Supplemental Questionnaire

Please note: It is your responsibility to make sure that all requested information is provided on this supplemental questionnaire. Only complete supplemental questionnaires will be considered.

RESPONSES TO THE REQUESTED INFORMATION WILL BE REVIEWED, EVALUATED, AND SCORED. THEREFORE, IT IS VERY IMPORTANT THAT YOU PROVIDE A THOROUGH RESPONSE. PLEASE PROVIDE TYPED OR WORD-PROCESSED RESPONSES ON SEPARATE PAGES.

1. What experience or training do you have in rendering emergency services such as unlocking car doors, jump starting a dead battery and general diagnosis of an inoperable vehicle?

2. Do you possess any certificates such as ASE or equivalent?

3. Please describe years of experience or training in the auto maintenance and repair field.

4. We have various gas and electric utility carts. Please describe any experience or training in the maintenance and repair of utility carts.

5. We have various grounds equipment, mowers gas and diesel, edgers, hedge trimmers, weed eaters, blowers etc. Please describe your experience or training in the maintenance and repair of grounds equipment.


Please print your name