

MDEQ Hazardous Waste Services

Request for Qualifications No. 07118200128

BIDDER / COMPANY NAME: _____

FEIN: _____

- This proposal offer is valid through _____ (must be at least 120 days from proposal due date).
- This Company agrees with all terms and conditions as listed in Article-2 of the ITB.
- This Company acknowledges that a Certificate of Insurance will be provided as a condition of award (as required by §2.180 of the ITB).
- Fill out this document and/or attach separate sheets as necessary.

COMPANY INFORMATION

1. COMPANY INFORMATION & CAPABILITIES (10 POINTS)

A. COMPANY NAME & ADDRESS INFORMATION (LEGAL ENTITY for CONTRACT)

NAME:	
MAIN / HEADQUARTERS OFFICE ADDRESS:	
CITY, STATE, ZIP:	
PHONE:	()
WEB PAGE:	

B. BRANCH OFFICE LOCATION(S)

OFFICE ADDRESS:	
CITY, STATE, ZIP:	
PHONE:	()

C. ITB CONTACT (For Contractual information)

Name, title, address, e-mail, phone and fax numbers for Bidder's ITB Contact.

CONTACT NAME:	
OFFICE ADDRESS:	
CITY, STATE, ZIP:	
PHONE NUMBER:	()
FAX NUMBER:	()
E-MAIL ADDRESS:	

D. COMPANY BACKGROUND INFORMATION

1.	Year Company /Organization was established.	
2.	Identify whether your company/organization operates as an individual, partnership, or corporation (if a corporation, include the state in which it is incorporated).	
	Is your company / organization a subsidiary of another company / organization? If yes, information should be included for both the parent and offering entity.	
	Current Number of Company Employees.	
	Percentage of Full Time employees:	
	Percentage of Half Time to less than full time:	
3.	Percentage of Less than Half Time:	
	Retention Rate of employees over the past three (3) years:	
4.	List any service related certifications your company /organization has obtained. Note: Bidders must demonstrate approved Qualified Underground Storage Tank Consultant status, and employ at least one Certified Underground Storage Tank Professional pursuant to requirements under Parts 213 and 215, of the Natural Resources Environmental Protection Act (NREPA), 1994 PA 451, as amended.	
5.	Provide insurance company, agent name and telephone number for each company that will provide general liability insurance, automobile insurance and worker's compensation. If you do not have insurance with an insurance company at this time, please indicate reason. (Example: State Farm, Agent Name: John Doe, Phone: 517-335-0000)	

2. PRIOR EXPERIENCE (60 POINTS)

A. PRIOR EXPERIENCE

Indicate the prior experience of your firm that you consider relevant to your ability to successfully manage a contract for the commodity/service defined by this ITB (not including prior State of Michigan Contracts, unless that is all you have). Proposals submitted must include (at least) 4 references with detailed description of the project or services performed, including specifications and dollar amount of project, to support that experience is directly related to services included in this solicitation.

BUSINESS REFERENCE INFORMATION #1

COMPANY NAME:	
OFFICE ADDRESS:	
CITY, STATE, ZIP:	
CONTACT NAME:	
PHONE NUMBER:	()
FAX NUMBER:	()
E-MAIL ADDRESS:	
PROJECT START DATE:	
PROJECT END DATE:	
PROJECT/CONTRACT VALUE:	
PROJECT DESCRIPTION:	

BUSINESS REFERENCE INFORMATION # 2

COMPANY NAME:	
OFFICE ADDRESS:	
CITY, STATE, ZIP:	
CONTACT NAME:	
PHONE NUMBER:	()
FAX NUMBER:	()
E-MAIL ADDRESS:	
PROJECT START DATE:	
PROJECT END DATE:	
PROJECT/CONTRACT VALUE:	
PROJECT DESCRIPTION:	

BUSINESS REFERENCE INFORMATION # 3

COMPANY NAME:	
OFFICE ADDRESS:	
CITY, STATE, ZIP:	
CONTACT NAME:	
PHONE NUMBER:	()
FAX NUMBER:	()
E-MAIL ADDRESS:	
PROJECT START DATE:	
PROJECT END DATE:	
PROJECT/CONTRACT VALUE:	
PROJECT DESCRIPTION:	

BUSINESS REFERENCE INFORMATION # 4

COMPANY NAME:	
OFFICE ADDRESS:	
CITY, STATE, ZIP:	
CONTACT NAME:	
PHONE NUMBER:	()
FAX NUMBER:	()
E-MAIL ADDRESS:	
PROJECT START DATE:	
PROJECT END DATE:	
PROJECT/CONTRACT VALUE:	
PROJECT DESCRIPTION:	

3. STAFF TRAINING & DEVELOPMENT (20 POINTS)

Bidder Instructions: As part of your proposal, provide a complete description of your company/organization's Training and Development Plan including the following information:

<p>1. Pre-Employment Requirements: Provide information about your company's requirements before hiring employees (i.e. GED/High School Diploma needed, certain drivers and equipment operator's license(s), past experience in environmental work, background checks, etc).</p>
<p>2. Before Job Placement: Explain the type of training that is provided to the employees prior to placing them on the job assignment. Include a list of all positions/staff requiring HAZWOPER certification per 29 CFR 1910.120.</p>
<p>3. On-Going Training: Provide any on-going training that your company provides to employees (i.e. weekly, quarterly, semi-annual training, seminars, certifications) with emphasis on observing environmental regulations and maintaining HAZWOPER requirements.</p>
<p>4. Health, Safety and Environmental Protection: Include a complete description of the company's Health and Safety Plan and Medical Monitoring Plan and its enforcement, as well as any program to ensure that staff are aware of and abide by relevant state and federal environmental statutes.</p>

Note to Bidder: For clarification purposes, the Contractor's Training and Development Plan shall be considered as work or service and shall be subject to acceptance throughout the term of the contract, to include any extensions of contract term. The contractor shall notify the Contract Administrator in writing of any proposed change to the Contractor's Training and Development Plan. The State Contract Administrator will implement no change prior to review and approval.

4. QUALITY ASSURANCE / CUSTOMER SERVICE (10 POINTS)

A. QUALITY ASSURANCE

1.	Quality Assurance: Bidders must describe how it verifies that staff adequately performs work for delivery of the service(s) described under this solicitation. Also, include who within your company inspects, approves and verifies delivery of service(s) and how corrective actions with staff are implemented. Emphasis should be placed on performance of field work, proper waste characterization and disposal, sample collection, and QA/QC of relevant environmental data.
2.	Customer Service: Bidders must describe a process for responding to customer complaints and verifying customer satisfaction and acceptance of service delivery.

5. OTHER CONSIDERATIONS (0 POINTS, REQUIRED FOR CONSIDERATION)

Each Bidder is required to list all benefit packages offered to employees (e.g. medical, dental, vision, and life insurances – and what percentage of insurances is the employee responsible for; 401(K) and/or other retirement plans, tuition reimbursement, vacation/holiday pay, etc.). If no benefit package is offered, so indicate.

List any current and/or past State of Michigan contracts your company/organization has managed in the past five (5) years. (Add lines as needed):

CONTRACT / BPO #	CONTRACT TERM	DESCRIPTION & VALUE