|  |  |  |
| --- | --- | --- |
| |  |  | | --- | --- | | |  | | --- | |  | | |
|  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | |  | | --- | | **City of Saint John Social Procurement Supplier Questionnaire**    **The City of Saint John is aiming to further its social procurement objectives, specifically with regard to: respecting the values of inclusivity, diversity, equity, culture, and fair labour practices; supporting diverse organizations; striving for an ever-improving quality of life with a view to becoming the most vibrant and welcoming community in Atlantic Canada by growing the City, serving the City and becoming the community of choice through the cultivation of community pride and the vibrant promotion of beautification, arts, culture, heritage, recreation, education, employment, and diversity; providing residents with opportunities to prosper with flourishing neighbourhoods and a protected environment with quality municipal services; and promoting population growth and a growing tax base for the City.  This questionnaire is voluntary. The information collected from suppliers via this questionnaire will be used by the City to register suppliers within the geographic boundaries of the City that identify with falling within any of the Social Procurement Supplier categories defined in the City's Social Procurement Protocol.**  **Please email the completed questionnaire to** [**supplychainmanagement@saintjohn.ca**](mailto:supplychainmanagement@saintjohn.ca) **If you have already responded to this questionnaire, there is no need to resubmit unless you wish to update previously submitted information.**  **Please submit any questions to** [**supplychainmanagement@saintjohn.ca**](mailto:supplychainmanagement@saintjohn.ca) | | | | |  | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | |  | | --- | | **A. Supplier Information** | | | | |  | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | **1.** | **Provide all business information.** | | | | | | \*(a) | |  | | --- | | Legal Name of Business | | : | |  | | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | \*(b) | |  | | --- | | Address 1 | | : | |  | | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | (c) | |  | | --- | | Address 2 | | : | |  | | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | \*(d) | |  | | --- | | City/Town | | : | |  | | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | \*(e) | |  | | --- | | Province | | : | |  | | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | \*(f) | |  | | --- | | Postal Code | | : | |  | | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | \*(g) | |  | | --- | | Telephone | | : | |  | | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | **2.** | **Provide all information about the contact person for the supplier.** | | | | | | \*(a) | |  | | --- | | Supplier Contact Name | | : | |  | | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | \*(b) | |  | | --- | | Contact Telephone | | : | |  | | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | \*(c) | |  | | --- | | Contact Email Address | | : | |  | | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | **\* Required Information** | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **3.** | **Please select the goods and services that you are qualified to provide. Please select as many as apply. If you select "Other", please specify what type of goods and/or services that you provide.** | | | |  |  |  |  | | --- | --- | --- | --- | |  |  | Light duty vehicles and trailers |  | |  |  | Firearms and ammunition |  | |  |  | Building renovations |  | |  |  | Landscaping/lawncare services |  | |  |  | Building demolitions |  | |  |  | Equipment maintenance services |  | |  |  | Safety supplies |  | |  |  | Flashlights/batteries |  | |  |  | Water meters |  | |  |  | Paints/stains |  | |  |  | Clothing |  | |  |  | Gloves |  | |  |  | Boots |  | |  |  | Nursery stock |  | |  |  | Pest control |  | |  |  | Computer cabling |  | |  |  | Well and water testing |  | |  |  | Delivery of summons |  | |  |  | Training |  | |  |  | Mats |  | |  |  | Bulky item pickup |  | |  |  | Printing services |  | |  |  | Pump installation |  | |  |  | Vehicle parts |  | |  |  | Dumpster rentals |  | |  |  | Portable toilet rentals |  | |  |  | Equipment rentals |  | |  |  | Removal of biosolids |  | |  |  | Shredding services |  | |  |  | Windshields/auto glass |  | |  |  | Sweeper brooms |  | |  |  | Tires |  | |  |  | Automotive filters and other parts |  | |  |  | Small engine equipment (mowers, etc.) |  | |  |  | Piping |  | |  |  | Fittings |  | |  |  | Hand tools |  | |  |  | Concrete rings and risers |  | |  |  | Chemicals |  | |  |  | Industrial gasses |  | |  |  | Cleaning supplies |  | |  |  | Lubricants |  | |  |  | Envelopes |  | |  |  | Blade sharpening |  | |  |  | Fire hydrants |  | |  |  | Fasteners, nuts, bolts |  | |  |  | Drafting/plotter paper |  | |  |  | Treadmills |  | |  |  | Signage |  | |  |  | Flaggers |  | |  |  | Light construction (e.g. decks) |  | |  |  | Automotive undercoating |  | |  |  | Vehicle rentals |  | |  |  | Crosswalk services |  | |  |  | Crain and hoist inspections |  | |  |  | Ready mix concrete |  | |  |  | Cold mix |  | |  |  | Badges and regalia |  | |  |  | Swag |  | |  |  | Other (Please specify)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | | | | |  | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | |  | | --- | | **B. Social Procurement Supplier Categories Diverse Suppliers** | | | | |  | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **4.** | **Diverse Suppliers are those businesses that have a diverse ownership group or workforce or who engage in inclusive employment practices that reduce systemic barriers to employment. For greater clarity, diverse means including or involving people from a range of different social and ethnic backgrounds and of different genders, sexual orientations, and the like.   Are you a Diverse Supplier?  (Select one option)** | | | |  |  |  |  | | --- | --- | --- | --- | |  |  | Yes |  | |  |  | No |  | |  | | | | | | **NOTE:** IF ANSWER TO **Q4** is **NO** SKIP DIRECTLY TO **Q8** | | | |  | | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **5.** | **Is your business owned, controlled, or managed by individuals that fall within one or more of the categories below? Please check all that apply.** | | | |  |  |  |  | | --- | --- | --- | --- | |  |  | Indigenous / Aboriginal |  | |  |  | Racialized person(s) |  | |  |  | Women |  | |  |  | Person(s) with disabilities |  | |  |  | Youth (Aged 18 to 29) |  | |  |  | 2SLGBTQ+ |  | |  |  | Recent Immigrant (within the past 10 years) |  | |  |  | None of the above |  | | | | |  | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **6.** | **Is your business's workforce made up individuals that fall within one or more of the categories below? Please check all that apply.** | | | |  |  |  |  | | --- | --- | --- | --- | |  |  | Indigenous / Aboriginal |  | |  |  | Racialized person(s) |  | |  |  | Women |  | |  |  | Person(s) with disabilities |  | |  |  | Youth (Aged 18 to 29) |  | |  |  | 2SLGBTQ+ |  | |  |  | Recent Immigrant (within the past 10 years) |  | |  |  | None of the above |  | | | | |  | | |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **7.** | **Describe any workplace diversity policies, procedures, or certifications that are currently in place at your business.** | | |  | | | |  | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | |  | | --- | | **B. Social Procurement Supplier Categories Social Enterprise Suppliers** | | | | |  | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **8.** | **Social Enterprise Suppliers are those businesses that embed a social, cultural, or environmental purpose into their business and reinvest the majority of their profits into their social mission.   Are you a Social Enterprise Supplier?  (Select one option)** | | | |  |  |  |  | | --- | --- | --- | --- | |  |  | Yes |  | |  |  | No |  | | |  | | --- | |  | | | | | | | **NOTE:** IF ANSWER TO **Q8** is **NO** SKIP DIRECTLY TO **Q11** | | | |  | | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **9.** | **Select the Social Enterprise Supplier category that best describes your business. Please select all that apply.** | | | |  |  |  |  | | --- | --- | --- | --- | |  |  | Social |  | |  |  | Cultural |  | |  |  | Environmental |  | |  |  | Other (Please specify)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | | | | |  | | |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **10.** | **Describe how you reinvest the majority of your profits into your business' social enterprise.** | | |  | | | |  | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | |  | | --- | | **B. Social Procurement Supplier Categories Environmentally Responsible Suppliers** | | | | |  | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **11.** | **Environmentally Responsible Suppliers are those businesses that reduce their carbon footprint by having adopted environmentally sustainable workplace practices and/or policies.   Are you an Environmentally Responsible Supplier?  (Select one option)** | | | |  |  |  |  | | --- | --- | --- | --- | |  |  | Yes |  | |  |  | No |  | | |  | | --- | |  | | | | | | | **NOTE:** IF ANSWER TO **Q11** is **NO** SKIP DIRECTLY TO **Q14** | | | |  | | |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **12.** | **Describe the sustainable workplace practices and/or policies that have been implemented in your business.** | | |  | | | |  | | |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **13.** | **Describe any environmental or sustainable certifications currently held by your business.** | | |  | | | |  | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | |  | | --- | | **B. Social Procurement Supplier Categories Social Impact Suppliers** | | | | |  | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **14.** | **Social Impact Suppliers are those businesses that employ a total of 20 or fewer employees within the City of Saint John and provide a positive social impact to the community of Saint John by paying property taxes or rent within the City of Saint John.   Are you a Social Impact Supplier?  (Select one option)** | | | |  |  |  |  | | --- | --- | --- | --- | |  |  | Yes |  | |  |  | No |  | | |  | | --- | |  | | | | | | | **NOTE:** IF ANSWER TO **Q14** is **NO** SKIP DIRECTLY TO **Q17** | | | |  | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **15.** | **How many employees does your business employ?  (Select one option)** | | | |  |  |  |  | | --- | --- | --- | --- | |  |  | 0-5 |  | |  |  | 6-10 |  | |  |  | 11-15 |  | |  |  | 16-20 |  | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **16.** | **Select the statement that best describes how your business positively impacts the City socially.  (Select one option)** | | | |  |  |  |  | | --- | --- | --- | --- | |  |  | My business pays property taxes in the City of Saint John. |  | |  |  | My business pays rent in the City of Saint John. |  | |  |  | My business pays both property taxes and rent in the City of Saint John. |  | | | | |  | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | |  | | --- | | **B. Social Procurement Supplier Categories Living Wage Suppliers** | | | | |  | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **17.** | **Living Wage Suppliers are those businesses that hire employees living in Saint John and pay those employees a living wage. For greater clarity, a living wage is at least $22/hour or the equivalent salary.   Are you a Living Wage Supplier?  (Select one option)** | | | |  |  |  |  | | --- | --- | --- | --- | |  |  | Yes |  | |  |  | No |  | | |  | | --- | |  | | | | | | | **NOTE:** IF ANSWER TO **Q17** is **NO** SKIP DIRECTLY TO **Q20** | | | |  | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **18.** | **Do you pay your employees a living wage, which means a wage of $22 or more an hour, or the equivalent salary?  (Select one option)** | | | |  |  |  |  | | --- | --- | --- | --- | |  |  | Yes |  | |  |  | No |  | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **19.** | **Select the lowest hourly rate or comparable annual salary range that your business currently pays its employees.  (Select one option)** | | | |  |  |  |  | | --- | --- | --- | --- | |  |  | $22/hour ($44,000/year) to $24.50/hour ($49,000/year) |  | |  |  | $25/hour ($50,000/year) to $29.50/hour ($59,000/year) |  | |  |  | $30/hour ($60,000/year) to $34.50/hour ($69,000/year) |  | |  |  | $35/hour ($70,000/year) to $39.50/hour ($79,000/year) |  | |  |  | $40/hour ($80,000/year) or higher |  | | | | |  | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | |  | | --- | | **B. Social Procurement Supplier Categories Work Experience Suppliers** | | | | |  | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **20.** | **Work Experience Suppliers are those that provide paid work experience programs to residents living in Saint John.   Are you a Work Experience Supplier?  (Select one option)** | | | |  |  |  |  | | --- | --- | --- | --- | |  |  | Yes |  | |  |  | No |  | | |  | | --- | |  | | | | | | | **NOTE:** IF ANSWER TO **Q20** is **NO** SKIP DIRECTLY TO **Q23** | | | |  | | |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **21.** | **How many paid work experience positions do you offer at your business?** | | |  | | | |  | | |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **22.** | **Describe the types of paid work experience roles you offer at your business.** | | |  | | | |  | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | |  | | --- | | **B. Social Procurement Supplier Categories Designated Ownership Suppliers** | | | | |  | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **23.** | **Designated Ownership Suppliers are those that have at least 51% ownership in one or more of the following designated categories:**   1. **Indigenous Peoples (original peoples of North America and their descendants)** 2. **Racialized Persons (as defined by Statistics Canada)** 3. **Woman/Women (women or those who identify as women)** 4. **Person(s) with Disabilities (as defined in Canada's Federal Disability Reference Guide)** 5. **Youth (people aged 18 to 29)** 6. **LGBTQIAS+ (Lesbian, Gay, Bisexual, Transgender, Questioning, Intersex, Asexual, and Two Spirit, or any other analogous group that identifies with this category)**   **Are you a Designated Ownership Supplier?  (Select one option)** | | | |  |  |  |  | | --- | --- | --- | --- | |  |  | Yes |  | |  |  | No |  | | |  | | --- | |  | | | | | | | **NOTE:** IF ANSWER TO **Q23** is **NO** STOP, YOU HAVE FINISHED THE SURVEY | | | |  | | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **24.** | **Is 51% of your business' ownership made up by individuals that fall within one or more of the categories below? Please check all that apply.** | | | |  |  |  |  | | --- | --- | --- | --- | |  |  | Indigenous Peoples |  | |  |  | Racialized Persons |  | |  |  | Women |  | |  |  | Persons with Disabilities |  | |  |  | Youth |  | |  |  | LGBTQIA2S+ |  | | | | | |  |  |  |  |  | | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | |  |  | | --- | --- | | **25.** | **Confirm the total number of owners and the number of owners that fall within one or more of the categories above.** | | |  | | | |  | |