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|  | SCHEDULE B – FORM OF QUOTATION |

RFQ Title: **Park Washroom Cleaning Services**

RFQ No: 1220-040-2023-018

**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 – Draft 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:

 **SUMMARY OF FEES**

|  |  |  |
| --- | --- | --- |
| **ITEM** | **PARK WASHROOM CLEANING SERVICES PACKAGES** | **TOTAL ANNUAL COST** |
| 1 | PACKAGE A - Modulars |  $  |
| 2 | PACKAGE B - Seasonal Buildings |  $  |
| SUBTOTAL: |  $  |
| GST (5%): |  $  |
| TOTAL PRICE: |  $  |

|  |
| --- |
| **Package A - Modulars** |
| **Park Site** | **DoorID#** | **# Toilets** | **# Urinals** | **# Services(a)** | **Unit Cost(b)** | **Annual Cost= (a) X (b)** |
| Holland Park | D021-008 |   |   | 365 |  $  |  $  |
| Royal Kwantlen | D011-039 |   |   | 365 |  $  |  $  |
| 60D Utility Row | D060-023 |   |   | 52 |  $  |  $  |
| Adams Road | D067-001 |   |   | 52 |  $  |  $  |
| Beaver Creek  | D060-024 |   |   | 52 |  $  |  $  |
| Brookside | D042-033 |   |   | 52 |  $  |  $  |
| Brownsville Bar | D009-001 |   |   | 52 |  $  |  $  |
| Clayton Dog | D068-001 |   |   | 52 |  $  |  $  |
| Colebrook | D082-001 |   |   | 52 |  $  |  $  |
| Dogwood | D121-001 |   |   | 52 |  $  |  $  |
| Dominion | D041-001 |   |   | 52 |  $  |  $  |
| East View Trail  | D050-001 |   |   | 52 |  $  |  $  |
|  |  |  |  |  |  $  |  $  |
| Freedom | D044-001 |   |   | 52 |  $  |  $  |
| Godwin | D035-002 |   |   | 52 |  $  |  $  |
| Guildford Heights | D024-015 |   |   | 52 |  $  |  $  |
| Green Timbers | D023-017 |   |   | 52 |  $  |  $  |
| Invergarry | D003-007 |   |   | 52 |  $  |  $  |
| Kennedy | D030-005 |   |   | 52 |  $  |  $  |
| Maple  | D043-004 |   |   | 52 |  $  |  $  |
| Princess Margaret | D061-001 |   |   | 52 |  $  |  $  |
| Robertson Drive | D030-004 |   |   | 52 |  $  |  $  |
| Serpentine Heights | D035-001 |   |   | 52 |  $  |  $  |
| Strawberry Hill | D050-032 |   |   | 52 |  $  |  $  |
| Sullivan  | D074-009 |   |   | 52 |  $  |  $  |
| Surrey Centre Cemetery | D075-001 |   |   | 52 |  $  |  $  |
| **Subtotal (Package A):** |  **$ -**  |

|  |
| --- |
| **Package B -Seasonal Buildings** |
| **Park Site** | **DoorID#** | **# Toilets** | **# Urinals** | **# Services(a)** | **Unit Cost(b)** | **Annual Cost= (a) X (b)** |
| Bear Creek Park Pavilion | D042-004D042-005 |   |   | 153 |  $  |  $  |
| Bolivar | D001-007 |   |   | 44 |  $  |  $  |
| Bridgeview  | D000-001D000-002 |   |   | 87 |  $  |  $  |
| Erma Stephenson | D014-001D014-002 |   |   | 153 |  $  |  $  |
| Fleetwood | D054-001D054-002 |   |   | 153  |  $  |  $  |
| Forsyth | D012-004 |   |   | 87  |  $  |  $  |
| Green Timbers |  D023-014D023-015 |   |   | 153 |  $  |  $  |
| Holland | D021-001D021-002 |   |   | 47  |  $  |  $  |
| North Surrey | D024-001D024-002 |   |   | 87  |  $  |  $  |
| Robson | D020-001 |   |   | 47  |  $  |  $  |
| Royal Kwantlen | D011-001D011-002 |   |   | 66 |  $  |  $  |
| Tom Binnie | D011-009D011-010 |   |   | 87 |  $  |  $  |
| Tom Binnie Changerooms | D011-006D011-007 |   |   | 22 |  $  |  $  |
| **Subtotal Package B:**  |  **$**  |

**NOTE:**

The Contractor should verify the # of toilets and # of urinals by visiting each site as the numbers per location may impact their final Quotation price.

**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.

**Extra Services**

1. If added-services are requested by the City of Surrey, the Contractor offers to supply the City of Surrey the extra services for the prices plus applicable taxes as follows:

|  |  |  |
| --- | --- | --- |
| **ITEM** | **EXTRA SERVICE** | **UNIT COST PER SERVICE** |
| **1** | **EXTRA CLEAN SERVICE - Modular** |  **$**  |
| **2** | **EXTRA CLEAN SERVICE - Single Room Washroom Building** |  **$**  |
| **3** | **EXTRA CLEAN SERVICE - Washroom Building** |  **$**  |
| **4** | **ON-CALL BIO-HAZARD CLEAN SERVICE** |  **$**  |
| **5** | **ON-SITE WASHROOM ATTENDANT, 4 HOURS** |  **$**  |
| **6** | **ON-SITE WASHROOM ATTENDANT, 8 HOURS** |  **$**  |

**Time Schedule:**

10. Contractors should provide an estimated schedule, for Package A and Package B services, with major item descriptions and times indicating a commitment to provide the Goods and perform the Services within the time specified (use the spaces provided and/or attach additional pages, if necessary).

MILESTONE DATES \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| ACTIVITY | SCHEDULE IN \_\_\_\_\_\_\_\_\_\_\_ |
|  | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
|  |  |  |  |  |  |  |  |  |  |  |
| SAMPLE |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |

**Experience, Reputation and Resources:**

11. **Experience:** 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):

12. **References:** 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.

13. 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: |  |

1. List three (3) of your current customers that are comparable to the City’s requirements insofar as scope and Green Cleaning requirements are concerned. Include the contact names, addresses, phone numbers, and project name for each listed customer reference.

1. Describe your company’s approach in maintaining a flexible workforce to meet the needs of the City.

1. Provide detailed description of monitoring procedures that the Contractor will use to ensure that its cleaning personnel are performing their duties in accordance with the scope of services.

1. Describe your company’s training program. Provide a list of refresher or upgrade training, if available, that your company provided for its existing employees, including examples of subjects covered, materials and frequency.

1. Describe how you will ensure that the City’s performance standards are adhered to and how you would maintain and monitor these performance standards.

1. **Health and Safety**: Utilization of Occupational Health and Safety (OH&S) – Applicant should provide evidence of a current program in place. Provide a sample or example OH & S program with general safety program for all workers.

Do you have specific Health and Safety Training Program for all personnel?

[ ]  Yes [ ]  No

Have your employees received the required Health and Safety training and retraining?

 [ ]  Yes [ ]  No

[ ]  Corporate OH&S policy attached (please tick to confirm).

1. Contractor should describe their sustainability initiatives relating to the environmental impacts. The environmental attributes (green) of their Goods and Services. Anticipated objectives (e.g., carbon neutral by 2015). Information pertaining to their environmental policies, programs and practices. Confirm that the Contractor complies with any applicable objective (use the spaces provided and/or attach additional pages, if necessary):

**Metro Vancouver’s Non-Road Diesel Engine Emissions Regulation By-law:**

1. Contractors 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 | SAMPLE | ❒ Tier 0 or ❒ Tier 1 |  |
| 3 |  | ❒ Tier 0 or ❒ Tier 1 |  |
| 4 |  | ❒ Tier 0 or ❒ Tier 1 |  |
| 5 |  | ❒ Tier 0 or ❒ Tier 1 |  |

1. 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) |