



## RETURN BIDS TO:

## RETOURNER LES SOUMISSIONS À:

Bid Receiving Public Works and Government  
Services Canada/Réception des soumissions Travaux  
publics et Services gouvernementaux Canada  
800 Burrard Street, Room 219  
800, rue Burrard, pièce 219  
Vancouver  
British Columbia  
V6Z 0B9  
Bid Fax: (604) 775-9381

## 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  
Public Works and Government Services Canada - Pacific  
Region  
800 Burrard Street, Room 219  
800, rue Burrard, pièce 219  
Vancouver  
British C  
V6Z 0B9

<b>Title - Sujet</b> Comm towers and supporting infrastr Tours de communication et l'infrastructure de soutien	
<b>Solicitation No. - N° de l'invitation</b> F1705-210916/A	<b>Amendment No. - N° modif.</b> 002
<b>Client Reference No. - N° de référence du client</b> F1705-210916	<b>Date</b> 2021-10-29
<b>GETS Reference No. - N° de référence de SEAG</b> PW-SPWY-031-9058	
<b>File No. - N° de dossier</b> PWY-1-44105 (031)	<b>CCC No./N° CCC - FMS No./N° VME</b>
<b>Solicitation Closes - L'invitation prend fin</b> <b>at - à 02:00 PM</b> Pacific Daylight Saving Time PDT <b>on - le 2021-11-04</b> Heure Avancée du Pacifique HAP	
<b>F.O.B. - F.A.B.</b> <b>Plant-Usine:</b> <input type="checkbox"/> <b>Destination:</b> <input checked="" type="checkbox"/> <b>Other-Autre:</b> <input type="checkbox"/>	
<b>Address Enquiries to: - Adresser toutes questions à:</b> Leung, Janie	<b>Buyer Id - Id de l'acheteur</b> pwy031
<b>Telephone No. - N° de téléphone</b> (778) 919-3273 ( )	<b>FAX No. - N° de FAX</b> ( ) -
<b>Destination - of Goods, Services, and Construction:</b> <b>Destination - des biens, services et construction:</b> DFO – Denny Island & Safety Mountain – Bella Bella & Calvert Island, BC	

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</b> <b>(type or print)</b> <b>Nom et titre de la personne autorisée à signer au nom du fournisseur/</b> <b>de l'entrepreneur (taper ou écrire en caractères d'imprimerie)</b>	
<b>Signature</b>	<b>Date</b>

This Amendment 002 is raised to:

- 1) Insert Special Instructions to Bidders - COVID-19 Vaccination Requirement and Certification and Appendix 6, COVID-19 Vaccination Requirement Certification
- 2) Insert Supplementary Conditions - COMPLIANCE WITH ON-SITE MEASURES, STANDING ORDERS, POLICIES, AND RULES

#### **COVID-19 Vaccination Requirement and Certification**

Under Special Instructions to Bidders (SI), insert:

##### **SI18 COVID-19 VACCINATION REQUIREMENT AND CERTIFICATION**

**This requirement is subject to the COVID-19 Vaccination Policy for Supplier Personnel. All Bidders must provide with their bid, the COVID-19 Vaccination Requirement Certification attached to this bid solicitation (Appendix 6).**

This Certification incorporated into the bid solicitation on its closing date is incorporated into, and forms a binding part of any resulting Contract. Failure to complete and provide the COVID-19 Vaccination Requirement Certification as part of the bid will render the bid non-responsive.

#### **Compliance With On-Site Measures, Standing Orders, Policies, And Rules**

Under Supplementary Conditions (SC), insert:

##### **SC03 COMPLIANCE WITH ON-SITE MEASURES, STANDING ORDERS, POLICIES, AND RULES**

The Contractor must comply and ensure that its employees and subcontractors comply with all security measures, standing orders, policies or other rules in force at the site where the Work is performed.

All other terms and conditions remain unchanged.

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## APPENDIX 6 - COVID-19 VACCINATION REQUIREMENT CERTIFICATION

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I, \_\_\_\_\_ (first and last name), as the representative of  
\_\_\_\_\_ (name of business) pursuant to  
\_\_\_\_\_ (insert solicitation number), warrant and certify that all personnel that  
\_\_\_\_\_ (name of business) will provide on this Contract who access federal  
government workplaces within Canada where they may come into contact with public servants will be:  
(a) fully vaccinated against COVID-19 with Health Canada-approved COVID-19 vaccine(s); or  
(b) for personnel that are unable to be vaccinated due to a certified medical contraindication, religion or other prohibited  
grounds of discrimination under the Canadian Human Rights Act, subject to accommodation and mitigation measures that  
have been presented to and approved by Canada;  
until such time that Canada indicates that the mandatory vaccination requirements of the Mandatory Vaccination Policy for  
Supplier Personnel are no longer in effect.

I certify that all personnel provided by \_\_\_\_\_ (name of business) have been notified of the vaccination  
requirements of the Government of Canada's COVID-19 Vaccination Policy for Supplier Personnel, and that the  
\_\_\_\_\_ (name of business) has certified to their compliance with this requirement.

I certify that the information provided is true as of the date indicated below and will continue to be true for the duration of  
the Contract. I understand that the certifications provided to Canada are subject to verification at all times. I also  
understand that Canada will declare a contractor in default, if a certification is found to be untrue, whether made  
knowingly or unknowingly, during the bid or contract period. Canada reserves the right to ask for additional information to  
verify the certifications. Failure to comply with any request or requirement imposed by Canada will constitute a default  
under the Contract.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Optional

For data purposes only, initial below if your business already has its own mandatory vaccination policy or requirements for  
employees in place. Initialing below is not a substitute for completing the mandatory certification above.

Initials: \_\_\_\_\_

Information you provide on this Certification Form and in accordance with the Government of Canada's COVID-19  
Vaccination Policy for Supplier Personnel will be protected, used, stored and disclosed in accordance with the Privacy  
Act. Please note that you have a right to access and correct any information on your file, and you have a right to file a  
complaint with the Office of the Privacy Commissioner regarding the handling of your personal information. These rights  
also apply to all individuals who are deemed to be personnel for the purpose for the Contract and who require access to  
federal government workplaces where they may come into contact with public servants