



RETURN BIDS TO:
RETOURNER LES SOUMISSIONS À:
PWGSC/TPSGC Acquisitions Bid Receiving
Box/Boîte de Réception des Soumissions
Bid Receiving Box/Boîte de Récepti
1st Floor/1^{ère} étage, Suite 1212
100-1045 Main Street
Moncton
New Brunswick
E1C 1H1
Bid Fax: (506) 851-6759

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
Acquisitions NB/PEI (Moncton Office) – Bureau
d'acquisitions N.-B./Î.-P.-É. (Moncton)
1045 Main Street / 1045, rue Main
Moncton
New Bruns
E1C 1H1

Title - Sujet Janitorial Services – NB Armouries	
Solicitation No. - N° de l'invitation W6898-220557/A	Amendment No. - N° modif. 003
Client Reference No. - N° de référence du client W6898-220557	Date 2022-01-24
GETS Reference No. - N° de référence de SEAG PW-\$MCT-039-6099	
File No. - N° de dossier MCT-1-44083 (039)	CCC No./N° CCC - FMS No./N° VME
Solicitation Closes - L'invitation prend fin at - à 02:00 PM Atlantic Standard Time AST on - le 2022-02-08 Heure Normale de l'Atlantique HNA	
F.O.B. - F.A.B. Plant-Usine: <input type="checkbox"/> Destination: <input checked="" type="checkbox"/> Other-Autre: <input type="checkbox"/>	
Address Enquiries to: - Adresser toutes questions à: Lomax (MCT), Sandra	Buyer Id - Id de l'acheteur mct039
Telephone No. - N° de téléphone (506) 639-8503 ()	FAX No. - N° de FAX (506) 851-6759
Destination - of Goods, Services, and Construction: Destination - des biens, services et construction:	

Instructions: See Herein

Instructions: Voir aux présentes

Delivery Required - Livraison exigée	Delivery Offered - Livraison proposée
Vendor/Firm Name and Address Raison sociale et adresse du fournisseur/de l'entrepreneur	
Telephone No. - N° de téléphone Facsimile No. - N° de télécopieur	
Name and title of person authorized to sign on behalf of Vendor/Firm (type or print) Nom et titre de la personne autorisée à signer au nom du fournisseur/ de l'entrepreneur (taper ou écrire en caractères d'imprimerie)	
Signature	Date

This Solicitation Amendment No. three (3) is raised to include the following Addendum No. three (3).

The following Addendum to the tender is effective immediately. This addendum shall form part of the contract documents.

All other terms and conditions remain the same.

OPTIONAL SITE VISIT

It is recommended that the Bidder or a representative of the Bidder visit the work site. Arrangements have been made for the site visit on Thursday January 27, 2022 and to be held at:

Location:

Fredericton Armoury
3 Carleton Street
Fredericton, NB

Time: 9:00 AM

Location:

Woodstock Armoury
107 Chapel Street
Woodstock, NB

Time: 11:00 AM

Location:

Grandfalls Armoury
576 Madawaska Road
Grandfalls, NB

Time: 1:00 PM

Location:

Edmundston Armoury
145 Martin Street
Edmundston, NB

Time: 2:30 PM

This site visit is subject to the COVID-19 Vaccination Policy for Supplier Personnel. The person(s) who attend must be fully vaccinated against COVID-19, or, 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.

Bidders must also complete and submit the following certification:

Solicitation No. - N° de l'invitation
W6898-220557A

Amd. No. - N° de la modif.
003

Buyer ID - Id de l'acheteur
pwb101

Client Ref. No. - N° de réf. du client
W6898-220557

File No. - N° du dossier

CCC No./N° CCC - FMS No./N° VME

I, _____ (first and last name), as the representative of

_____ (name of business)

pursuant to _____ (insert solicitation number), warrant and certify that all personnel that will attend this site visit on the business' behalf are:

fully vaccinated against COVID-19; or

or 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.

I certify that all personnel that will attend on behalf of _____ (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 site visit. I understand that the certifications provided to Canada are subject to verification at all times. Canada reserves the right to request additional information to verify the certifications at all times. I also understand that Canada will declare a bid non-responsive or a contractor in default, if a certification is found to be untrue, whether made knowingly or unknowingly.

Signature: _____

Date: _____

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.