# THE DIRECTORATE OF SOCIAL SERVICE

# Listuguj Mi'gmaq Government



# **Request for Proposal**

| Date         | October 27, 2025 |                                                    |
|--------------|------------------|----------------------------------------------------|
| Closing Date | November 7, 2025 |                                                    |
| Approved by  | Tanya Barnaby    |                                                    |
| Approved by  | Bassem Abdrabou, | General Manager/ Advisor, Capital & Infrastructure |
| Prepared by  | Jessica Hottot   | Project Coordinator                                |

# **OUTLINE:**

- 1. OBJECTIVES
- 2. BUILDINGS LOCATION
- 3. SPECIAL INSTRUCTIONS
- 4. INSURANCE REQUIREMENTS
- 5. TERMS OF PAYMENT
- 6. PLACE OF SUBMISSION
- 7. CONTRACT TERMINATION
- 8. PRICE FORM

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## 1. OBJECTIVES

Obtain proposals in compliance with the Listuguj Mi'gmaq Government (LMG) tender policy from interested contractor, perform the snow removal, salting and any other requirements to ensure the buildings are accessible any time during winter 2025/2026.

The Contractor will be responsible to supply the labour, equipment, and material to complete the work during the winter season 2025/2026

## 2. BUILDINGS LOCATION

# Gignu:

1 Gef Street Listuguj, QC G0C2R0

## Family & Child Services:

2 GEF Street Listuguj, QC G0C2R0

# **Listuguj Child & Family Youth Centre:**

19B Riverside West Listuguj, QC G0C2R0

## 3. SPECIAL INSTRUCTIONS:

The contractor must ensure that the snow is removed after ever two inches of snowfall as the clients offer 24-hour services. The contractor must provide the following services:

- Driveway and Parking Lot to each building.
- Main Entrances and Sidewalks to each building.
- Listuguj Child & Family Youth Centre side door and back emergency exits, as well as the back area by the rink/in front of the warmup shack.

The contractor will be responsible for providing their own employees, equipment and supplies necessary to complete the services.

The contractor is required to visit the building sites to assess the scope of work.

# 4. INSURANCE REQUIREMENTS:

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The contractor must provide proof of liability insurance for a minimum coverage of one million dollars (\$1,000,000) per event.

## **5. TERMS OF PAYMENT:**

- 50% at the beginning of the contract
- 25% Mid-February
- 25% at the end of the contract

## 6. TIME AND PLACE OF SUBMISSION

All proposals should be submitted on or before November 07, 2025 at 10:00 AM Atlantic time, no proposal will be considered after this time by email or in Sealed Envelope

Capital & Infrastructure 44 Dundee Road, Listuguj, QC G0C2R0

#### **Email Address:**

tanyabarnaby@listuguj.ca Jessica.hottot@listuguj.ca

#### 7. CONTRACT TERMINATION

The Owner has the right at any time to terminate the contract, in whole or in part, before or after the commencement of its performance. When the Owner decides to terminate the contract, it must notify the contractor in writing and indicate the effective date.

SIGNATURE:

# PRICE FORM TO BE FILLED BY THE CONTRACTOR

Excluding applicable taxes, and as detailed in the price schedule.

The Contractor, alter having visited the sites and acertaine the nature of the mandate, as well as after carefully reading the tender documents and appendices, hereby, to execute and complete the mandate in accordance with the tender documents and to the full satisfaction of the Owner within the applicable contractual deadlines, for a total price for the proper execution of:

\_Dollars (\$)

| The price submitted is in lawful money of Canada, the value of which is firm for the bid validity period described in this call for proposal/tenders and for the entire duration of the contract. |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| SIGNED AT (PLACE)                                                                                                                                                                                 |  |  |
| DATE                                                                                                                                                                                              |  |  |
| COMPANY NAME                                                                                                                                                                                      |  |  |
| ADDRESS                                                                                                                                                                                           |  |  |
| TELEPHONE                                                                                                                                                                                         |  |  |
| FAX                                                                                                                                                                                               |  |  |
| NAME OF THE REPRESENTATIVE                                                                                                                                                                        |  |  |
| FUNCTION                                                                                                                                                                                          |  |  |
|                                                                                                                                                                                                   |  |  |