



GOVERNMENT OF BERMUDA

Ministry of Public Works

Department of Works and Engineering

SUBMITTAL CHECKLIST

Tick if Submitted

0.1 Response Cover Letter

1.0 Mandatory Requirements

Notes

1.1 Signed Mandatory Submittal Form (Appendix A)

1.2 Certificate of Confirmation of Non-Collusion Form (Appendix C)

1.3 Company Profile Form (Annex A)

1.4 Local Benefit Form including Incumbency Certificate (Annex B)

1.5 Pricing Form - Unit rates only (Annex C)

1.6 Certificate of Incorporation

1.7 Professional Reference Letters (3)

2.0 Non-Mandatory Requirements

Notes

Non-Mandatory submissions allow scoring of non-price factors; omission loses points and tender might fail for lack of sufficient quality points

2.1 Safety and Health Policy

NOTE: Please register your interest in the pre-qualification to stimulus Program submittal before the submission deadline so that we can keep you informed of addendums or any other updates to the stimulus program.

Response Covering Letter

Respondent's name and address:

Date:

Ministry of Public Works, Head Office
3rd Floor General Post Office Building,
56 Church Street,
Hamilton Bermuda

Attention: Mr. Attila Fustos, Principal Structural Engineer

Subject: **List of Qualified Suppliers
Request for Qualifications No. 36/100, including any amendments or
additions (the "Request For Qualifications")**

NOTE: amendments and additions will be posted to the Government Portal at <https://www.gov.bm/procurement-notices>. It is the Respondent's sole responsibility to check for amendments and additional information.

The enclosed Response is submitted in response to the above-referenced Request for Qualifications.

We have carefully read and examined the Request for Suppliers Qualifications (RFSQ) and have conducted such other investigations as were prudent and reasonable in preparing the Response. We are authorized to submit this Response on behalf of the Respondent.

Yours truly,

Signature

Name: _____

Title: _____

Telephone Number: _____

e-mail address: _____

Legal name of Respondent: _____

Date: _____

APPENDIX A – SUBMISSION FORM

1. Respondent Information

Please fill out the following form, naming one person to be the contact for this RFSQ response and for any clarifications or communication that might be necessary.	
Full Legal Name of Respondent or Personal/Given Name:	
Representative Name (Person with Signing Authority) / Title:	
Any Other Relevant Name under which Respondent Carries on Business:	
Street Address:	
City, Province/State:	
Postal Code:	
Country:	
Phone Number:	
Respondent's Social Insurance Number issued by the Government of Bermuda:	
Respondent's Payroll Tax Number issued by the Government of Bermuda:	
Company Website (if any):	
Respondent Contact Name and Title:	
Respondent Contact Phone:	
Respondent Contact Fax:	
Respondent Contact Email:	

2. Acknowledgment of Non-Binding Procurement Process

The respondent acknowledges that this RFSQ process will be governed by the terms and conditions of the RFSQ and that, among other things, such terms and conditions confirm that this procurement process does not constitute a formal, legally binding bidding process (and for greater certainty, does not give rise to a Process Contract) and that no legal relationship or obligation regarding the procurement of any good or service will be created between the Government and the respondent unless and until the Government and the respondent execute a written agreement for the Deliverables pursuant to a subsequent invitational second-stage procurement process.

3. Ability to Provide Deliverables

The respondent has carefully examined the RFSQ documents and has a clear and comprehensive knowledge of the Deliverables required. The respondent represents and warrants its ability to provide the Deliverables in accordance with the requirements of the RFSQ.

4. Addenda

The respondent is requested to confirm that it has received all addenda by listing the addenda numbers, _____ to _____ (if applicable) issued by the Government, or if no addenda were issued by the Government write the word "None". The onus is on respondents to make any necessary amendments to their responses based on the addenda. The respondent confirms it has read, received and complied with these addenda. Respondents who fail to complete this section will be deemed to have received all posted addenda.

5. No Prohibited Conduct

The respondent declares that it has not engaged in any conduct prohibited by this RFSQ.

6. Conflict of Interest

Respondents must declare all potential Conflicts of Interest, as defined in section 3.4.1 of the RFSQ. This includes disclosing the names and all pertinent details of all individuals (employees, advisers, or individuals acting in any other capacity) who (a) participated in the preparation of the response; **AND** (b) were employees of the Government within twelve (12) months prior to the Submission Deadline.

If the box below is left blank, the respondent will be deemed to declare that (a) there was no Conflict of Interest in preparing its response; and (b) there is no foreseeable Conflict of Interest in performing the contractual obligations contemplated in the RFSQ.

Otherwise, if the statement below applies, check the box.

- The respondent declares that there is an actual or potential Conflict of Interest relating to the preparation of its response, and/or the respondent foresees an actual or potential Conflict of Interest in performing the contractual obligations contemplated in the RFSQ.

If the respondent declares an actual or potential Conflict of Interest by marking the box above, the respondent must set out below details of the actual or potential Conflict of Interest:

7. Disclosure of Information

Any information collected or used by or on behalf of the Government under this solicitation document is subject to the Public Access to Information Act 2010 (“Act”). The information belongs to a class of information that might be made available to the general public unless it is contained in a record that is exempt from disclosure under the Act. Any questions regarding the collection, use, or disclosure of the information should be directed to the public authority that issued this solicitation document.

Signature of Witness

Signature of Respondent Representative

Name of Witness

Name of Respondent Representative

Title of Respondent Representative

Date

I have the authority to bind the respondent.

APPENDIX C – CERTIFICATE OF CONFIRMATION OF NON-COLLUSION

Notes for the respondents

The essence of Open Tendering is that the Government of Bermuda shall receive bona fide competitive response from suitably qualified persons or entities. In recognition of this principle, each person or entity that submits a response will be required, by way of the signature of a duly authorized representative of the company, to confirm that the response has been submitted without any form of collusion.

All respondents must complete and sign a Certificate of Confirmation of Non-Collusion. Any proposals submitted which do not include a signed copy of the Certificate will be wholly rejected and will not be included in the evaluation process.

If it is later found that the undertakings made below have been breached at any stage of the procurement process, then the respondent will be expelled from the process immediately. In the event that this is discovered after a contract award, legal action may be taken against the respondent and/or any party involved in the matter.

Any respondent that submits false information in response to this Request for Supplier Qualifications (RFSQ), and any other person or entity involved in collusion, may be excluded from competing for future contracts tendered by the Government of Bermuda.

Confirmation of non-collusion

I/We certify that this is a bona fide proposal, intended to be competitive and that I/We have not fixed or adjusted the amount of the proposal or the rates and prices quoted by or under or in accordance with any agreement or arrangement with any other person.

I/We confirm that we have not received any information, other than that contained within the RFSQ pack, or supplementary information provided to all respondents.

I/We also certify that I/We have not done and undertake that I/We will not do at any time any of the following acts:

- (a) communicating to a person other than the RFSQ Contact the amount or approximate amount of my/our proposed response (other than in confidence in order to obtain quotations necessary for the preparation of the response for insurance);
- (b) entering into any agreement or arrangement with any other person that he shall refrain from competing or as to the amount of any proposal to be submitted; or
- (c) offering or agreeing to pay or give or paying any sum of money, inducement, gift /hospitality or valuable consideration directly or indirectly to any person in relation to this procurement.

Signed

(1) _____ Title _____ Date _____

(2) _____ Title _____ Date _____

for and on behalf of _____

COMPANY PROFILE FORM

This document comprises the following Sections:

- Section I: Company Information
- Section II: Product or service details
- Section III: Company Experience; Professional and Technical Staff
- Section IV: Customer experiences
- Section V: Company Interest

Section I

Company Information		
Vendor name	Vendor industry	
<i>[Company legal name]</i>	<i>[Primary offering (Construction category, Engineering services, etc.)]</i>	
Company description	<i>[Insert background and general company information]</i>	
Contact Information		
Primary Contact	Phone	Email

Section II

Product or Service Details	
Details	<i>[Provide a detailed description of the product or service your company provides]</i>
Capabilities	<i>[Provide more information about the benefits and capabilities your company provides]</i>
What are your primary differentiators?	<i>[Provide an overview of three of your competitive advantages]</i>
Delivery timeline	<i>[Typical delivery timeline]</i>

Section III

Company Experience, Professional and Technical Staff	
Relevant Experience	<i>[Provide any information about previous experiences, clients, or success stories a minimum of 3 examples]</i>
Key Personnel	<i>[Provide List of key personnel and their experience, certifications and/or skills]</i>

Section IV

Customer Experience					
Professional References	<p><i>[Provide information for at least three (3) recent clients including name and contact information (e-mail and phone). Attach corresponding reference letters to your submittal.]</i></p>				
	<i>Project</i>	<i>Date Complete</i>	<i>Contact Name</i>	<i>Phone#</i>	<i>e-mail</i>

Section V - Company Interest

Check general scope of works that your company might be interested in performing:

- Roadside vegetation clearing
- Landscaping works
- Trenching/Excavation
- Timber Fencing
- Fencing
- Road slurry seal program
- Wharf repairs/rebuild
- Dock maintenance/rebuild/pressure wash
- Docks platform repairs/welding
- Beacon maintenance/ repair
- Foreshore and coastal protection
- Beach access rebuild/repair
- Dangerous rock cuts
- Small bridges repair or rebuild
- Water tank repairs
- Garage doors/ Automatic doors
- Bathroom remodelling
- Office interior
- Building fit-out
- Building restoration
- Small building construction
- Multi-storey building construction
- Roof replacement
- Asbestos abatement
- Plumbing

- Electrical works
- AC supply and installation
- Small to medium equipment mechanics
- Welding contractor
- Platform works at Dockyard
- Asphalt plant refurbishment
- Solar panel projects
- Program management
- Project management
- Contract management
- Engineering Consultant for local studies and reports

LOCAL BENEFITS

(SOCIAL, ECONOMIC AND ENVIRONMENTAL)

All pages of this form must be completed and returned with the Proponent's response.

This form is used to gather information to influence and help the economic transformation and enable meaningful participation of Bermudians and "specified business" in Bermuda's economy. This form looks at the ownership, management structures, and skill development opportunities and to learn more about the businesses bidding on Government Contracts. The Government's aim is to increase access to local economic activities and encourage skills training opportunities for Bermudians and the Government's use of specified businesses.

Rated criteria in the Government's Standard Evaluation Matrix Section 3 is equivalent to 40% of the overall score. It helps the public officers to measure, promote equal opportunities, and optimize the participation of specified businesses.

Date:

Ownership:

1. Bermudian Owned Business..... Yes No

2. Are you defined as a "Specified Business" in Bermuda (Small or Medium Sized)?

Yes No

Other _____

Definition - According to the Code of Practice Project Management and Procurement (page 8 and 9), "**Specified Business**" means a Bermudian-owned and owner-operated business enterprise with such characteristics as the Bermuda Economic Development Corporation may determine and

(A) gross annual sales of less than one million dollars, or an annual payroll of less than five hundred thousand dollars; or

(B) at least three of the following attributes:

- (i) gross annual revenue of between \$1,000,000 and \$5,000,000;
- (ii) net assets of less than \$2,500,000;
- (iii) an annual payroll of between \$500,000 and \$2,500,000;
- (iv) between a minimum of 11 and a maximum of 50 employees; and
- (v) been in operation for a minimum of 10 years.

3. Provide a copy of the Certificate of Incorporation (if applicable).

Copy attached Yes No

4. Number of employees/Bermudians

Please indicate the total number of persons employed by the company and the number and percentage of Bermudian employees.

NUMBER OF NON-BERMUDIANS:	
NUMBER OF BERMUDIANS:	
NUMBER OF EMPLOYEES:	
PERCENTAGE OF BERMUDIANS:	

Management Control

5. INCUMBENCY CERTIFICATE

The undersigned being the secretary of the company has named below (the "Company"), a company duly organised and existing under the laws of the Islands of Bermuda and having its registered office as set out below **DO HEREBY CERTIFY** that the following is a true and correct listing of the Directors and Officers of the Company in full force and effect as of the date hereof.

DIRECTORS and ALTERNATE DIRECTORS

NAME	TITLE

OFFICERS

NAME	TITLE

IN WITNESS WHEREOF I have hereunto set my signature in accordance with the Bye-Laws of the Company.

Company Name:

Skill Development - Apprenticeships/training opportunities

- 6. Does your business offer internship, apprenticeships or training opportunities?
 Yes No

- 7. Does your business offer Bermudian’s internships opportunities?
 Yes No

- 8. Does your business offer Bermudian’s apprenticeships/training opportunities?
 Yes No

- 9. Is your business willing/able to provide new internship opportunities while working on the Stimulus Program projects?
 Yes No

- 10. If yes, to questions 7, 8 or 9, what apprenticeship or training opportunities exist, please indicate below. (add more lines as needed)

<u>NUMBER</u>	<u>NAME</u>	<u>NON BERMUDIAN</u>	<u>BERMUDIAN</u>	<u>INTERNSHIPS OR APPRENTICESHIPS OFFERED BY YOUR COMPANY (month/year)</u>

Preference Procurement

- 11. Will the proponent use Bermuda specified businesses in their supply chain?
 Yes _____ No _____
 Please provide an explanation _____

12. Will the proponent use Bermuda specified business sub-contractors (if applicable)?

Yes _____ No _____

Please provide an explanation _____

Enterprise and Supplier Development

13. Has the respondent participated in the BEDC Construction Incubator or any other Business Program

Yes No, if yes, state program _____ and year _____

14. Safety and Health, Sustainability and Environmental Policies

Please indicate whether the business has a:

a) Safety and Health Policy,

Yes No, if yes, then please provide a copy.

b) Sustainable Goods and Services Policy

Yes No, if yes, then please provide a copy.

c) Environmental Policy.

Yes No, if yes, then please provide a copy.

UNIT RATE SCHEDULE

(TO BE COMPLETED BY RESPONDENTS)

These rates may be used for determining additions to, and deletions from, the contract sum. (A working day shall be paid at 7 times the hourly rate)

Unit Rate Schedule – Please insert all prices that are applicable to your line of business. Use additional lines if needed.

ITEM	DESCRIPTION	Unit	Rate
1.	Principal	per hour	
2.	Site Supervisor/ Foreman	per hour	
3.	Skilled Labour	per hour	
4.	Unskilled Labour	per hour	
5.	Driver - Asphaltting	per hour	
6.	Road worker	per hour	
7.	Tradesman - Mason	Per hour	
8.	Tradesman - Carpenter	per hour	
9.	Tradesman - Electrician	per hour	
10.	Tradesman – Welder/steel fixer	per hour	
11.	Tradesman - Plumber	per hour	
12.	Small to medium equipment mechanic	per hour	
13.	Pipe fitter	per hour	
14.	Asbestos - Supervisor	per hour	
15.	Asbestos - Workmen	per hour	
16.	Asbestos – Outside Man	per hour	
17.	Painter -	per hour	
18.	Licensed paint blaster	Sq ft	
19.	Landscape laborer	per hour	
20.	Licensed Chainsaw Operative	per hour	

PRICING FORM
 For RFSQ – Stimulus Program
 Ref: 36/100

RESPONDENT:

21.	Mechanic	per hour	
22.	Junior Mechanic	per hour	
23.	Diver	per hour	
24.	Diver – Underwater welding	per hour	
25.	Drafting/ Autocad	per hour	
26.	Design Services (Structural Engineering) – Senior Eng	per hour	
27.	Design Services (Structural Engineering) – Junior Eng	per hour	
28.	Engineer In Training (Structural Engineering)	per hour	
29.	Design Services (Mechanical Engineering) – Senior Eng	per hour	
30.	Design Services (Mechanical Engineering) – Junior Eng	per hour	
31.	Engineer In Training (Mechanical Engineering)	per hour	
32.	Design Services (Electrical Engineering) – Senior Eng	per hour	
33.	Design Services (Electrical Engineering) – Junior Eng	per hour	
34.	Engineer In Training (Electrical Engineering)	per hour	
35.	Project Management Services	per hour	
36.	Contract Management Services	per hour	
37.	Certified Quantity Surveyor (MRICS)	per hour	
38.	Estimator	per hour	
39.	Excavation by machine	yd ³	
40.	Supply, placement of backfilling and compaction	yd ³	
41.	Supply of excavating equipment inclusive of operator and mobilization	per hour	
42.	Supply of Traffic control using stop and go labour for excavation in highways	daily per person	
43.	Supply of Traffic Control lighting	daily	
44.	Supply and pour concrete grade 3500 psi	yd ³	
	Equipment (inclusive of operator)		
45.	Equipment/ excavator	Day	
46.	35 DC mini excavator	Hour	
47.	Excavator 15t; excavating	Hour	

PRICING FORM
 For RFSQ – Stimulus Program
 Ref: 36/100

RESPONDENT:

48.	Excavator 20t+; excavating	Hour	
49.	35 DC mini excavator; hammering	Hour	
50.	Excavator 15t; hammering	Hour	
51.	Excavator 15t; grapple	Hour	
52.	Excavator 15t; bucket	Hour	
53.	Excavator 20t+; hammering	Hour	
54.	Excavator 20t+; grapple	Hour	
55.	Excavator 20t+; bucket	Hour	
56.	Bobcat	Hour	
57.	Air compressor	Hour	
58.	Concrete pump	Hour	
59.	Barge - Small	Hour	
60.	Barge - Large	Hour	
61.	Workboat	Hour	
62.	Tractor Trailer w/ dumpster	Hour	
63.	Tractor trailer w/ flatbed	Hour	
64.	Crane truck	Hour	
65.	Crane; 30t; mob/deb	Nr	
66.	Crane; 30t	Hour	
67.	Crane; 40t; mob/deb	Nr	
68.	Crane; 40t	Hour	
69.	Crane escort truck with driver	Hour	
70.	Flatbed	Hour	
71.	Pile Driving Equipment	Hour	
72.	Concrete mixer	Hour	
73.	Truck and tack coating machine	Hour	
74.	Leeboy paver 8515	Hour	
75.	Cat Roller CB224D vibratory	Hour	

PRICING FORM
 For RFSQ – Stimulus Program
 Ref: 36/100

RESPONDENT:

76.	Roller; 3.5 ton	Hour	
77.	Temporary generator – rental (excluding fuel)	Hour	
78.	Welding Plant	Hour	
79.	Asphalting - large skid loader	Hour	
80.	Asphalting - skid loader sweeper	Hour	
81.	Asphalting - Lee boy 5000 paver	Hour	
82.	Asphalting - Lee boy 1815 paver	Hour	
83.	Asphalting - 5 ton roller	Hour	
84.	Asphalting - Reheating system	Hour	
85.	Telescopic Forks	Hour	
86.	Telehandler	Hour	
87.	Chipper	Hour	
88.	Rock hammering	Hour	
89.	Platform/scaffolding/similar	ft ²	
90.	Truck	Hour	
91.	Equipment/ truck	per day	
92.	Vegetation Chipper (15HP)	per hour	
93.	Chainsaw	per hour	
94.	Other items not listed above		

All unit rates above shall be considered fully inclusive of overheads and profit.

ALSO INCLUDE:

- Certificate of Incorporation
- 3 Professional Reference Letters
- Brief marketing brochure if you have it (Optional)
- Health and Safety Policy if you have one