



RETURN BIDS TO:
RETOURNER LES SOUMISSIONS À:
Bid Receiving Public Works and Government
Services Canada/Réception des soumissions
Travaux publics et Services gouvernementaux
Canada
1713 Bedford Row
Halifax, N.S./Halifax, (N.É.)
B3J 1T3
Nova Scotia
Bid Fax: (902) 496-5016

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
Atlantic Region Acquisitions/Région de l'Atlantique
Acquisitions
1713 Bedford Row
Halifax, N.S./Halifax, (N.É.)
B3J 3C9
Nova Scot

Title - Sujet Buoyancy-Driven Coastal Gliders	
Solicitation No. - N° de l'invitation FP934-160005/A	Amendment No. - N° modif. 001
Client Reference No. - N° de référence du client FP934-16-0005	Date 2016-10-12
GETS Reference No. - N° de référence de SEAG PW-\$HAL-309-9934	
File No. - N° de dossier HAL-6-77085 (309)	CCC No./N° CCC - FMS No./N° VME
Solicitation Closes - L'invitation prend fin at - à 02:00 PM on - le 2016-11-03	
Time Zone Fuseau horaire Atlantic Daylight Saving Time ADT	
F.O.B. - F.A.B. Plant-Usine: <input type="checkbox"/> Destination: <input checked="" type="checkbox"/> Other-Autre: <input type="checkbox"/>	
Address Enquiries to: - Adresser toutes questions à: MacNeil, Blaine A.	Buyer Id - Id de l'acheteur hal309
Telephone No. - N° de téléphone (902) 496-5180 ()	FAX No. - N° de FAX (902) 496-5016
Destination - of Goods, Services, and Construction: Destination - des biens, services et construction:	

Instructions: See Herein

Instructions: Voir aux présentes

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

Amendment #1

1. Please note that the quantity of gliders to be purchased under this contract has been revised to firm purchase of four (4) gliders with an option to purchase up to three (3) more within one year of contract award. The revised Basis of Payment is attached below.

2. In the Statement of Requirement, line 10 has been revised to read: "Wet Labs Triplet Eco Puck (chlorophyll-a fluorescence, colour dissolved organicmatter (CDOM) **fluorescence and backscatter at 660 nm**)".

All other terms and conditions remain unchanged.

Annex B (Revision 1)

Basis of Payment

Table 1

Price per glider inclusive of all equipment required under the Statement of Requirement:	\$_____
Extended total (quantity 4)	\$_____
Total	\$_____

If the bidder is willing to offer DFO to purchase up to three (3) additional gliders at the same unit price as above, within one year of initial contract award, please indicate (YES/NO): _____ This option will not be evaluated.

Please include any pricing for optional items noted in the Statement of Requirement below. Add details or include technical documentation as required. This will not be evaluated and may or may not be purchased at a later date.

Table 2

		Price
1	Additional pucks	\$_____ (ea)
2	Hydrophone	\$_____ (ea)
3	On-site training	\$_____ (lot)