

### **Fisheries and Oceans Canada** ADDENDUM no. 2 July 14, 2021

**30000766:** Repair work on the Île Brion lighthouse (Lead Paint)

This addendum is being issued to answer questions related to tender 30000766 as follows:

#### Question #3

Invitation to Tender, Section IP03: It is written that "Any request for information on the invitation to tender must be made in writing to the Contracting Authority whose name appears in the Request for Proposals -Page 1 "... On the other hand, in the Statement of Requirements (Section 1.3 to 1.5), it is written that the resource person is Ms. Véronique Clavet. Please clarify who to send questions to and where to send the offer of services.

#### Answer #3

Apologies for the confusion. All questions are to be provided to the Contracting Authority only at the email address provided on page 1. Please refer to the updated Statement of Requirement – Revised.

### Question #4

In Annex A - Certificate of Insurance, reference is made to Site Insurance / Installation Risks, is this insurance necessary given that no construction will be done ... only repair work?

#### Answer #4

Minimum Insurance Requirements for Contracts of an estimated value of \$100,000 and more:

- **Commercial General Liability**
- Builder's Risk/Installation Floater

Further to that, after reflection, the Crown has decided to include Pollution Liability. Please refer to the section below that includes the new Annex "A".

### **Question #5**

Statement of Requirements, Section 2.2 - Timeline: Would it be possible to have an up-to-date timeline?

#### Answer #5

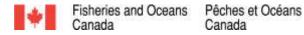
Please refer to the new Statement of Requirement – Revised.

#### **Question #6**

Would it be possible to have an extension of at least a week?

#### Answer #6

Yes – we will accept. The new closing date will be <u>July 27, 2021 at 14:00 Atlantic Daylight Time</u>.



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## **ANNEX A - CERTIFICATE OF INSURANCE** (Not required when submitting a bid)

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7	Canada

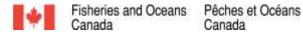
and Oceans

Pêches et Océans Canada

## **CERTIFICATE OF INSURANCE** Page 1 of 2

Description and Location	of Work					Cont	ract No.
						Proje	ect No.
Name of Insurer, Broker or Agent Postal Code		Address (No		City		Province	
Name of Insured (Contractor) Postal Code		Address (No	o., Street)	City Province			Province
Additional Insured							
Her Majesty the Queen in I	_	as represe	nted by Fis	heries and (	Ocean (D	FO)	
Type of Insurance (Required when Checked)	Insurer Name and Policy Number	Inceptio n Date D / M / Y	Expiry Date D / M / Y	Limits of Liability			-
Commercial General Liability □Umbrella/Excess Liability				Per Occurrenc e \$	Annual General Aggregat \$	е	Completed Operations Aggregate \$
Builder's Risk / Installation Floater				\$	<u>                                     </u>		•
☐Contractors Pollution Liability				\$ Agg Per Incident \$		Aggregate \$	
☐Marine Liability				\$			
$\square$ Aviation Liability				\$ □Per Inci □Per occ			Aggregate \$
☐Insert other type of insurance as required				\$			

I certify that the above policies were issued by insurers in the c Canada, are currently in force and include the applicable insura Certificate of Insurance, including advance notice of cancellation	ince coverages stated on page 2 of this
Name of person authorized to sign on behalf of Insurer(s) Number (Officer, Agent, Broker)	Telephone
Signature	Date D/M/Y



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# **ANNEX A - CERTIFICATE OF INSURANCE** (Not required when submitting a bid)

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## **CERTIFICATE OF INSURANCE** Page 1 of 2

Description and Location	of Work					Contract No.
					-	Project No.
Name of Insurer, Broker or Agent Postal Code		Address (No., Street)			City	Province
Name of Insured (Contractor) Postal Code		Address (No	o., Street)	City Province		
Additional Insured						
Her Majesty the Queen in I	Right of Canada	as represe	nted by Fis	heries and	Ocean (DI	FO)
Type of Insurance (Required when Checked)	Insurer Name and Policy Number	Inceptio n Date D / M / Y	Expiry Date D / M / Y	Limits of Liability		
Commercial General Liability				Per Occurrenc e	Annual General Aggregate	Completed Operations e Aggregate
☐Umbrella/Excess Liability				\$	\$	\$
Builder's Risk / Installation Floater				\$		
Contractors Pollution Liability				\$ Aggregate Per Incident Per occurrence		
☐ Marine Liability				\$		
☐Aviation Liability				\$ □ Per Inci □ Per occ		Aggregate \$
☐Insert other type of insurance as required				\$		

I certify that the above policies were issued by insurers in the Canada, are currently in force and include the applicable insu-	urance coverages stated on page 2 of this
Name of person authorized to sign on behalf of Insurer(s)  Number  (Officer Agent Proker)	Telephone
(Officer, Agent, Broker)  Signature	Date D/M/Y

All other terms and conditions remain the same.