

Telecommunications and Network Management Services for MDAD**Estimated Cost - \$833,000.00****RFQ No. MDAD-03-14 - Verification of Availability****May 21, 2014**

Find attached the “**Scopes of Work/Background**” and “**Minimum Qualifications**” for an upcoming **Request for Qualifications (RFQ)**. Please review to determine if you would be able to **satisfy the requirements** (as applicable), and **interested in responding**; if so, please check the appropriate areas below and respond to this email confirming the same. Please pay “**CLOSE**” attention to the various sections and the “**SPECIAL/MINIMUM**” requirements for each, and confirm your **ability** and **availability** to satisfy “**ALL**” sections/scopes.

Please be diligent in your review of the information and respond accordingly, based on your ability to meet **ALL** the applicable requirements.

Are you able to satisfy the requirements of the attached documents (RFQ)?

YES NO

Do you have prior experience consistent with the requirements of this (RFQ)?

YES NO

See Special Requirements (as indicated by MDAD)

The data network infrastructure equipment needs to be **CISCO** and the voice equipment **AVAYA** in order to be compatible with the existing equipment.

Are you able to satisfy the above requirements?

YES NO

Are you a CISCO authorized vendor/contractor?

YES NO

Are you a AVAYA authorized vendor/contractor?

YES NO

Other goods like fiber optic cables or Uninterruptable Power Supplies (UPS) can be purchased from different manufacturers but they have to meet specific technical specifications for their intended use.

Are you able to satisfy the above requirements?

YES NO

The following question was asked of MDAD:

Are there any minimum or special requirements associated with the "scopes of services" for the "goods and services component"?

The answer is YES. The maintenance contracts have to be procured from vendor-qualified distributors certified to provide that service.

___ I am "NOT" interested in this solicitation.

Name of Firm: _____ **SBE Exp. Date:** _____

Owner's Name: _____ **Signature:** _____

Please respond by **2:00pm, Friday May 23, 2014.**

Any questions, feel free to contact me at the number below.

(Respond to the "**Verification**" whether you are interested or not (choosing "**Yes**" or "**No**"), as this helps SBD in the determination of measures).

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"Delivering Excellence Every Day"

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Please complete the following **“Reference Requirements”**:

Project Title:

Client Name

Contact No.:

Scope Description:

Project Title:

Client Name

Contact No.:

Scope Description:

Project Title:

Client Name

Contact No.:

Scope Description:
