

CDBG PI Only – Woodsmoke Reduction and Heating Replacement Program

Attachment B - Questionnaire

Part 1 - Qualifications

Description of Qualification	Requirement
Provide a copy of your California State Contractor License	Required
Do you have an Equal Opportunity Employment Policy?	Yes/No
Do you have a Drug Free Work Place Policy?	Yes/No
Do you have a non-discrimination policy? Is it posted?	Yes/No Yes/No
Are you a small, disadvantaged, Section 3, woman or minority-owned business enterprise? If yes, please list which one(s):_____	Yes/No
Ability to provide Proof of Worker’s Compensation Insurance?	Yes / No
Ability to provide Proof of Liability Insurance with Siskiyou County as additional insured?	Yes / No
Are you able to give accurate detailed estimates and invoices for each specified project? – Cost of labor, equipment, materials and fees – Scope of work including any exterior, ground disturbance or paint disturbance (for homes built prior to 1978) work – Time frame in which the work can be completed	Yes / No
Ability to obtain required permits from the County and arrange inspections, as needed?	Yes / No
Ability to apply all standard guarantees and warranties with a minimum warranty on parts and labor?	Yes / No
Ability to enter into a 2-year contract with the County?	Yes / No
Does your company have any conflict of interest, direct or indirect, financial or otherwise, which would conflict in any manner or degree with the performance of your contract with the County? If yes, please explain:_____ _____	Yes / No

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Part 2 – Schedule and Capacity

Are you able to respond to County participants within a timely manner as you would a typical customer?	Yes / No
Are your services limited to particular heating devices/systems? If so, please indicate which one(s): _____ _____	Yes / No
Is your service area limited? If so please list the areas you serve: _____ _____	Yes / No
Ability to maintain records for 5 years for all participants referred for service with the understanding that the County or State can review those files?	Yes / No

Part 3 – Experience and References

Year Business Established	
# of Employees	
# Years Experience removing and installing heating devices	
# Years Experience in Siskiyou County	
# Years Experience with federally funded projects	
# Years Experience with State funded projects	
Do you have experience with Lead Based Paint regulations?	Yes / No
Do you have certifications or affiliations that enhance your qualifications for this work? If so, please list: _____ _____	Yes / No

References

Please list references for whom similar services have been provided:

1. Name/Company: _____

Address: _____

Telephone Number: _____

Email: _____

2. Name/Company: _____

Address: _____

Telephone Number: _____

Email: _____

3. Name/Company: _____

Address: _____

Telephone Number: _____

Email: _____

Part 4 – Bid Sheet *Company invoice may be submitted in lieu of Bid Sheet but must contain the components listed in the table below.*

Please submit a bid for the following **sample project**:

1200 square foot single family home in Hornbrook currently using a non-certified freestanding woodstove installed in 1972 to be replaced with an EPA Phase 2 Certified 2.5 grams per hour woodstove.

Equipment/Material

New Device		\$
Installation Material	(e.g. flashing, pipe, storm collar, spark arrester, etc.	\$
		\$
		\$
		\$
		\$
		\$

Labor

Removal/Installation	___ hours at \$___/hr	\$
Training	___ hours at \$___/hr	\$
Recycling	___ hours at \$___/hr	\$
Other (list):	___ hours at \$___/hr	\$
	___ hours at \$___/hr	\$

Other

Permit Fee		\$
Recycling Fee		\$
Travel		\$
Other (list):		