Submit the Response electronically as described in sections 1.4 and 1.5 of the Solicitation.

Company	Name:				
Company	's Address:				
Phone Nu	ımber:	Email Address:			_
None Certifi	CURITY REQUIREMENTS	Percent (5%)) SECTION		ase e ments Project Comp	oletion CONTRACT BOND
Sampl Sampl Bid O	required les required prior to Bid C les may be required subse pening	Opening Bond i	required required 100% of Bid		
QUANTI	ITIES			INSURAN	CE REQUIREMENTS
Quant Througho	tities indicated are exact tities indicated reflect the out the Contract period and al requirements.	approximate quantities to be ad are subject to fluctuation	be purchased in accordance	Insurar	nce required
	ENT DISCOUNTS				
2% 1 Othe	20, net 30 10, net 30 er e Offered				
		Description of Servi	ices		TOTAL BID PRICE
1	TOTAL BID FC	OR STEEL TRANSMISSIC		NTS)	\$
2		STEEL TRANSMISSION	•	,	\$
solicitat public "	tion. I understand th "as-is".	RESPONDENT	a redacted copy m T CERTIFICATION	ny proposa N	l will be disclosed to the
Solicitation legally au contractor	on, that the person signing athorized to do business in r's license for the work (if	n the State of Florida, and the	presentative of the Reshat the Company mair	sponding Con ntains in activ	npany, that the Company is
We ha	ave received addenda	Handwritten Sig	nature of Authorized (Officer of Co	mpany or Agent Date
	through				
		Printed Name an	nd Title		

PROPOSAL FOR STEEL TRANSMISSION POLES (SLIP JOINTS) PROJECT: 691-693 69kV STRUCTURE REPLACEMENTS

Bidder Please Write Compa	any Name Here:	

Bid Item No.	Standard Design No.	Structure No.	Total Length / Embedment	Required Quantity	Unit Price	Extended Bid Price
1	STR 13	#13	104'-0"/ 29'-0"	1	\$	\$
2	STR 17	#17	102'-0"/ 27'-0"	1	\$	\$
3	STR 13 – Three (3) additional transmission arms for O&M	#13	-	3	\$	\$
4	STR 17 – Three (3) additional transmission arms for O&M	#17	-	3	\$	\$
5	STR 17 – One (1) additional distribution arm for O&M	#17	-	1	\$	\$
6	Freight for all poles					\$
					Total =	\$

My (our) lump s	um bid for the it	ems descr	ibed above	and in the tabulated	d total quar	ntities is: \$	·
		orovide approval purchase order.	drawings	within	calendar days af	ter receipt	of the "notice	to
	. , .	e to complete de and approval dr		all items wit	:hin_calendar days	after the ap	oproval of the o	design
				SIGNED FO	R BIDDER:			
					TITLE:			

PROPOSAL FOR STEEL TRANSMISSION POLES (FLANGE PLATES) PROJECT: 691-693 69kV STRUCTURE REPLACEMENTS

Bidder Please Write Company Name Here:

Bid Item No.	Standard Design No.	Structure No.	Total Length / Embedment	Required Quantity	Unit Price	Extended Bid Price	
1	STR 13	#13	104'-0"/ 29'-0"	1	\$	\$	
2	STR 17	#17	102'-0"/ 27'-0"	1	\$	\$	
3	STR 13 – Three (3) additional transmission arms for O&M	#13	-	3	\$	\$	
4	STR 17 – Three (3) additional transmission arms for O&M	#17	-	3	\$	\$	
5	STR 17 – One (1) additional distribution arm for O&M	#17	-	1	\$	\$	
6	Freight for all poles					\$	
					Total =	\$	
(our) lump sum bid for the items described above and in the tabulated total quantities is: \$							
	provide approval drawings purchase order.	withini	calendar days a	itei receipt	of the notice	10	
d I (we) agree to complete deliveries of all items within_calendar days after the approval of the design calculations and approval drawings.							
		SIGNED FC	R BIDDER:				
			TITLE:				

APPENDIX B – RESPONSE FORM

1412039648 (IFB) Steel Poles for 69kV Circuit 691-693 Structure Replacement Project

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

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

COMPANY NAME:
BUSINESS ADDRESS:
CITY, STATE, ZIP CODE:
TELEPHONE:
FAX:
E-M AIL:
PRINT NAME OF AUTHORIZED REPRESENTATIVE:
The first of the fine less than the second of the first o
SIGNATURE OF AUTHORIZED REPRESENTATIVE:
NAME AND TITLE OF AUTHORIZED REPRESENTATIVE:

MINIMUM QUALIFICATIONS:

BIDDER INFORMATION

Bidder shall have the following Minimum Qualifications to be considered eligible to submit a Bid in response to this Solicitation. It is the responsibility of the Bidder to ensure and certify that it meets the Minimum Qualifications stated below. A Bidder not meeting all the following criteria may have their Bids rejected:

- 1. The Respondent is not on the State of Florida Convicted Vendor List, State of Florida's Suspended Vendor List, The City of Jacksonville's Disqualified Vendor List, have not had their bidding privileges actively suspended by JEA, been debarred by JEA, or have had a contract with JEA terminated for default within the last two (2) years.
- 2. The Respondent shall be on JEA's approved list of steel pole manufacturers (the "Manufacturers") as of the Bid Due Date. Steel poles, caissons and associated hardware shall be manufactured in the continental United States of America. The following Manufacturers are approved as follows:
 - a) DIS-TRAN Steel
 - b) Sabre Industries
 - c) Nucor Corp. Towers & Structures
 - d) Trinity Meyer
 - e) Valmont Newmark
 - f) Keystone/CHM Industries Inc.
- 3. The Bidder shall comply with the technical and commercial specifications for this solicitation. JEA may request and the Proposer shall provide within 48 hours additional information regarding the company's ability to provide the scope of services in this solicitation. Failure to provide additional information may result in Bid rejection.

Companies may submit a request to be added to the approved list of manufacturers to the standards technical lead, Michael Sasan at: sasamo@jea.com. If JEA approves the request, an addendum will be issued to revise this list.

LIST OF SUBCONTRACTORS						
JEA Solicitation Numberrequires certain major Subcontractors be listed on this form, unless the work will be self- performed by the Company.						
amess the work in se sen performed by the company.						
	ejection, and the Com	re to submit the required Subcopany agrees to employ the Subo				
		ot be modified subsequent to bi	id opening, without a s	howing		
	d the written consent of					
Type of Work	Corporate Name of Subcontractor	Subcontractor Primary Contact Person & Telephone Number	Subcontractor's License Number (if applicable)	Percentage of Work or Dollar Amount		
		Signed:				
		Company:_				
		Address:				

LIST OF JSER SUBCONTRACTORS

Authorsubm	ollowing JSEB Subcontractors will be orization arising from award of JEA - it said information will result in bid r	I (We) the undersigned unde ejection. I (We) will employ the JSE	rstand that failure to		
belov	v: (Use additional sheets as necessar Class of Work (Category) Dollar Amount	Name of JSEB Contractor (Indicate below)	Percentage of Total Job or		
		Signed: Company: Address:			

Note: This list shall not be modified subsequent to bid opening without a showing of good cause and the written consent of the JEA.



CONFLICT OF INTEREST DISCLOSURE FORM

Disclosing a potential conflict of interest does not disqualify vendors. In the event vendors do not disclose potential conflicts of interest, and they are detected by JEA, vendor may be **disqualified** from doing business with JEA.

Questions about this form? Contact (JEA, Buyer)

JEA Bid/Solicitation/Contract Number:	Name of JEA Employee(s) Working on	Vendor's Current Contract(s) with JEA:			
Vendor Name:		Vendor Phone:			
Vendor's Authorized Representative Name and Title	le:	Authorized Representative's Phone:			
NAME(S) OF JEA EMPLOYEE(S)) / PUBLIC OFFICER(S) WITH	I POTENTIAL CONFLICT OF INTEREST			
Name of JEA public officer(s), employee(s), or rela potential conflict of interest. If more than five, attac		Relationship of JEA public officer(s)/employee(s) and/or			
potential conflict of interest. If more than five, attac	en a second form.	relative(s) to vendor's company from list above (e.g. 1(a), 2, etc.). Please list all that apply:			
1.					
2.					
3.					
4.					
5.					
☐ Vendor has no conflict of interest to report.					
☐ Vendor hereby declares it has not and will not probtain or maintain a contract.	rovide gifts or hospitality of any dollar valu	ne or any other gratuities to any JEA officer or employee to			
☐ I certify that this Conflict-of-Interest Disclosure has been examined by me and that its contents are true and correct to my knowledge and belief and I have the authority to so certify on behalf of the Vendor.					
Vendor's Authorized Representative Signature:		Date:			

APPENDIX B – RESPONSE FORM

1412039648 (IFB) Steel Poles for 69kV Circuit 691-693 Structure Replacement Project FOR JEA USE ONLY IF CONFLICT NOTED This form has been reviewed by:

Name of JEA Ethics Officer:	Signature:	Date:
Note:	ı	L