APPENDIX FORM “A”

PROPOSAL SUMMARY AND SIGNATORIES

I/We have read and understood, having carefully examined the Request for Proposal, for the above stated project.

Proponents Business Name:

Address:

Authorized Signature(s):

|  |  |  |
| --- | --- | --- |
| Signature | Name | Title |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Date:

Telephone Number/Facsimile:

Email Address:

APPENDIX FORM “B”

FIRM INFORMATION

|  |  |
| --- | --- |
| FIRM NAME: |  |
|  |
|  |
| ADDRESS: |  |
|  |
|  |
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|  |

|  |  |
| --- | --- |
| Year firm was established? |  |
| Primary location of office that will be performing the work of this RFP? |  |
| Number of employees in your firm? |  |
|  |  |

SUBCONSULTANTS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| FIRM NAME | LOCATION | YEAR  ESTABLISHED | NUMBER OF EMPLOYEES | LENGTH OF WORKING RELATIONSHIP WITH FIRM |
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APPENDIX FORM “C”

REFERENCES

Please provide four references your firm has provided relevant services to within the last five (5) years.

|  |  |  |
| --- | --- | --- |
| 1. Client: | Contact Name: | Contact Phone/Email: |
| Brief Project Description: | | |
| 1. Client: | Contact Name: | Contact Phone/Email: |
| Brief Project Description: | | |
| 1. Client: | Contact Name: | Contact Phone/Email: |
| Brief Project Description: | | |
| 1. Client: | Contact Name: | Contact Phone/Email: |
| Brief Project Description: | | |

APPENDIX FORM D

KEY TEAM MEMBERS ROLES, RESPONSIBILITIES & RELATED EXPERIENCE

(please identify subconsultants)

|  |  |  |
| --- | --- | --- |
| Name | Role / Key Responsibilities | Relevant Experience |
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APPENDIX FORM E

KEY TEAM MEMBERS LOCATION AND AVAILABILITY

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Firm | Location | Monthly Availability Over Contract Term (Est’d) |
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APPENDIX “F”

CLIENT/CONSULTANT AGREEMENT

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