

**City of Coquitlam**

**PRO****POSAL SUBMISSION FORM**

**RFP No. 25-077**

**Removal of Preload from Cedar Drive**

**Proposals will be received as per the date and time specified in the Key Dates Section of the RFP**

**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 Company** |  |
| **Contact Person and Title** |  |
| **Business Address** |  |
| **Telephone** |  |
| **Email Address** |  |

1. **MANDATORY REQUIREMENTS**

Proponents MUST provide the following Mandatory Requirements for their Proposals to be evaluated:

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| 1. **Consent of Surety**   Proponent MUST attach the a copy of the original Consent of Surety to be submitted with the Proposal submission; that guarantees the City will be provided with a Performance Bond and Labour and Material Payment Bond each in the amount of 50% of the Total Proposal Price.  **The original document is to be provided upon request by the City.** |
| **🗆** Consent of Surety attached. |

1. **DEPARTURES**

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| 1. **CONTRACT -** I/We have reviewed the City’s **Standard Terms and Conditions - Purchase of Goods and Services** (per Section 2 of the RFP) and would be prepared to enter into an agreement that incorporates the City’s Standard 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): | |
| **Requirements – Requested Departure(s) / Alternate(s) / Addition(s)** | |
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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): |
| 1. Provide an overview of the Proponent’s organizational background, including history, mission, vision, corporate structure, and years in business: |
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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. Describe the Proponent’s current capabilities and capacity to perform the Services, including relevant resources, staffing levels, and the ability to manage this project alongside existing workloads: |
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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 and Email: |

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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 and Email: |
| **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 and Email: |

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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. (use the spaces provided and/or attach additional pages, if necessary) | | | | |
| **LINE ITEM** | **NAME** | **TITLE/POSITION** | **EXPERIENCE AND QUALIFICATIONS** | **YEARS WITH YOUR ORGANIZATION** |
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| 1. **SUB-CONTRACTORS -** The following Sub-contractors will be utilized in provision of the Services and will comply with all the terms and conditions of this RFP. No changes, additions or deletions are to be made to these subcontractors without the City’s written approval: | |
| **Sub-Contractor No. 1** | |
| **Legal Name** |  |
| **Trade/Services Performed** |  |
| **Background and Experience** |  |
| **Contact Information** | Name: |
| Phone Number: |
| Email Address: |
| **Sub-Contractor No. 2** | |
| **Legal Name** |  |
| **Trade/Services Performed** |  |
| **Background and Experience** |  |
| **Contact Information** | Name: |
| Phone Number: |
| Email Address: |
| **Sub-Contractor No. 3** | |
| **Legal Name** |  |
| **Trade/Services Performed** |  |
| **Background and Experience** |  |
| **Contact Information** | Name: |
| Phone Number: |
| Email Address: |

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| 1. **HEALTH AND SAFETY** | |
| 1. Confirm the Proponent has a written safety program in place that meets the requirements of WorkSafeBC? | |
| **Yes** | **No** |
| 1. Is your company COR (Certificate of Recognition) certified with respect to WorkSafeBC? | |
| **Yes** | **No** |

1. **TECHNICAL**

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| 1. **APPROACH and METHODOLOGY -** Summarize the key features of your Proposal and the Technical Approach to be used. Provide a brief description the various components required for successful completion of the Work. |
| 1. **Delivery, Set-Up and Execution -** Proposals should address the plan for the delivery, set up and execution of the Work; as well as the disposal, recycle or reuse for the surplus materials. Include any safety and pedestrian control measures. |
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| 1. **Quality Assurance -** Provide the measures the Proponent will use to maintain quality control for the Services being performed. |
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| 1. **Risk Factors -** Describe the risk factors anticipated and how the Proponent intends to mitigate these. |
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| 1. **Safety -** Proponent is to state how they will address safety on the work site. |
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| 1. **COMPLETION DATE** | |
| 1. The Proponent states that they are available and ready to start this Work and confirms the Work shall be completed on or before **October 15, 2025**. This date will be an important consideration in the evaluation. | |
| **Yes** | **No** |
| 1. If Proponent has stated NO, please state date and explanation as to proposed completion date: | |
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1. **FINANCIAL**



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| * 1. **ADDITIONAL LABOUR RATES**   The following are rates for qualified trades personnel that would be used for valuing additional Work and services beyond the scope of this RFP on an “as needed and when requested” basis.  These rates are all inclusive without limitation, including all labour, wages, taxes and assessments, benefits payable in accordance with applicable laws, mobilization and demobilization, supervision, administration, small tool allowance including small tool rental, overhead and profit. | | | |
| **ITEM** | **SCOPE OF WORK** | **Unit of Measure** | **PRICE** (exclude GST) |
|  | Project Manager |  | $ |
|  | Project Coordinator |  | $ |
|  | Site Superintendent |  | $ |
|  | Foreman |  | $ |
|  | Carpenter |  |  |
|  | Grademan |  |  |
|  | Instrument Man |  |  |
|  | Landscaper |  |  |
|  | Machine Operator |  |  |
|  | Traffic Control Person |  |  |
|  | Labourer/Helper |  |  |
|  | Other not listed above (Please provide a separate list) |  |  |

**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) , (or having received directly) 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** (per section 2 of RFP) and should our Proposal be selected, agree to the City’s **Standard Terms and Conditions - Purchase of Goods and Services** (per Section 2 of RFP) and will accept the City’s Contract as defined within this RFP document.
3. **I/We confirm** that, if I/we am/are awarded the Agreement, I/we will at all times be the “Prime Contractor” as provided by the Worker's Compensation Act (British Columbia) with respect to the Services. I/we further confirm that if I/we become aware that another contractor at the place(s) of the Services has been designated as the “Prime Contractor”, I/we will notify the City immediately, and I/we will indemnify and hold the City harmless against any claims, demands, losses, damages, costs, liabilities or expenses suffered by the City in connection with any failure to so notify the City.
4. **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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| **Legal Name of Company** |  |
| **Signature(s) of Authorized Signatory(ies)** | **1.** |
| **2.** |
| **Print Name(s) and Position(s) of Authorized Signatory(ies)** | **1.** |
| **2.** |