

Job Name:	
Job Number:	
Contact:	
S4C Contact:	

4090 Belgreen Dr. Unit 6, Gloucester, ON, K1G 3N2 **Phone:**(613) 738-5300 **FAX:** (613) 738-4719

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## **REQUEST FOR INFORMATION (RFI) #:**

DATE OF INQUIRY	RESPONSE REQUIRED NO LATER	RESPONSE REQUIRED NO LATER THAN:	
то:	FAX #:	FOR ACTION	FOR INFO
Attention:			
Consultant/Sub-Trade to fill i	n the boxes with the heavy borders (and "Questio	n") and forward to S	ourceFour
Initiator:	Affected Sections:		
Sub Trade Ref#:	Schedule Activity ID affected:		
	Detail or Drawing Reference:		
	Specification References:		
Request Title:		Iotal Pages:	:
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