

**SPECIFICATIONS:**

The City of Melfort will receive tenders for **(3) Swim EQ filters**. The replacement/install and removal of the old filters is to be included in the tender. The project will conform to and meet all the following specifications if possible:

Check Yes/No (This sheet must be returned with a FIRM (yes/no) indicated for each item.)

**A. GENERAL**

Yes/No

1.   Work to be completed between the dates of Sept 1-21st, 2017. To be adjusted if needed.
2.   Specs are 18.5 sq ft. per filter and 15gpm/sq. ft + 270 gpm per filter.
3.   36 " by 60" in size
4.   type of filtrations system \_\_\_\_\_

**B. SAFETY/OH & S**

Yes/No

1.   To have and supply own PPE as required.
2.   WCB certified.

**C. WARRANTY**

Yes/No

1.   Please note if your product has any manufacturer warranty.

**D. AUTHORIZED SIGNATURE:**

Dealer: \_\_\_\_\_

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

**CITY OF MELFORT  
COMMUNITY SERVICES**

**August 21, 2017**

**To: Tim Herzberg, Pool Manager  
Box 2230  
Melfort, SK S0E 1A0  
Phone: (306)752-5911 Fax: (306) 752-5911  
Email: pool@cityofmelfort.ca**

**TENDER CLOSING DATE: September 8<sup>th</sup>, 2017 at 1:00 P.M.**

**Tender Form For: (3) Swim EQ filters replacement**

**Tenders will be received at the office of the Facility Manager until 1:00 p.m., Friday September 8th, 2017.**

**The UNDERSIGNED, having carefully read the Standard Instructions to Bidders and having completed the Specification(s) sheets(s), DO HEREBY OFFER, in accordance with said Specifications and Instructions to Bidders, to supply and to conform to all the conditions therein for the following prices and guarantees:**

NET PRICE	\$ _____
GOODS & SERVICES TAX (5%)	\$ _____
PROVINCIAL SALES TAX (5%)	\$ _____
Total Tender Price	\$ _____

**\*The tender will be awarded to the bidder meeting specifications and having the lowest sum of base bid PLUS any combination of listed options as chosen by the City. Prices to be firm for thirty (30) days from tender opening.**

Company Name: \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_

Postal Code \_\_\_\_\_ Phone Number \_\_\_\_\_

**AUTHORIZED SIGNATURE:**

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

Print Name: \_\_\_\_\_

**Return tender in an envelope marked: "Tender for (3) Swim EQ Filters replacement TENDER CLOSING September 8th, 2017 @ 1:00 P.M.**