



APPENDIX B: STAGE I (SUBMISSION FORM)

Respondent's Information

Respondent must provide all requested information below.

Firm Name: _____

Firm Address: _____

Firm's Contact Person: _____

Contact Email: _____

Contact Phone: _____

Acknowledgment of Addendums

We acknowledge receipt of _____ addendums and agree that the addendum/addenda forms part of the RFP. I am aware that failure to acknowledge the correct amount of Addendum(s) may result in the disqualification of my Proposal at DNSSAB or NDHC's sole discretion.

Respondent's Declaration

Please initial beside each statement with which you agree. For DNSSAB or NDHC's purpose, only those Respondents who have accepted (initialed) each statement of the Respondent's Declaration will be considered; failure to agree to any statement may disqualify your Proposal at DNSSAB or NDHC's sole discretion.

_____ I/WE have reviewed all documents associated with this RFP and agree to all its terms and conditions.

_____ I/WE declare that the Proposal submitted has been made entirely in accordance with the terms and conditions outlined in the RFP.

_____ I/WE declare that this Proposal is the only Proposal submitted by us and that no other Proposal was submitted by us using a different name, subsidiary, or by any other means.

_____ I/WE declare that this Proposal does not contain multiple Pricing strategies based on distinct acceptance periods or conditions.

_____ I/WE declare that this Proposal was submitted by a Respondent (and all Participating Entities) who is not an Opposing Party in a legal action against DNSSAB or NDHC.

_____ I/WE declare that this Proposal is made without connection, knowledge, comparison of figures or arrangements with any other Respondent, firm or person making a submission and is in all respects fair and without collusion for fraud.

_____ I/WE declare that the Respondent's Firm empowers the undersigned to negotiate all matters with DNSSAB or NDHC's representatives relative to this RFP and any future Contract, and the person named below has the authority to submit this Proposal on behalf of the Respondent's Firm.

_____ I/WE declare that no persons associated with the Proposal have initiated communication about this RFP after it was issued and before the Closing Date or before one or more contracts are entered in respect of the Scope of Work, which is its subject, with any member of DNSSAB or NDHC's Personnel and/or the media.

_____ I/WE declare that no person associated with the Proposal has been convicted of a criminal offence, including but not limited to fraud or theft.



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I/WE declare that no person associated with the Proposal has been convicted of any quasi-criminal offence pursuant to applicable legislation or regulations, including but not limited to the Occupational Health and Safety Act, as amended, where the circumstances of that conviction demonstrate a disregard on the part of the Respondent for the health and safety of its workers, DNSSAB or NDHC's employees, and/or the general public.

I/WE declare that no person associated with the Proposal has committed professional misconduct, acts, or omissions that adversely reflect on the commercial integrity of the Respondent.

I/WE declare that if any future Contract is to be negotiated with DNSSAB/NDHC regarding the subject matter herein, the negotiations and the Contract shall be governed, construed and enforced under the laws of the Province of Ontario and the federal laws of Canada.

I/WE, including Non-Resident Respondent, shall comply with all Federal, Provincial (Ontario) and Municipal Laws, Acts, Ordinances, regulations, and By-Laws which in any way pertain to the Scope of Work outlined in this RFP.

I/We, including the Non-Resident Respondent, shall charge applicable HST for Ontario.

I/WE agree that any and all Personnel involved in the provision of the Goods and/or Services completed in the Proposal will be appropriately trained under the Occupational Health and Safety Act, that every supervisor appointed is a 'competent person' as defined in the Act, and all work shall be in compliance with the Act's regulations.

I/WE agree to hold DNSSAB/NDHC safe and harmless from any property damage or claims by individuals or third parties, including any legal costs incurred by DNSSAB/NDHC in connection therewith, on a solicitor/client basis, due to defective, damaged or unsuitable Goods and/or Services.

DECLARATION OF A CONFLICT OF INTEREST *(if applicable, provide details below)*

DECLARATION OF A JOINT SUBMISSION *(if applicable, provide details below)*

Project Identification

Please select your area of expertise for the VOR listing.

I/WE can confirm that we can advise, represent and support DNSSAB and NDHC under the following areas of expertise:

- Expertise in Labour and Employment Law (Collective Bargaining and Grievances)
- Expertise in Labour and Employment Law (Employment Standards, Contracts, and Terminations)
- Expertise in Labour and Employment Law (Human Rights)
- Expertise in Labour and Employment Law (Independent Contractor Agreements)
- Expertise in Labor and Employment Law (Workplace Safety and Insurance and Occupational Health and Safety)



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<input type="checkbox"/>	Expertise in Contract Law (Agreement of Purchase and Sale)
<input type="checkbox"/>	Expertise in Contract Law (Service Agreements)
<input type="checkbox"/>	Expertise in Contract Law (Data Sharing Agreements)
<input type="checkbox"/>	Expertise in Contract Law (Construction)
<input type="checkbox"/>	Expertise in Contract Law (Tech or Software Agreements)
<input type="checkbox"/>	Expertise in Contract Law (Dispute Resolution)
<input type="checkbox"/>	Expertise in Property Law (Commercial Leases)
<input type="checkbox"/>	Expertise in Property Law (Operator's Licenses)
<input type="checkbox"/>	Expertise in Property Law (Landlord and Tenant)
<input type="checkbox"/>	Expertise in Property Law (Real Property Agreements)
<input type="checkbox"/>	Expertise in Governance (DSSAB Act)
<input type="checkbox"/>	Expertise in Governance (Boards, Codes of Conduct, and Conflict of Interest)
<input type="checkbox"/>	Expertise in Governance (By-Laws)
<input type="checkbox"/>	Expertise in Governance (Jurisdictional)
<input type="checkbox"/>	Expertise in Governance (Fiduciary Duties)
<input type="checkbox"/>	Expertise in Governance (Codes of Conduct)
<input type="checkbox"/>	Expertise in Corporate Law (Non-Profits)
<input type="checkbox"/>	Expertise in Insurance Law
<input type="checkbox"/>	Expertise in Tax Law
<input type="checkbox"/>	Expertise in Municipal Law
<input type="checkbox"/>	Expertise in Environmental Protection and Assessment Law
<input type="checkbox"/>	Expertise in Intellectual Property Law
<input type="checkbox"/>	Expertise in Procurement/Tendering Law
<input type="checkbox"/>	Expertise in IT/Cyber Law
<input type="checkbox"/>	Expertise in Privacy Law (MFIPPA)
<input type="checkbox"/>	Expertise in Privacy Law (PIPEDA)
<input type="checkbox"/>	Expertise in Privacy Law (PHIPA)
<input type="checkbox"/>	Expertise in Social Services Legislation (Ambulance Act)
<input type="checkbox"/>	Expertise in Social Services Legislation (Child Care and Early Years Act)
<input type="checkbox"/>	Expertise in Social Services Legislation (Emergency Management and Civil Protection Act)
<input type="checkbox"/>	Expertise in Social Services Legislation (Housing Services Act)
<input type="checkbox"/>	Expertise in Social Services Legislation (Ministry of Health and Long-Term Care Act)
<input type="checkbox"/>	Expertise in Social Services Legislation (Ontario Works Act)



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- | | |
|--------------------------|---|
| <input type="checkbox"/> | Expertise in Social Services Legislation (Ontario Disability Support Program Act) |
| <input type="checkbox"/> | Experience at the Human Rights Tribunal |
| <input type="checkbox"/> | Experience at the Landlord and Tenant Board |
| <input type="checkbox"/> | Experience at the Social Benefits Tribunal |
| <input type="checkbox"/> | Experience at the Assessment Review Board |
| <input type="checkbox"/> | Experience at the Ontario Land Tribunal |

Required Documents

Respondents must submit the following document(s) with this form.

YES NO

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | I/WE have submitted a copy of a current Business License or Letters of Incorporation. |
| <input type="checkbox"/> | <input type="checkbox"/> | I/WE have submitted verification of good standing with the Law Society of Ontario for each proposed member of the legal team. |
| <input type="checkbox"/> | <input type="checkbox"/> | Brief Biographies of each proposed legal team member (2–3 paragraphs or 1-page max) that include an overview of their experience, case histories, academic qualifications and certifications. |
| <input type="checkbox"/> | <input type="checkbox"/> | Copy of your standard retainer form or engagement letter. |



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Declaration of Participating Entities

Participating Entity agreements made by the Respondent will not release the Respondent from any obligation to DNSSAB/NDHC concerning the performance of its obligations under the Contract. DNSSAB/NDHC will not be responsible for payment to the Respondent's Participating Entities if the Respondent defaults on its responsibilities. The Respondent is responsible for communicating this information to its Participating Entities.

Respondent's Declaration

Please initial beside the statement which best describes how Participating Entities are associated with your Proposal:

 Yes If Participating Entities are associated with this Proposal, provide details using the table below.

 No If by own forces, state so here (initial)

If Yes above, provide a list of all Participating Entities you will be using to undertake the work (add as many rows as necessary) and include their role and the amount, in dollars, allocated from your Proposal that will be expensed to the Participating Entity.

Listing of Participating Entities				
Type	Responsibility	Amount (\$)	Firm Name and Address	Contact Person
<input type="checkbox"/> Affiliate <input type="checkbox"/> Associate <input type="checkbox"/> Dealer <input type="checkbox"/> Distributor <input type="checkbox"/> Partner <input type="checkbox"/> Consultant <input type="checkbox"/> Sub-consultant <input type="checkbox"/> Contractor <input type="checkbox"/> Reseller <input type="checkbox"/> Sub-contractor <input type="checkbox"/> Sub-processor <input type="checkbox"/> Subsidiary <input type="checkbox"/> Third-party service provider <input type="checkbox"/> Other _____				
<input type="checkbox"/> Affiliate <input type="checkbox"/> Associate <input type="checkbox"/> Dealer <input type="checkbox"/> Distributor <input type="checkbox"/> Partner <input type="checkbox"/> Consultant <input type="checkbox"/> Sub-consultant <input type="checkbox"/> Contractor <input type="checkbox"/> Reseller <input type="checkbox"/> Sub-contractor <input type="checkbox"/> Sub-processor <input type="checkbox"/> Subsidiary <input type="checkbox"/> Third-party service provider <input type="checkbox"/> Other _____				

Completed by:

Name

Title

I HAVE THE AUTHORITY TO BIND THE CORPORATION