**ATTACHMENT 9**

**MINIMUM QUALIFICATIONS SUBMITTAL FORM**

|  |  |
| --- | --- |
| **Bidder’s Name:** |       |

|  |
| --- |
| **Instructions:** |
| Please provide the information requested below in the box(es) provided. Please note that any Bidder who fails to submit responses to the questions herein may be deemed non-responsive and denied further consideration for Contract award. |

**SECTION 1: EXECUTIVE SUMMARY**

|  |
| --- |
| 1. Headquarters Address –

 Please provide the address of your company’s headquarters (Street, City, State, Zip): |
|       |

|  |
| --- |
| 1. Please provide the date that your company was established, organized or incorporated (whichever occurred first):
 |
|       |

|  |
| --- |
| 1. Please provide your company’s gross annual sales for the 2018 tax year:
 |
|       |

|  |
| --- |
| 1. Please provide the total number of employees on your company’s payroll on 12/31/2018:
 |
|       |

**SECTION 2: MINIMUM QUALIFICATIONS**

See Section 2.1 in the Solicitation.

1. Is your company either an owner of Community Solar project(s) or an entity authorized by the owner to manage and sell subscriptions for Community Solar project(s)?

|  |
| --- |
|[ ]  Yes, we are an owner of Community Solar project(s) |
| [ ]  | Yes, we are authorized by the owner to sell and manage subscriptions for Community Solar project(s) |
| [ ]  | No |

1. Please list one Community Solar project either owned by your company or that your company is authorized by the owner to sell and manage subscriptions for.

|  |  |
| --- | --- |
| Project Name |       |
| NY-Sun Project Number |       |
| Town |       |
| County |       |
| Zip Code |       |
| Contact information for the community solar farm (website or phone number) |       |

1. Does your company own the Community Solar project listed in Question 6, or is It authorized by the owner to sell and manage subscriptions for the project?

|  |
| --- |
|[ ]  We own the project |
| [ ]  | We are authorized by the owner to sell and manage subscriptions for the project |
| [ ]  | Neither |

1. If your company is authorized by the owner to sell and manage subscriptions for the project listed in Question 6, have you included an ‘Owner’s Authorization Letter’ (see Attachment 11) for the project with your proposal?

|  |
| --- |
|[ ]  Yes |
| [ ]  | No |

1. Is the project listed in Question 6 accepting subscriptions at the time of the bid opening date?

|  |
| --- |
|[ ]  Yes |
| [ ]  | No |

1. Is the project listed in Question 6 either a NY-Sun Community Solar project or is it located in PSEG Long Island territory?

|  |
| --- |
|[ ]  NY-Sun |
| [ ]  | PSEG Long Island |
| [ ]  | Neither |

1. Has your company maintained an organization, in continuous operation, for at least two years prior to the bid opening date?

|  |
| --- |
|[ ]  Yes |
| [ ]  | No |

**SECTION 2: MINIMUM REQUIREMENTS** (cont’d)

(See Solicitation Section 2.1)

References will be contacted for a performance rating as detailed in Section *5.2 Reference Check* in the Solicitation).

The Bidder must provide a list of ten (10) references for residential, governmental or commercial utility accounts that were managed as part of a Community Distributed Generation or Community Solar project.

**Customer Reference #1**

|  |  |
| --- | --- |
| Customer’s Name |       |
| Customer’s Account Number |       |
| Customer’s Contact Name |       |
| Customer’s Contact Phone Number |       |
| Customer’s Contact email address |       |
| Name of Community Distributed Generation or Community Solar project |       |
| Location of CDG or CS project (town, state and Zip) |       |

|  |
| --- |
| Type of Entity: |
|  |[ ]  Residential |
|  |[ ]  Federal Agency |
|  |[ ]  State Agency |
|  |[ ]  Local Municipality (City, Town, County, etc.) |
|  |[ ]  College |
|  | [ ]  | School District |
|  | [ ]  | Commercial Business |
|  | [ ]  | Other – provide description:       |

**Customer Reference #2**

|  |  |
| --- | --- |
| Customer’s Name |       |
| Customer’s Account Number |       |
| Customer’s Contact Name |       |
| Customer’s Contact Phone Number |       |
| Customer’s Contact email address |       |
| Name of Community Distributed Generation or Community Solar project |       |
| Location of CDG or CS project (town, state and Zip) |       |

|  |
| --- |
| Type of Entity: |
|  |[ ]  Residential |
|  |[ ]  Federal Agency |
|  |[ ]  State Agency |
|  |[ ]  Local Municipality (City, Town, County, etc.) |
|  |[ ]  College |
|  | [ ]  | School District |
|  | [ ]  | Commercial Business |
|  | [ ]  | Other – provide description:       |

**Customer Reference #3**

|  |  |
| --- | --- |
| Customer’s Name |       |
| Customer’s Account Number |       |
| Customer’s Contact Name |       |
| Customer’s Contact Phone Number |       |
| Customer’s Contact email address |       |
| Name of Community Distributed Generation or Community Solar project |       |
| Location of CDG or CS project (town, state and Zip) |       |

|  |
| --- |
| Type of Entity: |
|  |[ ]  Residential |
|  |[ ]  Federal Agency |
|  |[ ]  State Agency |
|  |[ ]  Local Municipality (City, Town, County, etc.) |
|  |[ ]  College |
|  | [ ]  | School District |
|  | [ ]  | Commercial Business |
|  | [ ]  | Other – provide description:       |

**Customer Reference #4**

|  |  |
| --- | --- |
| Customer’s Name |       |
| Customer’s Account Number |       |
| Customer’s Contact Name |       |
| Customer’s Contact Phone Number |       |
| Customer’s Contact email address |       |
| Name of Community Distributed Generation or Community Solar project |       |
| Location of CDG or CS project (town, state and Zip) |       |

|  |
| --- |
| Type of Entity: |
|  |[ ]  Residential |
|  |[ ]  Federal Agency |
|  |[ ]  State Agency |
|  |[ ]  Local Municipality (City, Town, County, etc.) |
|  |[ ]  College |
|  | [ ]  | School District |
|  | [ ]  | Commercial Business |
|  | [ ]  | Other – provide description:       |

**Customer Reference #5**

|  |  |
| --- | --- |
| Customer’s Name |       |
| Customer’s Account Number |       |
| Customer’s Contact Name |       |
| Customer’s Contact Phone Number |       |
| Customer’s Contact email address |       |
| Name of Community Distributed Generation or Community Solar project |       |
| Location of CDG or CS project (town, state and Zip) |       |

|  |
| --- |
| Type of Entity: |
|  |[ ]  Residential |
|  |[ ]  Federal Agency |
|  |[ ]  State Agency |
|  |[ ]  Local Municipality (City, Town, County, etc.) |
|  |[ ]  College |
|  | [ ]  | School District |
|  | [ ]  | Commercial Business |
|  | [ ]  | Other – provide description:       |

**Customer Reference #6**

|  |  |
| --- | --- |
| Customer’s Name |       |
| Customer’s Account Number |       |
| Customer’s Contact Name |       |
| Customer’s Contact Phone Number |       |
| Customer’s Contact email address |       |
| Name of Community Distributed Generation or Community Solar project |       |
| Location of CDG or CS project (town, state and Zip) |       |

|  |
| --- |
| Type of Entity: |
|  |[ ]  Residential |
|  |[ ]  Federal Agency |
|  |[ ]  State Agency |
|  |[ ]  Local Municipality (City, Town, County, etc.) |
|  |[ ]  College |
|  | [ ]  | School District |
|  | [ ]  | Commercial Business |
|  | [ ]  | Other – provide description:       |

**Customer Reference #7**

|  |  |
| --- | --- |
| Customer’s Name |       |
| Customer’s Account Number |       |
| Customer’s Contact Name |       |
| Customer’s Contact Phone Number |       |
| Customer’s Contact email address |       |
| Name of Community Distributed Generation or Community Solar project |       |
| Location of CDG or CS project (town, state and Zip) |       |

|  |
| --- |
| Type of Entity: |
|  |[ ]  Residential |
|  |[ ]  Federal Agency |
|  |[ ]  State Agency |
|  |[ ]  Local Municipality (City, Town, County, etc.) |
|  |[ ]  College |
|  | [ ]  | School District |
|  | [ ]  | Commercial Business |
|  | [ ]  | Other – provide description:       |

**Customer Reference #8**

|  |  |
| --- | --- |
| Customer’s Name |       |
| Customer’s Account Number |       |
| Customer’s Contact Name |       |
| Customer’s Contact Phone Number |       |
| Customer’s Contact email address |       |
| Name of Community Distributed Generation or Community Solar project |       |
| Location of CDG or CS project (town, state and Zip) |       |

|  |
| --- |
| Type of Entity: |
|  |[ ]  Residential |
|  |[ ]  Federal Agency |
|  |[ ]  State Agency |
|  |[ ]  Local Municipality (City, Town, County, etc.) |
|  |[ ]  College |
|  | [ ]  | School District |
|  | [ ]  | Commercial Business |
|  | [ ]  | Other – provide description:       |

**Customer Reference #9**

|  |  |
| --- | --- |
| Customer’s Name |       |
| Customer’s Account Number |       |
| Customer’s Contact Name |       |
| Customer’s Contact Phone Number |       |
| Customer’s Contact email address |       |
| Name of Community Distributed Generation or Community Solar project |       |
| Location of CDG or CS project (town, state and Zip) |       |

|  |
| --- |
| Type of Entity: |
|  |[ ]  Residential |
|  |[ ]  Federal Agency |
|  |[ ]  State Agency |
|  |[ ]  Local Municipality (City, Town, County, etc.) |
|  |[ ]  College |
|  | [ ]  | School District |
|  | [ ]  | Commercial Business |
|  | [ ]  | Other – provide description:       |

**Customer Reference #10**

|  |  |
| --- | --- |
| Customer’s Name |       |
| Customer’s Account Number |       |
| Customer’s Contact Name |       |
| Customer’s Contact Phone Number |       |
| Customer’s Contact email address |       |
| Name of Community Distributed Generation or Community Solar project |       |
| Location of CDG or CS project (town, state and Zip) |       |

|  |
| --- |
| Type of Entity: |
|  |[ ]  Residential |
|  |[ ]  Federal Agency |
|  |[ ]  State Agency |
|  |[ ]  Local Municipality (City, Town, County, etc.) |
|  |[ ]  College |
|  | [ ]  | School District |
|  | [ ]  | Commercial Business |
|  | [ ]  | Other – provide description:       |