



SMOOTH
ROCK FALLS

**THE CORPORATION OF THE
TOWN OF SMOOTH ROCK FALLS**

Invites

REQUEST FOR PROPOSALS

RFP No. 2025-02

Mattagami Centre Roof Replacement
Located at 105 Second Avenue, Smooth Rock Falls, ON

Proposals, clearly marked
RFP No. 2025-02
will be received by the undersigned
until **2:00 p.m. EST**
on **Friday, May 2nd, 2025**

LOWEST OR ANY PARTICULAR PROPOSAL NOT NECESSARILY ACCEPTED.
THE TOWN OF SMOOTH ROCK FALLS RESERVES THE RIGHT TO ACCEPT OR REJECT ANY
OR ALL QUOTATIONS.

Please Note: Prior to submitting a Proposal, further information may be obtained by contacting:
Linda Ajdinovic
Public Works Coordinator
Phone (705) 338-2717 ext. 4
E-mail: lajdinovic@townsrf.ca

DATE ISSUED: April 9th, 2025

1. PROJECT SUMMARY

The Town of Smooth Rock Falls invites qualified contractors to submit proposals for the roof replacement project at the Mattagami Centre. The Contractor shall provide all supplies, machinery, materials, contracting and constructions services necessary for the roof replacement at the municipally-owned facility, the Mattagami Centre's roof, located at 105 Second Avenue, Smooth Rock Falls. The project involves roof rehabilitation to the majority of the roof at approximately 8,500 sq ft, as partial repair had previously been completed. (See project deliverables and indicated roof section on page 4)

This RFP outlines the requirements and expectations for the project, including scope of work, submission guidelines, and evaluation criteria.

2. PROJECT OVERVIEW

- **Project Name:** Roof Replacement at Mattagami Centre
- **Location:** Mattagami Centre, 105 Second Avenue, Smooth Rock Falls, Ontario
- **Project Manager:** Linda Ajdinovic, Public Works Coordinator

3. PROJECT DELIVERABLES

It is the responsibility of the bidder before submitting a proposal to complete a site inspection and carefully examine and measure the site of the proposed work. The scope of work includes, but is not limited to:

- Removal and disposal existing roofing material to the designated area. Inspect and repair underlying structures where necessary.
- Supply and install new roofing system to approximately 8,500 sq ft, as per local building code regulations and industry standards.
- Ensure proper sealing, ventilation, drainage, and flashing.
- Dispose of all debris and materials in accordance with environmental regulations. And to restore construction site to its original condition after work is completed.
- Project completion may begin as soon as project is awarded and must be completed by September 30, 2025.

Note: A PHOTO specifying the areas requiring replacement is attached to this RFP. Contractors are responsible for verifying site conditions, including the square footage of the roof to be replaced, prior to submitting their bids.

4. SITE VISIT

A site visit can be scheduled by appointment ONLY. Please contact Linda Ajdinovic, prior to April 30th, 2025, at lajdinovic@townsrf.ca or 705-338-2717 extension 4 to arrange access.

5. PROPOSAL REQUIREMENTS

Proposals must include the following information:

- **Company Information:** Name, address, and contact details of the contractor.
- **Experience and Qualifications:** Relevant experience and qualifications of the contractor and key personnel.
- **Proof of Insurance and WSIB clearance**
- **Project Plan:** proposed timeline for project completion.
- **Detailed Cost Estimate:** including labor, materials, and any additional expenses
- **Warranty:** Information on workmanship and manufacturer roof warranty. A minimum of one-year warranty on labor and materials from date of completion.
- **References:** Contact information of references from similar projects.

6. SUBMISSION GUIDELINES:

All proposals **MUST** be submitted on the proposal form attached to this RFP and may be submitted electronically or in-person by **Friday, May 2, 2025 @ 2:00pm EST** to:

Linda Ajdinovic
Public Works Coordinator
142 First Avenue
Smooth Rock Falls, ON
lajdinovic@townsrf.ca

7. EVALUATION CRITERIA

Proposals will be evaluated based on the following criteria:

- Experience and qualifications
- Cost-effectiveness
- Project timeline
- Warranty and service commitment
- References and past performance

8. TERMS AND CONDITIONS

All costs incurred in the preparation of the proposal are the responsibility of the contractor and will not be reimbursed by the municipality.

The Town of Smooth Rock Falls reserves the right to reject any or all proposals. The lowest or any proposal may not necessarily be accepted.

MATTAGAMI CENTRE OVERHEAD ROOF VIEW

***SPECIFIED AREAS FOR ROOF REPAIR ARE OUTLINED IN RED MARKINGS**





TOWN OF SMOOTH ROCK FALLS
REQUEST FOR PROPOSAL (RFP)
MATTAGAMI CENTRE ROOF REPAIR
RFP No. 2025-02

Submission Form

Contractor: _____

Address: _____

Telephone: _____ **Email:** _____

Contact Person: _____

Description of Work:

The contractor will be required to provide all machinery, materials, and manpower necessary to complete all work required as outlined in the project deliverables.

Location: Mattagami Centre, 105 Second Ave. Smooth Rock Falls, ON P0L 2B0

Subtotal \$ _____

H.S.T. \$ _____

TOTAL CONTRACT PRICE: \$ _____

An Itemized Quotation Must Be Attached or Included in the Proposal Package

The contractor is required to provide the Town with proof of insurance in the amount of \$2,000,000.00, and is responsible for all issues relating to WSIB, insurance etc., for their employees with relation to this contract.

By signing below, I acknowledge that I have read and understand this Request for Proposal No. 2025-02 and I agree to abide by the terms and conditions contained herein.

Authorized Signature: _____

Name: _____ (Please Print or Type)

Date: _____

Witness: _____

Date: _____

*Note that this submission form shall be completed in its entirety, no fields left blank. Any incomplete fields may result in the proposal being considered irregular and subsequently rejected.



TOWN OF SMOOTH ROCK FALLS
REQUEST FOR PROPOSAL (RFP)
MATTAGAMI CENTRE ROOF REPAIR
RFP No. 2025-02

REFERENCES

Client 1

Name: _____ Phone: _____

Scope of Work: _____

Contract Amount: \$ _____ Term: _____

Client 2

Name: _____ Phone: _____

Scope of Work: _____

Contract Amount: \$ _____ Term: _____

Client 3

Name: _____ Phone: _____

Scope of Work: _____

Contract Amount: \$ _____ Term: _____