



APPENDIX F

STANDING OFFER COST ESTIMATE QUOTE FORM

Name of Personnel	Category	Number of Hours

DISBURSEMENTS (Estimated)

At cost without allowance for mark-up or profit, supported by invoices/receipts. Please reference StandingOffer for geographic location outside of which disbursements can be charged.

(specify and enter limit)	
	\$
	\$
	\$
Maximum Amount for Disbursements	\$

TOTAL FIXED FEE (Based on Category/Number of Hours) \$ _____

TOTAL FEE (Fixed Fee plus Disbursements) \$ _____

The prime consultant and other members of the Consultant Team, shall be, or eligible to be, licensed, certified or otherwise authorized to provide the necessary professional services to the full extent that may be required by provincial or territorial law.

Name (Printed)

Signature

Date