

## CONTRACT CHECKLIST

I. PROJECT INFORMATION			
Date:	1/19/2022	REQUESTING DEPARTMENT	Parks
Project Name:	Discovery Park Skatepark - Design Build Project		
Project Manager:	Mike Barton	Contract Amount:	\$20,250
Contractor/Consultant/Design Engineer:	Evergreen Skateparks		
Is this a change order?		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
		Change Order No.	N/A
II. BUDGET INFORMATION (Project Manager to Complete)		III. Contract Type	
Fund:	60	Budget Available (Purchasing attach report):	
Department	3520	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
GL Account	53351	FY Budget:	2022
Project Number:	11045	Enhancement:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Will the project cross fiscal years?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
		Construction	<input checked="" type="checkbox"/>
		Task Order	<input type="checkbox"/>
		Professional Service	<input checked="" type="checkbox"/>
		Equipment	<input type="checkbox"/>
		Grant	<input type="checkbox"/>
IV. GRANT INFORMATION - to be completed only on Grant funded projects			
Grant #:	Wage Determination Received	Wage Verification 10 Days prior to bid due date	Debarment Status (Federal Funded)
N/A	N/A	N/A	N/A
	Print and Attach the determination	Print, attach and amend bid by addendum (if changed)	<a href="http://www.sam.gov">www.sam.gov</a> Print and attach
V. BASIS OF AWARD			
<b>BID</b>		<b>RFP / RFQ</b>	
<b>Award based on Low Bid</b>		<b>Highest Ranked Vendor Selected</b>	
(Bid Results Attached)	Yes <input type="checkbox"/> No <input type="checkbox"/>	(Ratings Attached)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Typical Award	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Master Agreement Category _____	
If no please state circumstances and conclusion: _____		Date MSA Roster Approved: _____	
Date Award Posted:	6/4/2019	7 day protest period ends:	June 11, 2019
VI. CONTRACTOR / CONSULTANT REQUIRED INFORMATION			
PW License	33615	Expiration Date:	2/28/2022
		Corporation Status	Active -Existing
Insurance Certificates Received (Date):	12/17/2021	Expiration Date:	4/22/2022
		Rating:	A-
Payment and Performance Bonds Received (Date):	Not at this time		Rating: N/A
Builders Risk Ins. Req'd:	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, has policy been purchased? _____	
<small>(Only applicabile for projects above \$1,000,000)</small>			
VII. TASK ORDER SELECTION (Project Manager to Complete)			
Reason Consultant Selected	<input type="checkbox"/> 1 Performance on past projects <input type="checkbox"/> 2 Qualified Personnel <input type="checkbox"/> 3 Availability of personnel <input type="checkbox"/> 4 Local of personnel		
<i>Check all that apply</i>	<input type="checkbox"/> Quality of work <input type="checkbox"/> On Time <input type="checkbox"/> On Budget <input type="checkbox"/> Accuracy of Construction Est		
Description of negotiation process and fee evaluation:			
Enter Supervisor Name			Date Approved
VIII. AWARD INFORMATION			
Date Submitted to Clerk for Agenda:	January 19, 2022	Approval Date	By: _____
Purchase Order No.:	Date Issued:	<b>WH5 submitted</b>	
		<small>(Only for PW Construction Projects)</small>	
NTP Date:	_____		