



EMERGENCY CONTRACTOR INFORMATION FORM (ECIF)

1. Provide the following identifying information.

| | | | | | | | | | | | |
|--------------------------------|----------------------|----------------------|---|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Federal Identification Number: | <input type="text"/> | <input type="text"/> | - | <input type="text"/> |
| Company Name: | _____ | | | | | | | | | | |
| Street Address: | _____ | | | | | | | | | | |
| City: | _____ | | | | | | | | | | |
| State: | _____ | | | | | | | | | | |
| Zip: | _____ | | | | | | | | | | |
| County: | _____ | | | | | | | | | | |

2. Provide a *minimum* of two (2) names with phone and fax numbers of contact persons available 24 hours a day, weekends and holidays who will respond with a quotation when called. *(Attach additional sheet(s) if there are more than two contacts.)*

| | |
|----------------------|-------|
| Name: | _____ |
| Phone No.: | _____ |
| Fax No.: | _____ |
| Mobile: | _____ |
| After Hours Numbers: | _____ |

| | |
|----------------------|-------|
| Name: | _____ |
| Phone No.: | _____ |
| Fax No.: | _____ |
| Mobile: | _____ |
| After Hours Numbers: | _____ |

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3. Is your firm a Minority/Women-Owned Business Enterprise (M/WBE)? Yes No

4. A) Provide verifiable experience for each trade selected for #2 of the Emergency Bidders List Requirements. *(Attach additional sheets as necessary.)*

| | <u>Trades</u> | <u>Project Title</u> | <u>Work Performed</u> | <u>\$ Value</u> | <u>Contact</u> | <u>Phone No.</u> |
|-----|---------------|----------------------|-----------------------|-----------------|----------------|------------------|
| 1. | _____ | _____ | _____ | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ | _____ | _____ | _____ |
| 5. | _____ | _____ | _____ | _____ | _____ | _____ |
| 6. | _____ | _____ | _____ | _____ | _____ | _____ |
| 7. | _____ | _____ | _____ | _____ | _____ | _____ |
| 8. | _____ | _____ | _____ | _____ | _____ | _____ |
| 9. | _____ | _____ | _____ | _____ | _____ | _____ |
| 10. | _____ | _____ | _____ | _____ | _____ | _____ |
| 11. | _____ | _____ | _____ | _____ | _____ | _____ |
| 12. | _____ | _____ | _____ | _____ | _____ | _____ |
| 13. | _____ | _____ | _____ | _____ | _____ | _____ |
| 14. | _____ | _____ | _____ | _____ | _____ | _____ |
| 15. | _____ | _____ | _____ | _____ | _____ | _____ |
| 16. | _____ | _____ | _____ | _____ | _____ | _____ |
| 17. | _____ | _____ | _____ | _____ | _____ | _____ |
| 18. | _____ | _____ | _____ | _____ | _____ | _____ |
| 19. | _____ | _____ | _____ | _____ | _____ | _____ |
| 20. | _____ | _____ | _____ | _____ | _____ | _____ |
| 21. | _____ | _____ | _____ | _____ | _____ | _____ |

See attached for additional information.

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4. B) Describe company staffing resources.

| <u>Title</u> | <u>Number</u> | <u>Title</u> | <u>Number</u> |
|---|---------------|--------------|---------------|
| Project Managers | _____ | (Other) | _____ |
| Superintendents | _____ | (Other) | _____ |
| Carpenters | _____ | (Other) | _____ |
| Electricians | _____ | (Other) | _____ |
| Plumbers | _____ | _____ | _____ |
| Steamfitters | _____ | _____ | _____ |
| Laborers | _____ | _____ | _____ |
| Bookkeepers | _____ | _____ | _____ |
| Secretarial/Clerical | _____ | _____ | _____ |
| <input type="checkbox"/> See attached for additional information. | | | |

5. List self-owned/long term leased equipment used for the trades selected for #3 of the Emergency Bidders List Requirements. (Attach additional sheet(s) as necessary.)

| <u>Equipment Description</u> | <u>Brand Name</u> | <u>Model No.</u> |
|---|-------------------|------------------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |
| 4. _____ | _____ | _____ |
| 5. _____ | _____ | _____ |
| 6. _____ | _____ | _____ |
| 7. _____ | _____ | _____ |
| 8. _____ | _____ | _____ |
| 9. _____ | _____ | _____ |
| 10. _____ | _____ | _____ |
| <input type="checkbox"/> See attached for additional information. | | |

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6. Attach résumé's/work histories of on-site supervisors and project managers as required in #4 of the Emergency Bidders List Requirements.

7. Provide verifiable documentation of required licenses for the following work in the trades selected. *(Attach copies of licenses/certifications and additional sheet(s) as necessary.)*

| | <u>License No.</u> | <u>Expiration Date</u> |
|---|--------------------|------------------------|
| 1. <u>Fire Alarm Systems</u> | _____ | _____ |
| 2. <u>Electronic Security Systems</u> | _____ | _____ |
| 3. <u>Asbestos Abatement</u> | _____ | _____ |
| 4. _____ | _____ | _____ |
| 5. _____ | _____ | _____ |
| 6. _____ | _____ | _____ |
| <input type="checkbox"/> See attached for additional information. | | |

8. If your firm is applying for the "T" Trade – Roofing, list data for all roofing systems your firm is certified to install. Attach evidence of current certification from all Manufacturers listed below for each type system. *(Attach additional sheet(s) as necessary.)*

| <u>Roofing Types</u> | <u>Manufacturer</u> | <u>Roofing Types</u> | <u>Manufacturer</u> |
|---|---------------------|----------------------|---------------------|
| 1. <u>Built-Up</u> | _____ | <u>(Other)</u> | _____ |
| 2. <u>Modified SBS</u> | _____ | _____ | _____ |
| 3. <u>PVC</u> | _____ | _____ | _____ |
| 4. <u>Hypalon</u> | _____ | _____ | _____ |
| 5. <u>EPDM</u> | _____ | _____ | _____ |
| 6. <u>Metal Roofing</u> | _____ | _____ | _____ |
| 7. <u>Shingle</u> | _____ | _____ | _____ |
| 8. _____ | _____ | _____ | _____ |
| 9. _____ | _____ | _____ | _____ |
| 10. _____ | _____ | _____ | _____ |
| <input type="checkbox"/> See attached for additional information. | | | |

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CERTIFICATION

The undersigned officer of _____ hereby represents and affirms that the information provided on this questionnaire is complete and accurate, and that the Emergency Bidders List Requirements are understood. The undersigned further acknowledges that this certification is submitted for the express purpose of inducing the Office of General Services to add the said company to one or more emergency contracting lists maintained by the Office of General Services. Qualifications are subject to verification. Intentional misrepresentations may constitute a crime under New York State Law.

Sworn to before me

this _____ day of _____, 20____ .

Notary Public

Officer's Signature

Print Name

Title

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LIST OF TRADES WITH DEFINITIONS

Indicate trades of interest by checking the appropriate box(es).

- C – Construction** – General Building Construction – Masonry/Carpentry including associated Excavation, etc., Concrete and Steel, and Interior/Renovation, etc. (does not include Mechanical/Electrical)
- H – HVAC** – Installation/Repair of all Heating, Ventilating, Air Conditioning, Refrigeration, Temperature Controls, Boilers, Chillers, Air Handlers, Pumps.
- E – Electrical** – Installation/Repair of Electrical Systems under 600 volts including Exterior Lighting – CCTV.
- P – Plumbing** – Installation/Repair of Interior Roof Leaders, Plumbing Repairs including Water, Waste and Vent.
- T – Roofing** – Installation/Repair - Accessories. Certification required in specified system.
- V – High Voltage** – Installation/Repair of Electrical Systems over 600 volts including Generators, Transformers, Switchgear, Feeders, Overhead Pole LINE Work.
- U – Elevator** – Repair/Installation/Modernization of Elevators, Escalators and Dumbwaiters.
- N – Fire Protection/Sprinkler** – Installation/Repair of Fire Protection/Sprinkler Systems including Standpipes, Fire Pumps and Fire Suppression.
- G– Water/Sewer/Storm/Site work** – Installation/Repair of Exterior Water/Sewer/Storm including associated Excavation and site work.
- B – Hazardous Materials** – Remediation/Removal/Disposal of hazardous materials, i.e., PCB's, Petroleum, Chemical, Biohazard and excluding Asbestos and Lead.
- A – Asbestos/Lead** – Remediation/Removal/Abatement/Disposal of Asbestos and Lead. Must hold all certifications required by law.
- F – Fire Alarm/Security** – Installation/Repair/Modernization of Fire Alarm and Security Systems. Must be licensed.
- I – Refractory/Chimney** – Installation/Rehabilitation of Boiler Refractory, Chimney Rehabilitation.
- L – Fencing** – Installation/Rehabilitation of Fencing.

For OGS Use Only:

(Explain any modifications made to selected trades.)

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LIST OF COUNTIES OF INTEREST

Indicate counties of interest by checking the appropriate box(es).

Region 1

Long Island

- Bronx
- Nassau
- Queens
- Suffolk

Region 2

New York City

- Kings
- New York
- Richmond
- Rockland

Region 3

Hudson Valley

- Columbia
- Greene
- Orange
- Sullivan
- Ulster

Region 4

Westchester

- Dutchess
- Putnam
- Westchester

Region 5

Albany

- Albany
- Fulton
- Montgomery
- Rensselaer
- Schenectady
- Schoharie

Region 6

Adirondack

- Clinton
- Essex
- Franklin
- Hamilton
- St. Lawrence
- Saratoga
- Warren
- Washington

Region 7

Syracuse

- Cayuga
- Jefferson
- Lewis
- Livingston
- Monroe
- Onondaga
- Ontario
- Oswego
- Seneca
- Wayne
- Yates

Region 8

Elmira

- Broome
- Chemung
- Chenango
- Cortland
- Delaware
- Herkimer
- Madison
- Oneida
- Otsego
- Schuyler
- Steuben
- Tioga
- Tompkins

Region 9

Buffalo

- Allegheny
- Cattaraugus
- Chautauqua
- Erie
- Genesee
- Niagara
- Orleans
- Wyoming
- Genesee

For OGS Use Only:

(Explain any modifications made to selected counties.)