



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 0B2 / Noyau 0B2

Gatineau

Québec

K1A 0S5

Bid Fax: (819) 997-9776

Revision to a Request for a Standing Offer

Révision à une demande d'offre à commandes

Regional Individual Standing Offer (RISO)

Offre à commandes individuelle régionale (OCIR)

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

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

Comments - Commentaires

This requirement contains a Security Requirement.

Vendor/Firm Name and Address

Raison sociale et adresse du
fournisseur/de l'entrepreneur

Issuing Office - Bureau de distribution

Maintenance & Professional Consulting Services
Division (FK)
11 Laurier St./ 11, rue Laurier
3C2, Place du Portage, Phase III
Gatineau
Québec
K1A 0S5

Title - Sujet ERA STANDING OFFER		
Solicitation No. - N° de l'invitation EP913-161733/A		Date 2016-01-18
Client Reference No. - N° de référence du client 20161733		Amendment No. - N° modif. 001
File No. - N° de dossier fk295.EP913-161733	CCC No./N° CCC - FMS No./N° VME	
GETS Reference No. - N° de référence de SEAG PW-\$\$FK-295-68673		
Date of Original Request for Standing Offer Date de la demande de l'offre à commandes originale		2015-12-18
Solicitation Closes - L'invitation prend fin at - à 02:00 PM on - le 2016-02-02		Time Zone Fuseau horaire Eastern Standard Time EST
Address Enquiries to: - Adresser toutes questions à: Rochon, Francine J.		Buyer Id - Id de l'acheteur fk295
Telephone No. - N° de téléphone (819) 956-2701 ()		FAX No. - N° de FAX () -
Delivery Required - Livraison exigée		
Destination - of Goods, Services, and Construction: Destination - des biens, services et construction:		
Security - Sécurité This revision does not change the security requirements of the Offer. Cette révision ne change pas les besoins en matière de sécurité de la présente offre.		

Instructions: See Herein

Instructions: Voir aux présentes

Acknowledgement copy required Accusé de réception requis	Yes - Oui <input type="checkbox"/>	No - Non <input type="checkbox"/>
The Offeror hereby acknowledges this revision to its Offer. Le proposant constate, par la présente, cette révision à son offre.		
Signature	Date	
Name and title of person authorized to sign on behalf of offeror. (type or print) Nom et titre de la personne autorisée à signer au nom du proposant. (taper ou écrire en caractères d'imprimerie)		
For the Minister - Pour le Ministre		

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AMENDMENT 001

Amendment 001 is issued to delete and replace under PART 4, EVALUATION PROCEDURES AND BASIS OF SELECTION, 4.1.1.1 Offeror's Experience and Past Performance to 4.1.1.1.15 inclusively as follows:

4.1.1.1 Offeror's Experience and Past Performance

The Offeror must provide evidence of its recent years experience and past performance by referencing one (1) recent, completed or ongoing project reference for each of the work streams (*services*) identified at 4.1.1.1.1 through 4.1.1.1.15. **The Offeror must complete the following grid in order to demonstrate that it has the required experience. Failure to complete the grid below with the required information will render the offer non-responsive.**

- Recent, completed or ongoing project reference is defined as project reference rendered from January 2008 up to solicitation closing date.

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4.1.1.1.1 Storage Tank Compliance Assessments/Audits

Name of client organization or client company. The Offeror cannot use its own company as reference.	Project Reference: _____
Name and title of client contact who can confirm the information presented in the proposal	Name: _____ Title: _____
Telephone and e-mail address of client contact	Phone Number: _____ E-mail: _____
Performance period of the project <i>(indicate year, month, day)</i>	Start date: _____ (year/month/day) Completion date: _____ (year/month/day)
Scope of service(s) rendered <i>(use additional sheet (s) if space provided is not enough)</i>	_____ _____ _____ _____

4.1.1.1.2 Halocarbon Containing Equipment Compliance Assessments/Audits

Name of client organization or client company. The Offeror cannot use its own company as reference.	Project Reference: _____
Name and title of client contact who can confirm the information presented in the proposal	Name: _____ Title: _____
Telephone and e-mail address of client contact	Phone Number: _____ E-mail: _____
Performance period of the project <i>(indicate year, month, day)</i>	Start date: _____ (year/month/day) Completion date: _____ (year/month/day)
Scope of service(s) rendered <i>(use additional sheet (s) if space provided is not enough)</i>	_____ _____ _____ _____

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4.1.1.1.3 Hazardous Materials Compliance Assessments/Audits

Name of client organization or client company. The Offeror cannot use its own company as reference.	Project Reference: _____
Name and title of client contact who can confirm the information presented in the proposal	Name: _____ Title: _____
Telephone and e-mail address of client contact	Phone Number: _____ E-mail: _____
Performance period of the project <i>(indicate year, month, day)</i>	Start date: _____ (year/month/day) Completion date: _____ (year/month/day)
Scope of service(s) rendered <i>(use additional sheet (s) if space provided is not enough)</i>	_____ _____ _____ _____

4.1.1.1.4 Inventories for Storage Tank Systems, Halocarbon-containing Equipment and In-use PCB Containing Equipment

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Telephone and e-mail address of client contact	Phone Number: _____ E-mail: _____
Performance period of the project <i>(indicate year, month, day)</i>	Start date: _____ (year/month/day) Completion date: _____ (year/month/day)
Scope of service(s) rendered <i>(use additional sheet (s) if space provided is not enough)</i>	_____ _____ _____ _____

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4.1.1.1.5 Hazardous Materials and Waste Inventories

Name of client organization or client company. The Offeror cannot use its own company as reference.	Project Reference: _____
Name and title of client contact who can confirm the information presented in the proposal	Name: _____ Title: _____
Telephone and e-mail address of client contact	Phone Number: _____ E-mail: _____
Performance period of the project <i>(indicate year, month, day)</i>	Start date: _____ (year/month/day) Completion date: _____ (year/month/day)
Scope of service(s) rendered <i>(use additional sheet (s) if space provided is not enough)</i>	_____ _____ _____ _____

4.1.1.1.6 Species at Risk Site Surveys

Name of client organization or client company. The Offeror cannot use its own company as reference.	Project Reference: _____
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Performance period of the project <i>(indicate year, month, day)</i>	Start date: _____ (year/month/day) Completion date: _____ (year/month/day)
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4.1.1.1.7 Lab Decontamination Assessments

Name of client organization or client company. The Offeror cannot use its own company as reference.	Project Reference: _____
Name and title of client contact who can confirm the information presented in the proposal	Name: _____ Title: _____
Telephone and e-mail address of client contact	Phone Number: _____ E-mail: _____
Performance period of the project (indicate year, month, day)	Start date: _____ (year/month/day) Completion date: _____ (year/month/day)
Scope of service(s) rendered (use additional sheet (s) if space provided is not enough)	_____ _____ _____ _____

4.1.1.1.8 General Phase-Out Plans

Name of client organization or client company. The Offeror cannot use its own company as reference.	Project Reference: _____
Name and title of client contact who can confirm the information presented in the proposal	Name: _____ Title: _____
Telephone and e-mail address of client contact	Phone Number: _____ E-mail: _____
Performance period of the project (indicate year, month, day)	Start date: _____ (year/month/day) Completion date: _____ (year/month/day)
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4.1.1.1.9 Halocarbon Phase-Out Plans

Name of client organization or client company. The Offeror cannot use its own company as reference.	Project Reference: _____
Name and title of client contact who can confirm the information presented in the proposal	Name: _____ Title: _____
Telephone and e-mail address of client contact	Phone Number: _____ E-mail: _____
Performance period of the project <i>(indicate year, month, day)</i>	Start date: _____ (year/month/day) Completion date: _____ (year/month/day)
Scope of service(s) rendered <i>(use additional sheet (s) if space provided is not enough)</i>	_____ _____ _____ _____

4.1.1.1.10 Halocarbon Management Plans

Name of client organization or client company. The Offeror cannot use its own company as reference.	Project Reference: _____
Name and title of client contact who can confirm the information presented in the proposal	Name: _____ Title: _____
Telephone and e-mail address of client contact	Phone Number: _____ E-mail: _____
Performance period of the project <i>(indicate year, month, day)</i>	Start date: _____ (year/month/day) Completion date: _____ (year/month/day)
Scope of service(s) rendered <i>(use additional sheet (s) if space provided is not enough)</i>	_____ _____ _____ _____

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4.1.1.1.11 PCB Management Plans

Name of client organization or client company. The Offeror cannot use its own company as reference.	Project Reference: _____
Name and title of client contact who can confirm the information presented in the proposal	Name: _____ Title: _____
Telephone and e-mail address of client contact	Phone Number: _____ E-mail: _____
Performance period of the project (indicate year, month, day)	Start date: _____ (year/month/day) Completion date: _____ (year/month/day)
Scope of service(s) rendered (use additional sheet (s) if space provided is not enough)	_____ _____ _____ _____

4.1.1.1.12 Storage Tank Management Plans

Name of client organization or client company. The Offeror cannot use its own company as reference.	Project Reference: _____
Name and title of client contact who can confirm the information presented in the proposal	Name: _____ Title: _____
Telephone and e-mail address of client contact	Phone Number: _____ E-mail: _____
Performance period of the project (indicate year, month, day)	Start date: _____ (year/month/day) Completion date: _____ (year/month/day)
Scope of service(s) rendered (use additional sheet (s) if space provided is not enough)	_____ _____ _____ _____

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4.1.1.1.13 Hazardous Materials and Waste Management Plans

Name of client organization or client company. The Offeror cannot use its own company as reference.	Project Reference: _____
Name and title of client contact who can confirm the information presented in the proposal	Name: _____ Title: _____
Telephone and e-mail address of client contact	Phone Number: _____ E-mail: _____
Performance period of the project (indicate year, month, day)	Start date: _____ (year/month/day) Completion date: _____ (year/month/day)
Scope of service(s) rendered (use additional sheet (s) if space provided is not enough)	_____ _____ _____ _____ _____

4.1.1.1.14 Environmental Emergency Response Planning

Name of client organization or client company. The Offeror cannot use its own company as reference.	Project Reference: _____
Name and title of client contact who can confirm the information presented in the proposal	Name: _____ Title: _____
Telephone and e-mail address of client contact	Phone Number: _____ E-mail: _____
Performance period of the project (indicate year, month, day)	Start date: _____ (year/month/day) Completion date: _____ (year/month/day)
Scope of service(s) rendered (use additional sheet (s) if space provided is not enough)	_____ _____ _____ _____ _____

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4.1.1.1.15 Lab Decontamination Planning

Name of client organization or client company. The Offeror cannot use its own company as reference.	Project Reference: _____
Name and title of client contact who can confirm the information presented in the proposal	Name: _____ Title: _____
Telephone and e-mail address of client contact	Phone Number: _____ E-mail: _____
Performance period of the project <i>(indicate year, month, day)</i>	Start date: _____(year/month/day) Completion date: _____(year/month/day)
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All other terms and conditions shall remain the same.