

CONTRACT CHECKLIST

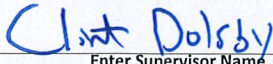
I. PROJECT INFORMATION			
Date:	10/23/2020	REQUESTING DEPARTMENT	Public Works
Project Name:	Sidestream Phosphorus Recovery		
Project Manager:	Daniel Berthe	Contract Amount:	\$545,210
Contractor/Consultant/Design Engineer:	Mountain Waterworks, Inc.		
Is this a change order? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
Change Order No. _____			

II. BUDGET INFORMATION (Project Manager to Complete)	III. Contract Type
Fund: <u>60</u> Department: <u>3590</u> GL Account: <u>96182</u> Project Number: <u>10036.d</u> Will the project cross fiscal years? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Budget Available (Purchasing attach report): Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> FY Budget: <u>FY20 - \$550,000 ; FY21 - \$5,450,000</u> Enhancement: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> No <input type="checkbox"/>
Construction <input type="checkbox"/> Task Order <input checked="" type="checkbox"/> Professional Service <input 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)
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
	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 <u>2A</u>
(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: <u>10/1/2020</u>
Typical Award Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
If no please state circumstances and conclusion: <u>N/A</u>		
Date Award Posted: <u>N/A</u>	7 day protest period ends: <u>N/A</u>	

VI. CONTRACTOR / CONSULTANT REQUIRED INFORMATION			
PW License	Expiration Date:	Corporation Status	
<u>N/A</u>	<u>N/A</u>	<u>Good Standing</u>	
Insurance Certificates Received (Date):	Expiration Date:	Rating:	
<u>8/25/2020</u>	<u>3/16/2021</u>	<u>A++</u>	
Payment and Performance Bonds Received (Date):	Rating:		
<u>N/A</u>	<u>N/A</u>		
Builders Risk Ins. Req'd:	If yes, has policy been purchased?		
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	<u>N/A</u>		
<small>(Only applicable for projects above \$1,000,000)</small>			

VII. TASK ORDER SELECTION (Project Manager to Complete)	
Reason Consultant Selected	<input checked="" type="checkbox"/> 1 Performance on past projects <input checked="" type="checkbox"/> Quality of work <input checked="" type="checkbox"/> On Time <input checked="" type="checkbox"/> 2 Qualified Personnel <input checked="" type="checkbox"/> 3 Availability of personnel <input checked="" type="checkbox"/> 4 Local of personnel
Check all that apply <input checked="" type="checkbox"/> On Budget <input type="checkbox"/> Accuracy of Construction Est	
Description of negotiation process and fee evaluation:	
The scope of work has been compiled based on decisions that were made as a result of the scoping meeting held during Preliminary Design efforts as well as from work expectations based on the City's preferences for equipment and material being requested by Airprex. The scope of work has been reviewed by Engineering and Operations personnel and is inline with our expectations for costs. Mountain Waterworks has completed work previously on time, within budget and has qualified personnel with significant experience with the City of Meridian.	
 Enter Supervisor Name	<u>10/23/20</u> Date Approved

VIII. AWARD INFORMATION			
Date Submitted to Clerk for Agenda:	Approval Date	By: <u>Council</u>	
<u>12/2/2020</u>			
Purchase Order No.:	Date Issued:	WH5 submitted	
		<u>N/A</u>	
<small>(Only for PW Construction Projects)</small>			
NTP Date: _____			