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Bid Receiving Public Works and Government
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1713 Bedford Row
Halifax, N.S./Halifax, (N.É.)
Halifax
Nova Scotia
B3J 1T3
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.)
Halifax
Nova Scotia
B3J 1T3

Title - Sujet Cryogenic Storage Freezer	
Solicitation No. - N° de l'invitation 31028-200797/A	Amendment No. - N° modif. 001
Client Reference No. - N° de référence du client 31028-20-0797	Date 2019-11-21
GETS Reference No. - N° de référence de SEAG PW-SHAL-406-10805	
File No. - N° de dossier HAL-9-83089 (406)	CCC No./N° CCC - FMS No./N° VME
Solicitation Closes - L'invitation prend fin at - à 02:00 PM on - le 2019-12-03	
Time Zone Fuseau horaire Atlantic Standard Time AST	
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: Matheson, Valerie	Buyer Id - Id de l'acheteur hal406
Telephone No. - N° de téléphone (902) 403-6236 ()	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 001 is issued to respond to questions raised after the release of the Solicitation.

Q1: The system must be delivered and installed at 270 Sandy Cove Road, Ketch Harbour, NS. As installation means delivery into the lab- is there an elevator available for the movers from the receiving dock?

A1: The unit location is on the main level therefore no elevator is required.

Q2: **Reference to Annex A, point 2.1:** "The cryogenic storage freezer must not have an external dimension greater than 30 L x 69 W x 43 H in. (76.2 x 175.3 x 109.2 cm)". Is a cryogenic freezer with length of 880mm including handle, lock and hinges, and 780mm without those, acceptable?

A2: As long as it can hold at least 12000 cryogenic tubes (1.8 mL) it is acceptable.

Q3: **Reference to Annex A, point 3.4:** "The cryogenic storage freezer must be able to store at least 12000 cryogenic tubes". Please indicated what is the size of the tubes that you want to use?

A3: 1.8 ml tubes

Q4: **Reference to Annex A, point 4.3:** "Set of storage racks to hold cryogenic boxes" Please indicate the size of cryogenic boxes that you want to use?

A4: 2 inch height x 5 inch length x 5 inch width (insert is 81 cell divided - hold 81 tubes)

All other terms and conditions remain the same