## FORM 5 - PROPOSER EXPERIENCE HISTORY

**A MINIMUM OF 3 PROJECTS OF** **COMPARABLE SCOPE AND SIZE PROJECTS REQUIRED; ADD MORE PAGES IF NEEDED.**

|  |  |  |
| --- | --- | --- |
| 1 | CLIENT NAME |  |
|  | CITY/STATE |  |
|  | CONTACT NAME |  |
|  | CONTACT EMAIL |  |
|  | CONTRACT START |  |
|  | CONTRACT END |  |
|  | TOTAL ANNUAL DOLLAR VALUE, OR IF AN ONGOING PROJECT, TOTAL PAID TO DATE: | |
|  | EQUIPMENT INSTALLED | |
|  | SERVICES PERFORMED | |
|  |
|  | DID YOU HAVE A SERVICE LEVEL AGREEMENT WITH THE CUSTOMER? | |
|  | WHAT WERE THE CONSEQUENCES IF YOU DID NOT MEET THE LEVELS? | |
|  | DURING THE TIME OF YOUR CONTRACT WITH THE CUSTOMER, DID YOU HAVE ANY PROBLEMS RELATED TO NOT FULFILLING THE ORDERS DUE TO THE LACK OF AVAILABILITY OF THE PRODUCT? | |
|  | IF SO, HOW WAS THIS COMMUNICATED TO THE CUSTOMER? | |
|  | WHAT ACTIONS WERE TAKEN TO REDUCE THE IMPACT? | |

|  |  |  |
| --- | --- | --- |
| 2 | CLIENT NAME |  |
|  | CITY/STATE |  |
|  | CONTACT NAME |  |
|  | CONTACT EMAIL |  |
|  | CONTRACT START |  |
|  | CONTRACT END |  |
|  | TOTAL ANNUAL DOLLAR VALUE, OR IF AN ONGOING PROJECT, TOTAL PAID TO DATE: | |
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| --- | --- | --- |
| 3 | CLIENT NAME |  |
|  | CITY/STATE |  |
|  | CONTACT NAME |  |
|  | CONTACT EMAIL |  |
|  | CONTRACT START |  |
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