GOVERNMENT OF BERMUDA
Ministry of Education

Proposal Bid Forms   # Elliot Primary

TO: The Government of Bermuda

1. We confirm that we have submitted a bona fide proposal, intended to be competitive and we have not fixed or adjusted our Price by or under or in accordance with any agreement or arrangement with any other bidder.

2. Having examined the Conditions of Contract, the Site, the Drawings and Specifications, and addenda Nos. _____ inclusive for the execution of the above named work, we, the undersigned, offer to execute and complete the whole of the said works and remedy any defects therein in conformity with the Conditions of Contract, Specifications, Drawings, and Addenda for the sum of

    _____(words)

    _____(figures)

    _____(days to complete)

3. We acknowledge that the Bid Proposal Forms are part of our proposal submittal.

4. We undertake, if our Proposal is accepted, We can commence the Works _____(start date)

5. of **60 working days** from the date of this undertaking and we shall not withdraw this Proposal during this period.

6. Unless and until a formal agreement is prepared and executed this proposal, together with your written acceptance thereof, shall constitute a binding contract between us.

7. We understand that you are not bound to accept the lowest or any Proposal that you may receive.

8. We confirm having received and complied with addenda number _____to _____ (if any).

9. We confirm that we, the undersigned, are conducting business as a proper legal entity and are not delinquent in making payments for outstanding debts for Government receivables such as Social Insurance contributions, Payroll Tax and Public Works (formerly Works & Engineering) fees.

Dated this _____ day of _____, 2016

SIGNED:

(signature)   _____ in the capacity of _____

(block letters)   _____

Duly authorized to sign tenders for and on behalf of:

(firm)   _____

(address)   _____

     _____

WITNESS:

(signature) _____ in the capacity of _____

(block letters) _____

Acknowledgement Letter for Standard Form of Agreement

This is to certify that I, _____ (name), in the position of _____ hereby acknowledge that I am aware of the terms and conditions of the attached Draft Contract.

I acknowledge that the following documents have been provided in the Request for Proposal package and at the date of this submission I have no issue with the terms and conditions of this agreement.

Signed:_____

Date:_____

Certificate of Non-Collusion

Notes for the bidder
The essence of Open Tendering is that the Government of Bermuda shall receive bona fide competitive Tenders from all persons Tendering. In recognition of this principle, all companies submitting a Proposal will be required, by way of the signature of the Company Principle, state their agreement to the statements below, which indicates that the Proposal has been submitted without any form of collusion.

The Certificate of Confirmation of Non-Collusion is a mandatory requirement from all bidders. Any bids 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 process, the bidder 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 bidder and/or any party involved in the matter.

False submissions may also exclude the bidder, and any other person or company involved in collusion, from bidding for future contracts tendered by the Government of Bermuda.

Confirmation of non-collusion
I/We certify that this is a bona fide Tender, 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 additional information, other than that contained within the Proposal pack, or supplementary information provided to all bidders.

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 Proposal administrator the amount or approximate amount of my/our proposed Proposal (other than in confidence in order to obtain quotations necessary for the preparation of the Proposal for insurance) or

(b)   entering into any agreement or arrangement with any other person that he
shall refrain from tendering 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 tender.

Signed

(1)   _____   Status _____

(2)   _____   Status _____

for and on behalf of

_____

Date _____

Price Breakdown

ITEM	DESCRIPTION		SUM
1.	**Demolition**		
2	**Tiling**		
3	**Ceiling/Millwork**		
4	**Electrical**		
5	**Plumbing**		
	TOTAL SUM	Lump Sum	

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FORM OF TENDER
(Note: all sheets form part of the tender)

Schedule of Rates

The rates and prices (in Bermuda dollars) in the following schedule are to be inclusive of services overheads, administration, profit, taxes, disbursements and related charges in providing the service. These rates shall be used for determining charges for the services rendered.

CATEGORY	ITEM	UNIT	COST
General Labour Rates	Supervisor	per hour	$
	Labourer	per hour	$
	Skilled Labourer	per hour	$
	Tradesman - Mason	per hour	$
	Tradesman - Carpenter	per hour	$
	Tiler	per.hour	$
	Plumber	per hour	$
	Electrician	Per hour	$

Signed

(1) _____ Position/Title _____

(2) _____ Position/Title _____

for and on behalf of _____ (Company)

Date _____

Bidder's Information

Bidder's Name **Address:** **Phone number:** **Email:** **Website:** **Principals Name and Titles**	
Payroll Tax Number	
Social Insurance Number	
Name of Workmen's Compensation Insurance Company	
Workmen's Compensation Insurance Policy Number	
Name of Contractor's Third Party Insurance Company	
Third Party Insurance Policy Number	
Name of Primary Bank	
Total Number of Persons Currently Employed	
Total Number of Bermudians Currently Employed	
Do you have a Safety and Health Policy?	
Do you provide apprenticeships/training positions?	