

**REVISED PROPOSAL SUBMISSION FORM – Rev No. 2**

**RFP No. 22-046**

**Strategic Transportation Plan**

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

**Monday, July 18, 2022**

(Revised 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.

|  |  |
| --- | --- |
| **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 [[Appendix A – Consulting and Professional Services Agreement](#Appendix)](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 succesful Proponent to complete and have the following in place before providing the Goods and Services.
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| 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/4196/VendorProfile-and-EFT-Application-2021?bidId=)
 |  |
| 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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| 1. **Contract** – Acceptance of the City’s Terms and Conditions: [Appendix A – Consulting and Professional Services Agreement](#Appendix)
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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)**:**
 |
| 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 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-CONSULTANTS -** The following Sub-Consultants 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-Consultants No. 1** |
| **Legal Name** |  |
| **Trade/Services Performed** |  |
| **Background and Experience** |  |
| **Contact Information** | Name: |
| Phone Number: |
| Email Address: |

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

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| **Sub-Consultants No. 3** |
| **Legal Name** |  |
| **Trade/Services Performed** |  |
| **Background and Experience** |  |
| **Contact Information** | 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.
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| **LINE ITEM** | **NAME** | **TITLE/POSITION** | **EXPERIENCE AND QUALIFICATIONS** | **YEARS WITH YOUR ORGANIZATION** |
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1. **TECHNICAL**

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| 1. **APPROACH and METHODOLOGY**

Provide details as to how your organization would approach this project and engage with the City including methodology, work plan and approach. Include a breakdown of tasks necessary to complete the project. Identify any challenges you anticipate in this project and how you propose to mitigate them. |
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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. **Proposed Work Schedule and Milestone Dates**

The City has included a proposed work schedule along with milestone dates within this RFP. The work schedule will be an important part of the evaluation process. Proponent is to state if they are able to meet these dates or provide an alternate schedule for consideration:The Proponent is able to meet Proposed Work Schedule: |
| [ ]  **Yes** | [ ]  **No** |
| 1. **If NO,** please provide explanation and alternate schedule for consideration:
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1. **FINANCIAL**

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| 1. **SCHEDULE OF EFFORT AND FEES**
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| **ITEM NO.** | **COMPONENT** | **Indicate Assigned Staff, Number of Hours, and Rate/Hour** | **TOTAL FEE****(LUMP SUM)**(exclude GST) |
| **PHASE 1** | **PREPARING** |  |  |  |  |
| 1.1 | Project kick-off meeting |  |  |  | $ |
| 1.2 | Site visit with City staff on City’s transportation system |  |  |  | $ |
| 1.3 | Draft Background Review and Data Gaps Analysis Report |  |  |  | $ |
| 1.4 | Deliverable: Background Review and Data Gaps Analysis Report |  |  |  | $ |
|  | **Sub-total** |  |  |  | **$** |
| **PHASE 2** | **DISCOVERING** |  |  |  |  |
| 2.1 | Summarize best practices and emerging trends |  |  |  | $ |
| 2.2 | Conduct existing conditions inventory and assessment |  |  |  | $ |
| 2.3 | Review City’s financial planning framework |  |  |  | $ |
| 2.4 | Identify issues, opportunities and priorities |  |  |  | $ |
| 2.5 | Additional data collection (if required) |  |  |  | $ |
| 2.6 | Update Travel Demand Model |  |  |  | $ |
| 2.7 | City Transportation Profile |  |  |  | $ |
| 2.8 | Draft Phase 2 Summary Report |  |  |  | $ |
| 2.9 | Deliverable: Phase 2 Summary Report |  |  |  | $ |
|  | **Sub-total** |  |  |  | **$** |
| **PHASE 3** | **VISIONING** |  |  |  |  |
| 3.1 | Develop shared vision, goals, objectives and targets |  |  |  | $ |
| 3.3 | Deliverable: Round 1 Public Engagement |  |  |  | $ |
| 3.4 | Draft Phase 3 Summary Report |  |  |  | $ |
| 3.5 | Deliverable: Phase 3 Summary Report |  |  |  | $ |
|  | **Sub-total** |  |  |  | **$** |
| **PHASE 4** | **PLANNING** |  |  |  |  |
| 4.1 | Identify gaps for each transportation mode |  |  |  | $ |
| 4.2 | Conduct assessment of travel demands and market potential for each mode of transportation considering expected growth scenario, and conduct sensitivity testing for higher than expected growth |  |  |  | $ |
| 4.3 | Develop preferred long-term transportation network plan using Multiple Account Evaluation framework |  |  |  | $ |
| 4.4 | Identify projects, support programs and policies |  |  |  | $ |
| 4.5 | Council Workshop |  |  |  |  |
| 4.6 | Deliverable: Round 2 Public Engagement |  |  |  | $ |
| 4.7 | Draft Phase 4 Summary Report |  |  |  | $ |
| 4.8 | Deliverable: Phase 4 Summary Report |  |  |  | $ |
|  | **Sub-total** |  |  |  | **$** |
| **PHASE 5** | **MOVING FORWARD** |  |  |  |  |
| 5.1 | Develop cost estimates |  |  |  | $ |
| 5.2 | Identify funding sources |  |  |  | $ |
| 5.3 | Develop phasing strategy |  |  |  | $ |
| 5.4 | Develop monitoring plan |  |  |  | $ |
| 5.5 | Draft Phase 5 Summary Report (Implementation Plan) |  |  |  | $ |
| 5.6 | Deliverable: Phase 5 Summary Report (Implementation Plan) |  |  |  | $ |
| 5.8 | Draft Strategic Transportation Plan Document |  |  |  | $ |
| 5.9 | Deliverable: Strategic Transportation Plan Document |  |  |  | $ |
|  | **Total Lump Sum Fee**(exclude GST) |  |  |  | **$** |

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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.** |