

**REVISED FORM 9  
ADDENDUM # 1**

*Form 9 - Minimum Qualifications Requirements*



**MINIMUM QUALIFICATION REQUIREMENTS  
FOR**

***B230173SML Master Pump Station 6600, LS 616 & LS 617 Improvements***

Bidder(s)/Proposer(s) must meet the minimum qualification requirements as specified in the following form to qualify for consideration of award. This form must be completed and returned with the proposal submittal along with any supporting documentation where requested and/or indicated herein.

The County reserves the right, in their sole judgment, to determine to its satisfaction whether the Bidder(s)/Proposer(s) has met the minimum qualification requirements as specified herein. The determination shall be based upon the examination of the Minimum Qualification Requirements form and associated supportive documentation (if any requested).

An affirmative determination shall be a prerequisite for award of the contract to the Bidder(s)/Proposer(s). A negative determination shall result in disqualification of the proposal, in which event the County shall exclude the proposal from the evaluation or consideration process and therefore deeming the Bidder(s)/Proposer(s) ineligible for award.

**1. CRITERIA 1 – EXPERIENCE**

The field superintendent must have a minimum of ten (10) years previous experience on projects of comparable size and complexity.

**Does the Field Superintendent have minimum ten (10) years' experience?**

\_\_\_\_\_ **YES** \_\_\_\_\_ **NO**

**2. CRITERIA 2 – EXPERIENCE**

The electrical contractor must have a minimum of ten (10) years previous experience in the installation of industrial electrical power systems.

**Does the Electrical Contractor have minimum ten (10) years' experience?**

\_\_\_\_\_ **YES** \_\_\_\_\_ **NO**

**3. CRITERIA 3 – CERTIFICATIONS**

The testing firm shall meet OSHA criteria for accreditation of testing laboratories, Title 29, part 1907, or be a Full Member company of the International Electrical Testing Association (NETA).

**Does the Testing Firm meet the above requirements?**

\_\_\_\_\_ **YES** \_\_\_\_\_ **NO**

If YES, provide details as requested below:

- LICENSE NUMBER: \_\_\_\_\_
- LICENSE DATE: \_\_\_\_\_
- Provide a copy of the above-mentioned licensure / certification or printout of Licensee Details from the Florida Department of Business and Professional Regulations.

**4. CRITERIA 4 – CERTIFICATIONS**

The lead, on-site, technical person shall be currently certified by the International Electrical Testing Association (NETA) or National Institute of Certification in Engineering Technologies (NICET) in electrical power distribution system testing or be an electrical professional engineer in the state of Florida.

**Does the On-Site Lead person meet the above requirements?**

\_\_\_\_\_ **YES** \_\_\_\_\_ **NO**

If YES, provide details as requested below:

- LICENSE NUMBER: \_\_\_\_\_
- LICENSE DATE: \_\_\_\_\_
- Provide a copy of the above-mentioned licensure / certification or printout of Licensee Details from the Florida Department of Business and Professional Regulations.

***ELECTRICAL WORK***

**5. CRITERIA 5 – LICENSURE / CERTIFICATION**

~~At least one member of the Prime or Sub-contractor, is a certified Citect Silver level or better integrator. This person **must** be the one doing the programming. Proof of the certification is required to be submitted with your submission.~~

~~\_\_\_\_\_ **Is at least one member of your firm or Sub-contractor, a certified Citect Silver level or better integrator?**~~

~~\_\_\_\_\_ **YES** \_\_\_\_\_ **NO**~~

~~\_\_\_\_\_ If YES, provide details as requested below:~~

- ~~\_\_\_\_\_ Provide a copy of the above-mentioned licensure / certification.~~
- ~~▪ **Failure to provide evidence of licensure / certification may deem your firm as non-responsive.**~~

**6. CRITERIA 6 – LICENSURE / CERTIFICATION**

The Field Superintendent of Prime or Sub-contractor must be an active State of Florida licensed Electrical Contractor through the Florida Department of Business and Professional Regulations. Proof of the licensure is required to be submitted with your submission.

**Is the Field Superintendent an active State of Florida licensed Electrical Contractor through the Florida Department of Business and Professional Regulations?**

\_\_\_\_\_ **YES** \_\_\_\_\_ **NO**

If YES, provide details as requested below:

- LICENSE NUMBER: \_\_\_\_\_
- LICENSE DATE: \_\_\_\_\_
- Provide a copy of the above-mentioned licensure / certification or printout of Licensee Details from the Florida Department of Business and Professional Regulations.