



**MUNICIPAL DISTRICT OF GREENVIEW**

# APPENDIX V

## Expression of Interest Equipment Forms



# EOI Equipment

Equipment Type: **GRAVEL TRUCKS**

Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

**Truck only (attachments have checkboxes)**

Make		Model	Year	Unit #		Serial # (Required)		Gross Vehicle Weight		Tare Weight	Comments
<b>TRUCK TYPE</b>	<input checked="" type="checkbox"/>	<b>TRUCK TYPE</b>	<input checked="" type="checkbox"/>			<b>ATTACHMENTS</b>	<input checked="" type="checkbox"/>				
Tandem Axle Dump		Tandem Axle Semi				Tandem Axle Pup		Clam Dump			
Tri -Axle Dump		Tri-Axle Semi				Tri-Axle Pup		Belly Dump			
						Tri-Axle Wagon		End Dump			
						Quad-Axle Wagon		Sander			

Make		Model	Year	Unit #		Serial # (Required)		Gross Vehicle Weight		Tare Weight	Comments
<b>TRUCK TYPE</b>	<input checked="" type="checkbox"/>	<b>TRUCK TYPE</b>	<input checked="" type="checkbox"/>			<b>ATTACHMENTS</b>	<input checked="" type="checkbox"/>				
Tandem Axle Dump		Tandem Axle Semi				Tandem Axle Pup		Clam Dump			
Tri-Axle Dump		Tri-Axle Semi				Tri-Axle Pup		Belly Dump			
						Tri-Axle Wagon		End Dump			
						Quad-Axle Wagon		Sander			

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## EOI Equipment

Equipment Type: **EXCAVATORS**

Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		
Thumb		Chuck Blade		Brush Rake							
Twister Bucket		Breaker/Brush Cutter		Digging Bucket							
Tamper		Dozer Blade		Trenching							
Mulcher		Clean up Bucket		GPS							
Ripper		Frost Bucket		Skeleton/Brush Guard							

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		
Thumb		Chuck Blade		Brush Rake							
Twister Bucket		Breaker/Brush Cutter		Digging Bucket							
Tamper		Dozer Blade		Trenching							
Mulcher		Clean up Bucket		GPS							
Ripper		Frost Bucket		Skeleton/Brush Guard							

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## EOI Equipment

Equipment Type: **DOZERS**

Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		
Hydraulic Tilt Dozer		Long Track		U Blade							
Rear Mounted Rippe		SU Blade									
Winch		Brush Rake									
6 Way Dozer		Dozer Blade									
Wide Pad / LGP		GPS									

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		
Hydraulic Tilt Dozer		Long Track		U Blade							
Rear Mounted Rippe		SU Blade									
Winch		Brush Rake									
6 Way Dozer		Dozer Blade									
Wide Pad / LGP		GPS									

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EOI Equipment

Equipment Type:

**LABOURERS**

Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

**Include proof of certifications for all workers**

No. of Labourers		Tools Required		Comments
Labourers:	v		v	
Certified Chainsaw		Fencing		
Certified Brushing		Ditch Work		
General Labourer(s)				
Certified Tree Faller		Incidental tools required:		
		Shovels		
		Impact Wrenches		
		Hammers		
		Other		

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## EOI Equipment

Equipment Type: **PACKERS**

Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
DETAILS:	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		
Drum width inches		Combination Roller									
Vibratory		Dozer									
Padfoot		Tilt Dozer									
Smooth Drum											

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
DETAILS:	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		
Drum width inches		Combination Roller									
Vibratory		Dozer									
Padfoot		Tilt Dozer									
Smooth Drum											

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## EOI Equipment

Equipment Type: **SKID STEERS**

Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		
Post Hole Auger		Stump Mulcher		Rototiller							
Backhoe		Track Mounted		Piling Head/Post Pounder							
Pallet Forks		Grapple Bucket		Ditch Witch							
Breaker		Clean up bucket		Snow Bucket							
Sweeper		Brush Mower									

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		
Post Hole Auger		Stump Mulcher		Rototiller							
Backhoe		Track Mounted		Piling Head/Post Pounder							
Pallet Forks		Grapple Bucket		Ditch Witch							
Breaker		Clean up bucket		Snow Bucket							
Sweeper		Brush Mower									

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## EOI Equipment

Equipment Type: **ROCK TRUCKS**

Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		
Articulating											
Side Boards											
Tailgate											
Wide Tires											
Ejector Box											

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		
Articulating											
Side Boards											
Tailgate											
Wide Tires											
Ejector Box											

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## EOI Equipment

Equipment Type: **GRADERS**

Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		
V-Plow		All wheel drive									
Snow Wings		Front Dozer									
Rear Ripper		GPS									
Scarifier		Front Angle Blade									

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		
V-Plow		All wheel drive									
Snow Wings		Front Dozer									
Rear Ripper		GPS									
Scarifier		Front Angle Blade									

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## EOI Equipment

Equipment Type: **LOADERS**

Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√	Equipment Details	√	ATTACHMENTS	√	ATTACHMENTS	√		
Hydraulic Tamper		Backhoe Loader									
Hydraulic Breaker		On-board Scale									
Twister Bucket		Printer									
Frost Bucket		Thumb									
Wheel Loader											

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√	Equipment Details	√	ATTACHMENTS	√	ATTACHMENTS	√		
Hydraulic Tamper		Backhoe Loader									
Hydraulic Breaker		On-board Scale									
Twister Bucket		Printer									
Frost Bucket		Thumb									
Wheel Loader											

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## EOI Equipment

Equipment Type: **TRACTORS & MOTOR SCRAPERS**

Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√			DETAILS	√	ATTACHMENTS	√		
Rotary Mower		Disc Plow				Skidder		Subsoiler			
Flailing Mower		Off Set Disc				Processor		Wobbly Packers			
Sickle Mower		Heavy Duty Cultivator				Buncher					
Post Pounder		Harrows- 4 Section				Motor Front & Back					
Weed Sprayer		Rock Picking Device									

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√			DETAILS	√	ATTACHMENTS	√		
Rotary Mower		Disc Plow				Skidder		Subsoiler			
Flailing Mower		Off Set Disc				Processor		Wobbly Packers			
Sickle Mower		Heavy Duty Cultivator				Buncher					
Post Pounder		Harrows- 4 Section				Motor Front & Back					
Weed Sprayer		Rock Picking Device									

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## EOI Equipment

Equipment Type: **WATER TRUCKS** (And Hydro Vacs & Steamers)

Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

Make		Model	Year	Unit #		Serial # (Required)		Volume Capacity (m3)		Tare Weight	Comments
ATTACHMENTS	√		√			ATTACHMENTS	√	ATTACHMENTS	√		
Spray Bar											
Pressurized Spool											
Water Tank											
Hydro Vac											
Steamer											

Make		Model	Year	Unit #		Serial # (Required)		Volume Capacity (m3)		Tare Weight	Comments
ATTACHMENTS	√		√			ATTACHMENTS	√	ATTACHMENTS	√		
Spray Bar											
Pressurized Spool											
Water Tank											
Hydro Vac											
Steamer											

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## EOI Equipment

Equipment Type: **TRUCKS & TRAILERS**

Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	WHEELS	#	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		
Low Boy		# Wheels									
Winch		# Wheels									
Bed Truck											
Flat Deck											
Tilt Deck											

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	WHEELS	#	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		
Low Boy		# Wheels									
Winch		# Wheels									
Bed Truck											
Flat Deck											
Tilt Deck											

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## EOI Equipment

Equipment Type: **SMALL EQUIPMENT TRAILERS**

Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

Make		Model	Year	Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		

Make/Model		Year		Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		

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Equipment Type: **MISCELLANEOUS**

Make/Model		Year		Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		

Make/Model		Year		Unit #		Serial # (Required)		Rated Capacity		ARHCA Group #	Comments
ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√	ATTACHMENTS	√		

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# MUNICIPAL DISTRICT OF GREENVIEW No. 16

## Electronic Funds Transfer Form

**Completion of All Fields is Mandatory. Incomplete forms will not be processed.**

**Please attach a copy of a void cheque or direct deposit form from your banking institution.**

### INSTRUCTIONS

Any alterations to the information that is preprinted on a cheque will not be accepted.

- Funds will only be deposited into ONE bank account.

- Funds can only be deposited in the name of the person or company who CURRENTLY receives the cheque.

### Part 1 - Party to Receive Payment

Company Name		Vendor ID (If Known)
Last Name	First Name	Middle Name
Address		City/Town
Province	Postal Code	Telephone Number (including Area Code)
Email address for electronic delivery of remittance advice:		

**I authorize the Municipal District of Greenview No. 16 to make all payments due to me by electronic deposit to the account below. Payment shall continue until I advise otherwise.**

Dated	Signed
-------	--------

### Part 2 – Banking Information

Name of Bank		Bank Address	
Bank Transit/Branch Number	Bank Number	Account Number	
Printed Name of Account Holder		Signature of Account Holder or Finance Officer	

See sample cheque below to complete the above information.

*The personal information collected on this form is being collected under the authority of Sections 33 and 39(1)(a)(b) of the Alberta Freedom of Information and Protection of Privacy Act, and Section 301.1 of the Municipal Government Act. The information will be used to process your application(s). Your name, contact telephone number and address may be used to carry out current and/or future construction, operating programs, services or activities of the Municipality. If you have any questions about the collection, use or disclosure of the personal information provided, please contact the Freedom of Information and Protection of Privacy Coordinator at 780.524.7600.*



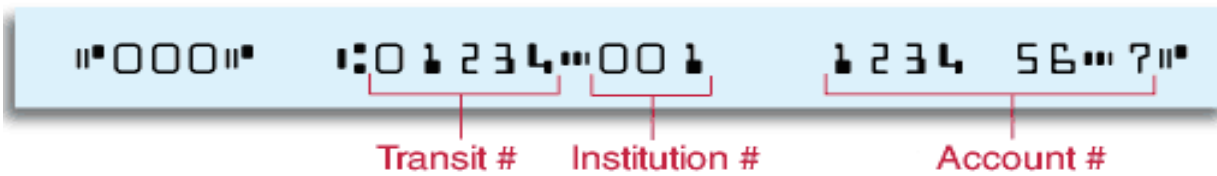
FIRST LASTNAME 000  
 1234 AVENUE ST  
 CITY, PROV. Z1Z 1Z1  
 Tel: (416) 555-6666

PAY TO THE ORDER OF \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ / 100 DOLLARS

**IN** Institution Name  
 Institution Full Name  
 Internet: www.institution.com  
 2345 Street Ave.  
 City, Prov. Z1Z 1Z1

MEMO \_\_\_\_\_

⑈000⑈ ⑆0 234 ⑈00⑆ 1234 56 ⑈7⑈



Please return this form to the MD of Greenview Accounts Payable for processing.

**Mailing Address:** PO Box 1079  
 Valleyview, AB  
 T0H 3N0

Email: [accounts.payable@mdgreenview.ab.ca](mailto:accounts.payable@mdgreenview.ab.ca)