

ARCHITECT-ENGINEER QUALIFICATIONS

PART I - CONTRACT-SPECIFIC QUALIFICATIONS

A. CONTRACT INFORMATION

1.	TITLE	AND I	OCATION (City a	nd State)				
2.	PUBL	IC NO	FICE DATE			3. SOLICITATION OR PROJ	IECT NUMBE	R
				B. AR	CHITECT-E	NGINEER POINT OF CONT	АСТ	
4.	NAME	EAND	TITLE					
5.	NAME	E OF FI	RM					
6.	TELE	PHONE	ENUMBER	7. FAX NUME	BER	8. E-MAIL ADDRESS		
				(Complete this sec		PROPOSED TEAM	ubcontract	tors.)
	PRIME)	PARTNER SUBCON-	ACTOR	9. FIRM NAME Sections A, B, and C		10. ADDRESS		11. ROLE IN THIS CONTRACT
a.				Page + 1 Page for additional Branch Offic Section C consultants eq'd.	ces or			
b.				Section D: Page for Team Org				
c.			Снеск іг	BRANCH OFFICE	Cove Part	e Summary er Letter: 1 Page I: Contract-Specific Requ		s
d.				BRANCH OFFICE	Sect Sect Sect	ions A, B, C: 1-2 Pages ion D: 1 Page ion E: 10 Pages Max (1 pa ion F: 20 Pages Max (2 pe ion G: 1 Page (include eac ion H: 10 Pages Max	r similar p	project)
e.				BRANCH OFFICE	Part 1 Pa	II - General Qualification ge per each Primary or Bra	anch Offic	
f.				BRANCH OFFICE				

D. ORGANIZATIONAL CHART OF PROPOSED TEAM

(Attached)

E. RESUMES OF KEY PERSONNEL PROPOSED FOR THIS CONTRACT										
(Complete one Section E for each key person.)										
12. NAME	2. NAME 13. ROLE IN THIS CONTRACT 14. YEARS EXPERIENCE									
			a. TOTAL	b. WITH CURRENT FIRM						
15. FIRM NAME AND LOCATION (City and State)	•		·	•						
16. EDUCATION (Degree and Specialization)		17. CURRENT PROFESSIONAL F	REGISTRATION	(State and Discipline)						

18. OTHER PROFESSIONAL QUALIFICATIONS (Publications, Organizations, Training, Awards, etc.)

	19. RELEVANT PROJECTS		
	(1) TITLE AND LOCATION (City and State)	(2) YEAR	COMPLETED
		PROFESSIONAL SERVICES	CONSTRUCTION (If applicable)
a.	(3) BRIEF DES	Check if project perf	ormed with current firm
	Control 1 Page per resume. Include all pertinent control 1 Page per resume. Include all per resume.		
	(1) TITLE AND Section G.	(2) YEAR	COMPLETED
	Primary Consultants (as reg'd for project scope):	PROFESSIONAL SERVICES	CONSTRUCTION (If applicable)
b.	(3) BRIEF DES Architecture	Check if project perf	ormed with current firm
	MEP Engineer) Civil Engineer)		
	Structural Engineer		
	(1) TITLE AND Cost Estimator	(2) YEAR	COMPLETED
		PROFESSIONAL SERVICES	CONSTRUCTION (If applicable)
c.	(3) BRIEF DESCRIPTION (Brief scope, size, cost, etc.) AND SPECIFIC ROLE	Check if project perf	I ormed with current firm
	(1) TITLE AND LOCATION (City and State)		COMPLETED
		PROFESSIONAL SERVICES	CONSTRUCTION (If applicable)
d.	(3) BRIEF DESCRIPTION (Brief scope, size, cost, etc.) AND SPECIFIC ROLE	Check if project perf	ormed with current firm
	(1) TITLE AND LOCATION (City and State)	(2) YEAR	COMPLETED
		PROFESSIONAL SERVICES	CONSTRUCTION (If applicable)
e.	(3) BRIEF DESCRIPTION (Brief scope, size, cost, etc.) AND SPECIFIC ROLE	Check if project perf	ormed with current firm

F. EXAMPLE PROJECTS WHICH BEST ILLUSTRATE PROPOSED TEAM'S QUALIFICATIONS FOR THIS CONTRACT	20. EXAMPLE PROJECT KEY NUMBER
(Present as many projects as requested by the agency, or 10 projects, if not specified. Complete one Section F for each project.)	

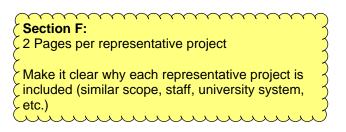
21. TITLE AND LOCATION (City and State)

22. YEAR COMPLETED
PROFESSIONAL SERVICES
CONSTRUCTION (If applicable)

23. PROJECT OWNER'S INFORMATION

a. PROJECT OWNER	b. POINT OF CONTACT NAME	C. POINT OF CONTACT TELEPHONE NUMBER

24. BRIEF DESCRIPTION OF PROJECT AND RELEVANCE TO THIS CONTRACT (Include scope, size, and cost)



25. FIRMS FROM SECTION C INVOLVED WITH THIS PROJECT

_			
a.		(2) FIRM LOCATION (City and State)	(3) ROLE
b.		(2) FIRM LOCATION (City and State)	(3) ROLE
c.	(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
d.		(2) FIRM LOCATION (City and State)	(3) ROLE
e.	(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
f.	(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE

26. NAMES OF KEY PERSONNEL (From Section E, Block 12)	27. ROLE IN THIS CONTRACT (From Section E, Block 13)	28. EXAMPLE PROJECTS LISTED IN SECTION F (Fill in "Example Projects Key" section below before completing table. Place "X" under project key number for participation in same or similar role.)									
		1	2	3	4	5	6	7	re completing	9	10
				***	YYY						
	Section G: Include each staff provided in Sectior										
	branch office) of th	e prima	ry wor								

G. KEY PERSONNEL PARTICIPATION IN EXAMPLE PROJECTS

29. EXAMPLE PROJECTS KEY

NUMBER	TITLE OF EXAMPLE PROJECT (From Section F)	NUMBER	TITLE OF EXAMPLE PROJECT (From Section F)
1		6	
2		7	
3		8	
4		9	
5		10	

H. ADDITIONAL INFORMATION

30. PROVIDE ANY ADDITIONAL INFORMATION REQUESTED BY THE AGENCY. ATTACH ADDITIONAL SHEETS AS NEEDED.

Section H: 10 Pages MAX.
Address NC State Selection Criteria below:
1. Experience and expertise with similar projects.
2. Past performance on similar projects.
3. Experience in design projects to be part of an existing campus context; experience with multi-phase projects on a college campus.
4. Adequate staff – qualifications and examples of previous experience on the representative similar projects.
5. Historically Underutilized Business representation on the proposed consultant team
6. Current workload and State projects awarded.
7. Proposed design approach or methodology.
8. Recent experience with project cost estimates and schedule adherence.
9. Construction administration capabilities.
10. Record of successfully completed projects without major legal or technical problems.
11. Demonstrated ability to manage diverse teams (consultants and stakeholders) from pre-design/master planning through close-out on a large-scale campus development (Lead Design Consultant only)
12. Demonstrate evidence of strong firm leadership, development of younger staff, and a succession plan for firm leadership.
13. A minimum of three references with current contact information, including email address and phone number.

I. AUTHORIZED REPRESENTATIVE

The foregoing is a statement of facts.

32. DATE

31. SIGNATURE

33. NAME AND TITLE

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ARCHITECT-ENGINEER QUALIFICATIONS

1. SOLICITATION NUMBER (If any)

	()	F f a firm has branch o		GENERAL <i>mplete for e</i>				vork.)	
2a. FIRM (or Bra			i				3. YEAR ESTABLISH		E ENTITY IDENTIFIER
2b. STREET							5. OWNERSHIP		
2c. CITY				2d. STA	TE 2e. ZIP	CODE	a. TYPE		
				20. 51A		CODE	b. SMALL BUSINESS	STATUS	
6a. POINT OF C	CONTACT NAM	IE AND TITLE					1		
						7. NAME OF FIRM (If Block 2a is a Branch Office)			
6b. TELEPHON	E NUMBER	E	òc. EMAIL AD	DRESS					
		8a. FORMER FIRM	NAME(S) (II	f any)		8b. YEA	R ESTABLISHED 80	. UNIQUE EI	NTITY IDENTIFIER
	9. EMF	PLOYEES BY DISCIPL	.INE		AND A		OFILE OF FIRM'S		
a. Function	h	. Discipline	c. Number o	of Employees			b. Experience		c. Revenue Index
Code			(1) FIRM				b. Experience		Number (see below)
		Part II: Include 1 Pa					}		
0	ther Employ	ees							
		Total							
SERV	CES REVE FOR LAST nue index nu /ork ral Work	GE PROFESSIONAL NUES OF FIRM 3 YEARS <i>umber shown at right)</i>	2. \$1 3. \$2 4. \$5	PROF ss than \$100 00,000 to le: 50,000 to le: 00,000 to le: million to le	0,000 ss than \$25 ss than \$50 ss than \$1	50,000 00,000 million	7. \$5 million 8. \$10 million 9. \$25 million	to less than to less than n to less thai	\$5 million
		<u> </u>							
			The for	egoing is a s	statement o	of facts.			
a. SIGNATURE								b. DATE	