

**City of Coquitlam**

**PROPOSAL SUBMISSION FORM**

**RFP No. 24-037**

**Supply and Install – Turnberry Park Playground**

**Proposals will be received as per date and time in** [**Key Dates Section**](#kdates)

**INSTRUCTIONS FOR PROPOSAL SUBMISSION**

Proposal submissions are to be returned in Microsoft Word and any other supporting documents 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.

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| --- | --- |
| **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 [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 would be prepared to enter into in an agreement that incorporates the City’s StandardTerms 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): |
| **Requirements – Requested Departure(s) / Alternate(s) / Addition(s)** |
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| 1. **AWARD -** For eligibility of award, the City requires the successful Proponent to complete and have the following in place before providing the Goods and Services. | |
| 1. **WCB** - WorkSafe BC coverage in goodstanding and further, if an “Owner Operator” is involved, personal operator protection (P.O.P.) will be provided: | WCB Registration Number: |
| 1. **Prime Contractor** - Acceptance of Prime Contractor Designation for the Services: [Prime Contractor Designation Form](https://www.coquitlam.ca/DocumentCenter/View/1455/Prime-Contractor-Designation-Letter-PDF) | Qualified Coordinator:  Contact Number: |
| 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. |  |
| 1. **Business License** - A City of Coquitlam or Tri Cities Intermunicipal [Business License](https://www.coquitlam.ca/602/Business-Licences) |  |
| 1. **Contract** – Acceptance of the City’s Terms and Conditions: [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) |  |
| **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. Proponent is to state relevant experience and qualifications as to the Services requested in the RFP: |
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| 1. Proponent is to state any value added benefits and activities they can provide in delivering the Services. Provide details: |
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| 1. Proponent is to 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. **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. | | | | |
| **LINE ITEM** | **NAME** | **TITLE/POSITION** | **EXPERIENCE AND QUALIFICATIONS** | **YEARS WITH YOUR ORGANIZATION** |
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| 1. **SUB-CONTRACTORS -** The following Sub-contractors 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-Contractor No. 1** | |
| **Legal Name** |  |
| **Trade/Services Performed** |  |
| **Background and Experience** |  |
| **Contact Information** | Name: |
| Phone Number: |
| Email Address: |

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

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| **Sub-Contractor No. 3** | |
| **Legal Name** |  |
| **Trade/Services Performed** |  |
| **Background and Experience** |  |
| **Contact Information** | Name: |
| Phone Number: |
| Email Address: |

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| 1. **HEALTH AND SAFETY** | |
| 1. Proponent to attach current [Work Safe BC Employer Report](https://www.worksafebc.com/en/resources/about-us/shared-data/employer-report?lang=en) | |
| **Yes** | **No** |
| **If no, explain:** | |
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| 1. Confirm the Proponent has a written safety program in place that meets the requirements of WorkSafeBC? | |
| **Yes** | **No** |
| 1. Is your company COR (Certificate of Recognition) certified with respect to WorkSafeBC? | |
| **Yes** | **No** |

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| We are registered with one or more of these Safety Management System/Program: OHSAS 18001, CAN/CSA Z1000, ANSI Z10 or other. Please specify: |
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| 1. **STATE MANUFACTURE(S) YOU REPRESENT:** |
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| 1. **MANUFACTURE AUTHORIZATION**   Provide as an attachment a letter from manufacturer that you are an authorized dealer for them | |
| **Yes** | **No** |

1. **SUSTAINABLE BENEFITS AND SOCIAL RESPONSIBILITY**

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| 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, people with disabilities and any other groups: |
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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 or Indigenous owned businesses: |
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| 1. What policies does your organization have to support reconciliation with indigenous peoples: |
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1. **TECHNICAL**

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| 1. **APPROACH and METHODOLOGY**   Summarize the key features of your Proposal and the Technical Approach to be used. Provide a brief description the various components required for successful completion of the work. |
| 1. **Delivery, Set-Up and Execution -** Proposals should address the plan for the delivery, set up and execution of the work; as well as the disposal, recycle or reuse for the surplus materials. Include any safety and pedestrian control measures. |
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| 1. **Quality Assurance -** Provide the measures the Proponent will use to maintain quality control for the Services being performed. |
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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. **Safety -** Proponent is to state how they will address safety on the work site. |
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| 1. **Repurpose -** Proponent is to provide details as how they would re-purpose the existing play structure. State how it will be repurposed, to whom it will be repurposed and the benefits of repurposing:. |
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| 1. **DESIGN DETAILS**   Proponent is to include with their Proposal, detailed design information, **in an electronic format as a separate attachment**, including but not limited to: | | |
| 1. Pictures, drawings etc. of structures Proposed for each park | | |
| **Yes** | | **No** |
| 1. Details of designs such as pictures, scale drawings | | |
| **Yes** | | **No** |
| 1. Details of overall sizes and the dimensions of the Proposed play structures and how they fit into the footprint of each park | | |
| **Yes** | **No** | |
| 1. Two sets of plan drawings to scale for each park and the respective play structure Proposed. Plan drawings are to show layout within the footprint of each park as per the applicable Appendix Drawings, and to clearly illustrate no-encroachment zones, clearances, and required protective surfacing zone and depth. Physical drawings, models, etc. may be requested from one or more Proponent(s). | | |
| **Yes** | **No** | |

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| 1. **PLAY VALUE**   Proponent is to provide information as to the play value provided with the Proposed play structures in respect to the categories listed in the table below (use the spaces provided and/or attach additional pages, if necessary): | |
| **Category** | **Feature and Information** |
| Variety |  |
| Creativity |  |
| Physical Challenge |  |
| Social and Mental Development |  |
| Sensory Enjoyment |  |
| Fun Factor |  |

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| 1. **MATERIALS/COMPOSITION**   State details as to the materials used for the Proposed play structure(s) for each park: |
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| 1. **LEAD TIMES** 2. The lead time for delivery and installation of the playground structures is a consideration with this purchase. Proponent guarantees to complete installation of the playground structures at the locations stated: |

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| Lead time for playground in days upon issuance of a Purchase Order: | **Days** |

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| 1. Proponents to provide an estimated schedule indicating a commitment to perform the Services, for each playground structure (use the spaces provided and/or attach additional pages, if necessary): | |
| Total amount of days for playground installation: | **Days** |

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| 1. **Completion Date** | |
| 1. The Proponent states that they are available and ready to start this work and confirms the work shall be completed on or before **July 26, 2024**. This date will be an important consideration in the evaluation. | |
| **Yes** | **No** |
| 1. If Proponent has stated NO, please state date and explanation as to proposed completion date: | |
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| 1. **STANDARDS AND SAFETY**   Proponent is to state all applicable safety standards their design for the park complies with: |
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1. **FINANCIAL**

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| * 1. **PRICE -** Prices proposed are to be all inclusive; therefore, include all labour, material, tools, equipment, transportation, fuel, supervision, disposal fees, permit fees and any other items required for provision of the services (exclude GST): | | | |
| **ITEM** | **SCOPE OF WORK** | **Unit of Measure** | **PRICE** (exclude GST) |
|  | Playground Equipment |  | $ |
|  | Installation |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  | Other not Listed |  | $ |
|  | Other not Listed: |  | $ |
|  | **TOTAL** |  | **$** |

**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) (or having received directly), 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 confirm** that, if I/we am/are awarded the Agreement, 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 contractor 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.
4. **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.** |