Template Version: SrC120161104 - Consulting Services RFP

FORM A: PROPOSAL

(See B7)

1.	Contract Title	FAIRNESS ADVISOR FO PLANT UPGRADE PROJ	OR THE NORTH END SEWAGE T SECT	TREATMENT
2.	Proponent			
		Name of Proponent (Legal Nam	e)	
		Usual Business Name of Propor	nent as it appears on Invoice (if different f	rom above)
		Street		
		City	Province	Postal Code
		Email Address of Proponent		
		Facsimile Number		
	(Mailing address if different)	Street or P.O. Box		
		City	Province	Postal Code
		GST Registration Number (if ap	plicable) Province	Postal Code
		The Proponent is:		
	(Choose one)	a sole proprietor		
		a partnership		
		a corporation		
		carrying on business und	er the above name.	
3.	Contact Person		authorizes the following conta or purposes of the Proposal.	act person to
		Contact Person	Title	
		Telephone Number	Facsimile Number	
1.	Definitions	All capitalized terms us	ed in the Contract shall have	the meanings

ascribed to them in the General Conditions and D3.

5.	Offer	The Proponent hereby offers to perform the Services in accordance with the Contract for the Fees, in Canadian funds, set out on Form B: Fees, appended hereto.
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 Work	The Proponent agrees that no Services shall commence until he/she is in receipt of a notice of award from the Award Authority authorizing the commencement of the Services.
8.	Contract	The Proponent agrees that the Request for Proposal in its entirety shal 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)

FORM B: FEES

(See B8)

Line	Work Item	Quantity of	Fee Amount	Allowable Disbursements	Total Fee
Item		Hours*	Α	В	A + B
Gen	eral Process				
1	Participation at the Fairness Advisor kick-off meeting	(Approximate= 2)			
2	General Communication with the City	(Approximate = 20)			
3	Any other duties necessarily incidental to the Services	(Approximate = 40)			
RFQ	Process				
4	Review of the RFQ and associated RFQ process documents	(Approximate = 20)			
5	Prepare and provide RFQ evaluation fairness training	(Approximate = 5)			
6	Review of RFQ site tour and proponent's meeting scripts	(Approximate = 5)			
7	Advisory services during the RFQ open period	(Approximate = 30)			
8	Attendance and advisory services during the RFQ evaluation consensus meetings	(Approximate =			
RFP	Process	,			
9	Review of the RFP and associated RFP process documents	(Approximate = 30)			
10	Prepare and provide RFP evaluation fairness training	(Approximate = 5)			
11	Review of RFP site tour and proponent's meeting scripts	(Approximate = 5)			
12	Advisory services during the RFP open period (including attendance at CCMs)	(Approximate = 200)			
13	Attendance and advisory services during the RFP evaluation consensus meetings	(Approximate = 100)			
Final	Reporting	,			
14	Prepare and submit final report	(Approximate = 5)			
Total	Fees and Allowable Disbursements	· · · · · ·			\$

^{*}If deviating from the estimated minimum hours, refer to B8.3(a) for additional requirements.

FORM X: HOURLY RATES

Role	Name of Kay Paragnas	Hourly Rates(\$)				
Role	Name of Key Personnel	2017	2018	2019	2020	
Fairness Advisor						
Fairness Advisor (back up)						
Principal - in - Charge						
QA/QC						
Project Manager						

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FORM C: EXPERIENCE OF PROPONENT AND SUBCONSULTANTS (See B9)

Proponent		Name:							
Subc	consultant								
Project #	Project N	lame	Duration of Project (year to year)	Project Delivery Method (DB, P3, etc.)	Proponent Business Entity (Sole Proprietor, Corporation, Partnership, etc.)	Owner Type (Municipal, Private, etc.)	Did this project have a RFQ? (Y/N)	Did this project have a RFP? (Y/N)	Did this project have CCMs? (Y/N)
1					Í				
3									
4									
5 Project #	#1 Reference: Refere	ences should ha	ve worked o	directly on t	he projects des	cribed such a	the Proje	ct Manage	er or
	Administrator.	erices siloulu ria	ve worked t	inecity of t	rie projects des	cribea, sucir a	s tile i roje	ct Mariage	51 01
Name:									
Title/Fun	ction:								
Email:									
Phone N	umber:								
Project #	2 Reference:								
Name:									
Title/Fun	ction:								
Email:									
Phone N	umber:								
Project #	#3 Reference:								
Name:									
Title/Fun	ction:								
Email:									
Phone N	Phone Number:								
Project #4 Reference:									
Name:									
Title/Fun	Title/Function:								
Email:									
Phone Number:									
Project #	5 Reference:								
Name:									
Title/Fun	Title/Function:								
Email:									
Phone N	Phone Number:								

FORM D: EXPERIENCE OF KEY PERSONNEL (See B10)

LEAD FAIRNESS ADVISOR				
Key personnel name				
Current employer				
Proposed base location (City, Country)				
Educational background, degrees, professional recognitions				
Years of experience as a Fairness Advisor or fairness monitor				
	ead Fairness Advisor Reference Project #1			
Project name and owner				
Project delivery method (DB, P3, DBO, DBOM, etc.)				
Project description				
Project award and completion dates				
Role and responsibilities on the project	Especially focus on roles during evaluation training, RFQ, RFP, CCMs, and the provision of a final report.			
Reference #1: Name: Title/Function: Email: Phone Number:	References should have worked directly on the project described, such as the Project Manager or Contract Administrator.			
Reference #2: Name: Title/Function: Email: Phone Number:				
Le	ead Fairness Advisor Reference Project #2			
Project name and owner				
Project delivery method (DB, P3, DBO, DBOM, etc.)				
Project description				
Project award and completion dates				
Role and responsibilities on the project	Especially focus on roles during evaluation training, RFQ, RFP, CCMs, and the final report.			
Reference #1: Name: Title/Function: Email: Phone Number:	References should have worked directly on the project described, such as the Project Manager or Contract Administrator.			
Reference #2: Name: Title/Function: Email: Phone Number:				

BACK-UP FAIRNESS ADVISOR					
Key personnel name					
Current employer					
Proposed base location (City, Country)					
Educational background, degrees, professional recognitions					
Years of experience as a Fairness Advisor or fairness monitor					
	k-up Fairness Advisor Reference Project #1				
Project name and owner					
Project delivery method (DB, P3, DBO, DBOM, etc.)					
Project description					
Project award and completion dates					
Role and responsibilities on the project	Especially focus on roles during evaluation training, RFQ, RFP, CCMs, and the final report.				
Reference #1: Name: Title/Function: Email: Phone Number:	References should have worked directly on the project described, such as the Project Manager or Contract Administrator.				
Reference #2: Name: Title/Function: Email: Phone Number:					
	k-up Fairness Advisor Reference Project #2				
Project name and owner					
Project delivery method (DB, P3, DBO, DBOM, etc.)					
Project description					
Project award and completion dates					
Role and responsibilities on the project	Especially focus on roles during evaluation training, RFQ, RFP, CCMs, and the final report.				
Reference #1: Name: Title/Function: Email: Phone Number:	References should have worked directly on the project described, such as the Project Manager or Contract Administrator.				
Reference #2: Name: Title/Function: Email: Phone Number:					