



## **Tree Service Registration Submission:**

The City of Vernon invites submissions from bonafide Arborist Contractors with a minimum of five years experience to be included on a pre-qualified Contractor list for Arborist & Tree Service requirements.

Submissions will be received at the office of the Purchasing Agent – Operation Services Office, 1900 – 48<sup>th</sup> Avenue, Vernon, BC, V1T 8Y7 or emailed to [pagent@vernon.ca](mailto:pagent@vernon.ca) or faxed to (250) 550-3523.

Pre-qualification submissions must consent to the City of Vernon verifying the information provided on their submission. Contractor's not able to comply fully with the minimum requirements will NOT qualify for registration with the City. Copies of certificates must be submitted with the Pre-Qualification Forms.

### **Pre-Qualification:**

1. Contractor must have a minimum of 3 years experience as a bonafide Arborist Contractor
2. Contractor must have a minimum of 1 ISA certified Arborist on staff
3. Submit mandatory documentation –proof of;
  - Arborist certification
  - \$2 M Public Liability Insurance with CoV & RDNO named as additional insured
  - WCB number or clearance letter
  - City of Vernon or inter-municipal business licence number
4. Ensure reference contact names & phone numbers are current.
5. Equipment photos are welcomed but not required.

The City will create a Contractor call out list based the following considerations.

<b>Criteria</b>	<b>Weight</b>
Rates – Mandatory Documentation must be in place	30%
Work Experience – Urban experience will be given preference	30%
Equipment	25%
References	15%
<b>Total</b>	<b>100%</b>

Once hired, Contractor to supply all labour, equipment and machinery necessary to complete all works. All work shall be completed within 14 days of receiving work order, unless otherwise specified. To ensure City of Vernon performance standards are met, the Contractor may be subject to a performance evaluation. If a situation develops where performance is not acceptable, a review on performance may warrant a suspension or termination. Contractor warrants it shall comply with all laws, rules and regulations applicable to the location of the Work, in particular, but without limitation, those concerning safety and WorksafeBC.



**CITY OF VERNON**  
**Purchasing Department (250) 550-3646 Fax (250) 550-3523**  
**2011 – Tree Services**  
**Pre-Qualification Registration Form**

<b>NAME OF REGISTERED OWNER/COMPANY:</b>		
<b>CONTACT NAME:</b>		
<b>ADDRESS:</b>	<b>POSTAL CODE:</b>	
<b>PHONE:</b>	<b>FAX:</b>	<b>EMAIL:</b>

<b>Number of Yrs as a bonafide Arborist Contractor</b>	
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	Aerial Truck	Chip Truck	Chipper	Stump Grinder	Other Equipment
<b>Max Working Height</b>					
<b>Make / Model</b>					
<b>Box Size / Capacity</b>					
<b>Year</b>					
<b>Hourly Rate</b>	\$	\$	\$	\$	\$
<b>Min Call Out Charge</b>	\$	\$	\$	\$	\$

	Climber / Bucket Operator	Labourer or Grounds Person	Stump Grinding Services
<b>Hourly Rate</b>	\$	\$	\$

	Truck / Chipper c/w 2 person crew
<b>Hourly Rate</b>	\$
<b>Emergency (2 hr response time) Hourly Rate</b>	\$

Vernon or Intermunicipal Business License	WorkSafe BC Coverage	CGL Insurance & Auto Liability Insurance	Arborist Certification #
<b>License #</b>	<b>WCB #</b>	<b>\$</b>	<b>Cert #</b>

**NOTE:** EQUIPMENT MUST BE WELL MAINTAINED AND SHALL CONFORM TO CVII REGULATIONS  
 EQUIPMENT AND TRUCKS SHALL BE HIRED ON AN ALL FOUND BASIS.  
 OPERATORS SHALL FOLLOW WORKSAFEBC SAFETY PRACTICES AND SHALL BE EQUIPPED WITH ALL SAFETY ITEMS  
 i.e.: (HARD HATS, HIGH VISIBILITY VESTS AND SAFETY FOOTWEAR)  
 FAILING TO MEET THE ABOVE REQUIREMENTS SHALL RESULT IN A LOSS OF WORK OPPORTUNITY

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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**SENIOR PERSONNEL**

Name	Yrs of Experience	Certification / Training

**COMPARABLE WORK EXPERIENCE / REFERENCES**

Work Description / Urban Experience	Site Location	Contracted By	Reference Contact Name & Phone #	Reference Check Evaluation (City Purposes)