

APPENDIX B – MINIMUM QUALIFICATIONS
JEA (ITN) 97569 Two-Phase Project: Repair & Repurpose JEA Unit 50883

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/TECHNICAL SPECIFICATION.

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.

THE RESPONDENT SHALL SUBMIT ALL OF THE REQUIRED RESPONSE FORMS ELECTRONICALLY TO ELAINE SELDERS AT SELDEL@JEA.COM.

RESPONDENT INFORMATION

COMPANY NAME:_____

BUSINESS ADDRESS:_____

CITY, STATE, ZIP CODE:_____

TELEPHONE:_____

FAX:_____

E-MAIL:_____

PRINT NAME OF AUTHORIZED REPRESENTATIVE:_____

SIGNATURE OF AUTHORIZED REPRESENTATIVE:_____

TITLE OF AUTHORIZED REPRESENTATIVE:_____

MINIMUM QUALIFICATIONS:

- The Respondent shall be a heavy-duty truck dealership and/or an established up-fitter.
- The Respondent shall exhibit successful completion of, at minimum, three (3) projects of similar scope within the last seven (7) years of operation.
- The Respondent shall demonstrate their eligibility by providing three (3) similar references. The reference shall include company name, address, phone number, contact name, email address, service dates, annual dollar amount and description of work.

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Please provide the reference verification information requested below pertaining to this contract.

1. REFERENCE

Reference Name _____

Reference Phone Number _____

Reference Company Name _____

Address of Work _____

Reference E-Mail Address _____

Dates of Work/\$ Amount _____

Description of Work _____

2. REFERENCE

Reference Name _____

Reference Phone Number _____

Reference Company Name _____

Address of Work _____

Reference E-Mail Address _____

Dates of Work/\$ Amount _____

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3. REFERENCE

Reference Name _____

Reference Phone Number _____

Reference Company Name _____

Address of Work _____

Reference E-Mail Address _____

Dates of Work/\$ Amount _____

Description of Work _____
