

SCHEDULE B – QUOTATION

RFQ Title: Supply and Delivery, Two (More or Less) Ice Resurfacers

RFQ No: 1220-040-2023-054

**CONTRACTOR**

**Legal Name:**

**Contact Person and Title:**

**Business Address:**

**Business Telephone:**

**Business Fax:**

**Business E-Mail Address:**

**CITY OF SURREY**

City Representative: Sunny Kaila, Manager, Procurement Services

E-mail 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 RFQ. Except as specifically modified by this Quotation, all terms, conditions, representations, warranties and covenants as set out in the RFQ will remain in full force and effect.

3. I/We have reviewed the RFQ Attachment 1 – Agreement – Goods and Services. If requested by the City, I/we would be prepared to enter into that Agreement, amended by the following departures (list, if any):

**Section Requested Departure(s)**

 **Please State Reason for the Departure(s):**

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

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 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 [Standard Certificate of Insurance](http://www.surrey.ca/files/DCT_Standard_Certificate_of_Insurance_2014.docx);

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

(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):

**Requested Departure(s):**

 **Please State Reason for the Departure(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 Agreement 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:**

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

7. I/We have reviewed the RFQ Attachment 1, Schedule A – Specifications of Goods and Scope of Services. 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)**

 **Please State Reason for the Departure(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:

 State make, year, and model: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **F.O.B.**Destination,Freight Prepaid | **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 #** | **Item Name** | **Quantity** | **Unit Price** | **Amount** |
| 1. | Electric Ice Resurfacer  | 2 | $ | $ |
| 2. | Applicable Batteries for Ice ResurfacerProvide both options:A) Lead Acid BatteryB) Lithium Battery | 2 | $$ | $$ |
| 3. | Charging Station(s) | 2 | $ | $ |
| 4. | Other: Include Optional items in addition (if applicable)Eg. Wash water tank transfer, Split shift (disengage 4WD), Side water valve, Tire wash system |  | $ | $ |
| 5. | Environmental Levy:Tires |  | $ | $ |
| 6. | Environmental Levy:Battery(ies) |  | $ | $ |
| 7. | Import Fees/Duties (if applicable) |  | $ | $ |
| 8. | Any other levies, fees or taxes excluding PST & GST (Please specify) |  | $ | $ |
| 9. | Factory Rebates (if any): |  | -$ | -$ |
| CURRENCY: Canadian | Subtotal: | $ |
| GST (5%): | $ |
| PST (7%): | $ |
| **Quotation Price:** | **$** |

**Delivery**

9. Contractors should provide an estimated schedule, with major item descriptions and times indicating a commitment to provide the Goods within the delivery time specified (use the spaces provided and/or attach additional pages, if necessary).

 Delivery time from receipt of an order is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ days.

**Options/Enhancements:**

10. Describe the components and additional costs of the machine that enhance the ability to perform an excellent ice clean in a variety of conditions.

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

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

**Safety:**

11. Describe any safety features included with the machine for the following:

 During ice clean: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 During charging: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Charging Stations and Batteries:**

12. Contractors should specify the charging station and describe its charging cycle. Comment specifically on the compatibility of this system with your product and what modifications may be required as a solution and the specifications of the charging unit.

13. Batteries:

 (a) State the estimated life: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (b) Warranty: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (c) Service technician response time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (d) Maintenance program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (e) Replacement cost: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (f) Maintenance cost: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (g) Are loaner batteries available, provide cost: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(h) Include any safety or programmable features that are available for the battery and charging system:

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

(i) Include number of ice cleans for the batteries and length and frequency of equalizing charges:

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

**Technical Specifications:**

14. Contractors should provide a ‘Specifications Sheet’ of the Ice Resurfacer Unit along with the specifications for width, height for dumping and minimum required ceiling height.

15. Contractors to list the steps and processes for the following:

1. Changing the blade:

1. Adjusting the blade:

1. Changing a tire:

1. Charging and preventive maintenance of the battery

16. Contractors to provide details on how the operator can make adjustments to the Goods to make heavy cuts, light cuts, etc.:

**Maintenance and Warranty:**

17. Contractors should provide the following information:

1. Goods warranty (Please provide details regarding the basic warranty provided with the machine, including term and extension options. Identify the location from which warranty service is available):

1. Operator Training required and provided:

1. Provide a demonstrated history of reliability and durability with your product:

1. Service options available such as callouts, rates, loaner machines:

1. Contractor should provide a projection of annual maintenance service and costs for the first 5 years:

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

18. Contractors should provide a five (5) year projection of the typical cost of maintenance (regular service work, routine maintenance and replacement etc.).

**Experience, Reputation and Resources:**

19. 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):

20. 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.

21. Contractors should identify and provide 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: |  |

22. Contractors should identify and provide 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* |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

23. 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 offered by the Contractor this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 202\_.

**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) |