

# THE CORPORATION OF THE TOWNSHIP OF NORTH STORMONT

**15 Union Street Berwick, Ontario K0C 1G0**

**REQUEST FOR QUOTATION   
RFQ- RECREATION-AUDIO/VIDEO**

**03-2022**

**Supply and delivery of audio/video equipment, for the new construction at the Moose Creek Recreation facility. A full list of audio/video items required is provided on page three (3) of this RFQ.**

**CLOSING TIME - 12:00 noon, THURSDAY, NOVEMBER 10st, 2022**

RFQ Documents are available on the Township [www.northstormont.ca](http://www.northstormont.ca) and can be picked up at the municipal office.

Proposals will be accepted in person, by courier, regular mail, or email.

Respondents to this RFQ shall submit two (2) copies of their completed proposal prior to 12 noon on Thursday, November 10st, 2022, clearly marked and addressed to:

Township of North Stormont Attention: Craig Calder, CAO/Clerk

PO Box 99, 15 Union Street, Berwick, ON K0C 1G0 [ccalder@northstormont.ca](mailto:ccalder@northstormont.ca)

RFQ-Recreation-03-2022

**Supply & Delivery of audio/video for the new construction at the Moose Creek Recreation Facility a full itemized list is available on page three (3) of this RFQ.**

# GENERAL

The Township of North Stormont is inviting quotations for the supply and delivery of furniture for the Moose Creek Recreation facility.

# GENERAL CONDITIONS AND SPECIFICATIONS

Request for Quotations will be accepted in person, by courier, regular mail, or email.

RFQs shall be open for acceptance for a period of 45 days after the closing date. After this time, the RFQ may only be accepted with the consent of the successful Respondent.

The successful Respondent must enter a written contract with the Township of North Stormont.

All proposal procedures will comply with the Township of North Stormont’s

Procurement Policy as established in By-law No. 38-2017. Lowest or any proposal not necessarily accepted.

# SCOPE OF WORK / SERVICES

It is anticipated that the following itemized list of furnishing is required for the completed Moose Creek Recreation complex:

Graphical user interface, text

Description automatically generated

# Text Description automatically generated with medium confidence

# Text Description automatically generated

# CONTACT PERSON / PROJECT COORDINATOR for the Township of North Stormont

All clarifications for this RFQ or any request for additional information shall be directed to:

Mr. Craig Calder

CAO/Clerk

Township of North Stormont

Box 99, 15 Union Street

Berwick, ON K0C 1G0

P. 613-984-2821 (223)

ccalder@northstormont.ca

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# SUBMISSION REQUIREMENTS

# Key Personnel / Team / Company

Describe the experience and duration of the company’s experience in the manufacturing/production, delivery of furniture to client(s).

# INSURANCE REQUIREMENTS

The Respondent shall, at their own expense and prior to the commencement of acceptance, manufacture and delivery of furnishings provide the Township with evidence of:

**Commercial General Liability Insurance**

Commercial General Liability insurance issued on an occurrence basis for an amount of not less than $2,000,000 per occurrence / $2,000,000 annual aggregate for any negligent acts or omissions with regards to work relating to this Agreement / contract. Such insurance shall include but is not limited to bodily injury and property damage including loss of use; personal injury; contractual liability; premises, property & operations; non-owned automobile; broad form property damage; broad form completed operations; owners & contractors protective; occurrence property damage; products; employees as Additional Insured(s); contingent employers’ liability; tenant legal liability; cross liability and severability of interest clause.

Such insurance shall add the Corporation of the Township of North Stormont as Additional Insured subject to a waiver of subrogation. This insurance shall be non-contributing with and apply as primary and not as excess of any insurance available to the Township.

Automobile Insurance

Automobile insurance with respect to owned or leased vehicles used directly or indirectly in the performance of the services covering Third Party liability for bodily injury, death, and damage to property with a limit of not less than

$5,000,000 inclusive for every loss.

Environmental Liability (if applicable)

Environmental liability insurance for an amount of not less than $1,000,000 limit per occurrence / aggregate. Such coverage shall cover Third Party liability – Bodily Injury and Property Damage including on-site and off-site clean-up cost. If coverage is written on a claims-made basis, the policy shall contain an extended reporting period of not less than 24 months or shall be maintained for a period of two years after the conclusion of services provided under this Agreement / contract.

The Respondent shall be responsible for the physical damage to their property used in providing the service as outlined in this Agreement / contract. Failure to effect coverage on their property/assets shall not impose any liability on the Township.

The Respondent is responsible for all deductibles and Township shall bear no cost towards deductibles.

The Township of North Stormont reserves the right to request additional insurance to address potential exposures.

The policies shown above shall not be cancelled unless the Insurer notifies the Township in writing at least 30 days prior to the effective date of the cancellation. The insurance policy will be in a form and with a company which are, in all respects, acceptable to the Township.

Indemnification

The successful Respondent shall defend, indemnify, and save harmless the Corporation of the Township of North Stormont, elected officials, officers, and employees from and against all claims of any nature, actions, causes of action, losses, expenses, fines, costs including legal costs, interest or damages

of every nature and kind whatsoever, including but not limited to bodily injury, sickness, disease or death or to damage to or destruction of tangible property including loss of revenue or incurred expense resulting from disruption of service arising out of allegedly attributable to the negligence, acts, errors, omissions, misfeasance, nonfeasance, fraud or willful misconduct of the Respondent, its directors, officers, employees, agents, contractors and subcontractors, or other parties which the Respondent is responsible. This indemnity shall be in addition to and not in lieu of any insurance to be provided to the Township in accordance with the Agreement / contract and shall survive this Agreement contract.

Workers Compensation Coverage

The successful Respondent shall comply with the regulations of the Workplace Safety and Insurance Board (WSIB) of Ontario. The Respondent shall provide proof of WSIB coverage to the Township prior to the commencement of work.

# ACCESSIBILITY

The Respondent shall comply with the provisions of the *Accessibility for Ontarians with Disabilities Act*, 2005, S.O. 2005, c. 11 and its Regulations regarding the provision of the goods and / or services. The Respondent, when applicable, shall ensure that its employees, agents, volunteers, and representatives receive training regarding the provision of goods and services to persons with disabilities. The Respondent acknowledges that the Corporation of the Township of North Stormont, in deciding to purchase goods or services through its procurement process, is required to consider the accessibility for persons with disabilities, when applicable and practical to do so.

# HEALTH AND SAFETY

Contractors and Subcontractors

This classification is external to the Township of North Stormont and includes all those individuals and organizations who work on contract or tendered work.

1. The health and safety responsibilities attached to this classification include the following:
   1. Demonstrate the existence and establishment of a health and safety program with standards and objectives consistent with applicable legislation of the *Occupational Health and Safety Act*.
   2. Contractors and subcontractors will include health and safety provisions in their management system to maintain a high level of health and safety.
   3. Ensure the workers in their employ are trained and knowledgeable about work hazards and safe work practices as it applies to personal protective equipment.
   4. Ensure the workers have the skills and training required for the proper procedures in reporting accidents, incidents and near misses to their supervisor.
   5. Ensure the workers are knowledgeable and understand the Health and Safety Policy and Procedures of the Township of North Stormont.
   6. Provide training to workers as it applies under the *Occupational Health and Safety Act* to contract and tendered work and demonstrate proof that such training exists.

# CONCLUSION

Respondents to this RFQ shall submit two (2) copies of their completed proposal **prior to 12 noon on Thursday, November 10st, 2022**, clearly marked as to its content and addressed to:

Township of North Stormont

Attention: Craig Calder, CAO/Clerk

PO Box 99, 15 Union Street, Berwick, ON K0C 1G0 ccalder@northstormont.ca

RFQ-Recreation-03-2022 – Moose Creek Recreation Audio/Video

Request for Quotations received after the closing date and / or time will not be accepted.

The Corporation of the Township of North Stormont reserves the right to accept or reject any or all Request for Quotations (RFQs).

**CONTRACTOR INFORMATION FORM**

**THE CORPORATION OF THE TOWNSHIP OF NORTH STORMONT RFQ-RECREATION**

**03-2022**

**NORTH STORMONT MOOSE CREK RECREATION FACILITY FURNITURE REQUIREMENTS:**

This Quotation is submitted by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contactor’s Business Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Authorized Person(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position(s) of the Person(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The following Addenda have been received and considered and quoted prices reflect the requirements set forth therein.

Addendum # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ through Addendum # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_