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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

Clothing and Textiles Division / Division des
vêtements et des textiles
L'Esplanade Laurier,
East Tower 7th Floor
Tour est 7e étage
140 O'Connor, rue O'Connor,
Ottawa
Ontario
K1A 0R5

Title - Sujet Interlock fabric	
Solicitation No. - N° de l'invitation 21C31-205451/A	Date 2020-10-19
Client Reference No. - N° de référence du client 3415451	Amendment No. - N° modif. 001
File No. - N° de dossier pr759.21C31-205451	CCC No./N° CCC - FMS No./N° VME
GETS Reference No. - N° de référence de SEAG PW-\$\$PR-759-79149	
Date of Original Request for Standing Offer 2020-10-06	
Date de la demande de l'offre à commandes originale	
Solicitation Closes - L'invitation prend fin at - à 02:00 PM on - le 2020-12-07	
Time Zone Fuseau horaire Heure Normale du l'Est HNE	
Address Enquiries to: - Adresser toutes questions à: Lafleur, Mario	Buyer Id - Id de l'acheteur pr759
Telephone No. - N° de téléphone (873) 354-0072 ()	FAX No. - N° de FAX () -
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 Accusé de réception requis	Yes - Oui <input type="checkbox"/>	No - Non <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		

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: _____