



## Request for Qualifications

# RFQ #15-03 for Architect & Engineering Services WLR - 3<sup>rd</sup> floor Remodel/Renovation

Due: June 17, 2015 at 4:00 p.m.  
[polk.edu/purchasing](http://polk.edu/purchasing)  
Contact: Mark Lillquist



POLK STATE

Business Services

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POLK STATE

Business Services

Submit Qualifications to:  <b>Polk State College</b> <b>999 Avenue H, Northeast</b> <b>Winter Haven, Florida 33881-4299</b>  <b>Attn: Purchasing Department</b> <b>Room WAD-139</b>	<h1 style="text-align: center;">Request for Qualifications</h1>	
Contact: <b>Mark Lillquist, FCCM</b> <b>Director of Purchasing</b>  Phone: <b>863-297-1083</b> Fax: <b>863-297-1085</b> Email: <b>mlillquist@polk.edu</b> Website HomePage: <b>www.polk.edu/purchasing/</b>	RFQ #:  <h2 style="text-align: center;">15-03</h2>	RFQ Title:  <b>Architect &amp; Engineering Services for WLR – 3<sup>rd</sup> Floor Remodel/Renovation</b>
Pre-Proposal Conference Date <b>June 3, 2015 at 2 p.m. EST</b>		
Pre-Proposal Conference Location: <b>Room WLR-104. Learning Resource Building</b>		
Dedicated Webpage for this procurement: <a href="http://www.polk.edu/purchasing/bids-rfps/rfq-15-03-architect-engineering-svcs-rfq-15-04-cm-risk-wlr-3rd-floor/">http://www.polk.edu/purchasing/bids-rfps/rfq-15-03-architect-engineering-svcs-rfq-15-04-cm-risk-wlr-3rd-floor/</a>		
Proposal Due Date & Time: <b>June 17, 2015 at 4 p.m. EST</b>	Issue Date: <b>May 15, 2015</b>	
Location of Public Receipt Acknowledgement:  <b>Room WAD-236. Administration Building</b>		
<p><b>Solicitation Intent / Objective:</b></p> <ol style="list-style-type: none"> <li>1. The intent of this Request for Qualifications (RFQ) is to select a qualified firm to provide quality Architect/Engineering (A/E) services to support Polk State College.</li> <li>2. Generally, the services will include, but not be limited to:             <ol style="list-style-type: none"> <li>a. Programming</li> <li>b. Schematic design</li> <li>c. Design development documents</li> <li>d. Construction documents, including all supporting specification</li> <li>e. Construction administration during the project</li> <li>f. Conformance with building codes, SREF, rules and regulation of agencies having jurisdiction</li> </ol> </li> <li>3. Services for the remodel/renovation of the library and related spaces, classrooms, offices, public spaces, entry areas, hallway, lobby area and associated HVAC distribution and utilities.</li> <li>4. 3<sup>rd</sup> floor Air Handler Unit, located in the 3<sup>rd</sup> floor mechanical room was replaced under a separate contract and not included in this RFQ.</li> <li>5. Ability to provide building information modeling (BIM), color, life-like readings and/or animation.</li> <li>6. Estimated budget for the project is \$5,782,500 to-date Polk State College has been allocated \$2,245,715 in PECO Funds. Polk State College has requested the remainder of the funds to complete the project. However, those funds have not been allocated and subject to uncertain legislative appropriations.</li> <li>7. RFQ # 15-04 CM at Risk Services is the “companion” RFQ associated with the WLR 3<sup>rd</sup> floor remodel/renovation project.</li> </ol>		

# Project Description

- 1) The project is located on the Winter Haven Campus, 3<sup>rd</sup> Floor of the multi-story WLR building.
- 2) The entire WLR building is on-line and fully occupied.
- 3) Services and/or the results of services provided in response of this RFQ, cannot cause to disrupt the normal operation of the 1<sup>st</sup> or 2<sup>nd</sup> floors without proper approval of the Project Manager.
- 4) 3<sup>rd</sup> floor occupants and services will be relocated for this project unless directed otherwise.
- 5) The sole 3<sup>rd</sup> floor air handler unit (AHU) is located in the 3<sup>rd</sup> floor mechanical room, south end of floor. The AHU was replaced under a separate contract and is not included as part of the RFQ. AHU equipment information will be provided to the awarded firm.
- 6) Services will support the remodel/renovation of the entire 3<sup>rd</sup> floor, excluding the mechanical room, south end of floor. A total list of spaces will be provided to the awarded firm and must be validated. Spaces include, but not limited to:
  - a. Library stack area, study areas, gathering areas, meeting rooms, offices, work rooms and transaction areas
  - b. Classrooms not associated with library
  - c. Office spaces not associated with library
  - d. Public bathrooms, male/female/family
  - e. Data/electrical rooms
  - f. Custodial closets
  - g. North/south entrance and public stairway
  - h. Area surveillance and remote monitoring
  - i. Access management and control
  - j. The close physical proximity of faculty staff and students should create a collection of “crucial masses”, providing constant opportunity for productive interaction.
- 7) Services necessary for the temporary relocation of the library operation and related spaces will be included at the direction of the Project Manager.
- 8) Services to support the remodel/renovation of the 2<sup>nd</sup> floor office spaces and classroom/laboratory spaces not included during an earlier RFQ will be included at direction of the Project Manager.
- 9) LEED certification will reflect Polk State College commitment to energy efficiency and on-going partnership with the environment.

# Scope of Work

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## Professional Services Relative to all Phases of Project

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- a. Initiate meetings and provide numbered meeting notes and agenda.
- b. Provide Owner with 100% AutoCAD drawings utilizing v. 2007 or newer.

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### 1. Pre-construction and Design (Phase #1 & 2)

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- a. Provide design renderings, and color/finish material boards as required.
- b. Submittal and response to DOE requirements.
- c. All designs to be in accordance with SREF, building codes, ADA and regulations having jurisdiction.
- d. Coordinate development of drawing release schedule with CM project schedule.
- e. Verify schematic drawings based on the programming needs/documents.
- f. Coordinate value engineering analysis with CM.
- g. Coordinate construction cost estimates with CM.
- h. Perform document reviews.
- i. Perform quality assurance reviews.
- j. Verify POLK STATE standards of construction and incorporate into drawings.

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### 2. Construction (Phase # 3)

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- a. Prepare construction document.
- b. Perform building code, SREF, and ADA compliance reviews.
- c. Perform document reviews.
- d. Perform quality assurance evaluations.
- e. Administer the contract for construction.
- f. Monitor project schedule and project cost, recommend any changes to assure on-time, within budget, delivery of project.
- g. Clarify and re-issue all items not clearly identified on the construction documents.
- h. Submittal management and approval with agencies having jurisdiction.
- i. Stamping of document.
- j. Observe construction for compliance with contract documents; notify Project Manager of discrepancies.
- k. Observe construction for compliance with applicable codes; notify college and CM representative of any discrepancies.
- l. Administration of document closeout process.

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### 3. Coordination

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- a. Utilization of Building Information Modeling (BIM) and Revit Architecture software for systems integration, clash avoidance, building information modeling and presentations.
- b. Leadership in the development and implementation of **LEED Certification**.

- c. A/E Team will direct the project through the completion of Construction Documents. Construction Management Team provides assistants in estimating and scheduling.
- d. CM will be responsible for scheduling throughout the entire project and function as lead through the construction phase. The A/E team administers the contract.
- e. Establish and implement procedures for information distribution, document reviews, presentations, and approvals at the start of the project.
- f. Provide and coordinate services of mechanical, electrical, plumbing, structural, and other sub-consultants as required.
- g. Review CM's construction cost estimate at each required submittal.
- h. Assist in analyzing the Guaranteed Maximum Price (GMP) and recommend acceptance and/or rejection to Project Manager.
- i. Attend weekly construction meetings.
- j. Contract administration consisting of inspection, as needed to advise the Owner as to whether or not work is in conformance with the Construction Documents.
- k. Respond in a timely manner to Requests for Information (RFIs) and Construction Change Requests (CCR).
- l. Certify pay requests as provided in the construction contract.
- m. Review and approve shop drawings for conformance to contract documents.
- n. Prepare punch-lists and actively participate in punch-list reviews and meetings.
- o. Issue Final Certificate of Completion.
- p. Inspections pertaining to the one-year guarantee provided by the CM.

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#### **4. Close-out**

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- a. Delivery of "As-built" drawings on CD utilizing AutoCad v. 2007 or newer.
- b. Support CM in the preparation and assemble of close-out documents (to be provided on CD and via hard-copy), training, parts and operational manuals.
- c. Participate with CM in providing training for Polk State personnel.
- d. Provide specifications in Microsoft Word v.2007 or newer.



# General Conditions, Instructions & Information for Proposers

## 1. Definitions:

- **RFQ:** Request for Qualifications. A formal request soliciting professional credentials from qualified firms. Includes specifications or Scope of Services and all contractual terms and conditions.
- **A/E:** A company/person which is awarded the RFQ/contract.
- **Evaluation Team:** Comprised of POLK STATE staff established to review the Submittals submitted in response to this RFQ, score the Submittals in accordance with the criteria, and make a recommendation for award. The Director of Purchasing serves as the non-voting Chairman of the ETeam.
- **Polk State:** Polk State College. Polk State was formerly Polk Community College.
- **CCNA:** Consultants' Competitive Negotiations Act. Florida Statute 287.055 which prescribes the process to be utilized when public entities procure services performed by an architect, professional engineer, landscape architect, or registered surveyor and mapper.
- **Proposal:** Credentials prepared and delivered in submittal to an RFQ.
- **Proposer:** Firm submitting their credentials in response to this RFQ.
- **Project Manager:** Polk State College Representative

**2. Contact:** Any questions, recommended changes to the RFQ documents, or other matters regarding this RFQ must be directed to the Director of Purchasing.

All prospective proposer are hereby instructed not to contact any member of the District Board of Trustees or POLK STATE Staff member other than the noted contact person regarding this RFQ or their Submittal prior to posting of a recommendation of award. Any such contact shall be cause for disqualification.

**Exception:** Contact may be made during the Pre-Proposal Conference and Oral Presentations.

**3. Due Date/Time:** The Submitting Firm may submit the submittal in person or by mail/courier service. POLK STATE cautions Submitting Firms to assure actual delivery of mailed or hand-delivered submittal prior to the deadline set for receiving submittal.

A list of submittals received will be available on the dedicated webpage at: [www.polk.edu/purchasing/bids-rfps/rfq-15-03-architect-engineering-svcs-rfq-15-04-cm-risk-wlr-3rd-floor/](http://www.polk.edu/purchasing/bids-rfps/rfq-15-03-architect-engineering-svcs-rfq-15-04-cm-risk-wlr-3rd-floor/). Additionally, telephone confirmation receipt of the submittal may be made by calling Polk State's Director of Purchasing.

**4. Late Submittals:** The time and date will be scrupulously observed. **Submittals received after the specified time and date shall be returned unopened.** POLK STATE will not be responsible for late deliveries or delayed mail. The time clock located at the Purchasing Department shall serve as the official authority to determine lateness of any submittal.

Receipt of the submittal in the Purchasing Department after the time and date specified due to failure by the submittal firm to provide the above information on the outside of the envelope/container shall result in the rejection of the offerer's submittal.

**5. Registration:** Proposer who obtain RFQ documents from other sources or directly from the website must officially register with POLK STATE Director of Purchasing in order to be placed on the mailing list for any forthcoming addenda or official communications.

POLK STATE shall not be responsible for providing addendum to submitting firms who receive RFQ documents from other sources.

Failure to register as a prospective submitting firm may cause your submittal to be rejected as non-responsive if your Proposal does not include an addendum acknowledgement for the most current addendum.

**6. Public Opening:** Proposal shall be received at the Purchasing Department at the above referenced address by the specified time and date. As soon as possible thereafter the names of the submitting firm shall be read off at the specified location. Persons with disabilities needing assistance to participate in the Public Opening should call the contact person at least 48 hours in advance of the Public Opening.

A list of submitting firms will be posted in the Purchasing Department and on its website.

**7. No Submittal:** If not submitting your firm's qualifications, respond by returning only the Statement of No Submittal (page 40), and give the reason in the space provided. Failure to submit either a Proposal or a Statement of No Proposal shall be cause for removal of the Proposer from the mailing list. The form may be faxed to 863-297-1085, Emailed to [purchasing@polk.edu](mailto:purchasing@polk.edu) or sent via regular mail.

**8. Delays:** Polk State, at its sole discretion, may delay the scheduled due dates indicated above if it is to the advantage of Polk State to do so. Polk State will notify Proposers of all changes in scheduled due dates by written addendum.

**9. Proposal Withdrawal:** Proposers may withdraw their proposals by notifying Polk State in writing at any time **prior** to the time set for the deadline. Proposers may withdraw their proposals in person or through an authorized representative. Proposers and authorized representatives must disclose their identity (company business card and driver's license) and provide a signed receipt for the proposal. Once opened, proposals become the property of Polk State and will not be returned to the Proposers.

**10. Additional Information:** No additional information may be submitted, or follow-up performed by any Proposer after the stated due date outside of a formal presentation to the Evaluation Team, unless specifically requested by Polk State.

**11. Inquiries:** All Proposers shall carefully examine the RFQ documents. Any ambiguities or inconsistencies shall be brought to the attention of Polk State in writing prior to the due date; failure to do so, on the part of the Proposer, will constitute an acceptance by the Proposer of any subsequent decision. Any questions concerning the intent, meaning and interpretations of the RFQ documents shall be requested in writing, and received by Polk State's Director of Purchasing by **5:00 p.m. on June 10, 2015**.

All questions must be emailed to [Mlillquist@polk.edu](mailto:Mlillquist@polk.edu), using the following subject line:

**RFQ #15-03 Questions.**

Such inquiries regarding this RFQ outside a Pre-Proposal Conference must be submitted in writing to Polk State's Director of Purchasing. Polk State will provide written answers to the questions in the form of written addendum to all Proposers who have received the RFQ. Polk State will not be responsible for any oral instructions made by any employee(s) of Polk State in regard to this RFQ.

**12. Addendum:** Should any revisions/clarifications/supplemental instructions be needed, Polk State will issue a written addendum to all Proposers who received an RFQ package from Polk State's Purchasing Department.

Proposer shall sign, date, and return the **acknowledgement page** of the latest/final addendum with their Proposal. Previous addenda will be deemed received. It is the Proposer's responsibility to contact Polk State's contact person in the event that a previous addendum is not received.

All Proposers should **check the website** at least **seven (7) calendar days** before the date fixed for receiving the proposals to ascertain whether any addendum have been issued.

**13. Termination:** If the awarded contract is terminated or cancelled within the first year of the

contract period, Polk State may elect to negotiate & award the contract to the next ranked Proposer or to issue a new RFQ, whichever is determined to be in the best interest of Polk State.

**14. Proposal Preparation Costs:** Neither Polk State nor its representatives shall be liable for any expenses incurred in connection with preparation of a Proposal. Proposers should prepare their proposals simply and economically, providing a straightforward and concise description of the Proposer's ability to meet the requirements of the RFQ.

**15. Accuracy of Proposal Information:** Any Proposer which submits in its proposal to Polk State any information which is determined to be substantially inaccurate, misleading, exaggerated, incomplete, false, or incorrect, shall be disqualified from consideration and may be disqualified from applying for other Polk State work for a period of up to three (3) years.

- a) All photos, images, schematics and drawings of buildings which are included in your proposal must cite the source.

**16. News Releases:** The Proposer shall obtain the prior approval of Polk State for any news releases or other publicity pertaining to this RFQ or the service, study or project to which it relates.

**17. Public Entity Crimes:** In accordance with Florida Statute 287.133, no award will be made to any person or affiliate identified on the Department of Management Services' "Convicted Vendor List". This list is defined as consisting of persons and affiliates who are disqualified from public contracting and the purchasing process because they have been found guilty of a public entity crime.

No public entity shall award any contract to, or transact any business in excess of the threshold amount provided in Section 287.017 Florida Statutes for Category Two (currently \$35,000<sup>.00</sup>) with any person or affiliate on the "Convicted Vendor List" for a period of thirty-six (36) months from the date that person or affiliate was placed on the "Convicted Vendor List" unless that person or affiliate has been removed from the list. By signing and submitting the RFQ forms, Proposer attests that they have not been placed on the "Convicted Vendor List".

**18. Public Records:** Upon award recommendation or p calendar days after opening, whichever occurs first, proposals become "public records" and shall be subject to public disclosure consistent with Chapter 119.07(3)(m) and 119.071(1)(b), Florida Statutes. Proposers must invoke the exemptions to disclosure provided by law in the response to the RFQ, and must identify the data or other materials to be protected, and must state the reasons why such exclusion from public disclosure is necessary.

Proposals may be reviewed at the Purchasing office.

**19. Acceptance / Rejection:** Polk State reserves the right to reject all proposals, to waive any informalities and technicalities, and to solicit and re-advertise for new proposals, or to abandon the project in its entirety. Polk State reserves the right to make the award to that Proposer who, in the opinion of Polk State, will be in the best interest of and/or the most advantageous to Polk State.

Polk State reserves the right to reject the proposal of any vendor who has previously failed in the proper performance of an award or to deliver on time contracts, or who, in Polk State's opinion, is not in a position to perform properly under this award. Polk State reserves the right to inspect all facilities of Proposers in order to make a determination as to the foregoing.

**20. Familiarity with Laws:** All Proposers are required to comply with all Federal, State, and Local laws, codes, rules and regulations controlling the action or operation of this RFQ.

Relevant laws may include, but are not limited to:

1. The Americans with Disabilities Act of 1990
2. OSHA regulations
3. All Civil Rights legislation.
4. Office of Education 6A-14
5. State Requirements for Educational Facilities (SREF)
6. Florida Statute 1013 (K-20 Education Code – Educational Facilities)
7. Florida Building Code

**21. EEO Statement:** Polk State is committed to assuring equal opportunity in the award of contracts, and therefore, complies with all laws prohibiting discrimination on the basis of race, color, religion, disability, national origin or gender.

**22. Conflict of Interest:** All Proposers must disclose with the Proposal the name of any officer, director, or agent who is also an employee of Polk State. All Proposers must disclose the name of any Polk State employee who owns, directly or indirectly, an interest of five percent (5%) or more in the Proposer's firm.

**23. Affirmation:** By submission of a proposal, Proposer affirms that his/her proposal is made without prior understanding, agreement or connection with any corporation, firm, or person submitting a proposal for the same materials, supplies, equipment or services, and is all respects fair and without collusion or fraud. Proposer agrees to abide by all conditions of this RFQ and the resulting contract.

**24. Precedence:** Any and all verbiage hereafter which varies from these Guidelines shall have precedence.

**25. Compliance with Laws:** No laws, rules, regulations or statutes, etc. may, or will, or are intended to be, superseded by any verbiage herein.

**26. College Closing:** In the event that Polk State is closed on the due date because of weather, or other event(s), the due date shall be automatically and officially changed to 4:00 p.m. on the next business day without the need for an Addendum to be issued.

**27. Clarifications:** Polk State reserves the right to request clarification of information submitted, and to request additional information of one or more Proposers, if needed.

# General Information

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## 1. Pre-Proposal Conference

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- a. A **Mandatory** Pre-Proposal Conference will be open to all interested parties, at which time Polk State Staff will be present to answer questions and explain the intent of the RFQ Documents.
- b. At this meeting, any suggested modifications may be presented in writing to, or discussed with Polk State's representative(s) as a possible addendum to the RFQ.
  - 1) Request clarification of any inaccuracies, inconsistencies, discrepancies, unclear items, or issues with the RFQ document at this meeting.
  - 2) If problems with the RFQ document are realized after the Pre-Proposal Conference, they must be brought to the attention of the Director of Purchasing prior to the submission date.
- c. Any conclusions reached at this conference which amend the RFQ Documents will be issued in the form of an Addendum.
- d. Attendance is mandatory.

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## 2. Gifts are Prohibited

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- a. Polk State's District Board of Trustees Rule 3.32 states the following, in part:
  - 1) Polk State employees may not accept or solicit any gift [see F.S. 112.312(12)(a) and F.S. 112.312(12)(b)] of any kind (except as otherwise provided within this rule) from any person or entity (a prohibited source) who:
    - a) is seeking official action by the employee or Polk State
    - b) does business or seeks to do business with Polk State

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## 3. Exclusive Rights:

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The contract will **not** grant exclusive rights to all architectural service requirements of Polk State.

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## 4. Form of Contract

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- a. Master contract prepared by the College will be negotiated following approval by the college President and District Board of Trustees.
- b. The Agreement shall include a provision that all travel expenses, if any, reimbursed by Polk State will comply with Florida Statute 112.061.

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## 5. Licenses / Permits

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It shall be the responsibility of the A/E to obtain, at no additional cost to Polk State, any and all licenses and permits required to complete the contractual services. These licenses and permits shall be readily available for review by Polk State's Director of Purchasing or his/her designee.

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## 6. Acknowledgement

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By submitting a proposal, the Proposer acknowledges that he/she has read this RFQ, understands it, and agrees to be bound by its terms and conditions.

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## 7. Time Period for Acceptance

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All proposals received shall remain firm for a period of one hundred twenty (120) calendar days, after the date specified for receipt of proposals.

# Tentative Procurement Schedule

1. The tentative schedule for this RFQ is as follows:

<b>Date</b>	<b>Item, Location &amp; Time</b>
May 15, 2015	RFQ Advertised and Released (distributed)
June 3, 2015	Pre-Proposal Conference <i>Room WLR - 104 at 2:00 p.m. EST</i>
June 10, 2015	Cut-off for Proposer's questions
June 17, 2015	Proposals Due <i>Deliver to the Purchasing Department Room WAD -139 by 4 p.m. EST Formal acknowledgement in Room WAD-236 immediately thereafter</i>
July 2, 2015	Evaluation Team Meets and Short-lists <i>Room WMS-124 at 9:30 a.m. EST</i>
July 6, 2015	Reference check and site visits begin
July 16, 2015	Oral Presentations & recommendation of award determined <i>Room WMS-124, entire day is scheduled</i>
August 7, 2015	Board Approval - August

2. The above tentative schedule is subject to change. All changes will be posted on the website at:

<http://www.polk.edu/purchasing/bids-rfps/rfq-15-03-architect-engineering-svcs-rfq-15-04-cm-risk-wlr-3rd-floor/>

3. **College Calendar:**

Polk State's College Calendar is available on-line at:

<http://www.polk.edu/currentstudents/Pages/AcademicCalendar.aspx>

# Insurance Requirements

## 1. Applicability

- a. Only the awarded firm must comply with the following insurance requirements.
- b. Please do NOT include a certificate of insurance with your Proposal.
- c. The awarded firm will be required to provide a certificate of insurance at time of contract execution.

## 2. Requirements

During the performance of the services under this Contract, Contractor shall maintain the following insurance policies reflecting at least the minimum amounts and conditions as follows:

Insurance Limit Requirements	
Type of Insurance	Minimum Limits of Liability
<b>General Liability:</b> Comprehensive Commercial General Liability including Products Liability	\$1,000,000 each occurrence \$1,000,000 Personal & Adv. Injury \$2,000,000 General Aggregate \$1,000,000 Products \$2,000,000 Products Aggregate
<b>Automobile Liability:</b> owned, non-owned and hired automobiles	\$1,000,000 per occurrence \$1,000,000 combined single limit each accident
Waiver of Subrogation Endorsement	Show Polk State in Schedule
Excess Liability or Umbrella	\$5,000,000 each occurrence
Crime or Faithful Performance	\$100,000 Employee Theft or Loss \$100,000 Depositors Forgery or Alt \$100,000 Computer and Funds Transfer
Worker's Compensation	\$100,000 each accident or disease \$500,000 aggregate
Employers Liability	\$500,000 each accident \$500,000 each employee – disease \$500,000 policy limit – disease
Professional Liability	\$5,000,000.00

## 3. Conditions

- a. Policies must be written by an insurance company authorized to do business in Florida.
- b. Policies other than Worker's Compensation shall be issued only by companies authorized by the Department of Insurance of the State of Florida to conduct business in the State of Florida and which maintain a Rating of "A-" or better and a Financial Size Category of "VI" or better according to the A.M. Best Company.
  - 1) Ratings may be verified by Polk State at <http://www.ambest.com/> .
- c. Policies for Worker's Compensation may be issued by companies authorized as a group self-insurer by Florida Statute 440.57.

- d. Contractor shall furnish Polk State with **certificates of insurance** which shall include a provision that policy cancellation, non-renewal or reduction of coverage will not be effective until at least **thirty (30) days** written notice has been endeavored to be made to Polk State.
- e. Contractor shall include Polk State as an **additional insured** on the General Liability and Automobile Liability insurance policy required by the Contract. All of Contractor's sub-consultants shall be required to include Polk State and Contractor as **additional insured** on their General Liability insurance policies.
- f. All policies shall be in **Occurrence** form only. "Claims made" insurance policies are **not** acceptable, unless there is an extended claims reporting period of five (5) years.
- g. Defense must be in addition to the limits of liability.
- h. The Contractor shall not commence work under this Contract until all insurance required as stated herein has been obtained and such insurance has been approved by Polk State.

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#### **4. Insurance Approved by Polk State**

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The Proposer shall not commence work under this Contract until all insurance required as stated herein has been obtained and such insurance has been approved by Polk State.

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#### **5. Self-Insured**

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In the event the Proposer is a self-insured organization, different insurance requirements may apply.

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#### **6. Misrepresentation**

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Misrepresentation of any material fact, whether intentional or not, regarding the Proposer's insurance coverage, policies or capabilities may be grounds for rejection of the Proposal and rescission of any ensuing contract.

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#### **7. ACORD Sample as Reference**

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- a. A sample ACORD Certificate of Liability Insurance is available on the dedicated website as a reference. The verbiage and alterations which will be required to be made to the form are shown for your information.
- b. To expedite the provision of proof of insurance to Polk State, Proposers are encouraged to forward the sample form to their insurance companies.

# Website

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## **1. Polk State Purchasing Department's Website**

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The Purchasing Department's website can be found at: [www.polk.edu/purchasing/](http://www.polk.edu/purchasing/)

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## **2. RFQ #15-03 Dedicated Webpage**

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a. The project specific dedicated webpage(s) for use during the procurement process is located at:

<http://www.polk.edu/purchasing/bids-rfps/rfq-15-03-architect-engineering-svcs-rfq-15-04-cm-risk-wlr-3rd-floor/>

b. The following documents and information will be posted at the dedicated webpage:

- 1) RFQ documents
- 2) Addenda
- 3) Submittal forms (in MS Word format)
- 4) Proposal Tabulation
- 5) Recommendation for Award
- 6) Award
- 7) and other information related to this RFQ

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## **3. Directions to Campus Locations**

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Maps and directions to Polk State's campuses are available at:

<http://www.polk.edu/locations/>



# Instructions for Preparing Proposals

All Proposals are subject to Florida Statute 119.07: Public Records

## A. Forms

For ease in preparation of your Proposal, **pages 28 through 40** are available in Microsoft Word format at:

<http://www.polk.edu/purchasing/bids-rfps/rfq-15-03-architect-engineering-svcs-rfq-15-04-cm-risk-wlr-3rd-floor/>

## B. Proposal Format

### 1. Polk State College Logo -- Trademarked

- a. Polk State College's logos are trademarked, and will NOT be provided to you for use in preparation of your Proposal.
- b. Do NOT download our logo to include in your Proposal.

### 2. For ease of evaluation:

- a. It is recommended that a **3-ring binder** be used (not GBC or spiral binding).
- b. Include your company name and/or logo on the cover and spine.
  - 1) The proposal should be submitted on 8½" x 11" paper, use 11" x 17" foldouts for schedules, organizational charts, etc.
- c. Portrait orientation
- d. The sections should be separated by using divider tabs with section title for easy reference (see below).
- e. Ensure all information is typewritten (via word processor, as appropriate)
  - a) Use either Arial or Calibri fonts.
  - b) Colored fonts and highlighting may be used.
- f. Duplex (2-sided) the pages to the fullest extent possible.

### 3. Format

- a. Submit **two (2) electronic copies** of your Proposal:
  - 1) May be submitted on either flash drives or CDs/DVDs.
  - 2) The electronic version should be submitted as one document. Do not separate by sections.
  - 3) The documents may be in PDF format only.
- b. Additionally, submit **eight (8) complete sets (hard-copies** in binders) as follows:
  - 1) One (1) original, labeled "original".
  - 2) Seven (7) hard-copies, labeled "copy".
- c. Each of the binders and electronic copies must be complete, with all supporting documentation.
- d. Place the books and electronic media in a box, and deliver sealed box to Polk State's Purchasing, boldly marked as follow:

***Your Company Name***  
***Return Address***  
**RFQ #15-03 for A/E for WLR 3<sup>rd</sup> Floor Remodel/Renovation**  
**Due: June 17, 2015 at 4:00 p.m.**

- e. Use form found on the dedicated webpage or computer generated form.
- f. **DO NOT WRITE DIRECTLY ON THE CARDBOARD BOX.**
- g. The hard-copy Proposal should be divided by tabs into eleven (11) sections, which shall be numbered or named:
 

<ol style="list-style-type: none"> <li>1. Basic Information</li> <li>2. Minimum Qualifications / Corporate Information / Licenses</li> <li>3. Work Plan</li> <li>4. Scheduling &amp; Workload</li> <li>5. Cost Control</li> <li>6. Qualification/experience of Firm</li> </ol>		<ol style="list-style-type: none"> <li>7. Qualification/experience of Project Personnel</li> <li>8. Information and Communications</li> <li>9. Resolution of Litigation</li> <li>10. Location</li> <li>11. References</li> </ol>
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## C. Proposal

### 1. Basic Information

Proposers shall include the following information/submittals:

- a. **Letter of Transmittal:** This **one-page** letter will summarize in a brief and concise manner, the Proposer's positive commitment to perform the work in a professional and timely manner. Additionally, it should state that all information submitted is certified to be true and accurate. The letter must be signed by an official authorized to make such commitments and enter into a contract with Polk State. The letter must indicate the official's title or authority.
- b. **Proposer Information:** Complete the "Proposer Information" form on **page 28** of the RFQ, which includes:
  - 1) **Proposer:** Company/firm name and addresses (street address and mailing address)
  - 2) **Contact Person:** Main contact person who should be contacted regarding your proposal, and whom to notify as to short-listing, oral presentations, and recommendation of award.
  - 3) **Internet Contact:** Include Contact Person's EMail address, and the firm's website address (if applicable).
  - 4) **State:** (ex: *Florida or Alaska*) where incorporated.
  - 5) **FEIN:** Provide the **Federal Employer Identification Number** of the Proposer
  - 6) **SSN:** In the case of a sole proprietorship or partnership, provide Social Security numbers for all owners/partners **only if the FEIN is not provided**.
  - 7) **Telephone Number:** Direct phone number of the Contact Person. Include extension number.
  - 8) **Toll Free:** Direct toll-free phone number of the Contact Person, if applicable
  - 9) **Fax Number:** Direct fax number of the Contact Person
  - 10) **Type of Business:** Identify the type of business entity involved (e.g.; corporation, sole proprietorship, partnership, joint venture, etc.).
- c. **Acknowledgment of Addenda:** Include the acknowledgement page (signed and dated) of the last/final **addendum** issued by Polk State, if applicable.
- d. **W-9 Form:** Submit a completed W-9 form (**page 29**, also available on the Internet at <http://www.irs.gov/pub/irs-pdf/fw9.pdf>).
- e. **Drug-Free Workplace:** If applicable, provide a statement concerning the Proposer's status as a Drug-Free Work Place [DFW] (complete RFQ **page 30**). In accordance with Florida Statute 287.087, whenever two or more proposals are determined to be equal, a proposal received from a business that completes the attached DFW form certifying that it is a DFW shall be given preference in the award process.
- f. **History of Firm:** Include a chronological history of your firm. Include items such as:
  - 1) date incorporated,
  - 2) date when Project Architect joined the firm,
  - 3) dates that the current partners/officials joined the firm,

- 4) new satellite office(s) opening dates,
  - 5) completion dates of major projects, and
  - 6) any “firsts” or important events experienced by the firm.
- g. **Subsidiaries:** Name any subsidiary or affiliated companies in which principals have a **financial interest**. Explain in detail the **Principals’ interest** in this company and nature of business.

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## 2. Minimum Qualifications / Licensing / Corporate Information

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- a. In order to be considered for selection, the Proposer must have the minimum qualifications as listed on the form on **page 31**.
- b. Complete the “Minimum Qualifications” form on **page 31** and submit with your proposal. Provide sufficient information to clearly show you meet or exceed the minimum qualifications.
- c. Provide sufficient information (attachments) to clearly show that you meet the minimum qualifications.
- d. Provide copies of licenses as follows:
  - 1) If Proposer is a corporation, provide a copy of the certificate from the Secretary of State verifying that the Proposer’s corporate status is in good standing.
  - 2) Local business license.
- e. Proposals submitted by firms under “**joint venture**” arrangements or other multi-party agreements **must** submit a power of attorney delegating authority to one principal with authority to negotiate and execute any/all contract documents and amendments resulting from negotiations/award of this RFQ.

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## 3. Work Plan

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- a. The Project Description and Scope of Work includes information for the specific services needed by Polk State. Describe how your firm will provide the services, and support each phase.
- b. Provide a summary of your approach to the project integration of the latest concepts in library design in an existing space, including estimated time schedule and in your own words describe the services that will be offer/provide to Polk State in support of the project.
- c. Describe systems and technology to be utilized to assure work plan compliance.
- d. Describe how an occupied building will or will not impact your design and its implementation.

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## 4. Scheduling and Workload

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- a. **Schedule and Budget Compliance:** Complete the form on **page 32**, indicating schedule compliance and budget over-runs/savings for each project with similar complexity and type, which were completed in the last five (5) years.
- b. Describe your work load and availability of personnel to support this project.

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## 5. Cost Control

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- a. Describe cost control methods (software, etc.) that will be used to ensure the final cost (GMP) will stay within budget.
- b. Describe projects that have utilized the cost control methods describe herein.

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## 6. Qualification/Experience of Firm (and sub-consultants)

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- a. **Company Credentials:** Provide a brief statement of qualifications that includes the firm’s size/staffing. Detail any information that would give the Proposer an advantage in completing this project.
- b. **Current and Recently Completed Projects:** Complete the form on **page 33** for each of your projects, of comparable type, size and complexity that best illustrate the experience of the Firm and the staff being assigned to this project. Include no less than five (5) or more than ten (10) projects
- c. **Photos:** Include photos/drawings for each of the projects on the facing page (**page 34**). Include a “before” photo (if available), schematic design, and final photo (or a current photo if the project is not yet complete) from the same viewpoint of the schematic design.
  - 1) This section should be **duplexed**, with the project information on the left side and the photos on the right side when the 3-ring binder is open.

- d. **Applicability:** Clearly indicate that the project was awarded to and performed by your firm on the form provided on **page 33**.

Current or Completed Projects	
<input checked="" type="checkbox"/> Current Project /Scheduled Completion Date: <u>April 3, 2012</u>	<input type="checkbox"/> Completed on _____
<input checked="" type="checkbox"/> Experience of the <b>Proposer</b> or	<input type="checkbox"/> Experience of <b>Individual</b> : _____
While working at _____ (individual's former employer)	

- e. **Sub-Consultants:** Include your major sub-consultants qualifications/information. A form is provided on **page 35**. Include a list of previous project experience with sub-consultants proposed for this project.

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## 7. Qualification/Experience of Staff:

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- a. **Organizational Chart:** Provide an organizational chart, as it will relate to this project, indicating key personnel and their relationships.
- 1) Indicate each staff member and sub-consultants' assignments and responsibilities.
    - a) Include photos of key staff, if possible.
  - 2) Indicate which positions are full-time and part-time.
  - 3) You may use either 8½" x 11" (letter size) or 11" x 17" paper (fold to fit 8½" x 11") for your organizational chart.
  - 4) Describe how the organizational structure will ensure orderly communications, distribution of information, effective coordination of activities, and accountability.
- b. **List of Project Staff:** Include a synopsis, in table format, of all personnel who will be assigned to the project. The columns should be titled: Project Position, Employee Name, Current Title, Number of Years with Firm.
- c. **Principle's Credentials:** List experience of each principle within the firm that will be assigned to this project.
- 1) Include current job description, resume, education/college degrees, licenses, and professional certifications.
  - 2) Designate number of years with firm and whether all experience is while employed by the Proposer's firm.
- d. **Project Architect:** Complete and submit the form on **page 36**.
- e. **Professional Personnel:** Designate persons that will be assigned to this project, including those from sub-consultants. For each of the professional personnel (including the Project Architect), provide the following information):
- 1) Name, title and assignment (position) for this project
  - 2) Resume which includes:
    - a) Number of years with this firm
    - b) Number of years with other firms
    - c) Experience:
      1. List all projects
      2. List of similar projects
      3. Size of projects (dollar value and square footage/scope)

- 4. Specific project involvement
  - d) Education / Degrees earned
  - e) Active registration/certification/licenses
  - f) Current job description or overview of current position
  - g) Other experience and qualifications which are relevant to this project
- f. **Support Personnel:** Provide details on the qualifications of the individuals who will perform the support (non-clerical) work on the project.
  - 1) List experience of each support person in the firm assigned to this project including current job description, resume, college degrees, and professional certificates/certifications.
  - 2) Designate number of years with firm and if all experience is while employed by the firm.

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## 8. Information and Communications

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- a. Identify meeting schedule(s) that will be used during the term of the contract.
- b. Detail the communication systems/software that will be utilized for this project. Describe projects utilizing these systems/software.
- c. Describe the functions and capabilities of your computer based project management/scheduling and information systems that will be utilized for this project. Describe projects utilizing these systems.
- d. Indicate if an Internet based website will be provided specifically for the project, as an informational tool. Describe projects that have utilized the A/E based website.

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## 9. Resolution of Litigation

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- a. **Summary of Litigation:** Provide a **summary of any litigation, claim(s), or contract dispute(s)** which have been **finalized/decided by a Court of Law**, which were filed by or against the Proposer in the past five (5) years (complete and submit a **Disputes Disclosure Form – page 37**).
- b. The summary shall include:
  - 1) The basis of the lawsuit, litigation, claim, or contract dispute (ex: Breach of Contract),
  - 2) A brief description of the case.
  - 3) The outcome.
  - 4) The monetary amounts involved.
- c. The disclosure can be limited to:
  - 1) Cases which are related to contractual services provided in the regular course of business.
  - 2) The regional/district office that will be supporting this Contract.
- d. **Guideline: What information to include/exclude.**
  - 1) In the “Resolution of Litigation” section of your Proposal, include:
    - a) The parties to the lawsuit.
    - b) The basis of the lawsuit (ex: Breach of Contract, Alleged Surveying Error, Improper Design).
    - c) The monetary amount claimed/requested.
    - d) The monetary amount settled/paid.
    - e) Identify if it is a third party lawsuit.
  - 2) **Include** lawsuits such as:
    - a) Breach of Contract.
    - b) Deficient services.
    - c) Oversight in design / design defects.

- d) Defects or deficiencies (ex: You are a Surveyor, and there was a boundary dispute involving a survey you performed.)
  - e) Errors or omissions.
  - f) Economic loss due to late completion of your services / delays.
  - g) Personal injury/death due to negligence regarding your services.
  - h) Negligence (regarding your services).
  - i) Negligence in insuring reasonable care during performance of services.
  - j) Negligence in overseeing projects.
  - k) Negligence in overseeing maintenance of traffic, if it is specifically your contractual duty.
  - l) Traffic accidents due to negligence in your design.
- 3) **Exclude** lawsuits such as:
- a) Traffic accidents on or off the project site due to employee being involved in an accident (as the driver of an involved vehicle).
  - b) Liens/lawsuits filed by you due to non-payment (by your client) after attempts to collect outstanding account receivable have been unsuccessful.
  - c) Third party Lawsuits/Lawsuits where you were dismissed from the case because you were not directly involved in the problem.
  - d) Landlord/tenant lawsuits.
  - e) Cases where you were granted summary judgment and released from the lawsuit.
  - f) Improper termination of employment.
  - g) Negligence cases such as a slip-and-fall on your office premises.
- e. **Pending Litigation:** Include any information regarding your firm being involved in any potential or pending litigation.
  - f. **Potential Disputes:** List any pending or forthcoming disputes that are known.
  - g. **Liquidated Damages:** Indicate whether your firm has ever been assessed **liquidated damages** or delay damages. Include details.
  - h. **Sanctions:** List any regulatory or license agency sanctions.
  - i. **Lost Accounts/Clients:** Provide a complete list of all accounts lost (early termination or non-renewal). Include contact names and telephone number, length of service at each account, and reason for loss. This list can be limited to the regional/district office which will be supporting this Contract, and may be limited to the past five (5) years.
  - j. **Canceled Accounts:** Provide a complete list of all accounts canceled/terminated **by the Proposer** prior to the expiration date. Include contact name and telephone number, length of service provided, and reason the Proposer chose to cancel the contract. This list can be limited to the regional/district office that will be supporting this Contract, and may be limited to the past five (5) years.
  - k. **Contract Denial:** Indicate if your firm has been denied a contract award by a public entity on which you submitted the low bid. Explain in detail.

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## 10. Location

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- a. This information is requested per **§ 287.055 (4) (b)**.
- b. Include a simple/small map that shows your firm's location relative to the project and Polk State's Winter Haven campus. Maps are available at [www.mapquest.com](http://www.mapquest.com) or [www.mapsonus.com](http://www.mapsonus.com).
- c. Identify the location of the specific office that will have direct responsibility for this project.
  - 1) Identify the county where this office is located.
  - 2) Include **number of miles and drive-time** to/from the project site and Polk State's Winter Haven campus.
- d. Identify the geographic location of your home/corporate office.

- e. Points will be awarded based on the specific office having direct responsibility for this project:
  - 5 points if within Polk County
  - 3 points if in a bordering county
    - 1) Hardee County
    - 2) Highlands County
    - 3) Hillsborough County
    - 4) Lake County
    - 5) Osceola County
    - 6) Pasco County
    - 7) Sumter County

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#### 11. References – Continental United States, Hawaii and Alaska only

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- a. Provide the following from at least five (5) references.
- b. Complete and submit **page 38**. Provide the following information:
  - 1) Company name
  - 2) Address
  - 3) Contact Person
  - 4) **E-Mail address (Required – References submitted without EMail addresses will be disregarded)**
  - 5) Phone number
  - 6) Toll-free number
  - 7) Fax number
  - 8) Educational References (college, university and schools)
  - 9) Non-Educational References
- c. If possible, include reference letters from the Client on each of the three most closely related projects that the firm has completed.
- d. Do not include as a reference Polk State staff or District Board of Trustees (DBOT) members.
- e. The ETeam considers both the information provided by the references, and the percentage of replies received.

**NOTE:** All proposals are subject to the Florida Public Records Act, F.S. 119.

<h4>D. Volume of Work Previously Awarded by Polk State</h4>
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- a. CCNA states Polk State shall consider the volume of work previously awarded to each firm “with the object of effecting on equitable distribution of contracts among qualified firms. Provided such distribution does not violate the principle of selection of the most highly qualified firm.” In accordance with CCNA, par. 287.055, the amount paid to each proposer in the past 5 years will be evaluated.
- b. **PROPOSERS** are not required to submit any information for this section.

# Evaluation of Proposals

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## 1. Evaluation Method

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- a. Polk State will appoint an Evaluation Team (ETeam) consisting of members of its staff to evaluate proposals, and to recommend ranking of all submitting firms. The recommendations shall be submitted to Polk State's President for approval/disapproval. The District Board of Trustees shall make the final approval/disapproval of the ranking.
- b. The ETeam will evaluate all responsive written proposal to determine which proposals best meets the needs of Polk State based on the evaluation criteria. Polk State's decisions will be final.
- c. The process will be in accordance with FS 287.055, the Consultants' Competitive Negotiation Act.

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## 2. Non-Responsive Proposals

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- a. Non-Responsive proposals will be rejected by the Purchasing Department, and will not be distributed to the ETeam for consideration. Additionally, the Evaluation Team may determine that one or more required submittals/documentation are so inadequate as to be determined to be non-responsive. A proposal may be Non-Responsive proposals due to:
  - 1) Late submission.
  - 2) Proposer does not meet minimum requirements.
  - 3) Failure to follow the required format listed on page 14 of the RFQ
  - 4) Failure to sign the proposal.
  - 5) Failure to acknowledge addenda (unless all changes are not materiel, ex: extending the due date).
  - 6) Failure to provide required submittals / documentation.

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## 4. Evaluation Criteria

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- a. The ETeam shall utilize the Evaluation Form included to rate/evaluate each of the proposals.
- b. The criteria and weights as shown on **pages 23 and 24** shall be utilized in the evaluation of the written proposals and oral presentations.

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## 5. Evaluation of Written Proposals / Short-Listing

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- a. Upon completion of the evaluation of all written proposals, the Eteam shall short-list the Proposers to no less than three (3) firms to give an oral presentation. Only those firms with the highest scores rated in accordance with the stated criteria and their weights will be invited to give oral presentations.
- b. The list of short-listed Proposers will be posted on the dedicated Webpage and the ITB/RFQ bulletin board in the Purchasing Department.

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## 6. Notification of Short-Listing

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- a. The short-listed Proposers will be notified, as follows:
  - 1) A letter will be sent to those firms who have been short-listed, notifying them of the place and time of their interview/presentation.
  - 2) Specific questions/clarifications that the ETeam would like for all of the Proposers to address will be included in this notification.
  - 3) Should the Evaluation Criteria for the Oral Presentations be changed, the revisions will be included in the letter.



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## 7. Reference Check

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- a. The evaluation criteria for the Oral Presentations will include References, and may involve on-site visits to Proposer's place of business or clients by members of the Evaluation Team.
- b. The Purchasing Department shall perform a written reference check.
  - 1) A 1-page reference questionnaire will be **Emailed** to each of the references listed in the Proposal.
  - 2) Each of your references should be aware that they may be contacted on or about **September 11**, and should be ready, willing and able to respond in a timely manner.
  - 3) A written tabulation of the responses will be provided to the Evaluation Team, therefore, this criteria need not be covered in your oral presentation.

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## 8. Site Visits

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- a. Members of the Evaluation Team may visit a service site or client of the short-listed Proposers. Proposers may be given at least 24 hours' notice of any site visits planned by Polk State.

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## 9. Oral Presentations

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- a. Short-listed firms will be invited to give an oral presentation. These presentations shall provide an opportunity for the Proposer to clarify their qualifications, approach to the project, and ability to furnish the required services in accordance with the evaluation criteria.
- b. Firms responding to this RFQ must be available for presentations/interviews.
- c. The criteria for evaluating the oral presentation is on **page 24**. The criteria are subject to change. In the event that the criteria are revised, the short-listed Proposers will be advised of the changes. The final scoring will be wholly based on these criteria. **Scores from the initial evaluation will not be "brought forward"**.
- d. The interview time shall be limited to one (1) hour. Forty-five (45) minutes shall be allotted to the presentation with the remaining time for questions and answers with your project team.
- e. The project team (Project Manager and other key employees who will be assigned to this project) should be available at the presentation.
- f. As part of your presentation, be prepared to discuss the services that you will provide, with an emphasis on **services to be provided on this project**. Additionally, discuss your firm's **ability to complete this project on time and within budgetary constraints**.
- g. Written handouts and/or "leave-behinds", such as brochures and PowerPoint hand-outs (recommend 3 slides per-page) are permitted. You should bring eight (8) hard-copies for the ETeam.
- h. If you use PowerPoint as a part of your presentation, both a hard-copy and an electronic copy of the presentation **must be provided to the Director of Purchasing upon your arrival**.
- i. Gifts, including food products, for the ETeam are **expressly prohibited**.
- j. You may bring your presentation on a flash-drive. Polk State will provide a computer with MS 2007, remote, and screen. Short-listed firms should consider bringing their own equipment (as a back-up precaution) to use for PowerPoint (or other) presentations, in case of software/hardware incompatibility. If your presentation requires specialized software, a laptop with that software loaded must be provided by the short-listed firm.
- k. The Oral Presentations are exempt from the "Sunshine Law", FS 286.011, and therefore, are not open to the public. However, they will be video-taped and made available for review.

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**10. Identical or Tie Scores:**

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- a. In the event two (2) or more Proposers are deemed equal during the evaluation process, the following criteria, in order of importance, shall be used to break said tie:
  - 1) Drug Free Work Place,
  - 2) Flip coin.

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**11. Approval by Polk State's President**

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Following oral presentations, the ETeam will recommend a ranking to Polk State's President.

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**12. Posting of Recommendation**

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- a. The President's recommendation for ranking will be posted for review by interested parties at the Purchasing Department, and at the dedicated webpage prior to submission to the District Board of Trustees (DBOT) for final acceptance of ranking
- b. The recommendation will remain posted to the dedicated webpage and the ITB/RFQ bulletin board in the Purchasing Department for a period of at least three (3) working days.

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**13. Negotiation and Award**

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- a. Polk State anticipates award to the highest ranked Proposer, judged by Polk State to be the most advantageous. Final approval of the ranking of Proposer(s) shall be by Polk State's District Board of Trustees at a regularly scheduled public meeting.
- b. The RFQ and ranking process does not constitute an offer, agreement or a contract with the Proposer. Once the ranking is approved, negotiations will commence with the top ranked firm. Failure to negotiate with the first ranked firm will result in negotiations with the second ranked firm, and so on.
- c. The Contract will become binding upon approval by the appropriate level of authority within Polk State, and executed by the parties.
- d. The process will be in accordance with FS 287.055, the Consultants' Competitive Negotiation Act (CCNA).

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**14. Protests**

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Failure to file a protest within 72 hours of posting of the recommendation for award shall constitute a waiver of proceedings.

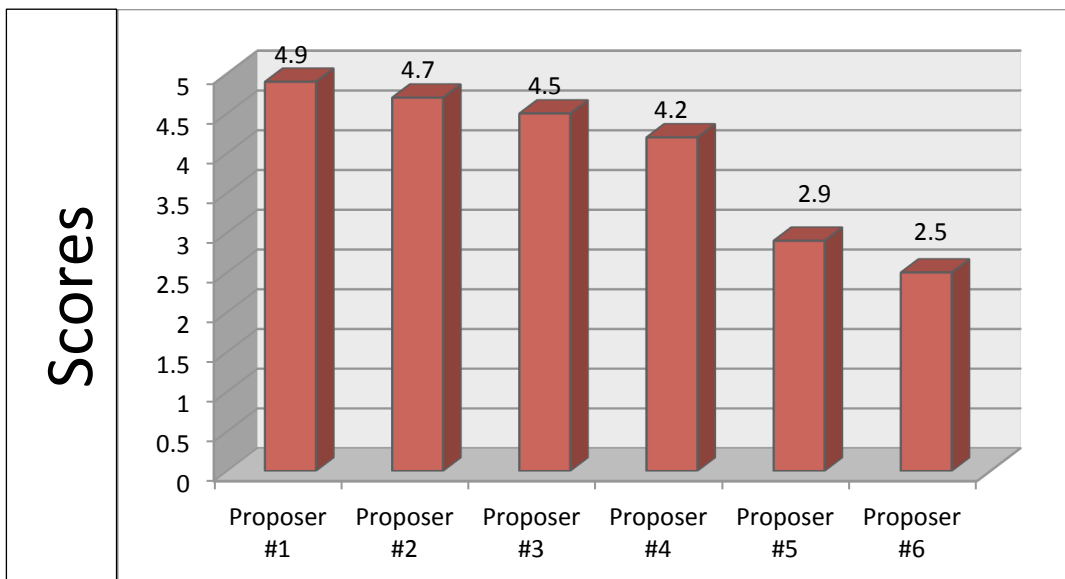
<b>Evaluation Criteria for Written Proposals</b>	
<b>Criteria for Evaluating Written Proposals</b>	<b>Weight</b>
<b>Work Plan</b> 1) Project Phases, integrating input from multiple stakeholders 2) LEED Certification and experience in an existing facility 3) Use of BIM, and other clash detection software and presentation software to assist in communicating design.	<b>10%</b>
<b>Workload and Scheduling</b> 1) Current workload 2) History of schedule and budget compliance 3) Availability 4) Scheduling	<b>5%</b>
<b>Cost Control</b> 1) Cost Control Methods 2) Use of Value Engineering	<b>10%</b>
<b>Experience of Firm</b> 1) Company Credentials 2) Completed Projects of similar scope 3) Sub-Consultants emphasizing similar scope of services	<b>25%</b>
<b>Experience of Project Personnel</b> 1) Organizational Chart for personnel assigned to this project 2) List of Project Staff 3) Principle's Credentials 4) Credentials of the Project Architect's assigned to this project 5) Professional Personnel Credentials for personnel assigned to this project 6) Support (non-clerical) Personnel's Credentials for personnel assigned to this project	<b>25%</b>
<b>Information and Communications</b> 1) Regularly scheduled meetings 2) Computer-based communications systems 3) Computer based management systems 4) Website	<b>10%</b>
<b>Litigation and Disputes</b> 1. Summary of Litigation 2. Pending litigation and potential disputes 3. Liquidated Damages and License Sanctions 4. Lost or Cancelled Accounts 5. Contract Denial	<b>5%</b>
<b>Location</b> Geographic location of office that will have direct responsibility for this project	<b>5%</b>
<b>Volume of Work Previously Awarded</b> 1. Dollar value of fees received from POLK STATE in the past 5 years. College will generate this information.	<b>5%</b>

<b>Evaluation Criteria for Oral Presentations</b>	
<b>Criteria</b>	<b>Weight</b>
<b>Project Work Plan:</b> <ol style="list-style-type: none"> <li>1) Demonstrate verbally and/or graphically your plan for performing this project.</li> <li>2) Indicate your firm's ability to deliver quality designs in an effective and efficient manner.</li> <li>3) Clearly indicate the services that will be offered to POLK STATE during the course of the contract.</li> <li>4) Explain the inter-relationship of all parties.</li> <li>5) Describe how you plan to manage the various sub-consultants to assure a coordinated effort, minimize RFI and avoid equipment and system interferences.</li> </ol>	<b>30%</b>
<b>Cost Control / Value Engineering:</b> <ol style="list-style-type: none"> <li>1. Demonstrate knowledge and experience in the evaluation of building systems, construction techniques, and the recommendations of materials to create an optimum value in meeting the design requirements.</li> <li>2. Explain how BIM and/or available software will be used to ensure a successful project.</li> </ol>	<b>25%</b>
<b>Scheduling the Project:</b> <ol style="list-style-type: none"> <li>1) Explain scheduling methodology for effectively managing and executing the design and construction documents to ensure timely completion of the project.</li> <li>2) Describe procedures for validating the CM's proposed schedule</li> <li>3) Identify past scheduling challenges with similar projects in occupied buildings and how they were remediated.</li> </ol>	<b>25%</b>
<b>Knowledge of the Site &amp; Local Conditions:</b> <ol style="list-style-type: none"> <li>1) Demonstrate knowledge of the project site and concern due to local conditions.</li> <li>2) Describe the permitting process required for this project.</li> </ol>	<b>15%</b>
<b>References:</b> <ol style="list-style-type: none"> <li>1) Tabulated results of written reference check performed by POLK STATE Purchasing Dept.</li> <li>2) Letters of Reference included in written submittal.</li> <li>3) Site Visits, if any, performed by ETeam.</li> </ol>	<b>5%</b>

# Competitive Range

## An Example

Scores range from 1 (poor) to 5 (excellent)



In the above scenario, the **top 4 firms** may be considered for further evaluation via oral presentations.

# Submittal Forms



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**Electronic copies of the above forms are available at:**

<http://www.polk.edu/purchasing/bids-rfps/rfq-15-03-architect-engineering-svcs-rfq-15-04-cm-risk-wlr-3rd-floor/>

***in Microsoft Word format***



# Proposer Information

Proposer (Company) Name:	Formerly:
Mailing Address:	Street Address:
City, State, Zip:	City, State, Zip:
Type of Entity: <i>(check one)</i>  <div style="display: flex; justify-content: space-around; align-items: center;"> <div><input type="checkbox"/> Corporation</div> <div><input type="checkbox"/> Partnership</div> <div><input type="checkbox"/> Proprietorship</div> <div><input type="checkbox"/> Joint Venture</div> </div>	
Contact Person:	Title:
Email Address:	Website Address: <a href="#">www.</a>
Telephone Number:	Toll Free Phone Number:
Fax Number:	Cell Phone Number:
Federal Employer Identification Number (FEIN):	SSN (if Sole-Proprietorship or Partnership):  <i>Only required if FEIN is not provided</i>
Incorporated in the State of: _____ Year: _____	
License #:	

***This form must be completed and returned with your Proposal to fulfill the requirements of page 14, section 1b***



<b>Form W-9</b> (Rev. December 2011) Department of the Treasury Internal Revenue Service	<b>Request for Taxpayer Identification Number and Certification</b>	<b>Give Form to the requester. Do not send to the IRS.</b>
---	---	--

Print or type  
See Specific Instructions on page 2.

Name (as shown on your income tax return)		
Business name/disregarded entity name, if different from above		
Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____  <input type="checkbox"/> Other (see instructions) ▶ _____		<input type="checkbox"/> Exempt payee
Address (number, street, and apt. or suite no.)	Requester's name and address (optional)	
City, state, and ZIP code	Polk State College 999 Avenue H, NE Winter Haven, FL 33881-4299	
List account number(s) here (optional)		

**Part I Taxpayer Identification Number (TIN)**  

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

<b>Social security number</b> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<b>Employer identification number</b> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
--	--

**Part II Certification**  

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
------------------	----------------------------	--------

**General Instructions**  

Section references are to the Internal Revenue Code unless otherwise noted.

**Purpose of Form**

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

Cat. No. 10231X
Form **W-9** (Rev. 12-2011)

*This form must be completed and returned with your proposal to fulfill the requirements of Page 14 item 1d*

# DRUG-FREE WORK PLACE FORM

The undersigned vendor in accordance with Florida Statute 287.087 hereby certifies that

\_\_\_\_\_ does:  
(Name of Business)

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are proposed a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

**X**

\_\_\_\_\_  
Proposer's Signature

\_\_\_\_\_  
Date

Use this form regarding page 14, section 1e  
***This form (if applicable) must be completed and returned with your Proposal***

# Minimum Qualifications

1. The Submitting Firm shall meet the following minimum experience qualifications:
  - a. The Principle and/or Project Architect must have a minimum of ten (10) years' experience as an architect.
  - b. Currently licensed as an architect in Florida.
  - c. Staff assigned to the project should have experience on the educational projects.
  - d. The Submitting Firm must have a LEED Accredited Professional on staff.
2. Complete the following items and submit with your Submittal:

a. Year Licensed as an architect. Name of Licensee:	
b. Number of years of experience of the Principle or Project Architect	#
c. Florida Occupational License Number (attach copy)	#
d. How many similar educational projects have you successfully completed? (include at least two [2] in the reference form – page 54, and complete pages 48-49 for each Client)	
e. Attach evidence of staff member's LEED credentials.	Name of LEED Accredited Professional:  _____

**Provide sufficient information (attachments) to clearly show that you meet or exceed the Minimum Qualifications.**

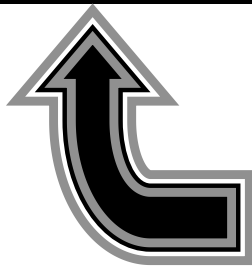
***This form must be completed and submitted with your Proposal.***

Use this form regarding page 15, section 2  
Include in Section 2 of your Proposal.

# Schedule and Budget Compliance

Synopsis of Projects Completed in the Last 5 Years

Project Name	*Schedule Compliance	Project Budget	Final Cost	Under or Over \$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$



- \* In this column, indicate either:
- 1 = Completed ahead of schedule
  - 2 = Completed on schedule
  - 3 = Late Completion

*This form (or an alternate form as determined by the Proposer – ensure all requested information is included) must be completed and included with your Proposal to fulfill the requirements of page 15, section 4a.*

# Current or Completed Projects

☐ Current Project /Scheduled Completion Date: \_\_\_\_\_ ☐ Completed on \_\_\_\_\_

☐ Experience of the **Proposer** or ☐ Experience of **Individual**: \_\_\_\_\_

While working at \_\_\_\_\_ (individual's former employer)

Project Name:

Type of Project:

**Insert Photo**

Project Scope or Summary of Work:

Client:

Address:

City, State, Zip:

Contact Person:

E-Mail:

Phone: ( )

Fax: ( )

Project Budget (building & site): Original: \$ \_\_\_\_\_

Current/Final: \$ \_\_\_\_\_ Over/Under Budget: \$ \_\_\_\_\_

Explain differences in contract original/final amounts:

Management techniques used to prevent budget overages:

Original Project Completion Date:

Revised to:

Actual Completion Date:

Explain Differences:

Project Manager:

Attach a list/schedule of all members of the project team for this referenced project who will also be assigned to this contract, and their roles.

***This form will fulfill the requirements of page 15, Section 6.***

***Include in Sections 4 and 6 of your Proposal***

# Project Photos

**Insert “Before” Photo or Schematic Design of Project**

**Final photo of completed project (from same viewpoint of above, if possible)**

*This form will fulfill the requirements of page 15, section 6.*

# Sub-Consultant

Specialty / Work Sub-contracted:

Company Name of Sub-/Consultant:

Address:

City:

State:

Zip+4:

Contact Name:

E-Mail Address:

Website HomePage:

Contact Phone Number:

Fax Number:

Incorporation Date:

Corp. Charter No.:

Indicate why their services will be required / their role in the project:

Attach a list of other projects which your firm has worked with this consultant

***This form (or an alternate form as determined by the Proposer – ensure all requested information is included) must be completed and returned with your proposal to fulfill the requirements of page 16, section 6e – if applicable.***

# Project Architect

**Project Manager's name:**

Include up to five (5) similar projects in which the proposed Project Architect has served in the capacity of Project Architect during the past ten (10) years.

**Project Name:**

**Company/Owner:**

**Completion Date:**

**Address:**

**Contact Person:**

**Phone Number:**

**EMail:**

**Summary of Work:**

**Project Name:**

**Company/Owner:**

**Completion Date:**

**Address:**

**Contact Person:**

**Phone Number:**

**EMail:**

**Summary of Work:**

**Project Name:**

**Company/Owner:**

**Completion Date:**

**Address:**

**Contact Person:**

**Phone Number:**

**EMail:**

**Summary of Work:**

**Project Name:**

**Company/Owner:**

**Completion Date:**

**Address:**

**Contact Person:**

**Phone Number:**

**EMail:**

**Summary of Work:**

*This must be completed and included with your Proposal to fulfill the requirements of page 16, section 7d.*



# Disputes Disclosure Summary of Litigation

**Answer the following questions by placing an "X" or check "✓" in the box (☒ or ☑) after "YES" or "NO". If you answer "YES", please explain via attachment.**

Disclosure can be limited to the regional/district office which will be supporting this Contract.

<b>YES</b> <input style="width: 30px; height: 20px;" type="checkbox"/> <b>NO</b> <input style="width: 30px; height: 20px;" type="checkbox"/>	Has your firm, or any of its officers, received a reprimand of any nature or been suspended by the Department of Professional Regulation or any other regulatory agency or professional association within the last five (5) years?
<b>YES</b> <input style="width: 30px; height: 20px;" type="checkbox"/> <b>NO</b> <input style="width: 30px; height: 20px;" type="checkbox"/>	Has your firm, or any member of your firm, been declared in default, terminated or removed from a contract or job related to the services your firm provides in the regular course of business within the last five (5) years?  <b>If yes</b> , indicate company name, contact name and telephone number, length of service provided, and reason for early cancellation/termination of contract.
<b>YES</b> <input style="width: 30px; height: 20px;" type="checkbox"/> <b>NO</b> <input style="width: 30px; height: 20px;" type="checkbox"/>	Has your firm had filed against it or filed any requests for equitable adjustment, contract claims or litigation in the past five (5) years that is related to the services your firm provides in the regular course of business?  <b>If yes</b> , state the nature of the request for equitable adjustment, contract claim or litigation, a brief description of the case, the outcome or status of suit and the monetary amounts involved.

I hereby certify that all statements made are true and agree and understand that any misstatement or misrepresentation or falsification of facts shall be cause for forfeiture of rights for further consideration of this procurement:

**X**

\_\_\_\_\_  
Authorized Signature (Officer)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed or Typed Name

\_\_\_\_\_  
Title

***Complete & include this form with your Proposal to fulfill the requirements of page 17, section 9***

<b>Proposer:</b>			
<h2>References</h2>			
Educational Client Name / Address		Contact Person	Telephone & Fax Number
		Name:	Phone:
		E-Mail:	Toll Free:
			Fax:
		Name:	Phone:
		E-Mail:	Toll Free:
			Fax:
		Name:	Phone:
		E-Mail:	Toll Free:
			Fax:
		Name:	Phone:
		E-Mail:	Toll Free:
			Fax:
		Name:	Phone:
		E-Mail:	Toll Free:
			Fax:
Non-Educational Client Name / Address		Contact Person	Telephone & Fax Number
		Name:	Phone:
		E-Mail:	Toll Free:
			Fax:
		Name:	Phone:
		E-Mail:	Toll Free:
			Fax:
		Name:	Phone:
		E-Mail:	Toll Free:
			Fax:
		Name:	Phone:
		E-Mail:	Toll Free:
			Fax:
		Name:	Phone:
		E-Mail:	Toll Free:
			Fax:
<h3>Include Email Addresses!</h3> <p><b>Verify all EMail addresses prior to submittal to ensure they are up-to-date!</b></p> <p><i>This form must be completed and included with your Proposal to fulfill the requirements of page 19, section 11a.</i></p>			

# Minority / Woman Owned Business Statement

Type of Business: *Check applicable block(s)*

☐

**“African-American”** includes persons having origins in any of the black racial groups of Africa.

☐

**“Hispanic American”** includes persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish cultures or origins, regardless of race.

☐

**“Native American”** includes American Indians, Eskimos, Alaskan Indians, Aleuts and Native Hawaiians.

☐

**“Asian-Pacific Americans”** includes persons whose origins are from Japan, China, Taiwan, Korea, Southeast Asia, the Philippines, Samoa, Guam, the U.S. Trust Territories of the Pacific, and Northern Marianas.

☐

**“Asian-Indian Americans”** includes persons whose origins are from India, the Indian Sub-Continent and Pakistan.

☐

**“Woman-Owned Business Enterprise”**

**Note:** MBE and WBE are defined by Federal Register 49 CFR, Part 23, as a business firm which as at least fifty-one percent (51%) owned by minority or women group members, or in the case of a publicly owned business, at least fifty-one percent (51%) of the stock of which is owned by the minority or woman. The minority or woman ownership must exercise actual day-to-day management and control of the business.

Company Name:

Certified by *(name of Public Entity, if applicable)*

Certificate Number:

Attach a copy, please.

Polk State is required to report M/WBE expenditures to the State of Florida's Office of Supplier Diversity (OSD) on an annual basis. The report includes a supplemental list of firms who have indicated that they are owned by a woman or minority, but have not been certified by OSD, although they may be certified by other public entities.

It is requested that M/WBE owned firms complete this page and include it with their Proposal in section 1

**For reporting purposes only**

# Statement of No Proposal

## RFQ #15-03

If your company does not intend to propose on this procurement, please complete and return this form prior to the date shown for receipt of proposals via fax to 863-297-1085, or via EMail to [purchasing@polk.edu](mailto:purchasing@polk.edu), or mail to:

Polk State College  
Purchasing Department  
999 Avenue H, Northeast  
Winter Haven, Florida 33881-4299

We, the undersigned, have declined to propose on the above referenced RFQ for the following reason(s):

- ☐ Scope of Work or Terms & Conditions are too "restrictive." *(please explain below)*
  - ☐ Unable to meet requirements *(please explain below)*
    - ☐ RFQ was unclear *(please explain below)*
      - ☐ Insufficient time to respond
  - ☐ We do not offer this type of service or equivalent
- ☐ Our employee manloading would not permit us to perform
  - ☐ Unable to meet insurance requirements
  - ☐ Other *(please explain below in "Remarks")*

Remarks:



**Remove us from your "Vendor Database"**

Company: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed

Name: \_\_\_\_\_

Failure to submit either a Proposal or a *Statement of No Proposal Submittal* shall be cause for removal from the vendor database.  
Use this form regarding page 5, section 7.

# Checklist

This checklist is provided to assist each Proposer in the preparation of their Proposal. Included in this check list are important requirements which are the responsibility of each Proposer to submit with their response in order to make their Proposal fully compliant. This checklist is only a guideline – it is the responsibility of each Proposer to read and comply with the RFQ in its entirety.

## Check (✓) each of the following when accomplished:

- ☐ Outside of box is marked accordingly: **RFQ #15-03 WLR 3<sup>rd</sup> Floor Remodel/Renovation, Due Date: June 17, 2015.** If you hand-deliver the Submittal, use the form provided on the website.
- ☐ **Two (2)** electronic copies are included. Place in an envelope and place in the box.
- ☐ The **eight (8)** binders do not need to be placed in separate envelopes within the box. Box is sealed with tape.
- ☐ Is the final Addendum (if issued) signed and included?
- ☐ Is *Proposer Information Form* (**page 28**) complete and included in Section 1?
- ☐ Is the *W-9 form* (**page 29**) completed and included in Section 1?
- ☐ Is *Drug-Free Workplace form* (**page 30**) signed and enclosed in Section 1, if applicable?
- ☐ Is the *Minimum Qualifications form* (**page 31**) completed and included in Section 2?
- ☐ Is the *Budget Compliance form* (**page 32**) completed and included in Section 4?
- ☐ Are the *Current or Completed Projects & Project Photos forms* (**pages 33-34**) completed in Section 6?
- ☐ Is the *Sub-Consultants form* (**page 35**) completed (if applicable) and included in Section 6?
- ☐ Is the *Project Architect form* (**page 36**) completed and included in Section 7?
- ☐ Is *Disputes Disclosure Form* (**page 37**) completed and included in Section 9?
- ☐ Are *References* (**page 38**) included in section 11? Have you contacted each of them to ensure their EMail address is correct? Are they aware that they are listed as a reference and may receive a 1-page questionnaire?
- ☐ Is the *Minority and Woman Owned Business Declaration form* (**page 39**) enclosed in section 1, if applicable?

*This page is for your information use only.  
It does not need to be submitted with your Proposal.*