**Notice of Request for Qualifications (RFQ)**

**RFQ No. P22/10047L**

**Architectural and Engineering Design Services**

**Project: Downtown Campus Hotel Properties Development**

PimaCounty Community College District (“College” or “District”) is seeking Statements of Qualifications (SOQ) from qualified firms to provide architectural and engineering design services for the Project: Downtown Campus Hotel Properties Development.

**Required Submittal Forms**

|  |
| --- |
| Certification Form |
| Exceptions Requested Form |
| Confidential and/or Proprietary Declaration Form |
| Mandatory Certifications Form |
| 1. Conflict of Interest |
| 1. Boycott of Israel |
| 1. Worker Eligibility Verification |
| Appendix Form |
| 1. Litigation |
| 1. Debarment and Suspension |
| 1. Canceled/Terminated Contracts |
| 1. Product/Service Discontinued Use |
| e) Cooperative, Subcontract, Third Party Agreement |
| 1. Non- Collusion Affidavit |

**Statement of Qualifications (SOQ) Forms**

|  |
| --- |
| Instructions |
| 1. Firm Experience Form |
| 1. Project Architectural Team Experience Form |
| 1. Project Engineering/Consultant Team Experience Form |
| 1. Project History of the A & E Teams Form |
| 1. Design Methodology and Approach Form 2. References Form |

**Required RFQ Submittal Forms**

**Certification Form**

In response to RFQ No. P22/10047L Title: Downtown Campus Hotel Properties Development is submitted by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

(Company Name)

□ a corporation organized and existing under the laws of the State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

□ a partnership, registered in the State of \_\_\_\_\_\_\_\_\_\_\_\_, and consisting of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

□ an individual trading as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

located at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Federal Tax Id No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The undersigned, as a duly authorized officer, hereby agrees to be bound by the content of this Proposal and agrees to comply with the terms, conditions and provisions of the referenced RFQ and any addenda thereto in the event of an award. Exceptions are to be noted as stated in the RFQ. The proposal will remain in effect for a period of ninety (90) calendar days as of the Due Date for SOQs to the RFQ.

The undersigned understands that the College reserves the right to reject any or all Proposals or to waive any formality or technicality, as determined by the College in its sole discretion, in any Proposal in the interest of the College.

The undersigned hereby acknowledges receipt of the following Addenda, if any:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Addendum No. | Date: |  | Addendum No. | Date: |
|  |  |  |  |  |
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|  |  |  |  |  |

The undersigned hereby certifies that this Statement of Qualifications is genuine and not a sham or collusive, nor made in the interest or behalf of any person not herein named, and that the undersigned has not directly or indirectly induced or solicited any other Offeror to put in a sham proposal, or any other person or entity to refrain from submitting proposals, and that the Offeror has not in any manner sought by collusion to secure for itself an advantage over any other Offeror.

The undersigned further certifies that your firm (check the appropriate areas):

□ women-owned business; □ minority-owned business; □ labor surplus area firm

□ does ***or*** □ does not meet the Federal (S.B.A.) Small Business definition (FAR 19.001) and size standards (FAR 19.102). If it does, please “CHECK” one of the following:

□ small business; □ veteran-owned small business; □ service-disabled veteran-owned small business;

□ HUB Zone small business; □ small disadvantaged business; or □ women-owned small business.

The undersigned further certifies that as a duly authorized officer, he or she is authorized to negotiate in good faith on behalf of this firm for purposes of this RFQ.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Authorized Signature/Date** | |  | | |
| **Print Name** |  | | **Title** |  |
| **Email Address** |  | | **Phone #** |  |

**Exceptions Requested Form**

|  |  |
| --- | --- |
| **Company Name** |  |

Any exceptions to the requirements of this RFQ, including the Contract and Scope of Work, that the Offer requests the College to consider must be addressed on this form.

Each Exception or Alternate should be addressed separately with specific reference to the requirement, specification including the page number, paragraph, and sentence and section number. For each exception, the Offeror will provide all of the following information: (i) Name of the Document/Attachment; (ii) Agreement Page Number and Section Number; (iii) Exception; (iv) Justification for Exception. Blank, unjustified, or unsupported requests will be disregarded.

Any exceptions requested from the College’ Sample Agreement must be provided, using this Exception Form.

If there are **NO** proposed alternates or exceptions, a statement to that effect must be provided.

**\_\_\_\_\_\_\_\_(initial)** Contractor certifies this proposal has taken **NO** exceptions and does not propose alternates.

***Exceptions/Alternates*** *are noted in the space below or are included as an Attachment to this section.*

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| --- | --- | --- | --- | --- |
| **Authorized Signature/Date** | |  | | |
| **Print Name** |  | | **Title** |  |

**Confidential and/or Proprietary Declaration Form**

|  |  |
| --- | --- |
| **Company Name** |  |

In the event the Offeror elects to include in its SOQ any information deemed "proprietary" or "protected," it will clearly mark the information as to any proprietary/confidential claim.  Indicate in the space below specific reference to the requirement, specification including the page number, paragraph, and sentence and section number that which is deemed confidential or proprietary by the Respondent.

The College discourages the submission of such information and undertakes to provide no more than reasonable efforts to protect the proprietary nature of such information.  The College, as a public entity subject to Arizona public records law, cannot and does not warrant that proprietary information will not be disclosed.

The College will have the right to use any and all information included in the SOQs submitted unless the information is expressly restricted by the Offeror.

If the SOQ contains **NO** confidential/proprietary information, a statement to that effect must be provided.

**\_\_\_\_\_\_\_\_(initial)** Contractor certifies this SOQ contains **NO** confidential and/or proprietary information.

***Confidential/Proprietary Information****. Contractor as indicated in the space below certifies the following pages, sections, paragraphs contain confidential and/or proprietary information****. If additional space is required, provide information on a separate page and submit as an attachment to this form.***

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| --- | --- | --- | --- | --- |
| **Authorized Signature/Date** | |  | | |
| **Print Name** |  | | **Title** |  |

**Mandatory Certifications Form**

|  |  |
| --- | --- |
| **Company Name** |  |

**A. Conflict of Interest Certification**

|  |  |
| --- | --- |
| **\_\_\_\_\_\_\_\_\_(*initial*)** The Offeror certifies that to the best of his/her knowledge there is **NO** officer or employee of College who has, or whose relative has, a substantial interest in any contract resulting from this Statement of Qualifications. | |
|  | |
| **\_\_\_\_\_\_\_\_\_(*initial*)** The names of all public officers or employees of College who have, or whose relative has, a substantial interest in any contract resulting from this Statement of Qualifications, and the nature of the substantial interest, are included below or as an attachment to this certification form. | |
| First, Last Names | Title |
|  |  |
|  |  |

**B. Boycott of Israel Certification**

As required by the Arizona Revised Statutes § 35-393.01, College is prohibited from awarding a contract to any Contractor for delivery of services, supplies, information technology or construction unless the contract includes a written certification that the Contractor is not currently engaged in, and agrees for the duration of the contract to not engage in, a boycott of Israel.

A breach of the forgoing warranty certification will be deemed a material breach of the resulting contract. In addition to the legal rights and remedies available to College under the law. In the event of such breach, College will have the right to terminate the resulting agreement with the Offeror.

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| --- |
| **\_\_\_\_\_\_\_\_\_(*initial*)** Accordingly, the Offeror by initialing certifies Offeror is not currently engaged in boycott of Israel, and will not for the duration of the resulting contract with College under this RFP engage in a boycott of Israel. |

**C. Worker Eligibility Verification**

As required by the Arizona Revised Statues § 41-4401, College is prohibited from awarding a contract to any Contractor who fails, or whose subcontracts/subrecipients fail, to comply with A.R.S § 23-214 governing the employee verification requirements through the federal e-Verify program.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **\_\_\_\_\_\_\_\_\_(*initial*)** Accordingly, by initialing certifies that Offeror (1) complies fully with all applicable federal immigration laws and regulations that relate to its employees; that it will, as applicable or required under A.R.S § 23-214, verify, through the e-Verify program as jointly administered by the U.S. Department of Homeland Security and Social Security Administration or any of its successor programs, the employment eligibility of each employee hired to work on the resulting agreement with College; and (2) that it will, as applicable or required under A.R.S § 23-214, require its subcontractor and subrecipients to provide the same warranties to the Offeror.  A breach of the forgoing warranty certification will be deemed a material breach of the resulting contract. In addition to the legal rights and remedies available to College under the law. In the event of such breach, College will have the right to terminate the resulting agreement with the Offeror.  Upon request, the College will have the right to inspect the papers of each Contractor, subcontractor or any employee of either who performs work hereunder for the purposes of ensuring that the Contractor or subcontractor is in compliance with the warranty certification set forth herein. | | | | |
| **Authorized Signature/Date** | |  | | |
| **Print Name** |  | | **Title** |  |

**Appendix Form**

|  |  |
| --- | --- |
| **Company Name** |  |

In each space provided below, provide a detailed answer or indicate Not Applicable (N/A). If additional space is needed, answers may be provided on a separate document and be attached to this form.

* 1. **Litigation:** Details of any litigation your company or any of its subsidiaries or affiliates has had in the past five (5) years related to the performance of services provided by your firm.

|  |
| --- |
|  |

* 1. **Canceled, debarred, suspended:** If a firm has had any previous contracts canceled or is currently debarred, suspended, or proposed for debarment by any government entity, the current status must be documented in this section.

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|  |

* 1. **Prior Use:** If any customer has stopped using the product(s) or service(s) you are proposing, provide details including customer name, date when product was installed, date when product was discontinued (usage) and reason for discontinuation, including contact details of the customer.

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|  |

* 1. **Cooperative:** If the firm intends to use any cooperative, for the purposes of this SOQ, the firm must submit a copy of the Cooperative Contract.
  2. **Subcontract, third party agreement**, or the like to perform under their SOQ:, the firm must supply the name, address, qualifications and criteria used by the firm for selection of any third party, and the intended services to be performed. **The services provided under the Scope of Work proposed, in part or in whole, shall not be subcontracted without prior written permission of the College.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Authorized Signature/Date** | |  | | |
| **Print Name** |  | | **Title** |  |

**Non-collusion Affidavit**

**(must be completed by contractor)**

**STATE OF: )**

**)**

**COUNTY OF: )ss**

**)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name of Individual)

being first duly sworn upon oath deposes and says:

That he/she is

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Title)

of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name of Company, Firm, or Corporation)

that, pursuant to Subsection 112(c) of Title 23, United States Code and Title 44, Chapter 10, Article 1, and Title 34, Chapter 2, Article 4 of the Arizona Revised Statutes, he certifies that neither he nor anyone associated with the company, firm, or corporation mentioned above has, either directly or indirectly, entered into any agreement, participated in any collusion, or otherwise taken any action in restraint of full competitive bidding in connection with the associated project:

Subscribed and sworn to before me \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_ 2022. (Signature)

If by a Corporation (Seal)

My commission expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public

**Statement of Qualifications (SOQ) Forms**

**Instructions:**

Each firm will be limited in the total number of pages submitted as part of their Statement of Qualifications (SOQ) packet.

Due to the offeror's time and cost in preparing this document, along with the challenge of thoroughly reading and evaluating these documents, the College will limit the total number of content pages to (single sided using minimum 11 point font). **A "page" is limited to one side of an 8-1/2 by 11 inch sheet of paper**:

Documents that will not be considered in this total number of content pages will be financial statements, letters from financial/insurance institutions, cover page, index, offer acceptance form, insurance certificates, non-collusion affidavit, and tab pages.

The tab pages will be used to reference each section and can be used for pictures or art work. Appendices may be attached as back up information; 254 & 255 forms are **not** required.

The College has attempted to streamline the amount of required information as noted on each Form. Firms are strongly encouraged to present their offers in strict accordance with the noted outline.

**The SOQ must adhere to the order and response length indicated per each Criteria Response.**

Note: When a response to a question is provided as an attachment, clearly identify each question number (1,2,3) or letter (A,B,C) to your response and ensure the form’s title is referenced – for example:

***Firm Experience Form – response to A: Firm’s Size and Work Load***

**(1) Firm’s Experience Form**

This evaluation criteria is twenty (20) points maximum.

|  |  |
| --- | --- |
| **Company Name** |  |

* + 1. **Firm’s Size and Work Load** (one page maximum, five points)

Clearly indicate the **total number of professional and technical staff, and technical professional registrants** (Registered Architects, Engineers and other professionals. Indicate location (include city, state) where staff regularly performs multiple tasks, include them in the most responsible position for which they spend at least 25% of their time.

* + 1. **Firm’s Project Experience** (four pages maximum, ten points)

Summarize experience within past seven (7) years of the firm with no more than three (3) projects of **similar** type and scope for which the firm is the firm of record. Similar projects include other; and/or a successful history of similar scope projects.

Definitions:

Project Type: new construction, addition, renovation, restoration, historic preservation etc.

Project Budget: the cost of construction of the project.

Project Manager: the person responsible to the client for the overall success of the project.

Project Architect: the person responsible for coordinating the day to day work of the project design team, construction document preparation and construction administration.

Project Designer: the person responsible for the design concepts.

Project Engineer(s): the person(s) responsible for the design, construction, document preparation and construction administration of specialized parts of the project.

Project Role: the role within the design team: Project Manager, Project Architect, Project Designer, etc. If the scope of project was small and one individual did more than one job, just list the individual once.

Use the following format for each project:

|  |  |  |
| --- | --- | --- |
| Past Project:  **Project Name, Owner or Client**  **Project Type,**  **Size (s.f.),**  **Project Budget, Date of Completion** | Key Personnel:  **Project Manager, Project Architect, Project Designer, Project Engineers and other Consultants** | Narrative on the Project**:**  **Describe how the project is similar and why your experience is relevant to this SOQ.**  **Describe best practices.** |
|  |  |  |

* + 1. **Contract Service** (one page, five points)

Does the firm have a local presence? If not, how will the firm provide the contracted services? Discuss in detail the firm's management and operating strategy. Does your firm use sub-consultants? Discuss Subconsultants and how they will be used for performance of services under this contract. Per the Pima Community College Facilities Guideline, Part I, Section 3.3, the cost of travel and long distance service by out of town Consultants or sub-Consultants to perform basic services of the contract will be included in the basic service fee.

**(2) Project Architectural Team** **Experience Form**

This evaluation criteria is twenty (20) points maximum. This form should not exceed five (5) pages.

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| --- | --- |
| **Company Name** |  |

**Instructions:** This form should be completed for *each key personnel* involved in the performance of this contract.

{Form for each key personnel should not exceed five (5) pages.}

Answer all questions in the space provided. Space will increase as information is typed. You may include more than one architect/engineer for each discipline. A separate resume (maximum two (2)pages) may be included and attached as a second page to this form. The resume is to be used to supply relevant information pertaining to the performance of this contract and is to be supplemental to the information below and is not to be used to replace this form.

**NOTE:** For projects that are the same as in Projects Listed under Firm Experience, provide the "**Project name**" only and say "refer to Firm Experience", and provide the person's project role. For personal experience, that is experience with another firm, put a double asterisk (\*\*) after the project name.

|  |  |  |  |
| --- | --- | --- | --- |
| **Employee Name:** | | | |
| **Position currently held in firm:** | | | |
| **Years with the Firm:** | | **Years in current position:** | |
| **Role under this Contract:** | | | |
| **Years of** **experience as role for this contract:** | | | |
| **Job related Education and Training:** | | | |
| **Job Related Registrations, Certifications:** | | | |
| **Describe his/her project role as structured within your firm and within this particular project team:** | | | |
| **Identify the primary function(s) of the employee in performing the services required by this solicitation:** | | | |
| **List employee’s relevant experience using the following 3-column format:** | | | |
| **Project Name, Owner or Client**  **Project Type,**  **Size (s.f.),**  **Project Budget, Date of Completion** | **Project Role**  **(Manager, Project Architect, etc.)** | | **Narrative on the project:**  **Describe how the project is similar and why the person's experience is relevant to this project.** |
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**(3) Project Engineering/Consultant Team** **Experience Form**

This evaluation criteria is twenty (20) points maximum. This form should not exceed five (5 pages).

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| --- | --- |
| **Company Name** |  |

**Instructions:** This form should be completed for *each key personnel* involved in the performance of this contract. {Form for each key personnel should not exceed five (5) pages.}

Answer all questions in the space provided. Space will increase as information is typed. You may include more than one engineer for each discipline. A separate resume (maximum two (2) pages) may be included and attached as a second page to this form. The resume is to be used to supply relevant information pertaining to the performance of this contract and is to be supplemental to the information below and is not to be used to replace this form.

Provide the name of each project engineer and Consultant who you anticipate you will use during the term of this contract.

**NOTE**: For projects that are the same as in Projects Listed under Firm Experience, provide the "**Project name**" only and say "refer to Firm Experience", and provide the person's project role. For personal experience, that is experience with another firm, put a double asterisk (\*\*) after the project name.

|  |  |  |  |
| --- | --- | --- | --- |
| **Employee Name:** | | | |
| **Position currently held in firm:** | | | |
| **Years with the Firm:** | | **Years in current position:** | |
| **Role under this Contract:** | | | |
| **Years of** **experience as role for this contract:** | | | |
| **Job related Education and Training:** | | | |
| **Job Related Registrations, Certifications:** | | | |
| **Describe his/her project role as structured within your firm and within this particular project team:** | | | |
| **Identify the primary function(s) of the employee in performing the services required by this solicitation:** | | | |
| **List employee’s/consultants relevant experience using the following 3-column format:** | | | |
| **Project Name, Owner or Client**  **Project Type,**  **Size (s.f.),**  **Project Budget, Date of Completion** | **Project Role**  **(Manager, Project Architect, etc.)** | | **Narrative on the project:**  **Describe how the project is similar and why the person's experience is relevant to this project.** |
|  |  | |  |
|  |  | |  |

**(4) Project History of the A & E Teams Form**

This evaluation criteria is twenty (20) points maximum. This form should not exceed five (5) pages.

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| --- | --- |
| **Company Name** |  |

Establish the experience and record of the Project Team. For **each** project listed in Form 1, and for significant relevant projects listed in Forms 2 and 3, provide the following information about each project:

1. Based on the client's educational specifications and the architectural program, does the client perceive the project as meeting all the stated goals?
2. How did your estimates at the various project phases track with the client's budget and the accepted bid? Does the client perceive the project as being completed within budget?
3. What percentage of the low bid was the final total cost of non-client requested change orders? Does the client perceive that the project had few change orders?
4. How does the actual design and construction schedule compare to the client's initial project schedule? Does the client perceive the project as being completed on time?

Use the following 2 column format to provide response.

|  |  |
| --- | --- |
| **Project Name, Owner or Client** | <<<response>>> |
| **Project is referenced on Form 1, Form 2 Form 3** | <<<response>>> |
| 1. **Based on the client's educational specifications and the architectural program, does the client perceive the project as meeting all the stated goals?** | <<<response>>> |
| 1. **How did your estimates at the various project phases track with the client's budget and the accepted bid? Does the client perceive the project as being completed within budget?** | <<<response>>> |
| 1. **What percentage of the low bid was the final total cost of non-client requested change orders? Does the client perceive that the project had few change orders?** | <<<response>>> |
| 1. **How does the actual design and construction schedule compare to the client's initial project schedule? Does the client perceive the project as being completed on time?** | <<<response>>> |

**(5) Design Methodology and Approach Form**

This evaluation criteria is fifteen (15) points maximum.

|  |  |
| --- | --- |
| **Company Name** |  |

1. **Design Methodolog**y (two pages design methodology/five pages examples), five points

Explain the firm's design methodology and approach to understanding the College's goals and needs. Focus on how you will interact with the user groups. How will the requirements of the facilities/ academic program be developed into an architectural solution and tracked throughout the process. What are the aesthetic opportunities and challenges you perceive in these projects? **Use no more than two pages for the narrative.**

Provide examples via reproduction of drawings, color copies of photos or other means of your past work which you feel best expresses the firm's aesthetic capabilities as it relates to this project. **(examples should not exceed five pages)**

1. **Assumptions and Owner Responsibilities** (one page), five points

Provide a discussion of your assumptions that you made in your design methodology approach narrative. Provide a discussion of the owner’s responsibilities in your design methodology approach.

1. **Quality Control and Schedule Control Procedures/Processes** (six pages), five points

**Quality**: Describe the methods used by the firm to check the quality and completeness of the firm's construction documents, such as coordination checklists and coordination review meetings. Also describe on-going processes, such as TQM, used by the firm to improve its level of service.

**Schedule:** Describe the methods used by the firm to prepare and maintain project schedules during design and during administration. Describe your process for managing your office work load and integrating new projects. How long do you anticipate between your first notification of a project and when you will be able to start work?

**(6) References Form**

This evaluation criteria is five (5) points maximum. Statement must not exceed one (1) page.

|  |  |
| --- | --- |
| **Company Name** |  |

Provide at least four Owner(College)/User references on projects listed in Form 1 – Firm Experience and/or significant projects listed in Form 2 – Team Experience Form. **Only** provide references for projects listed in Forms 1 and/or 2. References will be checked for short-listed firms. Provide **all** of the following information for **each** reference:

|  |  |
| --- | --- |
| Owner | Project Name |
| Owner’s Academic Rep Name, Title  (President, Dean, Department Chair, etc.)  Rep's Current Address  Rep's Current Phone Number | Contractor's Name  Contractor's Project Manager  P.M.'s Current Address  P.M.'s Current Phone Number |
| Owner’s Facility Rep Name, Title  (Director of Operations or Facilities Planning, etc.)  Rep's Current Address  Rep's Current Phone Number | Construction Manager (if applicable)  CM Project Manager (if applicable)  CM P.M.'s Current Address (if applicable)  CM P.M.'s Current Phone Number (if applicable) |
| Owner’s Facility Rep Name, Title  (Director of Operations or Facilities Planning, etc.)  Rep's Current Address  Rep's Current Phone Number | Construction Manager (if applicable)  CM Project Manager (if applicable)  CM P.M.'s Current Address (if applicable)  CM P.M.'s Current Phone Number (if applicable) |
| Owner’s Facility Rep Name, Title  (Director of Operations or Facilities Planning, etc.)  Rep's Current Address  Rep's Current Phone Number | Construction Manager (if applicable)  CM Project Manager (if applicable)  CM P.M.'s Current Address (if applicable)  CM P.M.'s Current Phone Number (if applicable) |

\**The points for references will be awarded on an all-or-nothing basis for correctly providing references. If interviews are conducted with the short-listed firms, the evaluation of the information provided by the reference will be part of the overall evaluation performed.*

**RFQ Completion Checklist**

This checklist is a summary of some of the required components of the RFQ. It is provided as a convenience to vendors, but is not intended to be all-inclusive or to imply acceptance or evidence of compliance by its use. It is the responsibility of the vendor to submit complete and compliant Statements of Qualifications.

🞏 **Cover Letter**

🞏 **Required Submittal Forms**

|  |
| --- |
| Certification Form |
| Exceptions Requested Form |
| Confidential and/or Proprietary Declaration Form |
| Mandatory Certifications Form |
| 1. Conflict of Interest |
| 1. Boycott of Israel |
| 1. Worker Eligibility Verification |
| Appendix Form |
| 1. Litigation |
| 1. Debarment and Suspension |
| 1. Canceled/Terminated Contracts |
| 1. Product/Service Discontinued Use |
| e) Cooperative, Subcontract, Third Party Agreement |
| Non- Collusion Affidavit |

🞏 **Statement of Qualifications (SOQ) Forms**

|  |  |
| --- | --- |
| A. | Firm Experience form |
| B. | Project Architectural Team Experience and Qualifications form |
| C. | Project Engineering/Consultant Team Experience and Qualifications form |
| D. | Project History of the A & E Teams form |
| E | Design Methodology and Approach form |
| F. | References form |

SOQ Completion Checklist – included as a courtesy. Do Not Include as a part of SOQ packet.