

**RETURN BIDS TO:**  
**RETOURNER LES SOUMISSIONS À:**  
**Bid Receiving - PWGSC / Réception des soumissions**  
**- TPSGC**  
**11 Laurier St. / 11, rue Laurier**  
**Place du Portage, Phase III**  
**Core 0A1 / Noyau 0A1**  
**Gatineau, Québec K1A 0S5**  
**Bid Fax: (819) 997-9776**

**SOLICITATION AMENDMENT**  
**MODIFICATION DE L'INVITATION**

The referenced document is hereby revised; unless otherwise indicated, all other terms and conditions of the Solicitation remain the same.

Ce document est par la présente révisé; sauf indication contraire, les modalités de l'invitation demeurent les mêmes.

**Comments - Commentaires**

**Vendor/Firm Name and Address**  
**Raison sociale et adresse du**  
**fournisseur/de l'entrepreneur**

**Issuing Office - Bureau de distribution**  
Vehicles & Industrial Products Division  
11 Laurier St./11, rue Laurier  
7A2, Place du Portage, Phase III  
Gatineau, Québec K1A 0S5

<b>Title - Sujet</b> BUS, 20 PASSAGERS + 1 IN WHEELCHAIR		
<b>Solicitation No. - N° de l'invitation</b> 3B001-121690/C		<b>Amendment No. - N° modif.</b> 001
<b>Client Reference No. - N° de référence du client</b> 3B001-121690		<b>Date</b> 2014-10-28
<b>GETS Reference No. - N° de référence de SEAG</b> PW-\$\$HP-923-65911		
<b>File No. - N° de dossier</b> hp923.3B001-121690	<b>CCC No./N° CCC - FMS No./N° VME</b>	
<b>Solicitation Closes - L'invitation prend fin</b> <b>at - à 02:00 PM</b> <b>on - le 2014-11-25</b>		<b>Time Zone</b> <b>Fuseau horaire</b> Eastern Standard Time EST
<b>F.O.B. - F.A.B.</b> <b>Plant-Usine:</b> <input type="checkbox"/> <b>Destination:</b> <input checked="" type="checkbox"/> <b>Other-Autre:</b> <input type="checkbox"/>		
<b>Address Enquiries to: - Adresser toutes questions à:</b> Martin, Erik		<b>Buyer Id - Id de l'acheteur</b> hp923
<b>Telephone No. - N° de téléphone</b> (819) 956-3842 ( )		<b>FAX No. - N° de FAX</b> (819) 953-2953
<b>Destination - of Goods, Services, and Construction:</b> <b>Destination - des biens, services et construction:</b>		

**Instructions: See Herein**

**Instructions: Voir aux présentes**

<b>Delivery Required - Livraison exigée</b>	<b>Delivery Offered - Livraison proposée</b>
<b>Vendor/Firm Name and Address</b> <b>Raison sociale et adresse du fournisseur/de l'entrepreneur</b>	
<b>Telephone No. - N° de téléphone</b> <b>Facsimile No. - N° de télécopieur</b>	
<b>Name and title of person authorized to sign on behalf of Vendor/Firm</b> <b>(type or print)</b> <b>Nom et titre de la personne autorisée à signer au nom du fournisseur/</b> <b>de l'entrepreneur (taper ou écrire en caractères d'imprimerie)</b>	
<b>Signature</b>	<b>Date</b>

---

THIS AMENDMENT **001** IS ISSUED TO MODIFY THE REFERENCED SOLICITATION AS FOLLOWS:

- 1- Post questions and answers related to the referenced Solicitation;
- 2- Modify Annex "A" - Specifications - Bus, 20 passengers plus 1 passenger in a wheelchair

**Question #1:** Can the CMVSS conformity plate be non-metallic?

**Answer #1:** Section 1.15 states that the identification plate is metallic or equivalent. The equivalent product must be durable and resistant.

**Questions #2:** A floor without wheel wells is asked. Can we still provide the floor with wheel wells?

**Answer #2:** A floor without wheel wells is preferable for better visibility on the sides and easier access to seats but we will accept a floor with wheel wells.

**Question #3:** Do you want 20 passengers and one wheelchair all at once, or 20 passengers and when needed, the bus becomes 16 passengers and a wheelchair?

**Answer #3:** We want to have a bus for 20 passengers plus one wheelchair at the same time. See page 22 of 43 under the section, Summary description of deliverable: Acquisition of a bus, 20 passengers plus 1 passenger in a wheelchair.

-----

In Annex "A" - Specifications - Bus, 20 passengers plus 1 passenger in a wheelchair.

**REMOVE:**

## **GENERAL REQUIREMENTS**

### **1.15) IDENTIFICATION PLATE**

The supplier shall attach to the unit an identification plate with the following characteristics:

- Metal
- Attached to equipment
- Indicating:
  - make;
  - model;
  - serial number;
  - year of manufacture;
  - total loaded mass;\*

- empty mass.\*

\*If applicable

## INSERT:

## GENERAL REQUIREMENTS

### 1.15) IDENTIFICATION PLATE

The supplier shall attach to the unit an identification plate with the following characteristics:

- **Metal or equivalent**
- Attached to equipment
- Indicating:
  - make;
  - model;
  - serial number;
  - year of manufacture;
  - total loaded mass;\*
  - empty mass.\*

\*If applicable

## REMOVE:

## 10.0 EQUIPMENT

### B – WHEELCHAIR CONFIGURATION

#### *Wheelchair anchorage*

- Washers and retractable belts, “Q’S TRAIT,” “SLIDE’N CLICK” model or equivalent.
- Located at the back on the right side of the passenger compartment.
- Flat floor, without wheel wells.

## INSERT:

## 10.0 EQUIPMENT

### B – WHEELCHAIR CONFIGURATION

#### *Wheelchair anchorage*

- Washers and retractable belts, “Q’S TRAIT,” “SLIDE’N CLICK” model or equivalent.
- Located at the back on the right side of the passenger compartment.
- Flat Floor, **preferably without wheel wells.**

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED.