



**SPECIFICATIONS FOR
TENDER #0171-1818
SUPPLY OF GROCERY FOOD ITEMS
FOR WESTERN HEALTH**

CLOSING DATE: Sept 19th, 2018

CLOSING TIME: 2:00 PM (Newfoundland Time)



Invitation to Tender for Miscellaneous Food Items

1.0 General Provisions

1.1 Intent

This invitation to Tender is intended to obtain Miscellaneous Food Items for the Western Regional Health Authority (Western Health) for the period indicated on the product bid sheet.

1.2 Client Background

Western Health was established in 2005 and is responsible for the delivery of Health and Community Services in the Western Region.

1.3 Vendor Response

1.3.1 Vendor's tender must contain an Executive Summary which shall contain:

- a. A brief description of the product being quoted.
- b. The name, title and address of the Vendor's representative responsible for the preparation of the Tender.

1.3.2 All prices quoted for goods and services must be specified in Canadian dollars, FOB Western Health Site. All Tenders will be held to be valid for ninety (90) days following the Tender closing date.

1.3.3 Tenders must be received in full on or before the exact closing time and date indicated. **TENDERS RECEIVED AFTER THAT TIME WILL NOT BE CONSIDERED.**

1.3.4 All costs relating to the work and materials supplied by the Vendor in responding to this Invitation to Tender must be borne by the Vendor.

1.4 Release of Information

1.4.1 **While Tender is Open:**

The names of individuals or companies who have picked up the tender documents will not be released.

Companies can contact Western Health for clarification regarding the tender process or the product specifications and Western Health will reply provided there is a reasonable amount of time to do so prior to the tender opening.

1.4.2 **At Tender Opening:**

1. The names of the bidders, and overall bid price(s) will be read out.
2. Where the overall bid price(s) cannot be readily determined, no pricing will be released.

1.4.3 **After Tender Opening:**

1. No further information will be released until after the contract is awarded.
2. After award, only the name and bid price of the successful bidder will be made available.
3. Information will be made available for a 90 day period only.
4. Successful Awards will be posted on Web Site.

1.5 **Communication During Tendering**

- 1.5.1 All communications with Western Health with respect to this invitation to Tender must be directed in writing to the attention of:

Mr. Paul Wight
Regional Director Materials Management
Western Health
1 Brookfield Avenue
Corner Brook, Newfoundland
A2H 6J7
Tel: (709) 784-5386
Fax: (709) 634-2649
Email: paulwight@westernhealth.nl.ca

- 1.5.2 Western Health may, during the assessment period, request meetings with the Vendors to clarify points in the Tender. No changes by the Vendor will be permitted after the Tender closing date.
- 1.5.3 Faxed Tender responses will be accepted with the condition that the original Tender documents are received at Western Health's Materiel's Management Department no later than **Five** working days following the Tender closing date.
- 1.5.4 All bids must be sent in a sealed envelope clearly marked with Tender Name and Number to: Materiel's Management Department, Western Health, Western Memorial Regional Hospital, First Floor, 1 Brookfield Ave., Corner Brook, NL A2H 6J7.
- 1.5.5 Bids submitted by electronic transmission (e-mail) will not be accepted.
- 1.5.6 Companies submitting fax Tenders are doing so at their own risk and the fax Tender must be at the public opening as specified in the Tender information. This Authority will not be responsible for in-house courier services if companies submit quotations by fax machine. The time stated on the fax Tender will become null and void since it is the responsibility of the company placing the Tender to have their Tender at the public opening, therefore, this Authority will not be responsible for any damages or liabilities.
- 1.5.7 In order to contribute to waste reduction and promote environmental protection, the Western Health will endeavour to acquire goods and services that support these principles, therefore, product(s) quoted should include:
- maximum level of post-consumer waste and/or recyclable content
 - minimal packaging
 - minimal environmental hazards
 - maximum energy efficiency
 - potential for recycling
 - disposal costs
- Without:
- reducing the quality of the product required or affecting the intended use of the product
 - significantly impacting the acquisition cost

1.6 **Tender Acceptance**

- 1.6.1 Any acquisitions resultant from this invitation to Tender shall be subject to the Public Tendering Act.
- 1.6.2 The Tenders shall be opened in the Private Dining Room at The Western Memorial Regional Hospital on the scheduled date and time.
- 1.6.3 Any Tender may be accepted in whole or in part. The lowest Tender may not necessarily be accepted and Western Health reserves the right to cancel the Tender call. Western Health shall not be held responsible or liable for the payment of any costs that are incurred by the bidder in preparing a Tender in response to this invitation to Tender.

1.7 **Warranty**

- 1.7.1 The Vendor shall warrant that the product supplied to Western Health shall equal the published specifications.

2.0 **Product Specifications**

- 2.1 As attached.

3.0 **Presentation / Training / Service**

3.1 **Presentation**

A presentation of the Tender and / or a demonstration of the product / system shall be provided, if requested, at the Vendor's expense.

4.0 **Financial Considerations**

Please indicate pricing for each product in the attached spreadsheet.

- 4.1 Please indicate pricing for each product in the attached spreadsheet. All applicable taxes shall be indicated in the Tender.

4.2 **Terms of Payment**

The Authority agrees to pay the full invoiced amount within 30 days following acceptance of the installed system by Western Health. Acceptance testing will be completed within 30 days following the complete installation of the system.

5.0 **Vendor Confirmation** (please sign)

I confirm that our Tender meets or exceeds the specifications detailed in this invitation to Tender. I also confirm that all specifications are included in the quoted price. Any items that are optional are noted accordingly.

Signed _____

Email Address: _____

Title _____

Company Name _____

Address _____

Phone _____

TENDER CHECKLIST

TENDER #0171-1818

DID YOU INCLUDE

HAS TENDER SUBMISSION BEEN SIGNED	Yes <input type="checkbox"/>	No <input type="checkbox"/>
COPY OF REQUIRED TENDER DOCUMENTS	Yes <input type="checkbox"/>	No <input type="checkbox"/>
COPY OF BROCHURES (IF REQUESTED)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
COPY OF WCB LETTER OF GOOD STANDING (IF REQUIRED)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
COPY OF PROOF OF INSURANCE (IF REQUIRED)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
AMOUNT OF TAX NOTED ON REQUEST FOR QUOTATION FORM	Yes <input type="checkbox"/>	No <input type="checkbox"/>
OPTIONAL PRICING FOR TRAINING INCLUDED	Yes <input type="checkbox"/>	No <input type="checkbox"/>

NOTE: TENDER RESPONSES MAY BE REJECTED IF YOU ANSWER “NO” TO ANY OF THE ABOVE QUESTIONS.