**TEMPLATE FOR SUBMISSION OF PRE-QUALIFICATION PROPOSALS**

**IN RESPONSE TO THE RFQ,**

**TO THOSE WISHING TO SERVE AS PROJECT CONTRACTORS (Include with cover letter)**

1. [Cover letter precedes]
2. Name of Contractor/Firm

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Physical Address

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| --- | --- | --- | --- |
| Address | Town | State | Zip |
|  |  |  |  |

Mailing Address if different from physical address

|  |  |  |  |
| --- | --- | --- | --- |
| Address | Town | State | Zip |
|  |  |  |  |

1. Year established and State where organized/incorporated (include former firm names and year established, if applicable)

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1. Type of Ownership (e.g., sole/ partnership/ corporation; include name and location of parent company/subsidiaries if any)

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1. Licensed to do business in State of Vermont?

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| --- | --- |
| Yes |  |
| No but will obtain license prior to awarding of any work |  |

1. Number of full-time employees and—separately—number of part-time employees routinely engaged

|  |  |
| --- | --- |
| Full time |  |
| Part time |  |

1. Project Type Checklist

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| --- | --- |
| **Project Type** (Select all that apply.  | **Check here if you wish to prequalify performing this project type** |
| Procuring Equipment for Best Management Practice installation and/or maintenance (forestry, stormwater/roads sectors) |  |
| Installation/construction  |  |
| Stormwater Practice Operation and/or Maintenance |  |
| Stormwater Practice Inspection |  |
| Other (Describe) |  |
|  |  |

1. Experience relating to project types identified in checklist above

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1. Any special technical resources your firm possesses or accesses (e.g., equipment, technology, access to materials, etc.).

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1. Debarment Documentation: If your organization has been debarred in the last five years please provide an explanation and documentation relating to the debarment. *Subgrantees may initially self-certify their debarment status. However, the CWSP will audit debarment status of subgrantees at least once within the three-year subgrantee agreement period.*

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1. Certificate of Good Standing: Is your organization compliant with Section 13 of Act 154 of 2016 – Certification for Grants? *Subgrantees may initially self-certify their adherence to Certificate of Good Standing requirements. However, the CWSP will audit Good Standing status of subgrantees at least once within the three-year subgrantee agreement period.*

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1. Description of the contractor’s commitment to, and experience with addressing, diversity and equity.

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1. Financial and Accounting information:

Type of Accounting system

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An hourly rate schedule for all job categories that may be utilized under this contract s

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1. References

At least three references familiar with the contractor’s ability, experience, and reliability in the performance and management of projects of a similar nature

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Position | Email | Telephone |
|  |  |  |  |
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