

Date

Business/Company

XXXX Street

City, Province Postal Code

Dear Business/Company:

As you are likely aware, the City of Niagara Falls has an active Drinking Water Quality Management System. Under this System, your company/agency has been identified as an essential supplier and/ or service provider, **as of RFP/Q_____ (if applicable)**

The products and/or services you provide play an important role in the provision of safe, high quality water to those who consume drinking water within the City of Niagara Falls.

Please take a moment to review the attached Quality Management System Policy/Mission Statement.

Upon your completed review of the Policy, we respectfully request that a company/agency representative fill out the bottom portion of this page and return the completed copy via fax to 905-353-8612 or scan and email to jblanchard@niagarafalls.ca . Please also keep a copy of the completed acknowledgement for your records. This signature will confirm that a representative of **Business/Company** has read the Quality Management System Policy and therefore understands their supplies and/ or services provided have an effect on the quality of drinking water delivered within the City of Niagara Falls water distribution system.

Thank you for your cooperation. Should you have any questions or concerns, please do not hesitate to contact me.

Regards,

Jessica Blanchard
Environmental Services Coordinator
City of Niagara Falls
905-356-7521 ext. 6209
jblanchard@niagarafalls.ca

As a representative of **Business/Company**, I confirm that I have read the City of Niagara Falls Quality Management System Policy and acknowledge that the supplies and/ or services **Business/Company** provide have an effect on the drinking water delivered within the City of Niagara Falls. Also, I understand that supplying drinking water is an extremely important duty of the City of Niagara Falls, which requires a very high standard of due diligence.

(Print)

(Sign)

(Date)