



SPECIFICATIONS FOR
TENDER #0171-1903
Construction of new Isolation Room
at Western Memorial Regional Hospital

CLOSING DATE: 14th of March, 2018

CLOSING TIME: 2:00 PM (Newfoundland Time)



Invitation to Tender for :

1.0 General Provisions

1.1 Intent

This invitation to Tender is intended for Construction of a new Isolation Room at Western Memorial Regional Hospital in Corner Brook, NL. as per the engineering specifications and drawing provided for this tender as shown in attached documents.

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 should contain an Executive Summary which shall contain:

- a. 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. 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:

Amendments may be made to the tender requirements or an extension of the closing time. It is the responsibility of the vendors to check the web site before the closing time to ensure they have amendments taken into account for bidding. If a vendor requires clarification on the requirements, specifications or tendering process they can contact Western Health Purchasing department, with adequate time to respond, prior to the closing time.

1.4.2 **At Tender Opening:**

1. The names of the bidders, and overall bid price(s) will be read out. No award will be given until a full review of the bid is completed and approved by authorized Western Health Staff.
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 of Materials Management
Western Health
1 Brookfield Avenue
Corner Brook, Newfoundland
A2H 6J7
Tel: (709) 637-5511
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 Materials 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:
Material's Management Department, Western Health, Western Memorial Regional Hospital, 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.

1.6 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

The Vendor shall warrant that products supplied to Western Health shall equal the published specifications. Details of all product warranties should be provided with all product information when requested.

2.0 Scope of Work

Interested Companies can request a copy of the Engineering specifications and Drawing by email to: paulwight@westernhealth.nl.ca

All work required is stated in the Engineering specifications.

Qualifications

1. The Vendor awarded this contract must be qualified and experienced in doing the type of work required. Bidders must provide verification of their employee's qualifications prior to contract being awarded.
2. The qualified Vendor shall furnish all necessary labour, material, parts, tools and equipment to carry out full maintenance service work in accordance with an approved work schedule and the manufacturer's manuals.

3.0 Product History and Vendor Reputation

3.1 The Vendor should provide a list of three (3) organizations where they have performed similar work. Include a contact person for each organization.

4.0 Financial Considerations

4.1 Bid Prices are to be provided in the bid sheets in the specifications section. 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 receipt of invoice by Western Health.

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.

Authorized company Representative:

(Print Name) _____

Signature _____

Title _____

Email _____

Company Name _____

Address _____
