

CONTRACTOR EXPERIENCE QUESTIONNAIRE FORMS

All Contractor Experience Questionnaire Forms must be completed and included with the Contractor's Bid or the Bid will be considered non-responsive and rejected.

I. General

a. Legal Title and Address of Organization

b. Corporation Co-Partnership Individual
(Check One)

II. Experience

a. Indicate type of contracting undertaken by your organization and years' experience

General Sub Other _____
Years _____ Years _____ Years _____

b. State mechanical and electrical **repair** experience for organization

Project Description & Firm's Role (Prime / Sub)	Relevant Type of Work	Start – End Dates & Construction \$	Agency's PM Contact Info (Name & Phone #)

Contract No. T201707005

c. State mechanical and electrical **maintenance** experience for organization

Project Description & Firm's Role (Prime / Sub)	Relevant Type of Work	Start – End Dates & Construction \$	Agency's PM Contact Info (Name & Phone #)

Contract No. T201707005

d. List some significant ongoing and recently completed projects performed by your organization.

Project Description & Firm's Role	Relevant Type of Work	Start – End Dates & Construction \$	Agency's PM Contact Info (Name & Phone #)

Contract No. T201707005

PROJECT MANAGER QUALIFICATIONS FORM

Name: _____ Firm: _____

Education: _____

Relevant Licenses/Certifications: _____

Previous Projects:

Title of Project	Description of Role in Project	Start – End Dates	Agency Contact Information

Other Relevant Information:

MASTER ELECTRICIAN QUALIFICATIONS FORM

Name: _____ Firm: _____

Education: _____

Relevant Licenses/Certifications: _____

Previous Projects:

Title of Project	Description of Role in Project	Start – End Dates	Agency Contact Information

Other Relevant Information:

Contract No. T201707005

CONTROL SYSTEMS EXPERT QUALIFICATIONS FORM

Name: _____ Firm: _____

Education: _____

Relevant Licenses/Certifications: _____

Previous Projects:

Title of Project	Description of Role in Project	Start – End Dates	Agency Contact Information

Other Relevant Information:

Contract No. T201707005

MECHANICAL MAINTENANCE PERSONNEL QUALIFICATIONS FORM

Name: _____ Firm: _____

Education: _____

Relevant Licenses/Certifications: _____

Previous Projects:

Title of Project	Description of Role in Project	Start – End Dates	Agency Contact Information

Other Relevant Information:

ADDITIONAL PERSONNEL QUALIFICATIONS FORM

Name / Firm	Personnel (Foreman, Welder, etc.)	Previous Experience (Description and Years)