	Street			Suite
City			Province/State	e
Postal code	Country	Website (optional)		
Main telephone		Fax		
2.4 Mailing and Check this box address:	ddress  if the mailing address is the same a	as the head office add	dress. If not, pl	ease provide the mailing
No.	Street			Suite
City			Province/State	e
Postal code	Country	Website (optional)		
Main telephone		Fax		

 $<sup>^{\</sup>mbox{\scriptsize 1}}$  A post office box is not an acceptable address for the head office.



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2.5	Legal form				
Please	e state the legal	form of the Applicant (c	heck only one box):		
□ Le	gal person	☐ Partnership	☐ Natural person operating a sole propri	etorship	☐ Other
2.6	Number o	f shareholders or pa	artners		
Pleas	se state the tot	al number of shareholder	rs (voting shares) or partners of the Applicant:		
2.7	Nature of	activities			
	e state the na orise registrar:	ture of the activities of	the Applicant, as described in the register	maintaine	ed by the Québec
2.8	Number o	f Attestation from R	levenu Québec		
Please	state the num	ber of the attestation iss	ued by <i>Revenu Québec</i> :		
2.9	Licence nu	imber assigned by t	he Régie du bâtiment du Québec (RB	Q)	
Pleas	se state the lice	nce number assigned by	the <i>Régie du bâtiment du Québec</i> (RBQ):		



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#### 2.10 Other names

	plicant currently have, or in the past five years has the Applicant had, one or more business names other the indicated in section 2.1?
☐ Yes	□ No
	red "yes", please state all the names currently appearing in the "Other names" section of your registration exprise registrar as well as all the other names under which the Applicant carried on its activities in the past
Current name	25:
Former name	es:
Part 3 –	Information about the contract (if applicable)
The number	of the call for tenders:
The title of th	ne call for tenders:
The estimate	d value of the contract or subcontract:
	for submitting bids or the date set out in the call for tenders concerning the required a, whichever is latest:
if the Applica	nt is part of a consortium, please state the consortium's name:



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### Part 4 – Information about the respondent

An enterprise that wishes to enter into a contract with a public body must appoint a natural person who acts as respondent pursuant to section 21.23 of An Act respecting contracting by public bodies:

"The application for authorization must be filed with the Authority by the natural person who is

the operator if it is for a sole proprietorship, by a director or an officer if it is for a legal person and by a partner if it is for a partnership. The person filing the application acts as respondent for the purposes of this chapter."							
4.1 Identity of respondent							
☐ Mr.							
☐ Ms.							
Last name(s)	First name(s)	Date of birth (mm/dd/yyyy)					
4.2 Functions of the respondent at the	ne enterprise						
Please state the respondent's function or function	s at the enterprise:						
☐ A natural person who operates the enterprise	as a sole proprietorship						
□ Director							
☐ Officer							
☐ Partner							



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### Home address of the respondent 4.3 No. Street Apt. Province/State City Personal telephone Postal code Country E-mail address Mailing address of the respondent 4.4 Street Suite No. City Province/State Website (optional) Postal code Country

Fax

Main telephone



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Part 5 – Declaration of the Applicant	

Sec	ction I – Declaration		
Plea	ase answer the following questions:		
1.	In the past five years, has the Applicant been prosecuted for or found guilty of an offence listed in Schedule I of <i>An Act respecting contracting by public bodies</i> ?	Yes 🗆	No 🗆
	If you answered "yes," please provide information about the offence(s) in section II of this form.		
2.	In the past five years, has the Applicant been prosecuted for or found guilty of any other criminal or penal offence committed in the course of its business?	Yes	No 🗆
	If you answered "yes," please provide information about the offence(s) in section II of this form.		
3.	In the past five years, has the Applicant been found guilty by a foreign court of an offence which, if committed in Canada, could have resulted in criminal or penal proceedings for an offence listed in Schedule I of <i>An Act respecting contracting by public bodies</i> ?	Yes 🗆	No 🗆
	If you answered "yes," please provide information about the offence(s) in section II of this form.		
4.	In the past two years, has the Applicant been ordered to suspend work by a decision enforceable under section 7.8 of <i>An Act respecting labour relations, vocational training and workforce management in the construction industry</i> (c. R-20)?	Yes 🗌	No 🗆
	If you answered "yes," please provide details:		



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5.	In the past two years, has the Applicant been of claim made under subparagraph (c.2) of the first respecting labour relations, vocational training construction industry (c. R-20)?	st paragraph of section 81 of <i>An Act</i>	Yes	s 🗆	No 🗆
	If you answered "yes," please provide:				
6.	Is there any information you would like to prov	ide which could be of interest to the	Yes	s 🗆	No 🗆
	AMP in connection with this application?  If you answered "yes," please provide details:				
Na	ime of respondent	Signature		Date (m	m/dd/yyyy)



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#### Section II – Information about offences

If you answered "yes" to questions 1, 2 and/or 3 of Se information for each offence:	ection 1 – Declaration of this form, please	provide the following
Section and name of the Act or Regulation that was con	ntravened:	
Court case number:		
Details about the offence (e.g.: facts and circumstances	surrounding the offence):	
Name of respondent	Signature	Date (mm/dd/yyyy)



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### Section III – Information about prohibitions under electoral laws

If you answered "yes" to question 4 of Section $1$ – Declaration of this form, please provide the following information for each prohibition from entering into a public contract:				
Details of the order:				
Expiry date of the prohibition from entering int	to a public contract:			
Has a judge suspended the prohibition? If so, p	olease provide details:			
Name of respondent	Signature	Date (mm/dd/yyyy)		



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Part 6 – Signature						
I declare having read and understood the questions and statements in this application.						
I declare that all information set out in this application	n is	s true and complete.				
I acknowledge that the AMP will send the Associate Commissioner for Audits appointed under section 8 of the <i>Anti-Corruption Act</i> (c. L-6.1) the information obtained so that the Associate Commissioner may conduct the audits he considers necessary in order to provide the AMP with an advisory opinion on the enterprise concerned by the application for authorization, the whole pursuant to <i>An Act respecting contracting by public bodies</i> (c. C-65.1; 2012, c. 25) (the "ACPB").						
I understand that any false or misleading statement of	con	stitutes an offence under section 27.5 c	f the	ACPB.		
Name of respondent		Signature		Date (mm/dd/yyyy)		
Should the enterprise withdraw this application at any stage in the process, the AMP will notify the <i>Secrétariat du Conseil du trésor</i> and the public bodies concerned.						
Part 7 – Additional consent						
In the case of an enterprise that is not constituted under the laws of Québec and does not have its head office or an establishment in Québec where it primarily conducts its activities, the following consent is required:  I agree that the Associate Commissioner for Audits may communicate the information provided herein to any local police force or local source of information as well as to the local fiscal authorities mentioned in section 5 of the Regulation, and receive all information necessary for the audits. The location of the enterprise and the persons concerned is the Canadian province or territory or other jurisdiction where the enterprise primarily conducts its activities or, in the case of a natural person, where he or she is domiciled.						

Signature

Date (mm/dd/yyyy)

Name of respondent



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### Part 8 – Documents to be provided ☐ The "Authorization to enter into a public contract/subcontract" form duly completed and signed by the respondent. The remittance slip, duly completed, for payment of the required fee. An official document confirming the appointment of the respondent. An organization chart outlining the structure of the enterprise and including, if applicable, the names of its subsidiaries and parent company and any subsidiaries of the parent company. Please indicate the relationship between the enterprises. Provide the audited financial statements for the latest fiscal year of the enterprise. If the enterprise does not have audited financial statements, the AMP requires at least a review engagement report on the financial statements for the latest fiscal year. A notice to reader alone will not be accepted. An attestation from Revenu Québec, issued not more than 30 days before the date on which the application is filed, stating that the enterprise has filed the returns and the reports that it was required to file under fiscal laws and that it has no overdue account payable to the Minister of Revenue. If you are a foreign enterprise, you must provide a tax attestation stating that your enterprise has filed the returns and the reports that it was required to file under the fiscal laws of its country of origin. ☐ The criminal and penal court record of the enterprise or any other similar document in respect of any entity not constituted under the laws of Québec. If your enterprise has established governance measures (code of ethics, training program, governance committee, etc.), please disclose them and send us the related documentation with the application for authorization.

Please note that the AMP does not accept remittance slips sent by fax. Please mail this form, together with your payment and the required documents, to the following email address: directionlcop@amp.quebec.

If you pay by check, please mail it to the following adress:

#### Autorité des marchés publics

525, boul. René-Lévesque Est, RC. 30 Québec (Québec) G1R 5S9

Part 9 – Sending the form

For any questions regarding this form, please contact the AMP Information Centre at 1 888 335-5550.