

# COMMUNITY VENTURES CORPORATION

## GROUNDS KEEPING PROCUREMENT

AGENCY: \_\_\_\_\_

### CRITERIA:

1. Availability to undertake and complete residential grounds keeping in a timely manner on prospective properties purchased by Community Ventures Corporation under the Neighborhood Stabilization Program Project.

---

---

---

2. Experience in residential grounds keeping.

---

---

---

4. Price per Property \_\_\_\_\_

Price x **19** units = \_\_\_\_\_ Total Bid

# COMMUNITY VENTURES CORPORATION

## GROUNDS KEEPING QUALIFICATIONS

AGENCY INFORMATION: (complete all that apply)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

S.S.# or BUSINESS ID #: \_\_\_\_\_ FAX: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ HOURS OF AVAILABILITY: \_\_\_\_\_

IS YOUR COMPANY OWNED/MANAGED BY 51% OR MORE:

- a) \_\_\_\_\_ WHITE \_\_\_\_\_ BLACK \_\_\_\_\_ AMERICAN INDIAN / ALASKAN NATIVE  
\_\_\_\_\_ ASIAN / PACIFIC ISLANDER \_\_\_\_\_ OTHER
- b) \_\_\_\_\_ HISPANIC \_\_\_\_\_ NON-HISPANIC
- c) \_\_\_\_\_ MALE \_\_\_\_\_ FEMALE

NUMBER OF YEARS IN BUSINESS \_\_\_\_\_

NUMBER OF QUALIFIED TECHNICIANS EMPLOYED: \_\_\_\_\_

NUMBER OF SERVICE VEHICLES AND TOOLS: \_\_\_\_\_

BUSINESS EXPERIENCE: (list company name, address, and phone number as well as contact person. If you did work as a sub-contractor under a prime contractor please list the complete information on the prime contractor.) Please complete this section in detail; it is our best method of checking your past performance.

1. Have you ever entered into a contract with this agency? If yes, please list contract number, when, and the project number.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other References:

2. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

4. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_