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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

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

Title - Sujet Canadian Forces Housing Maintenance	
Solicitation No. - N° de l'invitation W857A-22VA03/A	Date 2021-11-29
Client Reference No. - N° de référence du client HAWVA03	Amendment No. - N° modif. 002
File No. - N° de dossier fk328.W857A-22VA03	CCC No./N° CCC - FMS No./N° VME
GETS Reference No. - N° de référence de SEAG PW-\$\$FK-328-80574	
Date of Original Request for Standing Offer 2021-11-15 Date de la demande de l'offre à commandes originale	
Solicitation Closes - L'invitation prend fin at - à 02:00 PM Eastern Standard Time EST on - le 2022-01-11 Heure Normale du l'Est HNE	
Address Enquiries to: - Adresser toutes questions à: Seguin, Christine	Buyer Id - Id de l'acheteur fk328
Telephone No. - N° de téléphone (343) 574-2819 ()	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 002 is raised to:

- 1) Modify Annex A, section 4, 2.4.4; and
- 2) Modify ATTACHMENT 1 TO PART 5 COVID-19 Vaccination Requirement Certification

DELETE Annex A, section 4, 2.4.4 and REPLACE with:

There is one (1) trade that requires Emergency After Hours Response Service (EAHRS) work, which requires response 24 hours per day, 365 days per year. This one (1) trade is: plumbing. Offerors that apply for this one trade do so under the understanding that they will be required to provide tradespersons, equipment and materials for emergency repairs at any hour of any day. Contractors in the nominated trade category, identified above, shall maintain a continuous emergency service capable of 24/7 response for the full duration of the SO, including all statutory and/or provincial/territorial holidays and/or construction holiday periods. Additionally, Contractors shall register with the Technical authority full details of all acceptable means of emergency communication.

DELETE ATTACHMENT 1 TO PART 5 COVID-19 VACCINATION REQUIREMENT CERTIFICATION AND REPLACE WITH:

**ATTACHMENT 1 TO PART 5
COVID-19 VACCINATION REQUIREMENT CERTIFICATION**

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 call-up(s) issued against the Standing Offer resulting from this Request for Standing Offers who access federal government workplaces where they may come into contact with public servants will be:

- (a) fully vaccinated against COVID-19;
- (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; or
- (c) partially vaccinated against COVID-19 for a period of up to 10 weeks from the date of their first dose and subject to temporary measures that have been presented to and approved by Canada, immediately after which period the personnel will meet the conditions of (a) or (b) or will no longer access federal government workplaces where they may come into contact with public servants under this Contract;

until such time that Canada indicates that the vaccination requirements of the COVID-19 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 Standing Offer and any resulting call-ups (contracts). I understand that the certifications provided to Canada are subject to verification at all times. I also understand that Canada will declare an Offeror or contractor in default, if a certification is found to be untrue, whether made knowingly or unknowingly, during the period of the Standing Offer or call-up (contract). Canada reserves the right to

Solicitation No. - N° de l'invitation
W857A-22VA03/A
Client Ref. No. - N° de réf. du client
W857A-22VA03

Amd. No. - N° de la modif.
002
File No. - N° du dossier
W857A-22VA03

Buyer ID - Id de l'acheteur
FK328
CCC No./N° CCC - FMS No./N° VME

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 Standing Offer and call-up (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 any resulting Contract and who require access to federal government workplaces where they may come into contact with public servants.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED