

SCHEDULE B – FORM OF QUOTATION

RFQ Title: Mobile Fuel Supply and Related Services

RFQ No: 1220-040-2024-013

**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)**

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):**

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)**

**Price:**

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

 **Example of pricing schedule structure will be based on the following elements.**

|  |  |
| --- | --- |
| Rack Rate (Explain) |  |
| **Less:** |
| Cents per litre for diesel products | Marked: |
| Unmarked: |
| Equals Base Price Plus | Marked: |
| Unmarked: |
| Bridging (if applicable) | Marked: |
| Unmarked: |
| Equals Delivered and Dispensed Price (excluding taxes) | Marked: |
| Unmarked: |
| Minimum Delivery Requirements Site (Litres) |  |
| Fees (if any) for not meeting any minimum delivery quantity per site. |  |

*[Note: The above prices are all inclusive without limitation, including all overhead, management, loading, labour, wages, benefits, equipment, transportation, fuel, mobilization, travel time, truck charges, disposal, and profit to supply the Goods and Services.]*

**Experience, Reputation and Resources:**

9. **Capability, Capacity, Volume Fluctuations and Rush Orders.** (*Note: Contractor should describe their capabilities and capacities to provide the Goods and perform the Services, including staffing levels, vehicle availability, number of drivers, details of trucks, tank capacities etc. and how you will provide the Goods and Services for all locations.) (use the spaces provided and/or attach additional pages, if necessary*):

10. **Experience and Qualifications.** (*Note: Describe your relevant experience performing services the same/similar to the Services and your qualifications to perform the Services). use the spaces provided and/or attach additional pages, if necessary*):

11. **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.

|  |
| --- |
| **Reference No. 1** |
| **Description of Contract** |  |
| **Size and Scope** |  |
| **Work Performed** |  |
| **Start Date** |  |
| **End Date** |  |
| **Contract Value** |  |
| **Reference Information** | Company: |
| Name: |
| Business Phone Number: |
| Business Email Address:  |

|  |
| --- |
| **Reference No. 2** |
| **Description of Contract** |  |
| **Size and Scope** |  |
| **Work Performed** |  |
| **Start Date** |  |
| **End Date** |  |
| **Contract Value** |  |
| **Reference Information** | Company: |
| Name: |
| Business Phone Number: |
| Business Email Address:  |
| **Reference No. 3** |
| **Description of Contract** |  |
| **Size and Scope** |  |
| **Work Performed** |  |
| **Start Date** |  |
| **End Date** |  |
| **Contract Value** |  |
| **Reference Information** | Company: |
| Name: |
| Business Phone Number: |
| Business Email Address:  |

**Key Personnel & Subcontractors:**

12. **Key Personnel Availability.** 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):

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

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

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

13. **Proposed Subcontractor and Material Suppliers.** 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* |
|  |  |  |  |
|  |  |  |  |
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**RESPONSE TIME**

14.Contractor should **i**ndicate response time(s) in minutes for Emergency & non-Emergency call outs:

|  |  |
| --- | --- |
| **Emergency Call Out:** |  |
| **Non-Emergency Call Out:** |  |

**EQUIPMENT AND OTHER RESOURCES:**

15.**Equipment and other Resources***. (Note: Describe the equipment, technologies, and other resources you will utilize to perform the Services efficiently and effectively and to meet the time requirements set out in Schedule A - Scope of Services of the RFQ.)*

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*(Note: Describe any additional resources you will acquire to perform the Services (including equipment to be installed at the Service locations)*

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*(Note: Describe the facilities and other resources you expect City to provide.)*

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16. **Risk Mitigation** [Note: *Fuel supply continuity is critical for functions such as emergency services. Please describe plan to mitigate risk of supply disruption in situations such as ice storms*.]

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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 offered by the Contractor this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2024.

**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) |

RDO January 26, 2024