

# Big Lakes County

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## 2017 TRADES – QUOTATION FOR HOURLY RATES

**Deadline for Submissions: March 15, 2017**

From time to time Big Lakes County Public Works Department requires the services of qualified trades people such as plumbing, heating and cooling, carpentry, welding, etc. Wherever possible the work will be scheduled in advance, however, emergency situations arise requiring qualified trade services.

**Trade:** \_\_\_\_\_

**Name (Company/Owner)** \_\_\_\_\_

**Address** \_\_\_\_\_

\_\_\_\_\_

**Contact Person 1** \_\_\_\_\_ **Contact Person 2** \_\_\_\_\_

Telephone \_\_\_\_\_ Telephone \_\_\_\_\_

Telephone \_\_\_\_\_ Telephone \_\_\_\_\_

	Scheduled Work Hourly Rate Quotation	Emergency Work Hourly Rate Quotation
Qualified Trades Person		
Helper		
Mileage/km		
Vehicle		
Other - Please Specify:		

**Please attach the following information:**

1. Proof of Trade Certification
2. Certificate of Liability Insurance Coverage
3. Worker's Compensation Board Account
4. GST # \_\_\_\_\_

**Owner's Name:** \_\_\_\_\_

**Owner's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Witness Signature:** \_\_\_\_\_

**PLEASE SEE REVERSE SIDE FOR CONDITIONS**

The personal information on this form is being collected for the purpose of handling hourly hire trades quotations under the Freedom of Information and Protection of Privacy (FOIP) Act, and is protected by the FOIP Act. If you have any questions about the collection contact Big Lakes County's FOIP Assistant at phone (780) 523-5955.

## HOURLY HIRE CONDITIONS

1. Rates to include operator's wages, Worker's Compensation Board (WCB) Coverage, and any other costs associated with the trade.

Proof of valid WCB Coverage and Trade Certification must be provided to Big Lakes County prior to entering into the Agreement.

2. Owner to provide skilled, well trained trades people.
3. All safety regulations under the Occupational Health and Safety Act as well as all applicable MD of Big Lakes Safety Policies and Procedures shall be met by the contractor.
4. The Contractor shall, at his own expense and without limiting his liabilities herein, ensure his operations under a contract of either Comprehensive or Commercial General Liability, with an insurer licensed in Alberta, in an amount not less than \$1,000,000 inclusive per occurrence, (annual general aggregate, if any, not less than \$2,000,000) insuring against bodily injury, personal injury and property damage including loss of use thereof. Such insurance shall include blanket contractual liability, products and completed operations liability, operation of attached equipment and towing/on hook coverage and employees as additional insureds.

The Contractor shall maintain automobile liability on all vehicles owned, operated or licensed in the name of the contractor in an amount not less than \$1,000,000.

Evidence of all required insurance, in a form satisfactory to Big Lakes County, shall be promptly provided to the Big Lakes County prior to entering into the Agreement

5. The Owner agrees to indemnify and hold harmless Big Lakes County, its employees and agents from any and all claims and demands arising out of owner's performance of this agreement.
6. Big Lakes County shall have thirty days from the date of receipt of invoices within which to submit payment.
7. Big Lakes County shall have the right to terminate this agreement at any time, without penalty, if the above conditions are not adhered to, or if the work is not being completed satisfactory to Big Lakes County.

PRIME CONTRACTORS RESPONSIBILITIES

reviewed 8/10/09

Company Name: \_\_\_\_\_ Owner \_\_\_\_\_

Certificate of Recognition# \_\_\_\_\_ (Submit a copy of certificate)

General

The "Prime Contractor" responsibilities are described in Section 2.1 of the OH&S Act.

Where a Contractor enters into a contract or agreement with a firm or person to carry out work directly or indirectly on behalf of the County, the following shall apply:

- When the Contractor has received safety certification from a recognized body (ex. Alberta Construction Safety Association) satisfactory to Big Lakes County, the Contractor shall then assume "Prime Contractor" responsibilities.
- When the Contractor has not received safety certification from a recognized association satisfactory to the County, the County shall then assume "Prime Contractor" responsibilities. The County Safety Program governs with the following exception:
  - In the event of safety infractions the following disciplinary actions will apply:
    - 1) Warning (verbal and/or written)
    - 2) Suspension of work until infractions are corrected
    - 3) Termination of contract

Note: Safety violations shall be used in assessing Contractor work performance with regard to present and future employment with the County.

Contractor Safety Requirements

When the County assumes the role of Prime Contractor:

Prior to the start of work/construction, a meeting between the County and the contractor will be held to review all applicable County Rules, Safe Work Practices/Job Procedures, Personal Protective Equipment (PPE), and Hazard Analysis/Incident Investigation

The basic Personal Protective Equipment (PPE) requirements are: CSA approved steel toed safety boots, CSA approved hard hat, and CSA approved reflective safety vest.

Basic PPE is required at all times except when visiting in the County Administration building, in the Municipal Services Facilities, and in designated areas within the County maintenance shop and facilities.

Note:

- A hard hat and reflective vest are not required when driving a vehicle.
- A reflective vest is not required while inside the County maintenance yard.

The contractor is responsible for obtaining and maintaining all PPE required for the job, Fire Extinguishers, and First Aid services and supplies in order to comply with OH&S regulations and the County Safety Policy.

Infractions will result in disciplinary action. All individuals are equally responsible in creating a safe work environment. For further information contact the Big Lakes County Office at (780) 523-5955.

I have reviewed this document and understand my obligations towards the County Safety Program.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date