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| A close-up of a logo  Description automatically generated | **SCHEDULE B****APPLICATION FOR A****STANDING OFFER AGREEMENT** |

**Request For Applications For Standing Offer Agreement Title: Project Management Support Services**

**Request For Standing Offer No.: 1220-060-2024-004**

**APPLICANT**

**Legal Name of Applicant:**

**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

Dear Sir:

1. It is understood and agreed by the Applicant that should this Application be selected by the City, it will result in a Standing Offer only and the Services will be ordered by the City solely on an "as and when required" basis. The aggregate value of Services which may be ordered is conditional upon the needs of the City. No compensation will be accrued, owed or paid to any Applicant in the event that the Services are not ordered. If a Standing Offer is executed by the City, at the sole option of the City, the City may place an Order for Services specified in the Order and the Applicant agrees to provide those Services. The parties agree that the City may not place any Order for Services with the Applicant for the duration of the term of the Standing Offer. The parties agree that the City may purchase identical or similar Services from any other source.

2. If this offer is accepted by the City, such offer and acceptance will create a Standing Offer as described in:

 (a) the Request;

 (b) the scope of Services set out above and in Schedule A of the Request;

 (c) the Standing Offer Agreement as Attachment 1 to this Request;

 (d) this Application;

 (e) an Order (if any); and

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

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

**4. SCHEDULE OF RATES**

 ***(Refer to Schedule A – Scope of Services of this RFA-SOA)***

4.1 Summary of Fees (**Hourly Rates):** Provide hourly rates of key personnel that would be directly involved in each task of the service area components, (these rates will be used should there be approved additions or deletions to the scope of Services). The hourly rates must include all costs, direct and indirect. The hourly rates must include all personnel costs, office expenses, equipment and supplies, training, overhead and any costs associated with the performance of the Services.

 For example:

 (a) Senior Project Manager

 (b) Project Manager

 (c) Assistant/Junior Project Manager

 (d) Project Administration/Coordinator

4.2 Additional Expenses:

 The proposed Standing Offer Agreement attached as Attachment 1 to this RFA-SOA provides that expenses are to be included within the hourly rates shown above, other than the expenses listed in the Agreement as disbursements. Details of disbursements are to be shown in the space below. Please indicate any expenses that would be payable in addition to the proposed hourly rates.

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**5. 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.

**6. APPLICANT’S EXPERIENCE, REPUTATION AND RESOURCES**

6.1 Due to the nature of the proposed scope of Services, the Applicant’s experience should include examples of successful projects which required similar types of services as described in Schedule A – Scope of Services, producing superior quality within time and pricing constraints. The management team, and its key staff members to be assigned to the Services, is expected to be of the highest calibre, possess technical excellence and share the City’s utmost concern with planning and maintaining schedule compliance.

6.2 Describe your management/administrative structure and identify those people who would have oversight of and be responsible for the quality of services delivered to the City.

6.3 Describe if the Applicant has experience working with municipal government sector.

**Key Personnel**

6.4 Applicant should provide a description of the project management consultant team, including team leaders and all personnel the would be used in carrying out the various components of the Services as set out in this RFA-SOA. Applicant to describe approach to team formation and coordination of team members while clearly indicating roles and responsibilities of each personnel.

6.5 Applicants should also provide information on the background and experience of key personnel proposed to undertake the Services as set out in Schedule A of this RFA-SOA (should complete the chart below for all personnel proposed to undertake the Services) and include any proposed sub-consultants/sub-contractors.

 For example:

(a) Senior Project Manager

(b) Project Manager

(c) Assistant/Junior Project Manager

(d) Project Administration/Coordinator

*Note: The Project Manager should be an experienced professional with Project Management Professional (PMP) certification or equivalent, and at least 5 years of directly relevant project management experience, ideally in a local government setting. Formal project management training and certification is considered an asset. Project assignment can be complex, and requires a strong, experienced project manager with sound judgment and the ability to mobilize and lead a team to act with decisiveness, tact, intelligence, and speed. There are a variety of political, stakeholder, and project challenges that will be encountered throughout; the assignment requires strong leadership and is not suitable for a junior project manager.*

6.6 Applicants should include information on individual staff and firm experience with progressive design build methodology with public sector projects.

6.7 Applicants should include information on individual staff and firm experience with construction management at Risk methodology with public sector projects.

6.8 Applicants should provide references (name and telephone number). The City’s preference is to have a minimum of three references and should demonstrate the ability of the Applicant to perform services similar in scope, size, nature and complexity of this RFA-SOA. We hereby consent to the City contacting references for the purposes of evaluating our Application.

**7. APPLICANT’S TECHNICAL RESPONSE (SERVICES)**

 ***(Refer to Schedule A – Scope of Services of this RFA-SOA)***

7.1 Applicant should provide a narrative that illustrates an understanding of the City’s objectives, requirements and intent of the Services.

7.2 Describe your firm’s project management approach and team organization during the performance of Services similar to as set out in this RFA-SOA.

7.3 Describe Applicant’s general capability and capacity to undertake the Services and your ability to meet the requirements of Schedule A of the RFA-SOA.

7.4 Applicants should describe their firm’s approach to achieving competitive pricing and excellent quality.

7.5 Describe the collaborative process/method that would be used by the Key Personnel of the team in the various phases of a Project (e.g., reporting on change order management, cost and schedule issues.)

7.6 Describe how the Applicant is uniquely positioned to support the City’s capital project management team in it developing and deploying the service area activities from concept to fully functioning. Applicant should provide a narrative regarding your professional project management services as they relate to each of the following service area:

 (a) Overall Administration;

 (b) Budgeting and Cost Estimating;

 (c) Schedule Development and Monitoring;

 (d) Sustainability;

 (e) Permits and Approvals;

 (f) Procurement and Contract Administration;

 (g) Construction Inspection and Monitoring;

 (h) Safety;

 (i) Change Order Management;

 (j) Payment Process Management;

 (k) Claims Management; and

 (l) Post Construction

7.7 Provide a narrative describing how the Applicant proposes to structure and integrate its various specialized products and services to achieve this work.

7.8 Applicant should describe your processes and procedures for maintaining confidentiality and security of information.

7.9 Applicant should describe approach and methodology for project documentation control including filing, tracking, project close out and submission to the City.

7.10 **Value-Added Services:** Applicant should provide a description of value-added, innovative ideas and unique services that the Applicant can offer to implement the City’s requirements relevant to the scope of Services described in this RFA-SOA. Unless otherwise stated, it is understood that there are no additional costs for these services.

8. I/We have reviewed the General Terms and Conditions attached to this RFA-SOA as Attachment 1. If requested by the City, I/we would be prepared to enter into an agreement that incorporates the General Terms and Conditions, amended by the following departures (list, if any):

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

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

9. The City requires that the successful Applicant have the following in place **before performing the 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 Standing Offer 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 web site at www.surrey.ca search [Consultants Certificate of Insurance](http://www.surrey.ca/files/Consultants_Form_Certificate_of_Insurance_%28P%29.docx)
2. City of Surrey or Intermunicipal Business License Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. If the Applicant’s Services are subject to GST, the Applicant's GST Number is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;
4. If the Applicant 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 Application, 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)**

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

10. The Applicant acknowledges that the departures it has requested in Sections 8 and 9 of this Application will not form part of an Agreement 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.

11. I/We the undersigned duly authorized representatives of the Applicant, having received and carefully reviewed the Request including without limitation the General Terms and Conditions, submit this Application in response to the Request.

**This Application** is offered by the Applicant this \_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2024.

**APPLICANT**

I/We have the authority to bind the Applicant.

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