SCHEDULE C – FORM OF PROPOSAL

**RFP Project Title: Software, Theatre Ticketing Management**

**RFP Reference No.: 1220-030-2024-046**

**Legal Name of Proponent:**

**Contact Person and Title:**

**Business Address:**

**Business Telephone:**

**Business Fax:**

**Business E-Mail Address:**

TO:

City of Surrey

City Representative: Sunny Kaila, Manager, Procurement Services

E-mail for PDF Files: [purchasing@surrey.ca](mailto:purchasing@surrey.ca)

Dear Sir:

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 Website and BC Bid Website, and having full knowledge of the Site, and having fully informed ourselves as to the intent, difficulties, facilities and local conditions attendant to performing the Services, submit this Proposal in response to the RFP.
2. **I/We confirm** that the following schedules are attached to and form a part of this Proposal:

Schedule C-1 – Statement of Departures;

Schedule C-2 – Proponent’s Experience, Reputation and Resources;

Schedule C-3 – Proponent’s Technical Proposal (Goods and Services);

Schedule C-3-1 – Software, Theatre Ticketing Management Requirements Response;

Schedule C-4 – Proponent's Technical Proposal (Time Schedule);

Schedule C-5 – Proponent’s Financial Proposal; and

Schedule C-5-1 – Financial Worksheet

**3.0 I/We confirm** that this proposal is accurate and true to best of my/our knowledge.

**4.0** **I/We confirm** that, if I/we am/are awarded a contract, 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 consultant 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.

**This Proposal** is submitted this **[day]** day of **[month],** **[year].**

**I/We have the authority to bind the Proponent.**

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Legal Name of Proponent)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Signature of Authorized Signatory)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Print Name and Position of Authorized Signatory) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Signature of Authorized Signatory)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Print Name and Position of Authorized Signatory) |

SCHEDULE C-1 - STATEMENT OF DEPARTURES

**1.** I/We have reviewed the proposed Contract attached to the RFP as Schedule “B”. If requested by the City, I/we would be prepared to enter into that Contract, amended by the following departures (list, if any):

**Section Requested Departure(s) / Alternative(s)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**2.** The City of Surrey requires that the successful Proponent have the following in place **before commencing the Services**:

(a) Workers’ Compensation Board coverage in good standing and further, if an “Owner Operator” is involved, personal operator protection (P.O.P.) will be provided,

Workers' Compensation Registration Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

(b) Prime Contractor qualified coordinator is Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

and Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

(c) Insurance coverage for the amounts required in the proposed agreement as a minimum, naming the City as additional insured and generally in compliance with the City’s sample insurance certificate form available on the City’s Website at [www.surrey.ca](http://www.surrey.ca) search [Consultants Certificate of Insurance](http://www.surrey.ca/files/DCT_Consultants_Form_Certificate_of_Insurance_2014.docx);

(d) If applicable, City of Surrey or Intermunicipal Business License: Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

(e) If the Consultant’s Services are subject to GST, the Consultant’s GST Number is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; and

(f) If the Consultant is a company, the company name indicated above is registered with the Registrar of Companies in the Province of British Columbia, Canada, Incorporation Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

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):

**Section Requested Departure(s) / Alternative(s)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**3.** I/We offer the following alternates to improve the Services described in the RFP (list, if any):

**Section Requested Departure(s) / Alternative(s)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**4.** The Proponent acknowledges that the departures it has requested in Sections 1, 2 and 3 of this Schedule C‑1 will not form part of the Contract unless and until the City agrees to them in writing by initialling or otherwise specifically consenting in writing to be bound by any of them.

SCHEDULE C-2 - PROPONENT’S EXPERIENCE, REPUTATION AND RESOURCES

Proponents should provide information on the following (use the spaces provided and/or attach additional pages, if necessary):

1. Location of primary business, branch locations, background, stability, structure of the Proponent and number of years business has been operational;
2. Proponent’s relevant experience and qualifications in delivering services similar to those required by the RFP;
3. Proponent’s demonstrated ability to provide the Services;
4. Proponent should describe their capability, capacity and plans for developing and supporting the deliverables. The objectives for this RFP are as set out in Schedule A;
5. Using a format similar to the following, provide a summary of similar relevant contracts entered into by the Proponent in which the Proponent performed services comparable to the Services as described in Schedule A, including the jurisdiction of the contract performed, the contract value, the date of performance. The City's preference is to have a minimum of three references.

|  |  |
| --- | --- |
| Name of client’s organization: |  |
| Reference Contact Information: | **Name:** |
| **Phone Number:** |
| **Email Address:** |
| How long has the organization been a client of the Proponent? |  |
| Provide the installation date of the comparative system, and any relevant comments. |  |
| Description of comparative system - Please be specific and detailed. |  |
| Information on any significant obstacles encountered and resolved for this type of Service. |  |

1. Proponent’s financial strength (with evidence such as financial statements, bank references);

**Project Approach – Team Roles**

1. Proponents should provide an outline of the resource roles and estimated effort required for this project. (use the spaces provided and/or attach additional pages, if necessary):

|  |  |  |
| --- | --- | --- |
| **Role** | **Name** | **Forecasted Project Days/Hrs.** |
|  |  |  |
|  |  |  |
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1. Proponents should provide information on the background and experience of all key personnel proposed to undertake the Services (use the spaces provided and/or attach additional pages, if necessary):

**Key Personnel**

Name:

Experience:

Dates:

Project Name:

Responsibility:

Dates:

Project Name:

Responsibility:

**Sub-Contractors**

1. Proponents should provide the following information on the background and experience of all sub-contractors proposed to undertake a portion of the Services (use the spaces provided and/or attach additional pages, if necessary):

|  |  |  |  |
| --- | --- | --- | --- |
| **DESCRIPTION OF SERVICES** | **SUB-CONTRACTORS NAME** | **YEARS OF WORKING WITH PROPONENT** | **TELEPHONE NUMBER AND EMAIL** |
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SCHEDULE C-3 - PROPONENT’S TECHNICAL PROPOSAL (GOODS AND SERVICES)

Proponents should provide the following (use the spaces provided and/or attach additional pages, if necessary):

1. A description of the general approach and methodology that the Proponent would take in performing the Services including specifications and requirements;
2. Provide in detail how Proponent’s proposed Solution meets the Software, Theatre Ticketing Management Requirements. Please complete **Software, Theatre Ticketing Management Requirements Response, Schedule C-3-1.**

**Schedule C-3-1 may be viewed and/or downloaded from the City of Surrey’s Managed File Transfer Service (MFT):**

Hostname: <https://mft.surrey.ca>

Logon ID: surreybid

Password: Welcome

Locate Folder: 1220-030-2024-046

1. Value Added Services: The Proponent should provide a description of value added, innovative ideas and unique services that the Proponent can offer to implement the City’s requirements relevant to the scope of Services described in this RFP. Unless otherwise stated, it is understood that there are no extra costs for these services;
2. Any agreements that the Proponent would expect the City to execute, such as a support agreement, licensing agreement, service level agreement, etc.

SCHEDULE C-4 - PROPONENT’S TECHNICAL PROPOSAL (TIME SCHEDULE)

Proponents should provide an estimated schedule, with major item descriptions and time indicating a commitment to perform the Contract within the time specified (use the spaces provided and/or attach additional pages, if necessary):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Deliverables** | **Service Start Date** | **Work Product Delivery Date** | **City Review Period** | |
| **Start Date** | **Completed Date** |
| Kick Off | - | - | - | - |
| Completion of Discovery Assessment |  |  |  |  |
| Completion of Design and Configuration |  |  |  |  |
| Completion of Solution deployment in DEV and TEST including documentations |  | SAMPLE |  |  |
| Completion of Solution Integration in DEC and TRDT including documentation |  |  |  |  |
| Completion of User Acceptance Testing Sign off in TEST environment (UAT completion) |  |  |  |  |
| Completion of User training (Admin, super user, end users) including documentation |  |  |  |  |
| Go-live complete |  |  |  |  |
| Project close out |  |  |  |  |
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SCHEDULE C-5 - PROPONENT’S FINANCIAL PROPOSAL

Indicate the Proponent’s proposed fee (excluding GST), using the following financial worksheet(s) (as applicable):

**1. Schedule C-5-1: Financial Worksheet (Example)**

**Schedule C-5-1 may be viewed and/or downloaded from the City of Surrey’s Managed File Transfer Service (MFT):**

Hostname: <https://mft.surrey.ca>

Logon ID surreybid

Password: Welcome

Locate Folder 1220-030-2024-046

**2. Payment Schedule:**

As implementation is expected to occur over a lengthy duration, please propose a milestone-based payment schedule for which all implementation fees will be based. The City’s preferred payment schedule is provided below for reference.

|  |  |  |
| --- | --- | --- |
| **#** | **Implementation Milestone** | **Payment percentage** |
| **1** | Completion of Business Requirements, Initial Design and Configuration | 10% |
| **2** | Completion of Solution deployment and integration in DEV and TEST environments including documentations | 20% |
| **3** | Completion of User Acceptance Testing Sign off in TEST environment (UAT completion) | 35% |
| **4** | Completion of User training (Admin, super user, end users) including documentation | 10% |
| **5** | Go-live complete | 15% |
| **6** | Project close out | 10% |
|  | **Total** | **100%** |

**3. Additional Expenses:**

The proposed Contract attached as Schedule "B" to the RFP provides that expenses are to be included within the fee. Please indicate any expenses that would be payable in addition to the proposed fee set out above:

**4. Payment Terms:**

A cash discount of \_\_\_\_\_\_% will be allowed if account is paid within \_\_\_\_\_\_\_ days, or the \_\_\_\_\_\_\_\_\_ day of the month following, or net 30 days, on a best effort basis.