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| Logo 2 | **SCHEDULE C - QUOTATION** |

**RFQ Title: Replacement of Flood Boxes at Various Locations - Contract B**

**RFQ No: 1220-040-2018-080**

**CONTRACTOR**

Legal Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TO:

City Representative: Richard Oppelt, Purchasing Manager

 Purchasing Section

Address: City of Surrey,

Finance Department - Purchasing Section

Reception Counter, 5th Floor West

13450 - 104 Ave, Surrey, BC V3T 1V8 Canada

Email for PDF Files: purchasing@surrey.ca

1.If this Quotation is accepted by the City, a contract will be created as described in:

(a) the Agreement;

(b) the RFQ; and

(c) other terms, if any, that are agreed to by the parties in writing.

2.Capitalized terms used and not defined in this Quotation will have the meanings given to them in the Agreement and RFQ. Except as specifically modified by this Quotation, all terms, conditions, representations, warranties and covenants as set out in the Agreement and RFQ will remain in full force and effect.

3. I/We have reviewed the Sample Agreement (Schedule B). If requested by the City, I/we would be prepared to enter into the Sample Agreement, amended by the following departures (list, if any):

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

4. The City requires that the successful Contractor have the following in place **before providing the Work**:

1. 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 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

1. Prime Contractor qualified coordinator is Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

1. Insurance coverage for the amounts required in the proposed Contract 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 [Standard Certificate of Insurance](http://www.surrey.ca/files/Standard_Certificate_of_Insurance%28New_Web%29.docx);

d) City of Surrey business license;

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

f) If the Contractor 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 Quotation, 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)**

5.The Contractor acknowledges that the departures it has requested in Sections 3 and 4 of this Quotation will not form part of the Contract unless and until the City agrees to them in writing by initialing or otherwise specifically consenting in writing to be bound by any of them.

**Changes and Additions to Specifications and Scope:**

6. In addition to the warranties provided in the Agreement, this Quotation includes the

7. I/We have reviewed the RFQ, Schedule A through to Schedule C. If requested by the City, I/we would be prepared to meet those requirements, amended by the following departures and additions (list, if any):

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

**Fees and Payments**

8. The Contractor offers to supply to the City of Surrey the Goods and Services for the prices plus applicable taxes as follows:

|  |  |  |
| --- | --- | --- |
| F.O.B.Destination | Payment Terms:A cash discount of \_\_\_\_% will be allowed if invoices are paid within \_\_\_ days, or the \_\_\_ day of the month following, or net 30 days, on a best effort basis. | Ship Via: |
| **Item** | **Description** | **Unit** | **Qty** | **Pipe Dia** | **Unit Price** | **Amount** |
|  |  |  |  |  |  |  |
| **1** | **LN-5963-R** | L.S. | 1 | 750mm |  | $ |
| **2** | **LS-5205-L** | L.S. | 1 | 900mm |  | $ |
| **3** | **MN-7945-R** | L.S. | 1 | 900mm |  | $ |
| **4** | **US-14390-R** | L.S. | 1 | 750mm |  | $ |
| **Note: Overheads, General Conditions and Profit are to be included in the above amounts.**CURRENCY: CANADIAN | **Subtotal:** | **$** |
| **GST (5%):** | **$** |
| **TOTAL QUOTATION PRICE:** | **$** |

**List of Optional Alternative Prices:**

9. The following is a list of Alternative Price(s) and forms part of this RFQ, upon the acceptance of any or all of the Alternative Price(s). The Alternative Prices are an addition or a deduction to the Total Quotation Price and do not include GST. DO NOT state a revised Total Quotation Price.

 Description of Optional Alternative Prices Addition Deduction

 OAP-1. $ [ ] $ [ ]

 OAP 2. $ [ ] $ [ ]

**List of Separate Prices**: (Not Applicable)

10. The following is a list of Separate Price(s) and forms part of this RFQ, upon the acceptance of any or all of the Separate Price(s). The Separate Prices are an addition or a deduction to the Total Quotation Price and do not include GST. DO NOT state a revised Total Quotation Price.

**Force Account Labour and Equipment Rates**:

11. Contractors should complete the following tables setting out the all-inclusive hourly rates including overhead and profit for approved extras/credits for all applicable categories of labour (use the spaces provided and/or attach additional pages, if necessary):

**Table 1 – Schedule of Labour Rates:**

|  |  |  |
| --- | --- | --- |
| Labour Category | Straight Time/hr(Plus GST) | Overtime Rate/hr(Plus GST) |
| .1 Superintendent | $ | $ |
| .2 Foreman | $ | $ |
| .3 Journeyman | $ | $ |
| .4 Apprentice | $ | $ |
| .5 Skilled Labourer | $ | $ |
| .6 | $ | $ |
| .7 | $ | $ |
| .8 | $ | $ |

 **Table 2 – Schedule of Equipment Rates:**

|  |  |  |
| --- | --- | --- |
| No. | Equipment Description | Hourly Rate |
|  |  | $ |
|  |  | $ |
|  |  |  |
|  |  |  |
|  |  |  |

**Metro Vancouver’s Non-Road Diesel Engine Emissions Regulation By-law No. 1161, 2012 (the Bylaw)**

12. Contractor should confirm they are in compliance with By-law (if applicable)

❒ Applicable as follows ❒ Not applicable to this project

|  |  |  |  |
| --- | --- | --- | --- |
| No. | Equipment Description | Engine Tier Designation | Engine Registration Number as Issued by Metro Vancouver |
| 1 |  | ❒ Tier 0 or ❒ Tier 1 |  |
| 2 |  | ❒ Tier 0 or ❒ Tier 1 |  |
| 3 |  | ❒ Tier 0 or ❒ Tier 1 |  |
| 4 |  | ❒ Tier 0 or ❒ Tier 1 |  |
| 5 |  | ❒ Tier 0 or ❒ Tier 1 |  |

**Time Schedule:**

13. Contractors 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).

**Milestone Dates:**

* *Notice to Proceed*: September 4, 2018
* Mobilization of the *Work* is targeted for: September 4, 2018
* *Total Performance* of the Work will be achieved by October 31, 2018.

 Contractor may provide a Microsoft Project (or similar) schedule outlining the critical path and must include all major phases of the Work and indicate start and substantial completion dates for each.

Please state the following:

|  |  |
| --- | --- |
| ACTIVITY | SCHEDULE |
|  | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
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**Key Personnel & Sub-Contractors:**

14. Contractor to provide information on the background and experience of all key personnel proposed to provide the Goods and Services (use the spaces provided and/or attach additional pages, if necessary):

**Key Personnel**

|  |  |
| --- | --- |
| Name: |  |
| Experience: |  |
| Dates: |  |
| Project Name: |  |
| Responsibility: |  |

|  |  |
| --- | --- |
| Name: |  |
| Experience: |  |
| Dates: |  |
| Project Name: |  |
| Responsibility: |  |

|  |  |
| --- | --- |
| Name: |  |
| Experience: |  |
| Dates: |  |
| Project Name: |  |
| Responsibility: |  |

15. Contractor to provide the following information on the background and experience of all sub‑Contractors and material suppliers proposed to undertake a portion of the Goods and Services (use the spaces provided and/or attach additional pages, if necessary):

|  |  |  |  |
| --- | --- | --- | --- |
| *Description Of Goods & Services* | *Sub-Contractors & Material Suppliers Names* | *Years Of Working With Contractor* | *Telephone Number And Email* |
|  |  |  |  |
|  |  |  |  |
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**Experience and References:**

16. Contractor’s relevant experience and qualifications in delivering Goods and Services similar to those required by the Agreement (use the spaces provided and/or attach additional pages, if necessary):

17. Contractor’s references (name and telephone number) (use the spaces provided and/or attach additional pages, if necessary). The City's preference is to have a minimum of three references. Previous clients of the Contractor may be contacted at the City’s discretion.

17. I/We the undersigned duly authorized representatives of the Contractor, having received and carefully reviewed the RFQ and the Agreement, submit this Quotation in response to the RFQ.

This Quotation is executed by the Contractor this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_.

CONTRACTOR

I/We have the authority to bind the Contractor.

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