



**Data Loss Prevention Solution  
Tender #: 2018-070**

Contractor Information:

Company Name and Address:

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Telephone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Web Address: \_\_\_\_\_

I agree with all of the terms and conditions of this tender (including those posted at [www.nlchi.nl.ca/index.php/procurement-opportunities](http://www.nlchi.nl.ca/index.php/procurement-opportunities) Yes \_\_\_\_\_ No \_\_\_\_\_

I have read and understood each of the addendums posted to the Centre's web site relative to this tender Yes \_\_\_\_\_ No \_\_\_\_\_

Name and Contact information for local sales and service rep:

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\_\_\_\_\_  
Authorized Company Representative Signature

\_\_\_\_\_  
Authorized Company Representative Print

\_\_\_\_\_  
Company

\_\_\_\_\_  
Date