RFP 2017-01 Electrical Maintenance and Repair

Company Contact Information

Company Name	
Name, Title Phone Street City, State Zip	
Phone	
Street	
City, State	
Zip	

Zip						
	Contractor Bid Qualification Data					
1	How many years has your firm been in business under its present business and business organization structure?					
2	How many years has your firm been regularly & actively engaged in the Electrical Contracting Business, performing the type of work described in paragraph 1 of the specification "Purpose"?					
3	How many full-time journeyman or master rated electricians who hold a valid Massachusetts electricians license are employed by your firm?					
4	How many electrical service trucks are either owned or leased by your firm and are available for use by your electrical service workforce on a full-time basis?					
5	Does your firm provide emergency repair service on a 24 hour, 7 day per week basis?					
6	Will your firm offer a guarenteed 1 hour response time to any electrical emergencies? If no, what response time will you guarentee?					
7	Please list hours of work for your firm.					
8	Daily Working Hours, Straight Time					
9	Work Week, Straight Time					
10	Please list the days and times that overtime rate(s) apply.					

Con	npany Name		
	ne, Title		
	Phone		
11	What are the lowest overtime rates you offer?		
12	What are the highest overtime rates you offer?		
13	Does your firm have a 24hr emergency number that is staffed by a person and not an answering machine?		
14	If yes, please list #. If not please explain		
15	How much insurance do you carry compared to what we require?		
16	Is your company a minority, woman, veteran, disabled veteran, small, etc. owned company?		
17	Do you offer discounted terms? What are they?		
18	Do you meet the prevailing wage requirement?		
19		Can you get to us in an hour?	
20	business wit materials, an	n regularly and actively engaged in the electrical h a thorough knowledge of techniques, tools, d trade coordination for a minimum of five (5) ars prior to release date of this RFP?	
21	-	n offices -in Massachusetts which shall be staffed vn employees during regular working hours.	

Com	pany Name		
Name, Title			
Phone			
22	Please provide two (2) calendar years, 2015 and 2016, of your company's financial records showing annual gross revenue as		
23	Provide information regarding the last bankruptcy and current/pending litigation.		
24	Provide information regarding defaults on contracts and the reasons during the past three (3) calendar years.		
25	Provide three references, preferably from one (1) from a government entity for public work, one (1) from an educational institution and one (1) from the largest customer in Massachusetts, if available.		
26		of major jobs started during the last calendar ear, along with contact information.	
27	Indicate whether there is a written Continuity of Operations Plan (COOP) that describes how your company will continue to do business in case of an emergency.		
28		Do you accept/take credit cards?	
29	Does your firm	n have an energy saving specialist in its employ?	
30	Are all emplo	oyees assigned to Salem State OSHA certified?	
31	Are all empl	oyees assigned to Salem State CORI checked?	