

**RETURN BIDS TO:**  
**RETOURNER LES SOUMISSIONS À:**  
Module de réception des soumissions - TPSGC / Bid  
Receiving Unit - PWGSC  
50 rue Victoria Street  
(Salle de courrier/Mailroom : C114  
Gatineau  
Québec  
K1A 0C9  
Bid Fax: (819) 997-9776

**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  
Defence Communications Division. (QD)  
11 Laurier St./11, rue Laurier  
Place du Portage, Phase III, 8C2  
Gatineau, Québec K1A 0S5

Title - Sujet   DDR concernant le projet SCV	
Solicitation No. - N° de l'invitation W8475-245545/A	Amendment No. - N° modif. 001
Client Reference No. - N° de référence du client W8475-245545	Date 2024-04-19
GETS Reference No. - N° de référence de SEAG PW-\$\$QD-028-29295	
File No. - N° de dossier 028qd.W8475-245545	CCC No./N° CCC - FMS No./N° VME
<b>Solicitation Closes - L'invitation prend fin</b> <b>at - à   06:00 PM</b> Eastern Daylight Saving Time EDT <b>on - le 2024-10-30</b> Heure Avancée de l'Est HAE	
F.O.B. - F.A.B. Plant-Usine: <input type="checkbox"/> Destination: <input type="checkbox"/> Other-Autre: <input type="checkbox"/>	
Address Enquiries to: - Adresser toutes questions à: Garate, Oscar	Buyer Id - Id de l'acheteur 028qd
Telephone No. - N° de téléphone (873) 355-3354 (    )	FAX No. - N° de FAX (    ) -
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

# Modification de la DDR

**Au page** Invitation à une visite d'un lieu représentatif (p41)

**Sous Paragraphe 4 Inscription**

**Supprimer complètement**

**Remplace avec:**

**4.1** En raison de l'autorisation du visiteur et des exigences administratives, les inscriptions seront fermés avant le **30 avril 2024**.

**4.2** Pour l'inscription, veuillez communiquer avec l'autorité contractante de SPAC, Oscar Garate ([Oscar.Garate@tpsgc-pwgsc.gc.ca](mailto:Oscar.Garate@tpsgc-pwgsc.gc.ca)), en indiquant le nom du participant proposé, son courriel et son poste au sein de l'entreprise. De plus, les soumissionnaires doivent soumettre avec la liste des participants, le formulaire DDV dûment complété (l'annexe 2, 1 formulaire par visiteur) (ci-joint) **au plus tard le 30 avril 2024** à [eric.lariviere@forces.gc.ca](mailto:eric.lariviere@forces.gc.ca) et [danish.hussain@tpsgc-pwgsc.gc.ca](mailto:danish.hussain@tpsgc-pwgsc.gc.ca).

**Les autres termes et conditions de la sollicitation restent inchangées.**

# REQUEST FOR VISIT

TO: CANADA, 8 WING TRENTON  
(Country / international organisation name)

1. TYPE OF VISIT REQUEST	2. TYPE OF INFORMATION / MATERIAL OR SITE ACCESS	3. SUMMARY
<input checked="" type="checkbox"/> One-time <input type="checkbox"/> Recurring <input type="checkbox"/> Emergency <input type="checkbox"/> Amendment	<input type="checkbox"/> CONFIDENTIAL or above  <input type="checkbox"/> Access to security areas without access to classified information / material  <i>Only if required by the laws / regulations of the countries involved</i>  <input checked="" type="checkbox"/> Unclassified / RESTRICTED	No. of sites <input type="text" value="1"/>  No. of visitors <input type="text" value="1"/>
<b>4. ADMINISTRATIVE DATA:</b>		
Requestor: <input type="text"/>  To: <input type="text"/>	NSA/DSA RFV Reference No. <input type="text"/>  Date (dd/mm/yyyy): <input type="text"/>	
<b>5. REQUESTING GOVERNMENT AGENCY, ORGANISATION OR INDUSTRIAL FACILITY:</b>		
<input type="checkbox"/> Military <input type="checkbox"/> Government <input checked="" type="checkbox"/> Industry <input type="checkbox"/> NATO <input type="checkbox"/> EU <input type="checkbox"/> Other		
NAME: <input type="text"/>		
POSTAL ADDRESS: <input type="text"/>		
E-MAIL ADDRESS: <input type="text"/>		
FAX NO: <input type="text"/> TELEPHONE NO: <input type="text"/>		
<b>6. GOVERNMENT AGENCY(IES), ORGANISATION(S) OR INDUSTRIAL FACILITY(IES) TO BE VISITED -</b> (Annex 1 to be completed)		
<b>7. DATE OF VISIT (dd/mm/yyyy):</b> FROM <input type="text" value="28/05/2024"/> TO <input type="text" value="28/05/2024"/>		
<b>8. TYPE OF INITIATIVE (Select one from each column):</b>		
<input checked="" type="checkbox"/> Government initiative  <input type="checkbox"/> Commercial initiative	<input type="checkbox"/> Initiated by requesting agency or facility  <input checked="" type="checkbox"/> By invitation of the facility to be visited	

**9. IS THE VISIT PERTINENT TO:**

- ☐ Specific equipment or weapon system  
☐ Foreign military sales or export licence  
☐ A programme or agreement  
☒ A defence acquisition process  
☐ Other

**Specification of the selected subject:**

Request for information day (RFI), for the Voice Communication Switch System - Air Traffic Control (C.000677)  
Solicitation # W8475-245545

**10. SUBJECT TO BE DISCUSSED/JUSTIFICATION/PURPOSE** *(To include details of host Government/Project Authority and solicitation/contract number if known and any other relevant information. Abbreviations should be avoided):*

Part of Request for Information (RFI). Industry Day planned by Department of National Defence for the Voice Switch for Air Traffic Control Unit Project.

RFI link:  
<https://canadabuy.ca/en/tender-opportunities/tender-notice/pw-qd-028-29295>

**11. ANTICIPATED HIGHEST LEVEL OF INFORMATION/MATERIAL OR SITE ACCESS TO BE INVOLVED:**

*Only if required by the laws/regulations of the countries involved*

☒ Unclassified ☐ RESTRICTED

☐ CONFIDENTIAL

☐ SECRET

☐ TOP SECRET

☐ Other

**12. PARTICULARS OF VISITOR(S) - (Annex 2 to be completed)**

**13. THE SECURITY OFFICER OF THE REQUESTING GOVERNMENT AGENCY, ORGANISATION OR INDUSTRIAL FACILITY:**

NAME:

TELEPHONE NO:

E-MAIL ADDRESS:

SIGNATURE:

STAMP

All fields must be completed and the form communicated via Government-to-Government

**14. CERTIFICATION OF SECURITY CLEARANCE LEVEL:**

NAME:

STAMP

ADDRESS:

TELEPHONE NO:

E-MAIL ADDRESS:

SIGNATURE:

DATE (dd/mm/yyyy):

**15. REQUESTING NATIONAL SECURITY AUTHORITY / DESIGNATED SECURITY AUTHORITY:**

NAME:

STAMP

ADDRESS:

TELEPHONE NO:

E-MAIL ADDRESS:

SIGNATURE:

DATE (dd/mm/yyyy):

**16. REMARKS** *(Mandatory justification required in case of an emergency visit):*

**ANNEX 1 TO RFV FORM**

All fields must be completed and the form communicated via Government-to-Government

**GOVERNMENT AGENCY(IES), ORGANISATION(S)  
OR INDUSTRIAL FACILITY(IES) TO BE VISITED**

**Add**

☐ Military ☐ Government ☐ Industry ☐ NATO ☐ EU ☐ Other

NAME:

ADDRESS:

TELEPHONE NO:

FAX NO:

NAME OF POINT OF CONTACT:

E-MAIL:

TELEPHONE NO:

NAME OF SECURITY OFFICER OR  
SECONDARY POINT OF CONTACT:

E-MAIL:

TELEPHONE NO:

**Delete**

## ANNEX 2 TO RFV FORM

All fields must be completed and the form communicated via Government-to-Government

### PARTICULARS OF VISITOR(S)

Add

☐ Military ☐ Defence Public Servant ☐ Government ☐ Industry/Embedded Contractor ☐ NATO Employee ☐ EU Employee ☐ Other

SURNAME:

FORENAMES (as per passport):

RANK (if applicable):

DATE OF BIRTH (dd/mm/yyyy):

PLACE OF BIRTH:

NATIONALITY:

SECURITY CLEARANCE LEVEL:

PP/ID NUMBER:

POSITION:

COMPANY/AGENCY:

Delete