
This amendment 001 is raised to answer questions from potential bidders, to extend the solicitation and to make the following changes in the request for standing offer (RFSO).

Delete the closing date: November 16, 2020

Add the closing date: December 07, 2020

Question 1: Please explain the term " DETACHED FOLDING " of the item #2,3?

Answer 1: Detached folding is a line of fine knitting in the middle, not apparent, should be used to fold the collar from the middle.

Question 2: Item 2, 3: what type of knit? (Rib, flat, or interlock)?

Answer 2: The type of the knit is a 1/1 rib knit using a flat knitting machine for polo shirt collars.

Question 3: For the lab testing requirements, since the only difference between the 15" and 17" collars is the length can the lab testing be and be required for only 1 size completely and a test for the length & width be done for both?

Answer 3: Yes, the lab testing will be required only for one size and the test for the length & width must be done for both collars sizes 15" and 17".

Delete: The Annex B Technical specifications

Insert: The Annex B Technical specifications (Attachment)

Delete: The Annex "D" - Request to access a federal institution

Insert: The Annex "D" - Request to access a federal institution (Attachment)

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME.



Request to access a federal institution

PERSONAL INFORMATION

Surname: _____ Full name: _____
 Date of birth (YY-MM-DD): _____ Sex: M F
 Height: _____ Weight: _____ Eye color: _____ Hair color: _____
 Street: _____ City: _____
 Province: _____ Postal code: _____
 Tel. Number: Home: (____) _____ Cellular: (____) _____

GENERAL INFORMATION

Have you ever been found guilty of a criminal offence or do you have any pending charges?
 No Yes If so, which? _____
 Do you know personally anyone incarcerated in a federal or provincial institution?
 No Yes If so, what is the name? _____
 Are you registered as an inmate's visitor or have you ever visited an inmate?
 No Yes If so, what is the name? _____
 Have you made a similar request for access in the last two years?
 No Yes If so, for which institution? _____
 What is the reason for your request to access a federal institution? _____

 Name of your employer / educational institution? _____
 Name of the employee responsible for the visit: _____

Privacy act statement

Personal information about you is collected under the authority of the *Corrections and Conditional Release Act* in order to authorize your access to a federal institution. This information is collected, with no obligation on your part, and held in the Security Clearance System (SCS); however, if you refuse to comply with any security verifications, your access privileges will be refused. The information that you provide cannot be disclosed to other persons without your consent, EXCEPT where disclosure would be justified pursuant to one of the paragraphs of subsection 8(2) of the Privacy Act. **Access may be denied for submitting false information. The institution reserves the right to refuse access to the applicant before, upon arrival or during the visit.**

I hereby authorize the Correctional Service of Canada to conduct any investigation it deems necessary to allow my access to their institution. I agree that the Correctional Service of Canada cannot be held accountable for any harm suffered in the course of my activities unless this harm is directly attributable to the negligence of one or more employees of the Service.

Applicant signature: _____ Date: _____

Signature of employee responsible for the visit: _____ Date: _____



RESERVED FOR THE PREVENTIVE SECURITY DEPARTMENT

Institution: _____

Access to the institution granted: No Yes

Name of Security intelligence officer: _____ Date: _____