



# Fort McMurray Airport Authority Plough Truck RFP 24-001

## Response Sheet

Company Representative Name:

Company Name:

Address:

Phone:

Email:

Date:

Delivery Cost:

Unit Cost:

GST:

Total:

Delivery Date:

Specified Requirements Table:

Section No.	Meet Y/N	Details
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Section No.	Meet Y/N	Details
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Section No.	Meet Y/N	Details
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Section No.	Meet Y/N	Details
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Section No.	Meet Y/N	Details
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Section No.	Meet Y/N	Details
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