KEY PERSONNEL FORMS Page 1 of 4

**IFB91107DC**

BIDDING FIRM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1.** **PERSON'S NAME**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2.** **POSITION TO BE ASSIGNED**: # of Personnel

for this Position

□ Contract Manager 1

□ Field Superintendent 1

NOTE: If a Proposer finds the space provided on this form to be insufficient, he can attach additional pages to this form as he finds appropriate and just indicate on this form to see attached pages.

**3.** **TECHNICAL TRAINING/EDUCATIONAL BACKGROUND**: \*\*

Institution/Association Apprenticeship /Degree – Licenses / Seminars

Major Date Earned

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4.** **EMPLOYMENT HISTORY**: (If a person has more than three employers in his/her employment history, please provide complete employment history via supplemental page(s) and attach to this form.)

4.1 CURRENT EMPLOYER'S NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATES OF EMPLOYMENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POSITION HELD DURATION BY DATE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.2 PRIOR EMPLOYER'S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATES OF EMPLOYMENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POSITION HELD DURATION BY DATE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**KEY PERSONNEL FORM** Page 2 of 4

##### IFB91107DC

BIDDING FIRM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PERSON'S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.3 PRIOR EMPLOYER'S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATES OF EMPLOYMENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POSITION HELD DURATION BY DATE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5.** **CONTRACT/PROJECT REFERENCES**: (Note: It is preferable that these references be from the Similar Contract/Project Experience provided on attached chart below to this Key Personnel Form; if this is the case, you need only indicate "see attached" under the Description of Contract item.)

5.1 CONTACT PERSON: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TELEPHONE #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COMPANY NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DESCRIPTION OF CONTRACT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.2 CONTACT PERSON: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TELEPHONE #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COMPANY NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DESCRIPTION OF CONTRACT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.3 CONTACT PERSON: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TELEPHONE #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COMPANY NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DESCRIPTION OF CONTRACT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**KEY PERSONNEL FORM** Page 3 of 4

##### IFB91107DC

**6.** **ACHIEVEMENTS/PROFESSIONAL/TRADE CERTIFICATIONS/OTHER**:

**7. SIMILAR PROJECT/CONTRACT EXPERIENCE/REFERENCES**: (COMPLETE THE ATTACHED CHART BELOW– KEY PERSONNEL FORM for each of the submitted key people; that is, the Contract Manager and Field Superintendent). Please note: A **minimum of three (3) projects** are to be listed **for each key person**.

**\*\* NOTE: If a Bidder finds the space provided is insufficient for any category, he can attach additional pages to this form as he finds appropriate and just indicate on this form to "See Attached Page".**

**KEY PERSONNEL FORM** Page 4 of 4

**PROJECT EXPERIENCE ATTACHMENT**

**IFB91107DC**

**KEY PERSON’S NAME: OFFERER:**

**On Call Electrical Generator Repairs**

PROPOSER: PROJECT OWNER’S NAME:

PROJECT NAME: ADDRESS:

START DATE: **\*\***CONTACT PERSON: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COMPLETION DATE: **\*\***TELEPHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CONTRACT AMT: $ OFFERER’S CONTRACT MANAGER:

CONTRACT METHOD: \_\_\_\_ T&M \_\_\_\_ LUMP SUM/FP OFFERER’S LEAD MECHANIC:

\_\_\_\_ OTHER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ­ OFFERER’S MECHANIC: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OFFERER’S ADJUSTOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SETTINGS: \_\_\_\_\_ OCCUPIED, \_\_\_\_\_URBAN ENVIRONMENT, \_\_\_\_\_ HIGHER EDUCATION

WORK INCLUDED: (check all that apply)

Service engine service generators \_\_\_\_\_\_ service generator controls \_\_\_\_\_\_\_ service fuel systems

\_\_\_\_\_\_\_ service automatic transfer switch \_\_\_\_\_\_ full load bank tests \_\_\_\_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Brief, but detailed, description of the project inclusive of type of project and Project Schedule.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**\*\*NOTE: Be sure that the Contact Person and Telephone # are accurate as the University will be contacting them for a reference.**

**OFFERER’S CONTRACTS/PROJECTS MAINTENANCE EXPERIENCE FORM**

**IFB91107DC**

BIDDER: PROJECT OWNER’S NAME:

PROJECT NAME: ADDRESS:

START DATE: CONTACT PERSON:

COMPLETION DATE: TELEPHONE NUMBER:

CONTRACT AMT: $ BIDDER’S CONTRACT MANAGER:

CONTRACT METHOD: LUMP SUM/FP COST PLUS BIDDER’S’ FIELD SUPERINTENDENT:

\_\_\_\_\_\_ T&M \_\_\_\_\_\_ ON CALL ­ \_\_\_\_\_\_ OTHER

SETTINGS: \_\_\_\_\_ FULLY OCCUPIED, \_\_\_\_\_UNOCCUPIED, \_\_\_\_\_INSIDE/OUTSIDE, \_\_\_\_\_URBAN ENVIRONMENT, \_\_\_\_\_ HIGHER EDUCATION

WORK INCLUDED: (check all that apply)

Service engine service generators \_\_\_\_\_\_ service generator controls

\_\_\_\_\_\_\_ service fuel systems \_\_\_\_\_\_ service automatic transfer switch \_\_\_\_\_\_ full load bank tests

\_\_\_\_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GENERATOR TYPES:

KOHLER ONAN \_\_\_\_\_\_ KATOLIGHT

CATERPILLAR CUMMINS \_\_\_\_\_\_ WAUKESHA \_\_\_\_\_\_\_ DETROIT DIESEL

|  |  |
| --- | --- |
| Brief, but detailed, description of the project inclusive of (1) type of project, (2) Setting and (3) Project Schedule. | Similarities of your project to the On Call Electrical Generator Repairs Work: |
|  |  |
|  |  |
|  |  |
|  |  |

Note: Of the three submitted one MUST be done as an On-Call and/or T&M Basis and completed by bidding firm. (see Section 00300 for details)

**COMPANY PROFILE** PAGE 1 OF 3

**IFB91107DC**

BIDDING FIRMS COMPANY NAME:

(Local branch which will service UMB contract)

ADDRESS OF COMPANY:

(Local branch which will service UMB contract)

DATE OF INCORPORATION: STATE OF INCORPORATION:

PARENT COMPANY INFORMATION (IF APPLICABLE):

DATE OF INCORPORATION: STATE OF INCORPORATION:

TYPE OF ORGANIZATION (I.E., CORPORATION, PARTNERSHIP, INDIVIDUAL, JOINT VENTURE):

NUMBER OF YEARS IN BUSINESS UNDER PRESENT NAME:

# OF YEARS IN BUSINESS: # OF YEARS IN BUSINESS\_\_\_\_\_\_\_\_\_\_\_\_\_

(PARENT OFFICE) (BRANCH OFFICE)

OTHER OR FORMER NAMES UNDER WHICH YOUR ORGANIZATION HAS OPERATED:

TYPE OF WORK PERFORMED (*CHECK ALL THAT ARE APPLICABLE*):

 Service Engine,  Service Generators,  Service Generator Controls,

 Service Fuel Systems,  Service Automatic Transfer Switch,  Full Load Bank Tests,

 OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TYPE OF SERVICES WHICH WILL BE PROVIDED BY LOCAL BRANCH OFFICE WHICH WILL SERVICE UMB:

TYPE OF SERVICES WHICH WILL BE PROVIDED BY PARENT COMPANY (IF APPLICABLE) TO UMB:

TYPE OF SUPPORT SERVICES PROVIDED BY PARENT OFFICE TO THE LOCAL BRANCH OFFICE WHICH WILL SERVICE UMB:

**COMPANY PROFILE** PAGE 2 OF 3

**IFB91107DC**

**NOTE:** ATTACH ORGANIZATIONAL CHART OF BOTH THE PARENT COMPANY (IF APPLICABLE) AND THE LOCAL BRANCH OFFICE WHICH WILL SERVICE UMB.

NAME OF PRINCIPAL(S) AND TITLE(S) AT THE BRANCH OFFICE WHICH WILL SERVICE UMB:

NAME OF PRINCIPAL(S) AND TITLE(S):

BRIEF HISTORY OF COMPANY: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |
| --- | --- | --- | --- |
|  | TOTAL COMPANY | LOCAL BRANCH OFFICE WHICH WILL SERVICE UMB | EMPLOYEES IN THE BALTIMORE METROPOLITAN AREA |
| Number of Managers |  |  |  |
| Number of Supervisors |  |  |  |
| Number of Mechanics |  |  |  |
| Number of Modernization/Construction Field Staff |  |  |  |
| Number of Maintenance Field employees |  |  |  |
| Number of Engineering employees |  |  |  |
| Number of Office/Administrative Personnel |  |  |  |
| **TOTAL NUMBER OF EMPLOYEES:** |  |  |  |

**BID SECURITY:**

**BONDING COMPANY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**BONDING CAPACITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NOTE: If a Bidder finds the space provided is insufficient, he can attach additional pages to this form as he finds appropriate and just indicate on this form to "See Attached Page(s)".**

**ANNUAL SALES VOLUME/NUMBER OF PROJECTS**

**ON-CALL ELECTRICAL GENERATOR REPAIRS**

**IFB91107DC**

PROPOSER’S FIRM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| YEAR | ANNUAL SALES VOLUME $ | NUMBER OF CONTRACTS/PROJECTS COMPLETED | LARGEST CONTRACT/PROJECT SIZE |
| 2023 | $ |  | $ |
| 2022 | $ |  | $ |
| 2021 | $ |  | $ |

The above figures should be for the **local branch office** which will service the University.

**STATEMENT OF APPROACH FORM**

**ON CALL ELECTRICAL GENERATOR REPAIRS**

**IFB91107DC**

In response to the BID, Bidders are to provide their statement of approach as to **how** the On Call Electrical Generator Repairs Contract will be provided. The information to be provided under this category is to include, but not limited to the following:

a. A description of **how** your firm will respond quickly to the University for on call work under this contract, from the quotation phase through the completion of the project;

b. A discussion of your Key Personnel approach to coordinating all work including how your firm plans to provide project management of the task orders in order to minimize disruption to the University, students, staff and faculty when providing services under this On Call Electrical Generator Repairs Contract; and,

c. Describe how your mechanics and/or maintenance employees carry out safety practices before performing any kind of maintenance on UMB’s generators.

d. Particular challenges which these Projects present and how the Bidder would address these challenges.