



First Electric Cooperative Corporation

P.O. Box 5018
Jacksonville, Arkansas 72078-5018
(501) 982-4545 • (800) 489-7405

August 10, 2023

NOTICE TO ALL CONTRACTORS

First Electric Cooperative Corporation will be soliciting proposals later this summer for a system-wide, multi-year construction and maintenance contract, including post disaster electric distribution and transmission line construction work, for overhead and underground distribution lines beginning in January of 2024.

If your company is interested in submitting a proposal, your company must first complete a pre-qualification packet. Please go to www.firstelectric.coop and click on the **2024 Construction Contract Pre-Qualification Application** link to download a pre-qualification cover letter and application.

Your completed pre-qualification application must be received by First Electric Cooperative **before 5:00 p.m. on Wednesday, August 30th, 2023**. Email your completed application to: jerry.driskill@fecc.coop

First Electric Cooperative Corporation will evaluate each pre-qualification application using the criteria specified as follows:

- Record of Past Performance (experience)
- Contractor Integrity (references, reputation)
- Financial and Technical Resources (financial stability, resources, equipment & services)
- Compliance with Public Policy (safety)

Each of the criteria listed above will be scored on a pass/fail basis. You will be required to pass all four criteria to be eligible to receive a Request for Proposal. The Proposals will be evaluated from the qualifications and unit prices submitted.

First Electric Cooperative Corporation is an Arkansas corporation located at 1000 South J.P. Wright Loop Rd, Jacksonville, AR 72076. The mailing address is P.O. Box 5018, Jacksonville, AR 72078.

For additional information, please contact me at 501-982-4545.

Sincerely,

Jerry Driskill
V.P. of Operations
First Electric Cooperative

**FIRST ELECTRIC COOPERATIVE
CORPORATION**

**2024 Construction Contract
PRE-QUALIFICATION APPLICATION**

Please email all completed applications to:
jerry.driskill@fecc.coop

Company Name: _____

Please complete the following application to be considered for placement in the First Electric Cooperative Corporation (FECC) Qualified Contractors' List (QCL). Contractors must be on the FECC QCL in order to submit proposals on FECC construction projects. An incomplete application will not be accepted. Receipt of your completed Pre-Qualification Application does not guarantee placement on FECC's Qualified Contractors' List. FECC reserves the right to reject any Pre-Qualification Application at its own discretion.

You are notified that FECC complies with the prevailing wage laws of the State of Arkansas and requires all contractors to comply. Pre-qualification of contractors will be in accordance with the policies, guidelines, and specifications of FECC.

Questions concerning this application may be directed to Mr. Jerry Driskill, V.P. Operations, First Electric Cooperative Corporation, 1000 South J.P. Wright Loop Road, P.O. Box 5018, Jacksonville, Arkansas 72078. Telephone (501) 982-4545.

APPLICATION FOR PRE-QUALIFICATION

- 1) Name of Applicant
 - (a) Applicant:
 - (b) Contact/Phone:
 - 2) Address
 - (a) Mailing:
 - (b) Street Address:
 - (c) Proposals Mailed and Addressed to:
 - 3) Telephone:
 - 4) Fax:
 - 5) E-mail Address:
 - 6) Are you able to support after hours/unscheduled needs? Yes_____ No_____
- If yes, after-hours contact name: _____
- Phone Number: _____
- After-hours backup contact name: _____
- Phone Number: _____

- 7) Check appropriate: Corporation Partnership
 Sole Proprietorship Limited Liability Company

8) Federal Tax ID No. (EIN):

9) If applicant is a corporation:

(a) State of incorporation:

(b) Name and address of registered agent:

(c) Names and addresses of officers of the corporation and their length of time with corporation.

Name: _____

Title: _____

Address: _____

Telephone: _____

Authorized to sign contracts? Yes _____ No _____

Name/Title: _____

Title: _____

Address: _____

Telephone: _____

Authorized to sign contracts? Yes _____ No _____

Name/Title: _____

Title: _____

Address: _____

Telephone: _____

Authorized to sign contracts? Yes _____ No _____

(d) Number of years your corporation has been in business:

10) If applicant is a partnership, state:

(a) Names and addresses of all partners: _____

(b) Length of time partnership has been in business: _____

11) If applicant is a limited liability company, state:

(a) Names and addresses of all members: _____

(b) Length of time LLC has been in business: _____

12) If applicant is sole proprietorship, length of time in business:

13) Number of years applicant has performed the type of work for which applicant is seeking pre-qualification: _____

14) Number of employees (not including yourself): _____

15) My company is qualified to provide the service(s) selected below; and further seeks pre-qualification to work on FECC's system in the following areas:

PREQUALIFY FOR
SEALED BIDS

DISTRIBUTION

- 25 kV Primary
- 600 Volt Secondary
- Overhead Construction
- Underground Construction
- Work on or near energized parts and conductors (hot work)

TRANSMISSION

- 69 kV Overhead Construction
- 230 kV Overhead Construction

SUBSTATION - Includes up to 230 kV air insulated

FIBER OPTIC

- New fiber construction overhead.....
- New fiber construction underground
- Fiber Splicing
- Fiber Testing
- Transfer of existing fiber on tangent poles
- Transfer of existing fiber on dead-end poles

STREET LIGHTING - Installation and maintenance.....

TREE TRIMMING - Near energized lines (Mechanical).....

TREE TRIMMING - Near energized lines (Climbing).....

CONDUIT INSTALLATION ONLY

OTHER (Please specify) _____

16) What is the maximum dollar amount of work in one contract that you are capable of undertaking?

17) What is the minimum dollar amount of work your company is willing to bid?

18) Name and address of applicant's bank, including the branch, telephone number and name of the individual in said bank to be contacted for financial reference:

19) List at least three (3) recent electric utility clients for references. Include name of contact person, company, location, current phone number, and size of the project in dollars. (Attach additional sheets if necessary).

Firm Name/Address: _____

Contact Person: _____
 Telephone: _____
 Project: _____
 Dollar Amount: _____

Firm Name/Address: _____
 Contact Person: _____
 Telephone: _____
 Project: _____
 Dollar Amount: _____

Firm Name/Address: _____
 Contact Person: _____
 Telephone: _____
 Project: _____
 Dollar Amount: _____

Please initial by responses to questions 20 - 33.

- 20) Can you affirm that your company is an *independent contractor* and that it agrees to perform services for FECC as an *independent contractor* and not as a sub-contractor, agent or employee of FECC?
 YES _____ NO _____ .
- 21) Is your company a licensed contractor under the provisions of the State of Arkansas and is your company up to date on all current fees?
 YES _____ NO _____
- 22) Is your company able to be bonded?
 YES _____ NO _____

If no, please explain: _____

If yes, to what level? \$ _____

- 23) Do you confirm that your company has (or will have) the ability to submit invoices and accept payment electronically if required by FECC?
YES _____ NO _____
- 24) Do you certify that all individuals that would perform work for FECC are qualified under required Federal and State regulations including regulatory agencies such as OSHA and DOT that apply to the work being done?
YES _____ NO _____
- 25) Do you confirm you are in compliance with all State and Federal regulatory agencies?
YES _____ NO _____
- 26) Do you certify that all vehicles owned by your company are equipped with an automatic vehicle location (AVL) system?
YES _____ NO _____
- 27) If your company fleet is equipped with an AVL system, are you willing to make that information available to First Electric by means of integration into First Electric's software or by providing access to your company monitoring system?
YES _____ NO _____
- 28) Do you certify that your construction vehicles are equipped with two-way radios?
YES _____ NO _____

If yes, what brand and type of radio system do you use? _____

- If yes, would you be willing to program FECC's radio frequency into your system if it is compatible with FECC's radio system?
YES _____ NO _____
- 29) Do you understand that pre-qualification by FECC is only a measurement tool to help ascertain your company's ability to comply with FECC's contractual specifications and that the process of pre-qualification in no way negates your company's responsibility to ensure all contractual specifications are met on an ongoing basis?
YES _____ NO _____
- 30) Do you understand the pre-qualification approval of contractors to perform work on FECC's system is not construed as an approval of your company's practices, policies and procedures or any of your company's programs?
YES _____ NO _____
- 31) Do you understand that any and all work performed on FECC lines must first be approved by an authorized agent of FECC?
YES _____ NO _____
- 32) Do you recognize and agree that FECC has the right to reconsider or reevaluate the pre-qualification status of your company at any time and for any reason at the sole discretion of FECC?
YES _____ NO _____

33) Please include the following with your application, organized behind the cover sheets provided:

A. Safety Program Information

Name and title of the company official with binding authority who is responsible for your safety program: _____

Name, title and qualifications of person or persons primarily responsible for delivering safety and training programs and performing safety inspections (may include consulting safety professionals):

Do you certify that your company has and uses a safety manual and/or procedures?

YES _____ NO _____

Do you certify that OSHA 1910.269 training has been completed for all applicable personnel?

YES _____ NO _____

- Provide an example of a recent safety meeting agenda, meeting minutes, and attendance roster.
- Provide an example of a recent on-the-job safety inspection completed by your company.
- Provide an example of recent incident investigation report (investigating a near miss or accident).
- Provide the most current OSHA 300 report for your company.

B. Tools and Equipment Information

- Provide a most recent example of a vehicle, equipment and tool inspection report.
- Provide a most recent example of a rubber goods inspection and testing report.
- Provide a most recent example of a hot-stick inspection and testing report.
- Provide a most recent example of a grounds inspection and testing report.
- Attach a list of vehicles and equipment including age.
- Provide a most recent example of a bucket truck dielectric test.

C. Supervision and Personnel Information

Attach a list of all supervisors and key employees, their titles, qualifications, years of experience, professional/trade certifications, and professional/trade memberships.

Are you part of a Lineman Apprenticeship Program?

YES _____ NO _____

D. Insurance Information

Workers Compensation - Provide one of the following:

Proof of Workers' Compensation and Unemployment Insurance from the State of Arkansas (Arkansas-based Company)

Extra-territorial certification from the state of Arkansas for workers compensation and unemployment insurance.

A letter from your insurance provider stating that workers' compensation and unemployment insurance are not required by the state that your company is incorporated or doing business in.

Proof of liability insurance - Should have all of each following:

\$2 million minimum public liability

\$2 million minimum automobile liability

FECC as a named insured on the policy.

E. Financial Information

Most recent audited financial statement.

F. Contractor's License

Copy of your current contractor's license issued by the State of Arkansas.

SUBMITTED THIS _____ day of _____, 20____

Company Name

Name of Authorized Agent (Please Print)

Title: _____

Authorized Agent's Signature Date

STATE OF _____)

ss

COUNTY OF _____)

On this ____ day of _____, 20____, before me the undersigned, a Notary Public in and for the State of _____, duly commissioned and sworn, personally appeared _____, to me known to be the _____ and Authorized Agent respectively, of _____, the corporation that executed the foregoing instrument, and acknowledged the said instrument to be the free and voluntary act and deed of said corporation, for the uses and purposes therein mentioned, and on oath stated that (s)he is authorized to execute the said instrument, and that the statements contained in said instrument and in the attachments thereto are true and correct to the best of (his/her) knowledge.

WITNESS my hand and official seal hereto affixed the day and year first above written.

Notary Public

My commission expires: _____

(SEAL)

A. Safety Program Information

(Company Name)

B. Tools and Equipment Information

(Company Name)

C. Supervision and Personnel Information

(Company Name)

D. Insurance Information

(Company Name)

E. Financial Information

(Company Name)

F. Contractor's License

(Company Name)