

**091-19 - APPENDIX B - MINIMUM QUALIFICATIONS FORM  
PROCESS TANK AND CLASS IV LIFT STATION CLEANING SERVICES  
GENERAL**

**THE MINIMUM QUALIFICATIONS SHALL BE SUBMITTED ON THIS FORM. IN ORDER TO BE CONSIDERED A QUALIFIED RESPONDENT BY JEA YOU MUST MEET THE MINIMUM QUALIFICATIONS LISTED BELOW AND BE ABLE TO PROVIDE ALL THE SERVICES LISTED IN THIS SOLICITATION.**

**THE RESPONDENT MUST COMPLETE THE RESPONDENT INFORMATION SECTION BELOW AND PROVIDE ANY OTHER INFORMATION OR REFERENCE REQUESTED. THE RESPONDENT MUST ALSO PROVIDE ANY ATTACHMENTS REQUESTED WITH THIS MINIMUM QUALIFICATIONS FORM.**

**PLEASE SUBMIT THE ORIGINAL AND THREE (3) COPIES OF THIS FORM AND ANY REQUESTED ADDITIONAL DOCUMENTATION WITH THE RESPONSE SUBMISSION.**

**RESPONDENT INFORMATION**

COMPANY NAME: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP CODE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

FAX: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

PRINT NAME OF AUTHORIZED REPRESENTATIVE: \_\_\_\_\_

SIGNATURE OF AUTHORIZED REPRESENTATIVE: \_\_\_\_\_

NAME AND TITLE OF AUTHORIZED REPRESENTATIVE: \_\_\_\_\_

**MINIMUM QUALIFICATIONS:**

- Respondent must have successfully performed at least two (2) similar contracts in the last five (5) years as of the ITN due date.
  - A similar contract is defined as conducting the regular periodic removal of fats, oils, grease (FOG) residuals and debris of at least sixty (60) tons per month from a wastewater utility location and subsequent proper disposal of those residuals.

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**REFERENCE 1**

Reference Name \_\_\_\_\_

Reference Phone Number \_\_\_\_\_

Reference E-Mail Address \_\_\_\_\_

Contract Year/Tons per month \_\_\_\_\_

Project Title \_\_\_\_\_

Address of Work \_\_\_\_\_

Description of Project \_\_\_\_\_

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**REFERENCE 2**

Reference Name \_\_\_\_\_

Reference Phone Number \_\_\_\_\_

Reference E-Mail Address \_\_\_\_\_

Contract Year/Tons per month \_\_\_\_\_

Project Title \_\_\_\_\_

Address of Work \_\_\_\_\_

Description of Project \_\_\_\_\_

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