FORM A: PROPOSAL

(See B8)

1. Contract Title PROFESSIONAL ENGINEERING CONSULTING SERVICES FOR THE NEWPCC POWER SUPPLY UPGRADE

				_
2.	Proponent			
		Name of Proponent (Legal N	ame)	
		Usual Business Name of Bid	der as it appears on Invoice (if different	from above)
		Street		
		City	Province	Postal Code
		Email Address of Bidder		
		Facsimile Number		
	(Mailing address if different)	Street or P.O. Box		
		City	Province	Postal Code
		GST Registration Number (if	applicable)	
	(Choose one)	The Proponent is:		
		a sole proprietor		
		a partnership		
		a corporation		
		carrying on business u	nder the above name.	
3.	Contact Person		authorizes the following contac nt for purposes of the Proposal.	
		Contact Person	Title	
		Telephone Number	Facsimile Number	
4.	Definitions		used in the Contract shall hat General Conditions and D3.	ave the meanings
5.	Offer		offers to perform the Services in es, in Canadian funds, set out in	

6.	Execution of Contract	The Proponent agrees to execute and return the Contract no later than seven (7) Calendar Days after receipt of the Contract, in the manner specified in C4.1.							
7.	Commencement of the Services	The Proponent agrees that no Services shall commence until it is in receipt of a notice of award from the City authorizing the commencement of the Services.							
8.	Contract	The Proponent agrees that the Request for Proposal in its entirety shall be deemed to be incorporated in and to form a part of this offer notwithstanding that not all parts thereof are necessarily attached to or accompany this Proposal.							
9.	Addenda	The Proponent certifies that the following Addenda have been received and agrees that they shall be deemed to form a part of the Contract:							
		No Dated							
10.	Time	This offer shall be open for acceptance, binding and irrevocable for a period of one hundred and twenty (120) Calendar Days following the Submission Deadline.							
11.	Signatures	The Proponent or the Proponent's authorized official or officials have signed this							
		, 20							
		Signature of Proponent or Proponent's Authorized Official or Officials							
		(Print here name and official capacity of individual whose signature appears above)							

(Print here name and official capacity of individual whose signature appears above)

Phase	Scope of Services	Estimated Hours	Fee Estimate A	Allowable Disbursements B	Total Fee A+E	3	Average Hourly Rate
	Fixed Fees		•			•	•
Project Management	Project management plan						
	Project management plan updates						
	Coordination with MB Hydro						
	Conceptual design						
	Preliminary design						
	Procurement services						
	Project management activities						
	Others (identify)						
Subtotals Project Management							
Conceptual Design	Conceptual design development						
	Power transformation and distribution system						
	Digester switchgears						
	Secondary clarifier switchgears						
	Conceptual level project implementation plan						
	Risk and opportunity assessment						
	Others (Identify)						
Subtotals Conceptual Design							
Preliminary Design	Preliminary Design Development		•				
	Power transformation and distribution system						
	Digester switchgears						
	Secondary clarifier switchgears						
	Preliminary HAZOP assessment						
	Preliminary CHAIR assessment						
	Project implementation plan update						
	Design build technical performance elements						
	Class 3 cost estimate						
	Critical path schedule						
	Preliminary design cost development documents						
	Risk and opportunity assessment						
	Others (Identify)						
Subtotals Preliminary Design							
Procurement Services	Design build procurement						
	RFQ period						
	RFP period		1				
	Arch flash specialist procurement		+				
	Others (Identify)						
Subtotals Procurement Services	1 2 2 2 3 3 4 3 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5						

Phase	Scope of Services	Estimated Hours	Fee Estimate A	Allowable Disbursements B	Total Fee A+B	Average Hourly Rate
	Time Based Fee	s				
Project Management	Project management plan					
	Project management plan updates					
	Project management activities					
	Others (identify)					
Subtotals Project Management						
Contract Administration Services	Non resident engineering services					
	Resident engineering services					
	Third party testing					
	Commissioning					
	Others (Identify)					
Subtotals Contract Administration Service	es					
Post Construction Services	Warranty services					
	One year operational advice services (on call basis)					
	Others (Identify)					
Subtotals Post Construction Services	•					
Total Fixed Fee						
Total Time Based Fees						
	Total Fees					

FORM B: FEES HOURLY RATE - TIME BASED FEE PERIOD

		Name of Personnel		ŀ	lourly rate	es	
Item #	Description	(Where applicable)	2015	2016	2017	2018	2019
A	Project direction / project management						
A.1	Principal in charge						
A.2	Owner's Advocate project manager						
A.3	Procurement specialist						
A.4	Resident engineer						
A.5	Non-resident engineer						
A.6	Clerks						
A.7	Others (identify)						
A.7.1	#1						
A.7.2	#2						
A.7.3	#3						
В	Electrical						
B.1	Discipline Leader						
B.2	Senior engineers						
B.2.1	#1						
B.2.2	#2						
B.2.3	#3						
B.3	Intermediate engineers						
B.3.1	#1						
B.3.2	#1						
B.3.3	#3						
B.4	Junior engineers						
B.5	Senior technicians / technologists						
B.6	Intermediate technicians / technologists						
B.7	Junior technicians / technologists						
B.8							
	Experts/advisers						
B.8.1 B.8.2	#1 #2						
B.8.3	#3						
C	Civil works						
C.1	Discipline Leader						
C.2	Senior engineers						
C.2.1	#1						
C.2.2	#2						
C.2.3	#3						
C.3	Intermediate engineers						
C.3.1	#1						
C.3.2	#2						
C.3.3	#3						
C.4	Junior engineers						
C.5	Senior technicians / technologists						
C.6	Intermediate technicians / technologists						
C.7	Junior technicians / technologists						
C.8	Experts/advisers						
C.8.1	#1						
C.8.2	#2						
C.8.3	#3						

FORM B: FEES HOURLY RATE - TIME BASED FEE PERIOD

				ŀ	lourly rate	es	
Item #	Description	Name of Personnel (Where applicable)	2015	2016	2017	2018	2019
D	Instrumentation & Control	(Where applicable)	2013	2010	2017	2010	2013
D.1	Discipline Leader						
D.2	Senior engineers						
D.2.1	#1						
D.2.2	#2						
D.2.3	#3						
D.3	Intermediate engineers						
D.3.1	#1						
D.3.2	#2						
D.3.3	#3						
D.4	Junior engineers						
D.5	Senior technicians / technologists						
D.6	Intermediate technicians / technologists						
D.7	Junior technicians / technologists						
D.8	Experts/advisers						
D.8.1	#1						
D.8.2	#2						
D.8.3	#3						
E	Building services						
E.1	Discipline Leader						
E.2	Senior engineers						
E.2.1	Architect						
E.2.2	Structural engineer						
	Building mechanical engineer (HVAC,						
E.2.3	plumbing, fire protection)						
	Electrical, instrumentation, control,						
E.2.4	automation engineer						
E.2.5	Other engineers						
E.3	Intermediate engineers						
E.3.1	#1						
E.3.2	#2						
E.3.3	#3 etc.						
E.4	Junior engineers						
E.5	Senior technicians / technologists						
E.6	Intermediate technicians / technologists						
E.7	Junior technicians / technologists						
E.8	Experts/advisers						
E.8.1	#1						
E.8.2	#2						
E.8.3	#3						
	Additional on-site staff (e.g. site						
	engineers, quantity surveyors,						
F	commissioning engineers)						
F.1	#1						
F.2	#2						
F.3	#3						
F.4	#4						
F.5	#5						
G	Others (identify)						
G.1	#1						
G.2	#2						
G.3	#3						
G.4	#4						
G.5	#5						
			ı			l	

FORM B: FEES ALLOWABLE DISBURSEMENT - TIME BASED FEE PERIOD

		20)15	2	016	20)17	20)18	2	019
Item No.	Description	Total	Average Monthly Fee								
		Total	1 66								

The City of Winnipeg RFP No. 40-2014 Template Version: SrC120131129 - C RFP

FORM C: EXPERIENCE OF PROPONENT AND SUBCONSULTANT

Proponent	Name:			Project #:
_□				
Subconsultant				
Project Name:				
Start Date: Month/Year			Completion Date:	
Project Description:			•	
Include project owner, proje				sformation system and
other relevant information of	demonstrating simil	larity to project cri	iteria in B10.3.	
Consultant Comisso Dec				
Consultant Services Desc		of the consultant	convices details of the r	olo of the consultant/
Provide clear and compreh Subconsultant, and assign			services, details or the r	ole of the consultant
Gubconsultant, and assigni	noni oatoomos and	a dome vernerits.		
Original and Ethan Cont				
Original and Final Cost	the consultant cor	vices essianment	value of scope perform	ad and the construction
Provide this information for Identify the amount of scop				ed and the construction.
Tuerning the amount of scop	c changes and the	reasons for each	i or uloill.	
Design and Construction	Schedules			
Include anticipated project				gn and construction
separately and provide the	reasons for any dis	screpancies betw	een the two (if any).	
Reference Name		Title/Function	Email	Phone
Reference Name			Linaii	Number
#1				
#2				
Proponent Representative	Signature:		Subconsultant Rep	resentative Signature:
			•	
Date:				

FORM D: EXPERIENCE OF KEY PERSONNEL

Proponent/Partner/S	Subcon	sultant:				
Key personnel name						
Current employer						
Current role				Curren	t location	
Availability				Reside	ncy/Citizenship	
				status		
Period of commitmen	t			Commi	tment (Full or Part	
				Time)		
Proposed Role and	Respoi	nsibilities:				
Proposed role						
Proposed base location Country)	on (City	/,				
Proposed responsibil	ities					
Capabilities, Skills a	and oth	er information	on:			
Core capabilities and	or Tecl	hnical <i>Indic</i>	ate how skills, e	experienc	ce and capabilities m	atch the scope of
skills		servi	ces			
Education backgroun	d and					
degrees						
Professional recognit	ion and	titles				
Years of experience i	n simila	ar role				
as proposed						
Years of experience v	with cur	rent				
employer						
			Project	#1		
Role on the project						
Drainet name and						
Project name and						
Owner						
Project Award and						
completion dates						
Project description						
Responsibilities &						
achievements						
Reference		Name	Title/Fund	tion	Email	Phone Number

#1		
#2		

Repeat the above for each reference project on additional sheets

	Repeat	inc above	ioi eacii reference	project on	additional sheet	.3	
Proponent/Partner/S	ubconsult	ant:					
			Projec	t # 2			
Role							
Project name and owner							
Project Award and completion dates							
Project description							
Responsibilities &							
achievements							
Reference	Nam	ne	Title/Funct	ion	Email	Phon	e Number
#1							
#2							
I certify that I am availatime basis for the durathe proposed role.			Na 	me:		Signatu	re:
I certify that [Insert Name] is availathe above identified ba			Name:		Title:	Sign	nature: