



**RETURN BIDS TO:**

**RETOURNER LES SOUMISSIONS À:**

**Bid Receiving - PWGSC / Réception des soumissions -  
TPSGC**

**11 LaurierSt./ 11, rue Laurier**

**Place du Portage, Phase III**

**Core 0B2 / Noyau 0B2**

**Gatineau**

**Québec**

**K1A 0S5**

**Bid Fax: (819) 997-9776**

**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**

**Infrastructure Maintenance and Solution Services  
Division (FK)**

**L'Esplanade Laurier,**

**East Tower 4th Floor**

**L'Esplanade Laurier,**

**Tour est 4e étage**

**140 O'Connor, Street**

**Ottawa**

**Ontario**

**K1A 0R5**

<b>Title - Sujet</b> REMOVAL AND DISPOSAL OF IRRADIATORS	
<b>Solicitation No. - N° de l'invitation</b> W7714-207067/A	<b>Amendment No. - N° modif.</b> 007
<b>Client Reference No. - N° de référence du client</b> W7714-207067	<b>Date</b> 2019-11-21
<b>GETS Reference No. - N° de référence de SEAG</b> PW-\$\$FK-289-77728	
<b>File No. - N° de dossier</b> fk289.W7714-207067	<b>CCC No./N° CCC - FMS No./N° VME</b>
<b>Solicitation Closes - L'invitation prend fin at - à 02:00 PM on - le 2019-12-02</b>	<b>Time Zone</b> Fuseau horaire Eastern Standard Time EST
<b>F.O.B. - F.A.B.</b> <b>Plant-Usine:</b> <input type="checkbox"/> <b>Destination:</b> <input type="checkbox"/> <b>Other-Autre:</b> <input type="checkbox"/>	
<b>Address Enquiries to: - Adresser toutes questions à:</b> Maquiling(fk div), Amalia O.	<b>Buyer Id - Id de l'acheteur</b> fk289
<b>Telephone No. - N° de téléphone</b> (819) 360-6567 ( )	<b>FAX No. - N° de FAX</b> ( ) -
<b>Destination - of Goods, Services, and Construction:</b> <b>Destination - des biens, services et construction:</b>	

**Instructions: See Herein**

**Instructions: Voir aux présentes**

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

This solicitation amendment 007 is issued to revise 4.1.2 Technical Evaluation

Delete 4.1.2 Technical Evaluation in its entirety and replace with the following:

#### 4.1.2 Technical Evaluation

PWGSC reserves the right to verify information for completeness and accuracy and to confirm reference satisfaction with services provided. The evidence provided by the bidder may be verified by the Crown. Failure by the bidder to provide the required evidence or in the event where the evidence cannot be verified or the service found to be unsatisfactory, the proposal shall be considered non-responsive and no further consideration will be given to the Bidder. If the Bidder submits references in excess of the stated requirement above, only the references up to the identified limit will be assessed.

##### 4.1.2.1 Mandatory Technical Criteria

**The Phased Bid Compliance Process will apply to all mandatory technical criteria.**

Mandatory Technical Criteria: each bid will be reviewed for compliance with the Mandatory Technical Criteria. Bids that do not meet the mandatory requirements will be deemed non-responsive and will be given no further consideration.

Mandatory Technical Criteria				
<b>MTC1</b>	The Contractor must provide proof of their <b>valid</b> CNSC Licensing at the time of bid submission. License must be valid for the duration of the Contract.			
<b>MTC2</b>	The Contractor must demonstrate, by referencing a minimum of three recently completed projects within the last 10 years that required installing/uninstalling Category 1 or Category 2 sealed gamma radiation sources into equipment/devices (ref: IAEA Safety Guide RS-G-1.9, 2005). <b>The Bidder must complete the following grid in order to demonstrate that it has the required experience.</b>			
Name of client organization or Company	Project Reference #1: _____	Project Reference #2: _____	Project Reference #3: _____	
Name and title of client contact who can confirm the information presented in the proposal	Name: _____  Title: _____	Name: _____  Title: _____	Name: _____  Title: _____	
Telephone and e-mail address of client contact	Phone Number: _____  E-mail: _____	Phone Number: _____  E-mail: _____	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)	Start date: _____ (year/month/day)  Completion date: _____ (year/month/day)	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>	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

**4.1.2.2 Point Rated Technical Criteria – maximum of 18 points, minimum overall passing mark = 1. Project references in MTC2 may be used to demonstrate requirements in RTC1 and RTC2.**

Point Rated Technical Criteria		Maximum	
<b>RTC1</b>	<p>Demonstrate experience in installing/uninstalling Category 1 sealed gamma radiation sources into equipment/devices (ref: IAEA Safety Guide RS-G-1.9, 2005) within the last 10 years by referencing 1 or more recently completed projects:</p> <p>Within the last 36 months:</p> <p>1-2 devices – 3 points 3-5 devices – 6 points 6-7 devices – 8 points 8+ devices – 12 points</p> <p>37-72 months ago:</p> <p>1-2 devices – 1 point 3-5 devices – 3 points 6-7 devices – 4 points 8+ devices – 6 points</p> <p>73-120 months ago :</p> <p>1-5 devices – 1 point 5+ devices – 3 points</p>	<b>12</b>	
Name of client organization or Company	Project Reference #1: _____	Project Reference #2: _____	Project Reference #3: _____
Name and title of client contact who can confirm the information presented in the proposal	Name: _____  Title: _____	Name: _____  Title: _____	Name: _____  Title: _____
Telephone and e-mail address of client contact	Phone Number: _____  E-mail: _____	Phone Number: _____  E-mail: _____	Phone Number: _____  E-mail: _____

Performance period of the project (indicate year, month, day)	Start date: _____ (year/month/day)  Completion date: _____ (year/month/day)	Start date: _____ (year/month/day)  Completion date: _____ (year/month/day)	Start date: _____ (year/month/day)  Completion date: _____ (year/month/day)
Number of devices	_____	_____	_____
<b>RTC2</b>	Demonstrate experience installing/uninstalling Category 2 sealed gamma radiation sources into equipment/devices (ref: IAEA Safety Guide RS-G-1.9, 2005) within the last 10 years by referencing 1 or more recently completed projects:  Within the last 36 months: 1-4 devices – 2 points 5-7 devices – 4 points 8+ devices – 6 points  37-72 months ago: 1-4 devices – 1 point 5+ devices – 3 points  73-120 months ago : 1+ devices – 1 point		<b>6</b>
Name of client organization or Company	Project Reference #1: _____	Project Reference #2: _____	Project Reference #3: _____
Name and title of client contact who can confirm the information presented in the proposal	Name: _____  Title: _____	Name: _____  Title: _____	Name: _____  Title: _____
Telephone and e-mail address of client contact	Phone Number: _____  E-mail: _____	Phone Number: _____  E-mail: _____	Phone Number: _____  E-mail: _____
Performance period of the project (indicate year, month, day)	Start date: _____ (year/month/day)  Completion date: _____ (year/month/day)	Start date: _____ (year/month/day)  Completion date: _____ (year/month/day)	Start date: _____ (year/month/day)  Completion date: _____ (year/month/day)
Number of devices	_____	_____	_____

**No other changes apply.**