GENERAL

THE MINIMUM QUALIFICATIONS SHALL BE SUBMITTED IN THE FORMAT ATTACHED. THE REPORT SHALL BE PRESENTED IN THE ORDER DESCRIBED BELOW. IN ORDER TO BE CONSIDERED A QUALIFIED SUPPLIER BY JEA YOU MUST MEET ALL THE CRITERIA LISTED AND BE ABLE TO PROVIDE ALL THE SERVICES LISTED IN THIS SPECIFICATION.

THE PROPOSER MUST COMPLETE THE FOLLOWING INFORMATION AND ANY OTHER INFORMATION OR ATTACHMENTS.

PROPOSER 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:

- The Contractor shall have completed five (5) similar projects in the last ten (10) years date ending as of this RFP due date.
 - A similar project is considered to be a multi-barrier advanced treatment facility developed for a customer.
- The Engineer shall have completed five (5) similar projects in the last ten (10) years date ending as of this RFP due date.
 - A similar project is considered to be a potable reuse (direct or indirect) project (piloting, demonstration or full-scale) that has been developed for a customer.
- The Visitor Experience Specialist shall have completed five (5) similar projects in the last ten (10) years date ending as of this RFP due date.
 - A similar project is considered to be a visitor experience including education developed for a customer. At least two (2) reference projects must be for clients that produce a consumable liquid.

Reference Name_
Reference Phone Number
Reference E-Mail Address
Contract Year/Amount
Project Title
Address of Work
Description of Project

Reference Name_
Reference Phone Number
Reference E-Mail Address
Contract Year/Amount
Project Title
Address of Work
Description of Project

Reference Name
Reference Phone Number_
Reference E-Mail Address
Contract Year/Amount
Project Title
Address of Work
Description of Project

Reference Name
Reference Phone Number
Reference E-Mail Address
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Project Title
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