



**RETURN BIDS TO:
RETOURNER LES SOUMISSIONS À:**

Regional Manager/Real Property
Contracting/PWGSC
Ontario Region, Tendering Office
12th Floor, 4900 Yonge Street
Toronto, Ontario
M2N 6A6
Ontario

**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

Address inquiries to the Contracting Officer at
cindy.marshall@pwgsc.gc.ca

Vendor/Firm Name and Address

Raison sociale et adresse du
fournisseur/de l'entrepreneur

Issuing Office - Bureau de distribution

Regional Manager/Real Property Contracting/PWGSC
Ontario Region, Tendering Office
12th Floor, 4900 Yonge Street
Toronto, Ontario
M2N 6A6
Ontario

Title - Sujet Port Stanley Environmental Remed.	
Solicitation No. - N° de l'invitation EQ447-180524/A	Amendment No. - N° modif. 001
Client Reference No. - N° de référence du client R.013137.007	Date 2017-07-27
GETS Reference No. - N° de référence de SEAG PW-\$PWL-048-2307	
File No. - N° de dossier PWL-7-40016 (048)	CCC No./N° CCC - FMS No./N° VME
Solicitation Closes - L'invitation prend fin at - à 02:00 PM on - le 2017-08-10	Time Zone Fuseau horaire Eastern Daylight Saving Time EDT
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: Marshall, Cindy	Buyer Id - Id de l'acheteur pwl048
Telephone No. - N° de téléphone (416) 512-5867 ()	FAX No. - N° de FAX (416) 512-5862
Destination - of Goods, Services, and Construction: Destination - des biens, services et construction: PWGSC/TPSGC Joseph Shepard Building 32 4900 Yonge Street Toronto, ON M2N 6A6 Canada	

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

Solicitation Amendment 001 is issued to revise the Mandatory Requirements.

At **APPENDIX 5 - QUALIFICATIONS FORM (MANDATORY REQUIREMENTS) MANDATORY QUALIFICATIONS AND SUBMISSIONS**

Delete in its entirety.

Insert: **APPENDIX 5 - QUALIFICATIONS FORM (MANDATORY REQUIREMENTS)
MANDATORY QUALIFICATIONS AND SUBMISSIONS**

- 1a. The Bidder **Must** demonstrate past performance of the contractor or horticultural subcontractor responsible for executing the duties in Section 32 92 19.13 by submitting with their proposal two (2) successfully completed seeding and planting projects of similar size and scope as per the solicitation where the completed surface area of the seeding and planting was five (5) hectares or greater and projects must have been completed within five (5) years of the bid closing date. At least one (1) of the referenced projects must be located in similar zones as Southwestern Ontario.
- 1b. The Bidder **Must** demonstrate the proposed on-site field supervisor responsible for the execution of the duties in Section 32 92 19.13 has experience managing seeding and planting projects to completion by submitting with their proposal two (2) successfully completed projects of similar size and scope as per the solicitation where the surface area on which the seeding and planting was completed was a minimum of five (5) hectares or greater and completed within five (5) years of the bid closing date. At least one (1) of the referenced projects must be located in similar zones as Southwestern Ontario.
2. Each Proponent must provide with their bid, information demonstrating that they meet the above criteria (1a & 1b).

Bidders must complete the forms included herein or a reasonable facsimile, which includes all of the information contained therein. These forms must be included as part of the bid submission in "Envelope One - QUALIFICATIONS"

Form No. 1 - Contractor's Information

Form No. 2 – Submit 2 Projects to demonstrate the Bidder managed seeding and planting projects to completion.

Form No. 3 – Submit 2 Projects to demonstrate experience of the Bidders' proposed on-site field supervisor where they managed seeding and planting projects to completion.

Any Bid that fails to submit the required information or fails to meet any of the mandatory qualifications above may be declared non-compliant in which case it would receive no further consideration. "Envelope Two - PRICE", shall be returned unopened, for any bid declared non-compliant.

**APPENDIX 5 - QUALIFICATIONS FORM
FORM No. 1**

**CONTRACTOR'S INFORMATION
(THIS FORM OR A REASONABLE FACSIMILE, MUST BE INCLUDED IN
ENVELOPE 1 - QUALIFICATIONS)**

Company Name: _____

Full Address: _____

Telephone Number: _____

E-mail Address: _____

Fax Number (if applicable): _____

Contact Name: _____

Title: _____

Firms' Main Field of Activity: _____

**APPENDIX 5 - QUALIFICATIONS FORM
FORM No. 2**

PREVIOUS LANDSCAPING PROJECTS

PROJECT ONE

**THIS FORM OR A REASONABLE FACSIMILE, MUST BE INCLUDED IN
ENVELOPE 1 – QUALIFICATIONS**

Title of Project: _____
Name and Location of Work: _____
Municipality and Province: _____
Description of Work (seeding and planting): _____

Size of the Project
(Surface area): _____ Hectare

Final Completion Date: _____

Final Value of all Work: _____

Contact Name of Project Client: _____
Telephone: _____

Was the seeding and planting project located in similar zones as Southwestern Ontario?

Yes (___) No (___)

This is to certify that we completed the seeding and planting for the project referenced above.

Signature

Date

Please be advised PWGSC reserves the right to contact the person named above to verify the information contained herein.

**APPENDIX 5 - QUALIFICATIONS FORM
FORM No. 2**

PREVIOUS LANDSCAPING PROJECTS

PROJECT TWO

**THIS FORM OR A REASONABLE FACSIMILE, MUST BE INCLUDED IN
ENVELOPE 1 – QUALIFICATIONS**

Title of Project: _____
Name and Location of Work: _____
Municipality and Province: _____
Description of Work (seeding and planting): _____

Size of the Project
(Surface area): _____ Hectare

Final Completion Date: _____

Final Value of all Work: _____

Contact Name of Project Client: _____
Telephone: _____

Was the seeding and planting project located in similar zones as Southwestern Ontario?

Yes () No ()

This is to certify that we completed the seeding and planting for the project referenced above.

Signature

Date

Please be advised PWGSC reserves the right to contact the person named above to verify the information contained herein.

**APPENDIX 5 - QUALIFICATIONS FORM
FORM No. 3**

**ON-SITE FIELD SUPERVISOR
PROEJCT ONE**

**THIS FORM OR A REASONABLE FACSIMILE, MUST BE INCLUDED IN
ENVELOPE 1 – QUALIFICATIONS**

Demonstrate On-Site Field Supervisor individual experience as follows:

The Bidder **Must** demonstrate the proposed on-site field supervisor responsible for the execution of the duties in Section 32 92 19.13 has experience managing seeding and planting projects to completion by submitting with their proposal two (2) successfully completed projects of similar size and scope as per the solicitation where the surface area on which the seeding and planting was completed was a minimum of five (5) hectares or greater and completed within five (5) years of the bid closing date. At least one (1) of the referenced projects must be located in similar zones as Southwestern Ontario.

For the Site Supervisor specified, the Bidder **MUST** complete the 'On-Site Field Supervisor Information' section.

On-Site Field Supervisor Information:

On-Site Field Supervisor's Name: _____

Years of Experience: _____

Project Title: _____

Project Location: _____

Project Completion Date: _____

Project Description: _____

Size of the Project:

(Surface area) _____ Hectare

Project Client: _____

Contact Information: Name: _____

Telephone no.: _____ Fax (if applicable): _____

E-mail address: _____

Was the seeding and planting project located in similar zones as Southwestern Ontario?

Yes () No ()

I, the undersigned, hereby certify that the information provided herein is accurate to the best of my knowledge.

Name (print): _____ Title: _____

Signature: _____ Date: _____

Please be advised PWGSC reserves the right to contact the person named above to verify the information contained herein.

APPENDIX 5 - QUALIFICATIONS FORM
FORM No. 3

ON-SITE FIELD SUPERVISOR
PROEJCT TWO

THIS FORM OR A REASONABLE FACSIMILE, MUST BE INCLUDED IN
ENVELOPE 1 – QUALIFICATIONS

Demonstrate On-Site Field Supervisor individual experience as follows:

The Bidder **Must** demonstrate the proposed on-site field supervisor responsible for the execution of the duties in Section 32 92 19.13 has experience managing seeding and planting projects to completion by submitting with their proposal two (2) successfully completed projects of similar size and scope as per the solicitation where the surface area on which the seeding and planting was completed was a minimum of five (5) hectares or greater and completed within five (5) years of the bid closing date. At least one (1) of the referenced projects must be located in similar zones as Southwestern Ontario.

For the Site Supervisor specified, the Bidder **MUST** complete the 'On-Site Field Supervisor Information' section.

On-Site Field Supervisor Information:

On-Site Field Supervisor's Name: _____

Years of Experience: _____

Project Title: _____

Project Location: _____

Project Completion Date: _____

Project Description: _____

Size of the Project:

(Surface area) _____ Hectare

Project Client: _____

Contact Information: Name: _____

Telephone no.: _____ Fax (if applicable): _____

E-mail address: _____

Was the seeding and planting project located in similar zones as Southwestern Ontario?

Yes (___) No (___)

I, the undersigned, hereby certify that the information provided herein is accurate to the best of my knowledge.

Name (print): _____ Title: _____

Signature: _____ Date: _____

Please be advised PWGSC reserves the right to contact the person named above to verify the information contained herein.