



RETURN BIDS TO:

RETOURNER LES SOUMISSIONS À:

Public Works and Government Services Canada
Canada Place / Place du Canada
9700 Jasper Ave. / 9700 ave. Jaspe
10th floor / 10e étage
Edmonton
Alberta
T5J 4C3
Bid Fax: (780) 497-3510

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

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
Canada Place / Place du Canada
9700 Jasper Ave. / 9700 ave. Jaspe
10th floor / 10e étage
Edmonton
Alberta
T5J 4C3

Title - Sujet General Construction Services	
Solicitation No. - N° de l'invitation W6895-190036/A	Date 2019-09-30
Client Reference No. - N° de référence du client DND-W6895-190036	Amendment No. - N° modif. 001
File No. - N° de dossier PWU-9-42093 (004)	CCC No./N° CCC - FMS No./N° VME
GETS Reference No. - N° de référence de SEAG PW-\$PWU-004-11696	
Date of Original Request for Standing Offer Date de la demande de l'offre à commandes originale 2019-09-20	
Solicitation Closes - L'invitation prend fin at - à 02:00 PM on - le 2019-10-21	
Address Enquiries to: - Adresser toutes questions à: Espedido, Karielen K.	Buyer Id - Id de l'acheteur pwu004
Telephone No. - N° de téléphone (780) 231-4719 ()	FAX No. - N° de FAX (780) 497-3510
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	Yes - Oui	No - Non
Accusé de réception requis	<input type="checkbox"/>	<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		

Solicitation No. - N° de l'invitation
W6895-190036/A

Client Ref. No. - N° de réf. du client
DND-W6895-190036

Amd No. – N de la modif.
001

File No. - N° du dossier
PWU-9-42093 (004)

Buyer ID - Id de l'acheteur
pwu004

CCC No./N° CCC - FMS No./N° VME

This amendment has been raised with the following changes:

AMENDMENT #001:

Note the address has changed on Page 1.

Replace Annex F attachment with the following.

END OF AMENDMENT

CERTIFICATE OF INSURANCE

Page 1 of 2


 Travaux publics et
 Services gouvernementaux
 Canada

 Public Works and
 Government Services
 Canada

Description and Location of Work General Construction Services Cold Lake, AB	Contract No.
	Project No.

Name of Insurer, Broker or Agent	Address (No., Street)	City	Province	Postal Code
Name of Insured (Contractor)	Address (No., Street)	City	Province	Postal Code
Additional Insured Her Majesty the Queen in Right of Canada as represented by the Minister of Public Works and Government Services				

Type of Insurance	Insurer Name and Policy Number	Inception Date D / M / Y	Expiry Date D / M / Y	Limits of Liability		
				Per Occurrence	Annual General Aggregate	Completed Operations Aggregate
Commercial General Liability Umbrella/Excess Liability				\$	\$	\$
				\$	\$	\$

I certify that the above policies were issued by insurers in the course of their Insurance business in Canada, are currently in force and include the applicable insurance coverage's stated on page 2 of this Certificate of Insurance, including advance notice of cancellation / reduction in coverage.

Name of person authorized to sign on behalf of Insurer(s) (Officer, Agent, Broker)	Telephone number
Signature	Date D / M / Y

CERTIFICATE OF INSURANCE Page 2 of 2

General

The insurance policies required on page 1 of the Certificate of Insurance must be in force and must include the insurance coverage listed under the corresponding type of insurance on this page.

The policies must insure the Contractor and must include Her Majesty the Queen in Right of Canada as represented by the Minister of Public Works and Government Services as an additional Insured.

The insurance policies must be endorsed to provide Canada with not less than thirty (30) days notice in writing in advance of a cancellation of insurance or any reduction in coverage.

Without increasing the limit of liability, the policies must protect all insured parties to the full extent of coverage provided. Further, the policies must apply to each Insured in the same manner and to the same extent as if a separate policy had been issued to each.

Commercial General Liability

The insurance coverage provided must not be substantially less than that provided by the latest edition of IBC Form 2100.

The policy must either include or be endorsed to include coverage for the following exposures or hazards if the Work is subject thereto:

- (a) Blasting.
- (b) Pile driving and caisson work.
- (c) Underpinning.
- (d) Removal or weakening of support of any structure or land whether such support be natural or otherwise if the work is performed by the insured contractor.

The policy must have the following minimum limits:

- (a) **\$2,000,000** Each Occurrence Limit;
- (b) **\$2,000,000** General Aggregate Limit per policy year if the policy contains a General Aggregate; and
- (c) **\$2,000,000** Products/Completed Operations Aggregate Limit.

Umbrella or excess liability insurance may be used to achieve the required limits.