

**REQUEST FOR PROPOSALS**

**RFP No. 21-065**

**Audio Visual Preventative Maintenance**

**Proposals will be received on or before 2:00 pm local time on**

**Monday, October 25, 2021**

(Closing Date and Time)

**INSTRUCTIONS FOR PROPOSAL SUBMISSION**

Proposal submissions are 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 in .pdf format and “Send”**

 (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 - Purchase of Goods and Services](https://www.coquitlam.ca/DocumentCenter/View/1446/10-02-2019-Standard-Terms-and-Conditions---Purchase-of-Goods-and-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):
 |
| **Requirements – Requested Departure(s) / Alternate(s) / Addition(s)** |
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| 1. **AWARD -** For eligibility of award, the City requires the succesful Proponent to complete and have the following in place before providing the Goods and Services.
 |
| 1. **WCB** - WorkSafe BC coverage in goodstanding and further, if an “Owner Operator” is involved, personal operator protection (P.O.P.) will be provided:
 | WCB Registration Number: |
| 1. **Prime Contractor** - Acceptance of Prime Contractror Designation for the Services: [Prime Contractor Designation Form](https://www.coquitlam.ca/DocumentCenter/View/1455/Prime-Contractor-Designation-Letter-PDF)
 | Qualified Coordinator:Contact Number: |
| 1. **Insurance** – Provide Insurance coverage as per the [City's Standard Insurance Form](https://www.coquitlam.ca/DocumentCenter/View/1458/Certificate-of-Insurance---Contractor-Form-PDF)
 |  |
| 1. **Vendor Info** - Complete and return the City’s [Vendor Profile and Electronic Funds Transfer Application (PDF)](https://www.coquitlam.ca/DocumentCenter/View/1449/Vendor-Profile-and-Electronic-Funds-Transfer-Application-PDF)
 |  |
| 1. **Business License** - A City of Coquitlam or Tri Cities Intermunicipal [Business License](https://www.coquitlam.ca/331/Business-Services-Licensing)
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| **\*\*ATTACH THE CONSENT OF SURETY AND SUBMIT WITH PROPOSAL SUBMISSION FORM\*\*** |
| **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)**:**
 |
| 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. Proponent is to state relevant experience and qualifications as to the Services requested in the RFP:
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| 1. Proponent is to provide a narrative as to their demonstrated ability to provide the Services requested in the RFP :
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| 1. Proponent is describe their capabilities, resources and capacities, as relevant to the Services requested in the RFP: This includes their capacity to take on this project in regards to other work the Proponent may have ongoing:
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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. **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: |

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| **Sub-Contractor No. 2** |
| **Legal Name** |  |
| **Trade/Services Performed** |  |
| **Background and Experience** |  |
| **Contact Information** | Name: |
| Phone Number: |
| Email Address: |

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| **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**
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| 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. **RESPONSE TIME:**

Indicate Response time in hours for Emergency & non-Emergency Call outs: |
| **Emergency Call Out:** |  |
| **Non-Emergency Call Out:** |  |

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| 1. **EQUIPMENT AND VEHICLES -** Equipment, vehicles and power tools used at the work site must be clearly identified. Please list Proponent’s vehicles and equipment which is owned or leased and would be used in providing the services. Demonstration of the equipment, vehicles and tools offered may be required and must comply in all respects with all applicable standards, requirements and governing regulations of CSA and the BC Motor Vehicle Act.
 |
| **Equipment****(including power tools to be used)** | **Make / Model** | **Year** |
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1. **FINANCIAL**

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| * 1. **PRICE -** Prices proposed are to be all inclusive; therefore, include all labour, material, tools, equipment, transportation, fuel, supervision, disposal fees, permit fees and any other items required for provision of the services (exclude GST):
 |
| **ITEM** | **SCOPE OF WORK** | **Unit of Measure** | **PRICE** (exclude GST) |
|  | PSLC (Arena) 6 month - Major Communication and Security - Sound System Service and Inspection |  | $ |
|  | PSLC (Arena) 6 month - Minor Communication and Security - Sound System Service and Inspection |  | $ |
|  | PSLC (Pool) 6 month - Major Communication and Security - Sound System Service and Inspection |  | $ |
|  | PSLC (Pool) 6 month - Minor Communication and Security - Sound System Service and Inspection |  | $ |
|  | CCAC 6 month - Major Communication and Security - Sound System Service and Inspection |  | $ |
|  | CCAC 6 month - Minor Communication and Security - Sound System Service and Inspection |  | $ |
|  | Glen Pine Pavilion Annual - Major Communication and Security - Sound System Service and Inspection |  | $ |
|  | Dogwood Pavilion Annual - Major Communication and Security - Sound System Service and Inspection |  | $ |
|  | Centennial Hall Annual - Major Communication and Security - Sound System Service and Inspection |  | $ |
|  | Town Centre Park Stadium Grandstand Annual - Major Communication and Security - Sound System Service and Inspection |  | $ |
|  | Hourly Rate |  | $ |
|  | Overtime Rate (after 5:00 PM and Weekends) |  | $ |
|  | Vehicle Charges |  | $ |
|  | Other not Listed: |  | $ |
|  | Other not Listed: |  | **$** |

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| * 1. **Material Markup Rates**
 |
| Mark-up rate on materials | **%** |

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| * 1. **MINIMUM HOURS**

Minimum number of hours billed per mobilization: |
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| * 1. **VALUE ADD**

Provide information on what makes your firm innovative, what is your competitive advantage, and what other services your firm provides that would assist or be of benefit to the City |
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| * 1. **SUSTAINABLE BENEFITS AND SOCIAL RESPONSIBILITY**
1. Describe all initiatives, policies, programs and product choices that illustrate your firm’s efforts towards sustainable practices and environment responsibility in providing the services that would benefit the City
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| 1. What policies does your organization have for hiring apprentices, indigenous peoples, recent immigrants, veterans, young people, women, and people with disabilities:
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| 1. What policies does your organization have for the procurement of goods and services from local small and medium sized business or social enterprises:
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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 - Purchase of Goods and Services](https://www.coquitlam.ca/DocumentCenter/View/1446/10-02-2019-Standard-Terms-and-Conditions---Purchase-of-Goods-and-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.** |

1. **AUTHORIZATION**

We hereby submit our Proposal for the supply and services as specified and undertake to carry out the work in accordance with all Regulations and Codes, applicable to this RFP.

We agree to the rules of participation outlined in the [Instructions to Proponents](http://www.coquitlam.ca/DocumentCenter/View/1457/Instructions-to-Proponents-PDF) and should our Proposal be selected, will accept the City’s Contract: [Standard Terms and Conditions - Purchase of Goods and Services](http://www.coquitlam.ca/DocumentCenter/View/1446/10-02-2019-Standard-Terms-and-Conditions---Purchase-of-Goods-and-Services-PDF)

The signature is an authorized person of the organization and declares the statements made in their submission are true and accurate.

For the purpose of this RFP submission, electronic signatures will be accepted.

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| **Company Name:** |  |
| **Address:** |  |
| **Phone:** |  |
| **GST Registration No.:** |  |
| **Project Contact:**Name and Title of Individual *for communication related to this RFP (*please print**)** |  |
| **Contact Email:** |  |
| **Name & Title of Authorized Signatory:**(please print) |  |
| **Signature:** |  |
| **Date:** |  |