

# **LITHGOW CITY COUNCIL**

**Tender No. 01/08**

**Supply of Pipes and fittings for South  
Bowenfels Pipe Line Project**

## **TENDER SUBMISSION DOCUMENTS**

- Form of Tender
- Schedule of Rates
- Quality Assurance
- Occupational Health, Safety  
and Rehabilitation System

# ATTACHMENT A - FORM OF TENDER

Tender NO: 01/08 South Littleton Pipe Line

TENDER CLOSING TIME: 12.00pm

*I/We the undersigned, being duly authorised to act on behalf of the Tenderer and having read all of the Request for Tender documents, submit on behalf of the Tenderer the attached Tender. In submitting this Tender, the Tenderer is making an offer to the Lithgow City Council that it will provide and perform the goods and services (including the provision and supply of all materials and labour) as named, shown, described and alluded to in this Tender response to:*

Supply of Pipe Line materials and valves fittings as shown in the schedule of rates

*at the prices or rates set out in Attachment B..*

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**NAME OF TENDERER:\*\***

**ABN:**

**ACN OR ARBN:**

**REGISTERED ADDRESS:**

**PRINCIPAL PLACE OF BUSINESS:**

**NAME OF CONTACT PERSON FOR THIS TENDER:**

**ADDRESS:**

**TELEPHONE:**

**FACSIMILE:**

**SIGNED FOR AND ON BEHALF OF THE TENDERER .....**

**BY:** ..... **POSITION:** .....  
(Print Name)

**\*\* NOTE: Where the Tender is submitted by a single person or corporation, the following details must be provided:**

- (i) if the Tenderer is a natural person, the full name and address of each such person must be specified together with their ABN;**
- (ii) if the Tenderer is a body corporate - the full name of the body corporate, ABN, the ACN or ARBN number, the registered office and the principal place of business;**
- (iii) if the Tenderer is a firm or partnership - the full name of the firm or partnership, ABN, ARBN number (if any), the principal place of business and the names of all principals or partners and their details as specified in paragraph (i) above.**

**Where the Tender is submitted by two (2) or more parties, the above details must be provided in respect of each party (depending on whether the party is a natural person, a body corporate or a firm or partnership).**

## ATTACHMENT B - SCHEDULE OF RATES

The Tenderer shall complete the Schedule by inserting in the "Rate" column the tendered rates, or where L.S. appears, by inserting in the "Amount" column the tendered Lump Sum for the items of work. Where a rate is tendered, the amount arrived at by multiplying the tendered rate by the estimated quantity shown hereunder shall be inserted in the "Amount" column.

Item No	Description	Unit	Qty.	Rate (\$)	Amount (\$)
1	<b>Pipe (as per specification)</b>				
	DN 250MM	Meters	1537		
	DN 300 MM	Meters	711		
2	<b>Bends ( as per specifications)</b>				
	250/11.25 Bend(V)	No	8		
	250/11.25 Bend (H)	No	15		
	250/90 Bend (H)	No	2		
	250/22.5 Bend (H)	No	3		
	250/45 Bend (H)	No	2		
	300/11.25 Bend (H)	No	5		
	300/22.5 Bend (H)	No	2		
	300/45 Bend (H)	No	1		
	300/90 Bend (H)	No	1		
3	<b>Valves (as per specifications)</b>				
	DN 100 Scour valve	No	5		
	DN 80 DAV	N <sup>o</sup>	4		
<b>TOTAL TENDER PRICE (GST Not Included)</b>					
<b>PLUS GST</b>					
<b>TOTAL</b>					

SIGNATURE OF TENDERER \_\_\_\_\_ DATE \_\_\_\_\_

FOR THE FIRM OF \_\_\_\_\_

## ATTACHMENT C - QUALITY ASSURANCE

The Tenderer shall supply the following information relating to Quality Assurance:

1. Has the Company an Officer responsible for quality functions? YES/NO
  
2. Has the company a documented Quality Manual?  
YES/NO
  
3. Has the Company documented Quality Procedures?  
YES/NO
  
4. What is the current status of the Company's Quality System?  
  
Third Party Certified.....  
Second Party Certified.....  
Substantial Implementation.....  
None.....  
Other (Please Specify) .....
  
5. Name & address of Company or Agency which provided Certification, including Certificate No, date certified and capability statement  
  
.....  
.....
  
6. Results of last audit  
  
No. of Major Non-conformances .....  
No. of Minor Non-conformances .....  
Date of last audit .....
  
7. What Standard (s) do the Company Quality Systems comply to:  
  
AS/NZS ISO 9001, 9002 or 9003 .....  
AS 3563 or others.....
  
8. Name and telephone number of the Company's Quality Assurance Representative for the Contract [Please print]  
  
.....  
.....  
.....  
Tel ( ) ..... Fax ( ) .....

## ATTACHMENT C - QUALITY ASSURANCE - CONTINUED

9. The documents listed in the following table shall be submitted with the Tender.

Company Quality Manual  
Quality Plan  
Inspection and Test Plan

Tenderer to tick the appropriate boxes in the following table:

DOCUMENT DESCRIPTION	Copy submitted with Tender	Sample submitted with Tender
Company Quality Manual		
Project Specific Quality Plan		
Inspection and Test Plan		

Remarks (if any)

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SIGNATURE OF TENDERER \_\_\_\_\_ DATE \_\_\_\_\_

FOR THE FIRM \_\_\_\_\_

# ATTACHMENT D - OCCUPATIONAL HEALTH, SAFETY AND REHABILITATION SYSTEM

The Tenderer shall supply the following information relating to Occupational Health, Safety and Rehabilitation (OHS&R):

1. Has the Tenderer an OHS&R system in place? Yes / No
  
2. If yes, does the Tenderer's OHS&R system comply with the requirements of the NSW Government's current OHS&R Management System Guidelines?  
Yes / No
  
3. Has the Tenderer's OHS&R system been accredited with a NSW Government Agency  
Yes / No

If yes,

(a) Indicate with which agency(s) accredited: .....

.....

(b) Date of last accreditation: .....

(c) Date of last audit: .....

4. Have any indications been given to the Tenderer that its accreditation has been / will be revoked?  
Yes / No

SIGNATURE OF TENDERER \_\_\_\_\_ DATE \_\_\_\_\_

FOR THE FIRM \_\_\_\_\_