

# **FORM OF TENDER**

**FORM OF TENDER**

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**FORM OF TENDER**

We, the undersigned Contractor(s) have carefully examined the attached documents as herein listed and forming part of this tender

**DOCUMENTS INCLUDED IN CONTRACT:**

Special Instructions to Bidders  
Instructions to Bidders  
Form of Tender  
Agreement to Bond  
Form of Contract Agreement  
Schedule of Drawings & Specifications  
Special Provisions – General Supplementary  
Special Provisions – Contract Items Supplementary  
General Conditions of Contract Supplementary  
Construction Drawings (as noted)  
Addenda (if applicable)

and have carefully examined the site and location of the work to be done under this contract. We, the undersigned Contractor(s), understand and accept the said drawings and contract documents, and, for the prices set forth in this Tender, hereby offer to furnish all machinery, labour, tools, apparatus and other means of construction, furnish all materials except as otherwise specified in the Contract, and to complete the work in strict accordance with the drawings and contract documents referred to above, for the total tender price of:

\_\_\_\_\_ Dollars.

(\$ \_\_\_\_\_) *excluding H.S.T.*

We acknowledge that we have received Addendum/Addenda No. \_\_\_\_\_\* to \_\_\_\_\_\* inclusive, and that all changes specified in the Addendum/Addenda have been included in the prices submitted.

**ADDENDA**

We agreed to commence work as specified to proceed continuously to the completion and to complete all the work at the unit prices tendered within **twenty (20) working days**.

**COMMENCEMENT  
& COMPLETION**

We agree that this tender is to continue open to acceptance and irrevocable until the formal contract has been executed by the successful Tendered for the said work, and the bond or bonds as specified have been executed by the approved surety or sureties, and that the Owner may, at any time, within **forty five (45) calendar days** of closing date, accept this tender without notice, whether any tender has been previously accepted or not.

**TENDER IS OPEN  
TO ACCEPTANCE  
& IRREVOCABLE**

*\* to be filled in by Tenderer.*

**OFFERED ON BEHALF OF  
THE CONTRACTOR**

Insert Workplace Safety &  
Insurance Board Account  
No. \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

Contractor's Seal

\_\_\_\_\_  
Witness

**NOTE:**

City of Niagara Falls  
Contract 2019-09  
2019 CRACK SEALING PROGRAM

- a) If the Tendered is a Corporation, the Corporate seal must be affixed under the signature of a duly authorized officer or officers of the Corporation.
- b) If the Tendered is not a Corporation or a Partnership, the Tendered must sign in the presence of a witness who must also sign.
- c) If the Tendered is a Partnership, each member of the Partnership must sign in the presence of a witness who must also sign.

All Bidders are to note that the Special Provisions - Contract Items Supplementary are regularly revised and in some cases modified to a specific project. The City will not be responsible for any Bidder not being aware of the changes from previous tender documents.

**SCHEDULE OF QUANTITIES AND UNIT PRICES**

CONTRACT NO. 2019-09  
2019 CRACK SEALING PROGRAM

ITEM NO.	SPEC NO.	DESCRIPTION	ESTIMATED QUANTITY	UNIT	UNIT PRICE	TOTAL PRICE
<b>SECTION 'A' - GENERAL</b>						
A1	A1	Bonding	1	L.S.	\$ _____	\$ _____

TOTAL SECTION 'A' - GENERAL \$ \_\_\_\_\_

<b>SECTION 'B' - CRACK SEALING</b>						
B39	SPCS	<b>Crack Sealing</b> <i>Includes all necessary labour, materials, traffic control and equipment required to complete the crack sealing of various streets (Local, Collector &amp; Arterial), parking lots and other City facilities.</i> a) Rout & Seal	25,000	m	\$ _____	\$ _____

TOTAL SECTION 'B' - CRACK SEALING \$ \_\_\_\_\_

**TENDER SUMMARY**

SECTION 'A' - GENERAL	\$
SECTION 'B' - CRACK SEALING	\$
<b>TOTAL TENDER:</b>	\$

**STATEMENT 'A'**

**TENDERER'S EXPERIENCE IN SIMILAR WORK**

***UNLESS THIS LIST IS PROPERLY COMPLETED,  
THE TENDER MAY BE DISQUALIFIED***

Year Completed	Description of Work	For Whom Work Performed	Value (\$)



**STATEMENT 'B'**

**HARMONIZED SALES TAX**

The Contractor shall **not** include any amount in his tender price for the Harmonized Sales Tax (H.S.T.). Any amount to be levied with respect to the H.S.T. will be included as a separate item on the payment certificate. The appropriate H.S.T. levy will be paid to the Contractor in addition to the amount approved by the Contract Administrator for work performed under the contract and will, therefore, not affect the amount of the contract. The Contractor will be required to make the appropriate remittance to Revenue Canada in accordance with the legislation.

- i) Total Tender Price \$ \_\_\_\_\_
- ii) Estimated Cost of the Harmonized Sales Tax (H.S.T.) \$ \_\_\_\_\_
- iii) Total Contract Amount [(i) + (ii)] \$ \_\_\_\_\_
- iv) H.S.T. Registration Number: \_\_\_\_\_

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Contractor's Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Contractor's Seal

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Witness

**STATEMENT 'C'**

**CONFIRMATION FORM**  
**ACCESSIBILITY REGULATIONS FOR CONTRACTED SERVICES**

If the nature of your business with the City of Niagara Falls (the 'City') requires that any of your employees, sub-contractors or trades interact with the public on behalf of the Owner, it is necessary that the Owner ensure those providing service on our behalf have received 'Customer Service Training' in order that we retain our compliance with the requirements of the Accessibility for Ontarians with Disabilities Act 2005.

Please sign below to ensure you are the person able to bind your company. Companies, whose employee's role may require them to interact with the public on behalf of the Owner, shall receive the CUSTOMER SERVICE STANDARD TRAINING of the *ACCESSIBILITY FOR ONTARIANS WITH DISABILITIES ACT 2005*.

If you have any questions, please contact:

**Jason MacLean, M.Ed., B.A., CSEP-CEP**  
Manager of Training, Development & Client Services  
City of Niagara Falls  
Human Resources Department  
Phone: 905-356-7521 ext. 4294

The successful Contractor will be required to sign and submit this sheet at the Preconstruction Review Meeting (see SPGS 30).

Dated this day of, \_\_\_\_\_, 2019.

\_\_\_\_\_  
Contracting Company

\_\_\_\_\_  
Signature of Authorized Person Signing for Company

\_\_\_\_\_  
Position

**STATEMENT 'D'**

**LIST OF SUB-CONTRACTORS**

The bidders shall list hereunder the names of all sub-contractors intended to be used in the execution of this work subject to the approval of the Contract Administrator.

All work not performed directly by the Contractor's forces shall be included in this list and any changes must be approved by the Contract Administrator.

Sub-Trade	Sub-Contractor Company Name	Sub-Contractor Company Address