

**RETURN BIDS TO:**  
**RETOURNER LES SOUMISSIONS À:**  
Public Works and Government Services Canada  
ATB Place North Tower  
10025 Jasper Ave./10025 ave. Jasper  
5th floor/5e étage  
Edmonton  
Alberta  
T5J 1S6  
Bid Fax: (780) 497-3510

## 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  
Public Works and Government Services Canada  
ATB Place North Tower  
10025 Jasper Ave./10025 ave Jasper  
5th floor/5e étage  
Edmonton  
Alberta  
T5J 1S6

<b>Title - Sujet</b> Garrison Medical Buildings- Janitor	
<b>Solicitation No. - N° de l'invitation</b> W0127-15ES01/A	<b>Amendment No. - N° modif.</b> 005
<b>Client Reference No. - N° de référence du client</b> W0127-15ES01	<b>Date</b> 2015-05-25
<b>GETS Reference No. - N° de référence de SEAG</b> PW-\$EDM-014-10386	
<b>File No. - N° de dossier</b> EDM-4-37154 (014)	<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 2015-06-08</b>	<b>Time Zone</b> Fuseau horaire Mountain Standard Time MST
<b>F.O.B. - F.A.B.</b> <b>Plant-Usine:</b> <input type="checkbox"/> <b>Destination:</b> <input type="checkbox"/> <b>Other-Autre:</b> <input type="checkbox"/>	
<b>Address Enquiries to: - Adresser toutes questions à:</b> Lau (EDM), Chris	<b>Buyer Id - Id de l'acheteur</b> edm014
<b>Telephone No. - N° de téléphone</b> (780) 497-3981 ( )	<b>FAX No. - N° de FAX</b> (780) 497-3510
<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 is raised to answer the following questions:**

**1. What is the total number of patient turns expected?**

Sick parade is 10-15 per CDU per day, then approx. 20 per Clinician per Day. Although housekeeping is not required in between patients as the Medics in each CDU are responsible for cleaning and disinfecting stretchers and equipment used.

**2. What is the total number of operations expected per month?**

We do minor surgeries only approx. 12 per month.

**3. Total list of the types of equipment that are to be cleaned during patient turns? And the quantity of each equipment type per room? (See: Guide for Cleaning Services Chart)**

No equipment cleaning - Clinic staff clean between patients.

**ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME AND IN FULL EFFECT**