

## **INVITATION TO QUOTE**

### **SNOW REMOVAL**

#### **SKIFF LAKE GARBAGE /RECYCLE AREA & DRY HYDRANT**

##### **Contract No. 2025-2027-SL**

The Municipality of Lakeland Ridges hereby invites quotes for the following items of work. This is a two-year contract. All items of work refer to the period November 1<sup>st</sup>, 2025 – April 30<sup>th</sup>, 2026 and November 1<sup>st</sup>, 2026 – April 30<sup>th</sup>, 2027. Price quoted will be for the 2025-2026 season. The Consumer Price Index (CPI) will be used to adjust the rate for the 2026-2027 season.

1. The removal of snow from the area around the garbage and recycle bins on LaCoote Drive in the former Canterbury Local Service District.

Snow removal from the Dry Hydrant located on Rte. 122 by “the opening”.

Sanding and salting of the area as **required or requested**.

2. Snow removal will be required after any snowfall with an accumulation of three inches (3”) or when an accumulation of three inches (3’) has resulted from multiple minor snow falls. Due to the emergency nature of the Fire Department’s operation, the contractor should never hesitate to plow if snow accumulation may pose a hindrance to the fire vehicles.
  3. Acceptance of the snow removal contract includes responsibility for all proper licenses, permits, insurances and liability (two million dollars per occurrence) related to the work. **The Contractor agrees that he shall always provide and maintain during the term of this contract, motor vehicle public liability insurance and comprehensive general liability insurance, for no less than Two Million Dollars (2,000,000.00) respectively per occurrence. Proof of insurance must be provided to the Municipality of Lakeland Ridges upon request, prior to award.**
1. The Contractor must provide proof of WorkSafe NB coverage for all employees prior to award.

If the Contractor provides proof of WorkSafe NB coverage, and is awarded the tender, the CAO for Lakeland Ridges may request current documentation from the Contractor from time to time, which will show coverage. Failure to provide the appropriate documentation within the timeframe agreed to between the Contractor and the CAO, shall be grounds for termination of the contract.

2. When submitting the tender, please indicate:
  - The person(s) who will be doing the work.

- The amount to be charged for each plowing and sanding/salting occurrence.
  - A copy of this quote.
3. Quotes can be delivered in person, mailed, or emailed.

***All quotes must be received on or before October 10, 2025***

**\*\* “SKIFF LAKE GARBAGE & RECYCLE BIN SNOW REMOVAL” must be clearly marked on the front of the envelope \*\***

In person: Municipal office located at 199 Main Street in Canterbury  
Business hours are Monday – Friday 8am to 4pm

Mailed to: Municipality of Lakeland Ridges  
199 Main Street  
Canterbury, NB  
E6H 1M6

Email: [spatterson@lakelandridges.ca](mailto:spatterson@lakelandridges.ca)  
Please put “Skiff Lake Snow Removal” in the subject line.

LOWEST OR ANY QUOTE NOT NECESSARILY AWARDED

**NO SUB-CONTRACTING**

**MUNICIPALITY OF LAKELAND RIDGES  
SKIFF LAKE GARBAGE & RECYLCE BIN  
SNOW REMOVAL QUOTATION**

**CLOSING DATE: 4:00PM, OCTOBER 10, 2025**

**COMMITMENT**

Having examined the documents provided and having visited the project site, I/we hereby quote and offer to furnish all materials, tools, labor and equipment necessary for the carrying out and proper completion of the work and to perform the same in accordance with the aforementioned documents for the sum or sums of lawful money in Canada shown below:

*(HST is not to be included in price)*

*CPI will be used to calculate the rate for the 2026-2027 season*

**GARBAGE & RECYCLE BIN AREA**

Snow Removal Per Storm: \$ \_\_\_\_\_

Sanding/Salting Per Occurrence: \$ \_\_\_\_\_

**Dry Hydrant**

Snow Removal Per Storm: \$ \_\_\_\_\_

Sanding/Salting Per Occurrence: \$ \_\_\_\_\_

**NAME AND ADDRESS OF BIDDER (please print)**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**COMMUNITY:** \_\_\_\_\_

**POSTAL CODE:** \_\_\_\_\_

Work Telephone: \_\_\_\_\_

Residence: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_, 2025

EQUIPMENT	
YEAR	MODEL/DESCRIPTION