

Contractor/Supplier Pre-Qualification Package 2023

GrandBridge
ENERGY

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Submission Requirements to Apply for Approved Contractor/Supplier Status

GrandBridge Energy Contractor/Supplier Classification

Class A: GrandBridge Energy Projects

- a) Capital Projects – overhead and underground rebuilds, new infrastructure
- b) Maintenance Projects – Delta Wye, Tree Trimming, Cable Testing, Building Repair
- c) **Requirements:** Items 1 – 12 on page 3

Class B: Subdivision Developments

- a) Contractors that are working for a Developer on GrandBridge Energy projects
- b) **Disclaimer:** The responsibility of the work performed is with the developer. The work must be done in accordance with GrandBridge Energy subdivision agreements. Refer to GrandBridge Energy standards.
- c) The requirements are for record-only with GrandBridge Energy
- d) **Requirements:** Items 1-9 on page 3

Class C: Non-infrastructure Contractors/Suppliers

- a) Vendors
- Requirements:** Items 1-6 on page 3

Submission Requirements List

1. **Cover Letter**
 - a. State in your letter what you are applying for - i.e., Secondary Services, General Underground, Overhead or Underground work, Trenching, etc.
2. **List of staff and their qualifications.** (See form on pg. 8)
 - a. Indicate who the supervisor on site will be.
 - b. If your staff list changes, we must be notified **immediately**, and additional information must be supplied prior to the individual commencing work.
3. **Company Profile Form** (See form on pg. 5)
 - a. General company info, contacts and references.
4. **W.S.I.B. Clearance Certificate** required.
 - a. Supply a copy of current clearance certificate (valid for 60 days).
 - b. Please supply your WSIB Certificate (due every 60 days) and Copy of Insurance AS IT COMES DUE, to the attention of: **Sue Kozar – Purchasing Clerk**
519-621-3530 ext. 2357
Fax: 519-740-3095
skozar@grandbridgeenergy.com
5. **W.S.I.B. Report** required (W.S.I.B.)
 - a. Supply a copy of a recent WSIB Safety Check:
<https://safetycheck.onlineservices.wsib.on.ca/safetycheck/explore/search?lang=en>
6. **Insurance Certificate** required.
 - a. Supply Insurance Certificate, \$5,000,000 aggregate and \$2,000,000 for each occurrence.
 - b. The Contractor shall provide with bid, a certified copy of the Insurance Certificate showing **GrandBridge Energy, The City of Cambridge, The Township of North Dumfries, the County of Brant, The City of Brantford, The Region of Waterloo, and His Majesty the King represented by the Minister of Transportation**, as additional named Insureds.
 - i. Coverage must be maintained continuously while work is in progress, and renewal certificates must be provided as required, satisfactory in form to GrandBridge Energy
 - c. Subcontractors (if any) must maintain the same insurance coverage as required by the contractor. Each insurance policy referred to herein shall add the above list as additional named Insureds, and shall contain, as appropriate, a severability of interests and a cross liability clause.
7. **Bid and Performance Bond** required.
 - a. *Tender documents will specify this requirement if needed from the contractor.
8. **Health and Safety Policy** required.
 - a. Supply a copy of your Health and Safety policy and/or manual.
9. **List of equipment** that your company has and/or has access to use. (See form on pg. 7)
10. **List of mechanical fitness records (MTO/Aerial Device Certificates)** which includes:
 - a. Vehicle equipment and ownership
 - b. A letter stating that you have checked your drivers, drivers' abstracts and that their licenses are in good standing
11. **Safety Orientation Meetings** are a requirement before any project commences
12. **Liability Waver** (See form on pg. 10)

Contractor/Supplier Submission Checklist

Document/Form	Required by Class	Date	Received (Y/N)
Cover Letter	A + B + C		
Company Profile (pg. 5)	A + B + C		
References (pg. 6)	A + B + C		
Equipment List/Capabilities (pg. 7)	A		
Staff List and Qualifications (pg. 8)	A + B		
Accident Frequency Report (pg. 9)			
Liability Waiver (pg. 10)	A + B		
W.S.I.B. Current Clearance Certificate	A + B + C		
Insurance Certificate	A + B + C		
Bid and Performance Bond (if applicable)			
Health and Safety Policy/Manual			
Mechanical Fitness Records			
Vehicle/Equipment Ownership (MTO/Aerial Device Certificates)			
Letter of checked drivers, drivers abstracts and drivers licenses are in good standing			
Safety Orientation Meeting Scheduled			

***All documents must be sent in BEFORE commencing work**

How to Submit an Application

Completed applications can be returned to GrandBridge Energy, via email, mail, fax or delivered to our drop box at the Glebe Street location addressed to Tony Farias – Manager, Supply Chain. All applications should be titled with the Company name, main contact, GrandBridge Energy contractor/supplier class and date of submission. See below for contact information.

A list of GrandBridge Energy contacts will be sent to contractors/suppliers once approved by GrandBridge Energy.

GrandBridge Energy

39 Glebe Street

P.O. Box 1060

Cambridge, ON. N1R 5X6

Phone: 519-621-3530

Fax: 519-740-3095

Email: tfarias@grandbridgeenergy.com



Company Profile

General Information

Company Name:		
Property Address:		
City:	Province:	
Postal Code:	Country:	
Mailing Address (If not same as above):		
City:	Province:	
Postal Code:	Country:	
Phone Number:	Fax Number:	
Years in Business:	Unionized (Yes or No):	Expiry Date:
Under Present name:	Previous Name/Location:	
Website (link):		
Company Specialization:		
Company Description:		
Company Capabilities:		
Has this company worked for a Utility before (yes/no):		
If "yes" please list:		

Type of Supplier

Underground		Overhead		General Construction		Tree Trimming	
Maintenance		Distributor		Manufacturer		Sub-Contractor	
Other		Describe:					

Main Contact

Name:	Position/Title:
Phone Number:	E-mail:
Signature:	Date:

Department Contacts

Contact Type	Name	Email	Phone Number	Cell Number
CEO/President				
Engineering				
Safety				
Operations				
Customer Service				
Finance (Accounts Payable)				
Emergency/Afterhours				



References

Number	Company	Contact Name	Phone	Email
1				
2				
3				

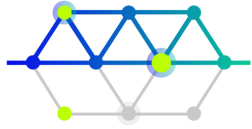
Completed By:

Name

Signature

Position

Date



Equipment Capability

Vehicle #	Description	Age (year)	MTO Cert. #	Cert. Date	Dielectric Test	Test Date	Other



Accident Frequency Record

Year	Total Hours Worked A	Lost Time in Injuries B	Frequency (B x 200,000)/A
2022			
2021			
2020			
2019			
2018			

List any fatalities in the last five years and nature of accident (if none, please indicate)

I certify that the above information is correct, and understand that erroneous data may result in rejection of the bid

Contractor Name

Date

Contractor Signature

Contractor Phone Number

Contractor Email



Liability Form

I/We understand and acknowledge the fact that in undertaking any contract work for GrandBridge Energy, the company must follow and obey all rules and regulations of the Infrastructure Health & Safety Association (I.H.S.A.) and all safety standards established by law.

I/We agree to supply a copy of Insurance (P.L. and P.D.) as stated in Tender/Purchase Order documents.

I/We am aware that the company listed below will be monitored to ensure compliance of all safety regulations by GrandBridge Energy.

Name

Position

Signature

Date

Name

Position

Signature

Date

Name

Position

Signature

Date