

QUALIFICATIONS — SIMILAR PROJECTS FORM

Include this form in the Qualifications Submittal (TAB 1)

Respondent (or a combination of the firm, individual, or project manager assigned to the work) or Respondent's subconsultant must have successfully completed at least **three** similar projects within the past 10 years immediately preceding the deadline date for receipt of Submittals for this solicitation. *(Respondent must use form Qualifications – Similar Projects provided under the section "FORMS").*

Completed Similar Project 1:

Agency/company: _____

Current contact person at agency/company: _____

Telephone: _____ Email: _____

Address of agency/company: _____

Project Name: _____

Description: _____

Percentage of work Respondent performed with its own workforce (must be approximate): _____

Project value: _____ Start date: _____ Completion date: _____
 (min. _____) (month/year) (month/year: prior to _____)

Name(s) of key personnel:

Project Manager: _____

Engineer of Record: _____

Others: _____
