

## CONTRACT CHECKLIST

I. PROJECT INFORMATION			
Date:	5/3/2023	REQUESTING DEPARTMENT	<b>Public Works</b>
Project Name:	<b>TERTIARY FILTRATION UPGRADE - FINAL DESIGN</b>		
Project Manager:	David Briggs	Contract Amount:	<b>\$2,256,927</b>
Contractor/Consultant/Design Engineer:	<b>Stantec Consulting Services, LLC</b>		
Is this a change order?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
			Change Order No. _____
II. BUDGET INFORMATION (Project Manager to Complete)		III. Contract Type	
Fund:	60	Budget Available (Purchasing attach report):	
Department	3590	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
GL Account	96154	FY Budget:	2023
Project Number:	<b>11281.e</b>	Enhancement:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Will the project cross fiscal years?	Yes <input 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. PROCUREMENT USE ONLY - 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 type="checkbox"/> No <input type="checkbox"/>
Typical Award	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Date MSA Roster Approved: <b>10/1/2020</b>	
If no please state circumstances and conclusion: _____			
Date Award Posted:	N/A	7 day protest period ends:	N/A
VI. PROCUREMENT USE ONLY - CONTRACTOR / CONSULTANT REQUIRED INFORMATION			
PW License	N/A	Expiration Date:	N/A
Insurance Certificates Received (Date):	4/22/2022	Expiration Date:	5/1/2023
Payment and Performance Bonds Received (Date):	N/A	Rating:	<b>A++</b>
Builders Risk Ins. Req'd:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If yes, has policy been purchased?	N/A
<small>(Only applicabale 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"/> On Budget	
<i>Check all that apply</i>	<input checked="" type="checkbox"/> Quality of work	<input checked="" type="checkbox"/> Accuracy of Construction Est	
	<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		
Description of negotiation process and fee evaluation:			
			Enter Supervisor Name _____ Date Approved _____
VIII. PROCUREMENT USE ONLY - AWARD INFORMATION			
Date Submitted to Clerk for Agenda:	May 16, 2023	Approval Date	By: _____
Purchase Order No.:	Date Issued:	WH5 submitted	N/A
<small>(Only for PW Construction Projects)</small>			
NTP Date:	_____		