

Energy Tax Credit Assistance Services Statement of Qualifications

NAME OF FIRM: _____

ADDRESS: _____

1. Years in Business in Present Form: _____

2. Firms' History and Resource Capability to Perform Required Services:

3. Titles, Names, and Addresses of all Officers:

4. List categories in which firm is legally qualified to do business. Include Licenses and Registrations where applicable.

5. If you were awarded this project, what would your fee be? _____

6. List up to five (5) projects which demonstrate skills and experience with IRS Energy Tax Credit projects. Note project name, location, owner, year, contract amount, and nature of firm's responsibility.

1. _____

2. _____

- 3. _____
- 4. _____
- 5. _____

7. List key personnel (with qualifications) likely to be involved on these projects and explain their specific role in energy tax credit work.

8. List three (3) references for the Firm.

- 1. _____
- 2. _____
- 3. _____

9. Certifying that:

Mr./Mrs./Ms. _____ (signature) being duly sworn
deposes and states that he/she is the _____ (title)
of _____ (name of firm) and that answers to the
foregoing questions and all statements herein contained are true and correct.