



Request for Quote

THIS IS NOT A PURCHASE ORDER

Walk in Fridge Freezer

Listowel Memorial Hospital
255 Elizabeth St East
Listowel, ON
N4W 2P5

Please visit us at our new website www.lwha.ca

Submission Details

Submission Deadlines

All submissions for responding to this request must be submitted electronically to the below contacts no later than:

October 10 2025

It is important to provide a response for each section in this RFQ.

Submission Questions and Clarifications

You may contact the following persons if you have any questions or require clarification on any topics covered in this Request for Quote:

Krista Robinson
Junior Purchaser
Listowel Wingham Hospitals Alliance
Phone: 519-291-3120 x 6398
Krista.robinson@lwha.ca

Electronic responses via email will be accepted.

Introduction and Executive Summary

LWHA is seeking quotes for a walk-in freezer.

This project will need to be completed by March 31 2026

If site visit is required, please coordinate with Krista Robinson or Steve Baxter.

Business Overview & Background

Please visit us at www.lwha.ca

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Selection Criteria

Our final selection will be based on your response to each section in this RFQ.

Instructions:

1. Quotations will not be considered unless this document is returned and signed.
2. If unable to quote, please return form advising to that effect.
3. LWHA reserves the right to accept or reject all or any part of this quotation.
4. If you have any questions please contact Krista Robinson.
5. Complete a quotation for the goods or services listed in Section 1 – Scope of Work
6. Respond to the terms and conditions Section 3 – Terms and Conditions

Section 1 - Scope of Work

Listowel Hospital Nutrition and Food Services team is needing to replace their aging freezer door. The freezer was originally installed in 2007, and in 2024 did not pass the health unit inspection.

- ***Remove existing door, hinges, frame, sill.***
- ***Repair concrete under sill as required***
- ***Non slip flooring to be installed in the area between the kitchen and the freezer***
- ***Replace sill, hinges and door***
- ***Disposal of old door – removed from site***

LWHA will look at different options for this quote. Turnkey (1 contract for all), or different contracts based on what You quote (example: door is 1, flooring is another, etc.)

Section 3 - Terms and Conditions

Incoterms 2010- EXW Wingham, ON

Contractors are required to have \$5 million liability insurance and provide proof of this. WSIB is also a requirement and proof must be provided.

LWHA reserves the right in its sole discretion to request clarification and/or further information from one or more prospective suppliers after closing without becoming obligated to offer the same opportunity to all prospective suppliers.

LWHA reserves the right in its sole discretion to negotiate modifications to any quotation received without becoming obligated to offer to negotiate with any other prospective supplier.

LWHA intends that a signed contract and purchase order for this project will be executed with the chosen supplier prior to any portion of the service being provided.

Section 4 - Acceptance Criteria and Payment

Acceptance is defined as being signed off by project manager that all items purchased installed and operating.

Complete Questionnaire below:

1. Quotation in Canadian Dollars?
2. Is the electrical equipment CSA or equivalent approved?
3. Are controlled goods involved (e.g. radioactive, alcohol, hazardous)?
4. If yes to item 3 above have you included MSDS?
5. Are permits or other certifications required?
6. Are your warranties clearly described?
7. Are there any services required – electrical, cabling, water pressure, temperature, etc.
8. What is your project timeline for completion? Please clearly define project schedule, as we will have to rent a portable freezer unit.
9. Where is your product serviced from?
10. Please accept payment terms as defined above.

Acknowledgement:

Company Name _____ Date _____

I/We _____ the undersigned hereby declare and acknowledge:

That I/we have examined, and agree to, the terms and conditions contained in this RFQ.

That full disclosure has been made of any conflict of interest or potential conflict of interest.

That I/we have marked as “confidential” all information so deemed by us.

Contact Information:

Address:

Phone:

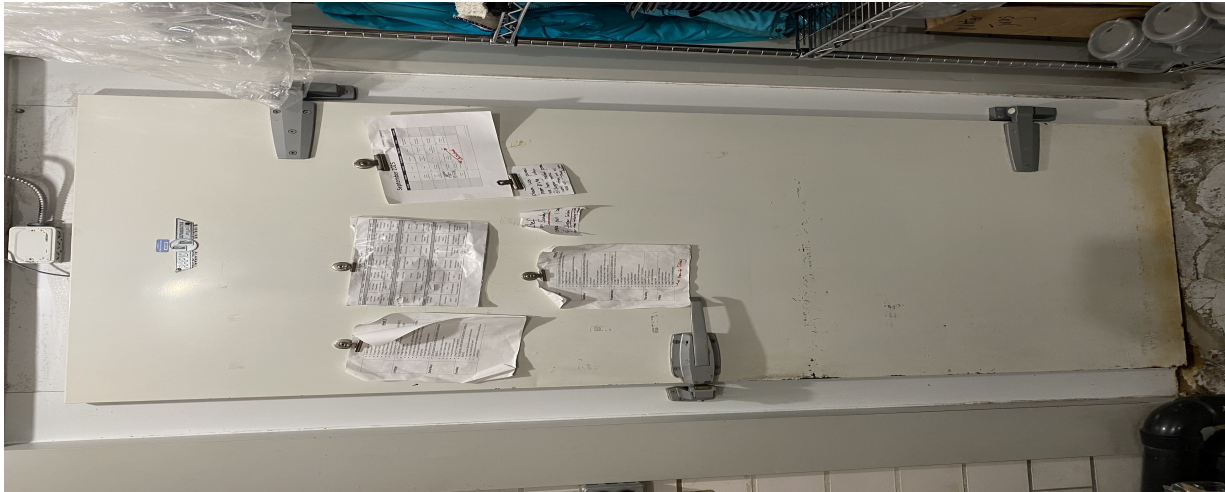
Fax:

Email:

Signature:

Date:

Section 5 - Reference Documents







Section 6 – Evaluation

Our team will evaluate all responses:

Evaluator
Steve Baxter, Manager Facilities
Stacey Bailey, Manager NFS
Rob MacDonald, Maintenance
Krista Robinson, Purchasing

Criteria
75% Lowest Price
25% Full response as requested above