

QUALIFICATION FORM PART A
for

**GUARANTEED MAINTENANCE SERVICE OF AIR CONDITIONING AND VENTILATING
EQUIPMENT**

The offeror and his personnel shall meet the Experience and Personnel Qualifications as indicated in the Special Provisions of this bid. Please complete this form as fully and explicitly as possible to facilitate our evaluation of your firm. Use additional sheets and substantiating documents when necessary.

A. Exact Legal Name of Air Conditioning Contractor:

Air Conditioning Contractor's License Number: _____

Oahu Business Location: _____

Street Address

City

State

Zip Code

Telephone No: _____ Fax No: _____

E-mail Address: _____

Contact Person: _____

Telephone No. of Contact Person: _____
(if different from above)

Cell Phone No. of Contact Person: _____

Contact Person and Phone No. for emergency calls during **regular** workings hours (if different from above): _____

Offeror _____
Name of Company

B. CONTACT INFORMATION IN CASE OF EMERGENCY – AFTER HOURS:

Contact Person: _____

Telephone No. of Contact Person: _____

Cell Phone No. of Contact Person: _____

Fax No.: _____ E-mail address: _____

I. Contractor's number of consecutive years of experience (immediately prior to bid opening date) in the field of air conditioning and ventilation equipment maintenance and repair service which includes reciprocating chillers: _____

Are services to be rendered by company employees similar or equal to public officers and employees listed in the attached employee classification descriptions?

Yes _____ No _____

If yes, list positions:

II. List at least three (3) journeymen refrigeration/air conditioning mechanics who will be assigned to this contract to perform air conditioning and ventilating maintenance/repair work. Each mechanic must have a minimum of five (5) consecutive years (immediately prior to bid opening) of maintenance and repair experience on types of equipment as indicated in the Specifications. Each journeyman mechanic shall have a refrigerant universal certification classification as indicated in the Specifications.

1. Journeyman Mechanic's Name: _____

a. Number of years of experience: _____

b. Number of years with present employer: _____

c. Title of and date that course of studies completed: _____

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Offeror _____
Name of Company

- d. Names and Dates of previous employers the mechanic worked for and performed centrifugal/screw chiller maintenance/repair:

Dates

Employers

2. Journeyman Mechanic's Name: _____

a. Number of years of experience: _____

b. Number of years with present employer: _____

c. Title of and date that course of studies completed: _____

- d. Names and Dates of previous employers the mechanic worked for and performed centrifugal/screw chiller maintenance/repair:

Dates

Employers

3. Journeyman Mechanic's Name: _____

a. Number of years of experience: _____

b. Number of years with present employer: _____

c. Title of and date that course of studies completed: _____

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Offeror _____
Name of Company

- d. Names and Dates of previous employers the mechanic worked for and performed centrifugal/screw chiller maintenance/repair:

<u>Dates</u>	<u>Employers</u>
_____	_____
_____	_____
_____	_____

III . List at least two (2) refrigeration/air conditioning mechanics that will be assigned to this contract to assist the journeymen refrigeration/air conditioning mechanics. Each mechanic must have a minimum of three (3) consecutive years (immediately prior to the bid opening) of air conditioning maintenance/repair experience on types of equipment as indicated in the Specifications. Each mechanic shall be/have successfully completing/(ed) a course of study in the field of temperature or pneumatic control and refrigeration systems and have a refrigerant universal certification classification.

1. Mechanic's Name: _____

a. Number of years of experience: _____

b. Number of years with present employer: _____

c. Title of and date that course of studies completed: _____

d. List types of experience:

<u>Dates</u>	<u>Building/Location</u>	<u>Experience</u>	<u>Contact Person</u>	<u>Phone</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

2. Mechanic's Name: _____

a. Number of years of experience: _____

b. Number of years with present employer: _____

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Offeror _____

Name of Company

c. Title of and date that course of studies completed: _____

d. List types of experience:

Dates Building/Location Experience Contact Person Phone

IV. REFERENCES

Offeror shall list at least five (5) references in the State of Hawaii other than the State of Hawaii government, for whom offeror has performed a total coverage mechanical maintenance service of air conditioning and ventilating equipment and temperature control systems on a regular basis, that is similar in nature (full service guaranteed maintenance services) and volume (annual dollar value for the five combined referenced contracts shall be equal to or greater than \$100,000.00 per year) to the services specified in this bid, that will qualify offeror to perform the project.

The State reserves the right to reject a bid submitted by any offeror whose performance on other jobs for this type of service has been proven unsatisfactory.

<u>Name of Firm</u>	<u>Address</u>	<u>Contact Person</u>	<u>Telephone</u>	<u>Annual Project Vol.</u>
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1. _____

2. _____

3. _____

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Offeror _____
Name of Company

4. _____

5. _____

Total Combined Annual Project Volume: \$ _____

Offeror _____
Name of Company