Submit the Response via electronic pdf in accordance with the procedures in the solicitation

Company	y Name:				
Company	y's Address:				
License N	Number:				
Phone Nu	umber: FAX No):	Email Address:		
None in Certifi	ied Check or Bond Five Percent (5% EREQUIREMENTS required	SECTION None	Other, Specify - IN 255.05, FLORIDA Street	ase Years w/Two (2) – 1Yr l Project Completion STATUTES CONTRA	
Sampl Sampl Bid O	les required prior to Bid Opening les may be required subsequent to Opening	⊠ Bond	I required 100% of Bid	Award	
OUANTI				INSURANCE REQU	<u>UIREMENTS</u>
Quanti Througho with actua	tities indicated reflect the approxima out the Contract period and are subje- al requirements.	ite quantities to	be purchased 1 in accordance	Insurance requir	ed
1% 20 2% 10	NT DISCOUNTS 0, net 30 0, net 30 Offered				
Item No.	ENTER YOUR BID FOR THE	FOLLOWING I	DESCRIBED ARTICLE	ES OR SERVICES:	TOTAL BID PRICE
1	Phase 1 – N0%	2 Day Bin to Fu	urnace Injection Point	ts	\$
2	Phase 2 – N0:	1 Day Bin to Fu	urnace Injection Point	ts	\$
3	Phase 3 – Crv	ısher Building	to N01 & N02 Day Bir	ns	\$
4		`	From Bid Workbook)		\$
_	ve read and understood the Sun and that in the absence of a red				
D-: auhmi	'w' - d-i- Did the Didder contifies th		R CERTIFICATION	1 to postoining to	dia Calinitation that the
person sig	itting this Bid, the Bidder certifies the gning below is an authorized represe of Florida, and that the Company maker also certifies that it complies with on.	entative of the B naintains in active	Bidding Company, that the status an appropriate	the Company is legally contractor's license for	authorized to do business in the work (if applicable).
We ha	ave received addenda	Handwritten Sig	onature of Authorized	Officer of Company or A	Agent Date
	through	Handwillon oig	induic of Fundionized	Jilleor of Company of I	agont Date
		Printed Name a	and Title		

GENERAL

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.

DIDDER 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:

Respondent must meet the following Minimum Qualifications to be considered eligible to have its Response evaluated by JEA. Respondent must complete and submit the Minimum Qualification Form provided in this Solicitation. Respondents that are working or have worked for JEA in the past 2 years involving similar work must submit JEA as a reference. JEA reserves the right to ask for additional back up documentation or additional reference projects to confirm the Respondent meets the requirements stated above.

JEA will reject Responses from Respondents not meeting all of the following Minimum Qualifications:

- I. The Respondent must have successfully self-performed similar work preceding the Response Due Date.
- II. Any Respondent whose contract with JEA was terminated for default within the last two years shall have its Response rejected.
- Bidder shall have completed or be in the process of performing two (2) similar contracts within the last 5 years. A similar contract is defined as installation of industrial piping systems of similar size and scope as outlined in the Appendix A Technical Specifications with a contract value of at least \$350,000.

RIDDED INFODMATION

MINIMUM QUALIFICATIONS:

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	
Description of Work	

		LIST OF SUBCONTRACTO	<u>DRS</u>			
A Solicitation Nu f-performed by th	•	nires certain major Subcontractor	s be listed on this form	m, unless the work v		
The undersigned understands that failure to submit the required Subcontractor information on this form will result in rejection, and the Company agrees to employ the Subcontractors specified below: (Use additional sheets as necessary Note: This list of Subcontractors shall not be modified subsequent to bid opening, without a showing of good cause the written consent of JEA.						
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:				

Date:

Class of Work (Category) Oollar Amount	Name of JSEB Contractor (Indicate below)	Percentage of Total Job or
_		

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