

QUESTIONNAIRE

The following information will be evaluated as a part of the bid award process. The City reserves the right to award to the best bidder, based on a thorough review of performance, check of past work and responses to this questionnaire.

PLEASE RESPOND TO THE FOLLOWING by providing either a specific answer or a full explanation as appropriate. If you wish you may submit an attachment with detailed explanations of your responses.

1. At the present time, does your company have the ability to provide all the equipment, vehicles, and services requested in this bid?

Yes: _____ No: _____ N/A: _____

If no, please provide details.

Response: _____

2. If your company were awarded this bid, who would be your single point of contact for the following?

Supervisor: _____

Implementation Coordinator: _____

Billing: _____

3. Provide a complete listing of utilities for which you have performed Meter Reading in the past five (5) years. Please note which clients are current and which are not. Please respond by including the information shown below for each utility and include it in your response as ATTACHMENT A.

Name of Utility
Contact's Name
Contact's Title
Contact's Phone #
Type of Service(s) Performed
Length of Service (consecutive years)
Meter Reading Accuracy (%)

4. How long has your company been in business?

Response: _____

5. What is your principal service area at the present time?

Response: _____

6. If your company is awarded a contract, indicate the specific amount of time your company would require to be ready with a full complement of manpower and equipment as specified in this bid document, from the time of the award until commencement of work.

Response: _____

7. What is the total number of motor vehicle accidents your company vehicles (both leased and owned) were involved in during the calendar year 2013?

Response: _____

8. What was your company's total number of motor vehicle accidents (both leased and owned) that involved injury or death during the calendar year 2013?

Response: _____

9. Provide a copy of your company's latest OSHA Form 300A Summary of Work-Related Injuries and Illnesses. Please include this information as ATTACHMENT B.

10. Provide a copy of your company's current Safety and Health Policies. Please include this information as ATTACHMENT C.

11. Please describe what type of safety program your company provides to your employees and how you are currently incorporating this at other accounts.

Response: _____

12. How do you evaluate employee meter reading accuracy?

Response: _____

13. In an attachment, describe your plans for deterring "curb reading" among your employees and how you currently handle this with other accounts. Please include this information as ATTACHMENT D.

14. In an attachment, describe how you propose to meet the City's service level requirements and how you currently handle this with other accounts. Please include this information as ATTACHMENT E.

15. In an attachment, outline your contingency plan for employee absences. Please include this information as ATTACHMENT F.

- 16. In an attachment, outline your contingency plan for emergency support to the City. Please include this information as ATTACHMENT G.
- 17. Provide a copy of your company's drug and alcohol policy. Please include this information as ATTACHMENT H.
- 18. Provide a detailed sample copy of your company's background check report that would be used for any of your employees who would be working on the City's account. Please include this information as ATTACHMENT I.

19. Will you be partnering with a subcontractor for any portion of this bid?

Yes: _____ No: _____ N/A: _____

If yes, please provide the following information:

Company Name of Subcontractor: _____

Subcontractor's Street Address: _____

Subcontractor's City/State/Zip: _____

Person(s) Who Will Be Assigned to the City's Account: _____

Phone #: _____

Is this subcontractor:

MBE-Certified? _____

WBE-Certified? _____

None of the above _____

20. OPTIONAL: Please provide any additional information or comments that you feel are critical to the City's decision-making. Please state facts only and substantiate any claims made. Please include this information as ATTACHMENT J.