



Proposal Form

Glacier Creek Campground Host

2026-063-PKS

Proposals will be received on or before **11 AM PDT**
on **15 April, 2026**
(Closing Date and Time)

PROPOSAL SUBMISSION INSTRUCTIONS

1. Responses must be prepared using the RDCK Response Form. Additional information to the Response Form can be submitted as an appendix to the form with pre-approval from the RDCK's Representative prior to submission.
2. Responses must be submitted by email to the RDCK Representative.
 - In the email subject line enter: RFPQ Number and Name
 - The RDCK email system has an approximate 25 MB file size limit.
 - If your submission exceeds this limit, you must either:
 - request a secure file transfer link from the RDCK Representative; or
 - send your submission in multiple emails, clearly labeled (e.g., "Email 1 of 3", "Email 2 of 3").
3. The main Response must be submitted in Microsoft Word format. All supporting documents must be submitted in PDF format.
4. Respondents are responsible to allow ample time to complete the Response submission process should ensure they receive a receipt confirmation email from the RDCK Representative prior to the Closing Time.

Legal Business Name of Proponent*	
BC Business Registration #	
Contact Person and Title	
Business Address	
Telephone	
Email Address	

*The Legal Business Name indicated above must match your registered business name or, if a sole proprietor, the name on your government issued identification DBA your registered business name (if registered). This same name must appear on your Certificate of Insurance, Worker's Compensation Clearance and Direct Deposit Account information.

1 RDCK RIGHTS RESERVED – DEPARTURES, REQUIREMENTS AND REFERENCES

(a) FORM OF AGREEMENT - I have reviewed the [RDCK's Trades and Operations Service Agreement terms](#) and am prepared to enter into an Agreement with the RDCK on that basis. My proposed departures are listed below (list, if any). If no departures are listed, I accept the [RDCK's Trades and Operations Service Agreement terms](#) as is.
 Note: Add a row for each section listed.

Section #	Requested Departure(s) / Alternative(s) / Addition(s)

(b) SCHEDULES - I have reviewed all Schedules in this NRFP and am prepared to meet those requirements, amended by the following departures (list, if any). If no departures are listed, I accept all Schedules as is.
 Note: Add a row for each section listed.

Schedule	Section #	Requested Departure(s) / Alternative(s) / Addition(s)

(c) ASSUMPTIONS – Please clarify any assumption made as part of the Proposal below.

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(d) VERIFICATION OF REQUIREMENTS

(i) Legal Business Name: Provide your Business Registration Number listed in OrgBook BC (or the equivalent business registry in your province) or select “unregistered sole proprietor” if applicable.	Registration No. # _____ <input type="checkbox"/> Unregistered Sole Proprietor
(ii) Workers Compensation Coverage in Good Standing: Provide your WorkSafe BC assessment registration/account number (or equivalent registration for your province).	Registration No. # _____
(iii) Insurance Coverage as per NRFP Schedule E: Does your insurance coverage currently meet the RDCK’s insurance coverage requirements as per Schedule E of the NRFP?	<input type="checkbox"/> Yes <input type="checkbox"/> No

<p>If your insurance does not meet the RDCK’s insurance coverage requirements, are you willing to increase your insurance coverage to meet the requirements?</p> <p>If you are unable to meet the RDCK’s insurance coverage requirements, please attach a copy of your insurer’s Certificate of Insurance to this completed Proposal Submission Form for consideration.</p> <p>If selected as the Lead Proponent, do you agree to coordinate with your insurance broker to provide proof of insurance on the RDCK’s Standard Certificate of Insurance Form?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> I am unable to meet the RDCK’s insurance coverage requirements, but have attached my insurer’s COI to this Proposal Form.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>(iv) Vulnerable Sector Criminal Record Check – If awarded the contract, do you agree to provide proof of a clear Vulnerable Sector Criminal Record valid within 6 months prior to the contract start date for employees and subcontractors 18 years of age or older who will be involved in providing the Services under this contract?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>(v) Direct Deposit Form – If awarded the contract, do you agree to agree to complete the RDCK’s Vendor Information and Electronic Funds Transfer Form?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>(vi) If you are unable to meet any of the requirements above, please explain why:</p>	

<p>(e) REFERENCES – Proponent must be competent and capable of performing the Services requested and successfully delivered service contracts of similar size, scope and complexity. Provide three references below which may speak to those competencies and capabilities. The RDCK reserves the right to contact any person(s), agency(ies) or firm(s) listed and not listed as part of an independent review.</p>	
<p>Reference No. 1</p>	
<p>Description of Contract</p>	
<p>Work Performed</p>	
<p>Project Duration</p>	
<p>Contract Value</p>	
<p>Reference Information</p>	<p>Company</p> <p>Name:</p> <p>Phone Number:</p> <p>Email Address:</p>

Reference No. 2	
Description of Contract	
Work Performed	
Project Duration	
Contract Value	
Reference Information	Company
	Name:
	Phone Number:
	Email Address:

Reference No. 3	
Description of Contract	
Work Performed	
Project Duration	
Contract Value	
Reference Information	Company
	Name:
	Phone Number:
	Email Address:

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CORPORATE

(a) CAPABILITIES, CAPACITY AND RESOURCES - Provide information on the following (use the spaces provided and/or attach additional pages, if necessary):

(i) Please describe your experience working with the local government sector in general and with the RDCK specifically.

(ii) State relevant experience and qualifications as to the Services requested in the NRFP:

(b) SUSTAINABILITY AND ENVIRONMENTAL STEWARDSHIP: Describe initiatives, policies, programs and product choices that illustrate your company's efforts towards sustainable practices and environment responsibility as may be related to providing the Services:

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TECHNICAL

(a) APPROACH and METHODOLOGY - Summarize the key features of your Proposal and the technical approach you are proposing. Provide a brief description the various components required for successful completion of the Services.

(i) **Approach** - State how your organization will approach the service need and engage with the RDCK to deliver the services:

(ii) **Methodology and Work Plan** – Provide the methodology and work plan that you will utilize to meet the requirements of the scope of work.

(iii) **Challenges** – Describe the challenges or risk factors anticipated and how you intend to mitigate these.

(iii) **Safety** - State how you will address on-site safety.

(b) PROPOSED WORK SCHEDULE – Provide a proposed work schedule that would allow you to meet the daily obligations of the Campground Host

(c) START DATE	
(i) I am available and ready to start the Services on 11th of May, 2026. This date will be an important consideration in the evaluation.	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
(ii) If NO, please provide an explanation and your alternative proposed completion date:	

(d) CERTIFICATIONS – Please list any certifications and/or ratings required and/or relevant to the Services in this NRFP. Please note: A valid First Aid Certificate and Valid BC drivers license are mandatory requirements.

(e) KEY PERSONNEL – Identify your key personnel for the Services stated in the NRFP. No changes, additions or deletions are to be made to these Key Personnel without the RDCK’s written approval. Bio’s may be attached to this Proposal Form for additional detail.			
LINE ITEM	NAME	TITLE/POSITION	EXPERIENCE AND QUALIFICATIONS
(i)			
(ii)			
(iii)			
(iv)			

4 FINANCIAL

(a) FEE SCHEDULE	
<p>(i) The Park Host is eligible to be paid up to a maximum amount of \$4100/month for a total of \$17,500 (contract maximum) for the completion of the scope of services. Proponents must confirm agreement to the eligible maximum amount or can define a lower rate if they choose to do so. Please check the corresponding box (Yes or No) if you agree to the maximum eligible amount of \$4100/month for a maximum contract total of \$17,500. All amounts are exclusive of GST.</p>	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>(ii) If No, please provide a monthly rate that the proponent will charge to complete the scope of service:</p>	

(a) FEE SCHEDULE	
<p>(i) Proponents must complete the fields provided below. The RDCK’s budget for the Services is up to \$4,100 per month for a total of \$17,500 (excluding GST) for the Term of the Agreement. Proposals that exceed this amount may be rejected or may receive a lower evaluation score at the sole discretion of the RDCK. Please identify the per month and maximum contract price you are proposing for the Services below. Prices proposed are to be all inclusive; therefore, include all labour, material, equipment, transportation, permit fees and any other items required for provision of the Services.</p>	
RATE PER MONTH	\$
MAXIMUM CONTRACT PRICE SUBTOTAL	\$
GST	\$
MAXIMUM CONTRACT PRICE	\$

(b) PROPOSED PAYMENT SCHEDULE - Include your proposed payment schedule below.
<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Upon Completion of the Services <input type="checkbox"/> Other (please specify):

AUTHORIZATION

1 By submitting a Proposal, the Proponent:

- (a) agrees to all of the terms, conditions, and process rules of the NRFP;
- (b) agrees to be bound by the statements and representations made in the Proposal;
- (c) confirms it has conducted such investigations as were prudent and reasonable in preparing its Proposal; and
- (d) for those Proponents submitting by email or hardcopy, affirms and declares that the Proponent's authorized representative's name being signed, or an image of that signature being affixed on this form, will constitute the Proponent's legally binding signature.

I/We have the authority to sign on behalf of the Proponent and have duly read all documents.

SIGNED by:

(Signature of Proponent's Authorized Representative)

(Print Name and Title of Authorized Signatory)

(Signature of Authorized Signatory)

(Name and Title of Authorized Signatory)

DATED at _____ this ____ day of _____, 20____.