

# FRIAA CHRP RFP

Operational Planning June 2024

Question & Answer #2,

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1. I was reviewing the spatial data that was provided in the bid and I was hoping you could provide insight into why there is such a discrepancy in the data provided vs how many km is listed in the RFP. In the RFP it was stated that 663 km will require planning. However, the spatial data provided includes 4,418 km of conventional seismic line.

I believe this discrepancy is because harvest areas have not been clipped out of the candidate treatment lines. Are you able to provide a shapefile of the harvest areas?

I want to confirm that trails and low-impact seismic were intentionally excluded from the bid package.

**Answer:** The seismic data was provided to FRIAA and was posted as received without verification. Upon further review and verification by FRIAA, it appears the total km for assessment would be an estimated 4,419 km as based on the GIS data posted in the RFP package.

FRIAA does not have a harvest area shapefile available. There is potential that the GoA will be able to make this data available to the successful Applicant. Alternatively, the FMA areas may be able to provide this data during the consultation and engagement phases of this project.

FRIAA is unable to confirm the exclusion of trails and low-impact seismic lines in the bid package data. The appended map (Appendix A) indicates that the linear features represent conventional seismic lines. Applicants are encouraged to review ABMI's "Wall to Wall Human Footprint" GIS layer for additional features such as low-impact seismic and trails that may require consideration for access and/or treatment prescriptions in the planning process.

FRIAA is looking for the successful Applicant to complete a comprehensive review of the area identified in "Appendix A" and determine which lines need treatment based on the Framework and program objectives, how to access those lines with heavy machinery (being mindful that regenerating cutblocks must not be damaged or destroyed), or if another treatment option is appropriate to meet the objectives, and what the treatment prescription is based on the current site conditions and site limiting factors.