

**PROPOSAL SUBMISSION FORM**

**RFP No. 24-079**

**Lights at Lafarge Food Vendor Management**

**Proposals will be received as per date and time in** [**Key Dates Section**](#kdates)

**INSTRUCTIONS FOR PROPOSAL SUBMISSION**

Proposal submissions are to be returned in Microsoft Word and any other supporting documents to be consolidated into one PDF file and uploaded through QFile, the City’s file transfer service accessed at website: [qfile.coquitlam.ca/bid](http://qfile.coquitlam.ca/bid)

**1. In the “Subject Field” enter:** RFP Number and Name

**2. Add files and “Send Files”**

 (Ensure your web browser remains open until you receive 2 emails from QFile to confirm upload is complete.)

Proponents are responsible to allow ample time to complete the Proposal Submission process. If assistance is required phone 604-927-3037.

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| **Legal Name of Proponent** |  |
| **Contact Person and Title** |  |
| **Business Address** |  |
| **Telephone** |  |
| **Email Address** |  |

1. **DEPARTURES AND AWARD**

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| 1. **CONTRACT -** I/We have reviewed the City’s [Standard Terms and Conditions - Consulting and Professional Services (PDF)](https://www.coquitlam.ca/DocumentCenter/View/1448/10-02-2019-Standard-Terms-and-Conditions---Consulting-and-Professional-Services-PDF) and would be prepared to enter into in an agreement that incorporates the City’s Stand Terms and Conditions, amended by the following departures (list, if any):
 |
| **Section** | **Requested Departure(s) / Alternative(s)** |
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| 1. **SERVICES -** I/We have reviewed the Scope of Services as descibed in this RFP and are prepared to meet those requirements, amended by the following departures and additions (list, if any):
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| **Requirements – Requested Departure(s) / Alternate(s) / Addition(s)** |
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| 1. **AWARD -** For eligibility of award, the City requires the successful Proponent to complete and have the following in place before providing the Goods and Services. **Section 1c items are not required as part of this Proposal but may be required prior to entering into an agreement with the City.**
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| 1. **Insurance -** Professional Errors and Omissions Liability and Commercial General Liability as outlined on the [City's Certificate of Insurance - Consultant Form](https://www.coquitlam.ca/DocumentCenter/View/1454/Certificate-of-Insurance---Consultant-Form-PDF?bidId=)
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| 1. **Business License** - A City of Coquitlam or Tri Cities Intermunicipal [Business License](https://www.coquitlam.ca/602/Business-Licences)
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| **As of the date of this Proposal, we advise that we have the ability to meet all of the above requirements except as follows (list, if any):** |
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1. **CORPORATE**

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| 1. **CAPABILITIES, CAPACITY AND RESOURCES** - Proponents to provide information on the following (use the spaces provided and/or attach additional pages, if necessary)**:**
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| 1. Structure of the Proponent, background, how many years they have been in business and organizational history (e.g. mission, vision, corporate directions, years in business, etc.):
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| 1. Provide a detailed narrative as to the Proponent’s understanding of the project objectives, outcomes and vision:
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| 1. Proponent is to state any value added benefits and activities they can provide in delivering the Services. Provide details:
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| 1. **REFERENCES –** Proponent shall be competent and capable of performing the Services requested and successfully delivered service contracts of similar size, scope and complexity. The City reserves the right to contact any person(s), agency(ies) or firm(s) not listed as part of an independent review (use the spaces provided and/or attach additional pages, if necessary):
 |
| **Reference No. 1** |
| **Description of Contract** |  |
| **Size and Scope** |  |
| **Work Performed** |  |
| **Start Date** |  |
| **End Date** |  |
| **Contract Value** |  |
| **Project completed on budget** |  |
| **Project completed on schedule**  |  |
| **Reference Information** | Company |
| Name: |
| Phone Number: |
| Email Address: |

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| **Reference No. 2** |
| **Description of Contract** |  |
| **Size and Scope** |  |
| **Work Performed** |  |
| **Start Date** |  |
| **End Date** |  |
| **Contract Value** |  |
| **Project completed on budget** |  |
| **Project completed on schedule**  |  |
| **Reference Information** | Company |
| Name: |
| Phone Number: |
| Email Address: |

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| **Reference No. 3** |
| **Description of Contract** |  |
| **Size and Scope** |  |
| **Work Performed** |  |
| **Start Date** |  |
| **End Date** |  |
| **Contract Value** |  |
| **Project completed on budget** |  |
| **Project completed on schedule**  |  |
| **Reference Information** | Company |
| Name: |
| Phone Number: |
| Email Address: |

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| 1. **KEY PERSONNEL –** Proponent proposes the following key personnel for the Services stated in the RFP. No changes, additions or deletions are to be made to these Key Personnel without the City’s written approval. (Add rows as needed). Please include resumes as an Attachment to this Submission, at a maximum of 2 pages per resume.
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| **LINE ITEM** | **NAME** | **TITLE/POSITION** | **EXPERIENCE AND QUALIFICATIONS** | **YEARS WITH YOUR ORGANIZATION** |
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| (use the spaces provided and/or attach additional pages, if necessary) |

1. **SOCIAL RESPONSIBILITY**

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| 1. What policies does your organization have for hiring apprentices, indigenous peoples, recent immigrants, veterans, young people, women, people with disabilities and any other groups:
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| 1. What policies does your organization have to support reconciliation with indigenous peoples:
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1. **TECHNICAL**

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| 1. **APPROACH and METHODOLOGY -** Description of how the Consultant will source, manage, and coordinate food trucks.
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| 1. **Crisis and Contingency Planning:** Detailed plan for managing unexpected challenges, such as inclement weather, vendor cancellations, or health and safety emergencies
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| 1. **Food Truck Satisfaction:** State your approach to ensuring vendor satisfaction, including clear communication channels, support services, and feedback mechanisms.
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1. **FINANCIAL**

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| 1. **Fee Structure:** Provide a clear breakdown of how the Consultant plans to charge food trucks, including the base fee, any additional charges, and the payment schedule.
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| 1. **Revenue Model:** Description of the revenue model, including the Consultant's approach to sharing revenue from food trucks..
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**Attention Purchasing Manager:**

1. **I/We, the undersigned duly authorized representative of the Proponent**, having received and carefully reviewed all of the Proposal documents, including the RFP and any issued addenda posted on the City’s website [www.coquitlam.ca/Bid-Opportunities](http://www.coquitlam.ca/140/Bid-Opportunities), and having full knowledge of the Site, and having fully informed ourselves as to the intent, difficulties, facilities and local conditions connected to performing the Services~~,~~ submit this Proposal in response to the RFP.
2. **I/We**  agree to the rules of participation outlined in the [Instructions to Proponents](https://www.coquitlam.ca/DocumentCenter/View/1457/Instructions-to-Proponents-PDF) and should our Proposal be selected, agree to the City’s [Standard Terms and Conditions - Consulting and Professional Services (PDF)](https://www.coquitlam.ca/DocumentCenter/View/1448/10-02-2019-Standard-Terms-and-Conditions---Consulting-and-Professional-Services-PDF) and will accept the City’s Contract as defined within this RFP document.
3. **I/We acknowledge** receipt of the following Addenda related to this Request for Proposals and have incorporated the information received in preparing this Proposal.

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| **Addendum No.** | **Date Issued** |
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**This Proposal** is submitted this \_\_\_\_day of \_\_\_\_\_\_\_, 20\_\_\_\_\_\_.

**I/We have the authority to sign on behalf of the Proponent and have duly read all documents.**

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| **Name of Proponent** |  |
| **Signature(s) of Authorized Signatory(ies)** | **1.** |
| **2.** |
| **Print Name(s) and Position(s) of Authorized Signatory(ies)** | **1.** |
| **2.** |