

CONTRACT CHECKLIST

I. PROJECT INFORMATION			
Date:	1/27/2026	REQUESTING DEPARTMENT	Public Works
Project Name:	Eagle Rd. Water Crossings		
Project Manager:	Dean Stacey	Contract Amount:	\$712,458
Contractor/Consultant/Design Engineer:	Owyhee Civil		
Is this a change order?		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
		Change Order No.	

II. BUDGET INFORMATION (Project Manager to Complete)		III. Contract Type
Fund: <u>62</u> Department: <u>3490</u> GL Account: <u>95000</u> Project Number: <u>11407.b</u>	Budget Available (Purchasing attach report): Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> FY Budget: <u>2026</u> Enhancement: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Construction <input checked="" type="checkbox"/> Task Order <input type="checkbox"/> Professional Service <input type="checkbox"/> Equipment <input type="checkbox"/> Grant <input type="checkbox"/>
Will the project cross fiscal years? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		

IV. PROCUREMENT USE ONLY - GRANT INFORMATION (to be completed only on Grant funded projects)			
Grant #: N/A	Wage Determination Received	Wage Verification 10 Days prior to bid due date	Debarment Status (Federal Funded)
	Print and Attach the determination	Print, attach and amend bid by addendum (if changed)	www.sam.gov Print and attach

V. BASIS OF AWARD									
BID			RFP / RFQ				TASK ORDER		
Award based on Low Bid			Highest Ranked Vendor Selected				Master Agreement Category _____		
(Bid Results Attached) Yes <input type="checkbox"/> No <input type="checkbox"/>			(Ratings Attached) Yes <input type="checkbox"/> No <input type="checkbox"/>				Date MSA Roster Approved: _____		
Typical Award Yes <input type="checkbox"/> No <input type="checkbox"/>									
If no please state circumstances and conclusion: _____									

Date Award Posted: _____ 7 day protest period ends: _____

VI. PROCUREMENT USE ONLY - CONTRACTOR / CONSULTANT REQUIRED INFORMATION									
PW License	AAA-079686		Expiration Date:		10.31.2026		Corporation Status		Active
Insurance Certificates Received (Date):			Pending		Expiration Date:		Rating:		
Payment and Performance Bonds Received (Date):			Pending		Rating:				
Builders Risk Ins. Req'd:		Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	If yes, has policy been purchased?		N/A	
(Only applicabale for projects above \$1,000,000)									

VII. TASK ORDER SELECTION (Project Manager to Complete)	
Reason Consultant Selected	<input type="checkbox"/> 1 Performance on past projects <input type="checkbox"/> Quality of work <input type="checkbox"/> On Time <input type="checkbox"/> 2 Qualified Personnel <input type="checkbox"/> 3 Availability of personnel <input type="checkbox"/> 4 Local of personnel
<div>Check all that apply</div> <div> <input type="checkbox"/> On Budget <input type="checkbox"/> Accuracy of Construction Est </div>	
Description of negotiation process and fee evaluation:	
<div>Enter Supervisor Name</div> <div>Date Approved</div>	

VIII. PROCUREMENT USE ONLY - AWARD INFORMATION			
Date Submitted to Clerk for Agenda:	January 27, 2026	Approval Date	By: Council
Purchase Order No.:		Date Issued:	WH5 submitted (Only for PW Construction Projects)
NTP Date:			