

**STATE OF CALIFORNIA
CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
FACILITY PLANNING, CONSTRUCTION AND MANAGEMENT DIVISION
PROJECT MANAGEMENT BRANCH**

**REQUEST FOR STATEMENT OF QUALIFICATIONS FOR
“STRUCTURAL PEER REVIEW SERVICES”
FOR
PROPOSED INFILL PROJECTS – LEVEL II DORM FACILITIES**

RFQ NO. PMB201301

GENERAL INFORMATION SHEET

To be completed by the proposer and placed after the Table of Contents

Legal Name of Firm, Corporation Identification
Number and Federal Employer Identification Number

Date

Firm's Address

Firm's Telephone #

Type of Organization, Partnership, Corporation, etc.

Name of Principal-in-Charge, Title and License Number

Name of Project Manager and Title

Name, Title, Telephone Number, and E-mail Address of Person to Whom Project
Correspondence Should be Directed

Address Where Correspondence Should be Sent

Listing of major sub-consultants proposed, their telephone numbers, and areas of responsibility
(indicate which Consultants are DVBE):

**THIS ATTACHMENT IS NOT INCLUDED
IN THE 40-PAGE LIMITATION REQUIREMENT**

**STATE OF CALIFORNIA
CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
FACILITY PLANNING, CONSTRUCTION AND MANAGEMENT DIVISION
PROJECT MANAGEMENT BRANCH**

**REQUEST FOR STATEMENT OF QUALIFICATIONS FOR
“STRUCTURAL PEER REVIEW SERVICES”
FOR
PROPOSED INFILL PROJECTS – LEVEL II DORM FACILITIES**

RFQ NO. PMB201301

STATEMENT OF COMPLIANCE

_____ (hereinafter referred to as)
(Company Name)

"Prospective Consultant" hereby certifies, unless specifically exempted, compliance with Government Code Section 12990 and California Administrative Code, Title II, Division 4, Chapter 5 in matters relating to the development, implementation and maintenance of a nondiscrimination program. Prospective Consultant agrees not to unlawfully discriminate against any employee or applicants for employment because of race, color, ancestry/ethnicity, creed, religion, age, sex, national origin, sexual orientation, physical or mental disability or political affiliation.

I, _____, hereby swear that I am duly authorized to legally bind the
(Name of Official)
Prospective Consultant to the above described certification. I am fully aware that this
certification executed on _____ in the County of _____
(Date) (County)

is made under the penalty of perjury under the laws of the State of California.

Signature

Title

**THIS ATTACHMENT IS NOT INCLUDED
IN THE 40-PAGE LIMITATION REQUIREMENT**

**STATE OF CALIFORNIA
CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
FACILITY PLANNING, CONSTRUCTION AND MANAGEMENT DIVISION
PROJECT MANAGEMENT BRANCH**

**REQUEST FOR STATEMENT OF QUALIFICATIONS FOR
“STRUCTURAL PEER REVIEW SERVICES”
FOR
PROPOSED INFILL PROJECTS – LEVEL II DORM FACILITIES**

RFQ NO. PMB201301

LIST OF LEGAL JUDGMENTS (All Firms to complete)

Provide information below regarding California Legal Judgments over \$25,000 involving the firm within the past seven (7) years.

FIRM NAME: _____

County	Case Caption (with names of all parties)	Date of Entry	Amount	Notes

**THIS ATTACHMENT IS NOT INCLUDED
IN THE 40-PAGE LIMITATION REQUIREMENT**

**STATE OF CALIFORNIA
CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
FACILITY PLANNING, CONSTRUCTION AND MANAGEMENT DIVISION
PROJECT MANAGEMENT BRANCH**

**REQUEST FOR STATEMENT OF QUALIFICATIONS FOR
“STRUCTURAL PEER REVIEW SERVICES”
FOR
PROPOSED INFILL PROJECTS – LEVEL II DORM FACILITIES**

RFQ NO. PMB201301

STATEMENT OF QUALIFICATIONS EVALUATION FORM

FIRM:	MAXIMUM POINTS
DATE:	
EVALUATOR:	
PROJECT GROUP(S) FIRM IS PROPOSING SERVICES FOR: STRUCTURAL PEER REVIEW SERVICES	
1. Approach for providing Structural Engineering Peer Review Services and knowledge of applicable codes and regulations for this project.	
2. Internal management systems experience, approach, and methods in the following areas:	
a. Quality control system – Structural Peer Review coordination to be performed, monitored, documented and assured within own firm and for sub-consultants (including process used to ensure reviews are completed on schedule).	30
b. Schedule management system – management tools and controls, example of schedule.	15
c. Design management: Describe your team’s process for providing structural peer review, structural systems confirmation relating to seismic components, and structural seismic design validation.	15
3. Description of organization, resources, roles and responsibilities of your proposed team.	
a. Chart outlining organizational approach, identifying key personnel and their roles.	10
b. Define firm type i.e. single firm, joint venture, partnership and what work to be done by each firm and from what location. Identify all consultant and sub-consultant firms and percentage of work for each. Identify which consultants and sub-consultant firms are DVBE & SBE firms and the percentage of work expected to be performed by DVBE & SBE firms.	10
c. Provide resumes for key personnel.	50
d. Provide information documenting availability of resources of proposed teams to staff projects.	30
4. Current and past project experience as outlined in the RFQ’s scope of work.	
a. Provide information on projects constructed within the last five (5) years.	70
TOTAL	280

**THIS ATTACHMENT IS NOT INCLUDED
IN THE 40-PAGE LIMITATION REQUIREMENT**

**STATE OF CALIFORNIA
CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
FACILITY PLANNING, CONSTRUCTION AND MANAGEMENT DIVISION
PROJECT MANAGEMENT BRANCH**

**REQUEST FOR STATEMENT OF QUALIFICATIONS FOR
“STRUCTURAL PEER REVIEW SERVICES”
FOR
PROPOSED INFILL PROJECTS – LEVEL II DORM FACILITIES**

RFQ NO. PMB201301

CURRENT AND PAST EXPERIENCE

CONSULTANT NAME

Project Name / Description of Project	Construction Budget	Design Start & Completion Dates	Construction Completion Date	Firms Role	Consultants Project Responsibility	Owner and contact person for project and current telephone number

THIS ATTACHMENT IS NOT INCLUDED IN THE 40-PAGE LIMITATION REQUIREMENT

**STATE OF CALIFORNIA
CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
FACILITY PLANNING, CONSTRUCTION AND MANAGEMENT DIVISION
PROJECT MANAGEMENT BRANCH**

**REQUEST FOR STATEMENT OF QUALIFICATIONS FOR
“STRUCTURAL PEER REVIEW SERVICES”
FOR
PROPOSED INFILL PROJECTS – LEVEL II DORM FACILITIES

RFQ NO. PMB201301**

INTERVIEW EVALUATION CRITERIA

CONTENT AREA	MAXIMUM POINTS
1. Project approach.	10
2. Management systems/project controls.	15
3. Description of organization, resources, roles and responsibilities within your firm.	30
4. Current and past project experience involving new and existing correctional facilities as outlined in the RFQ’s scope of work.	20
5. Panel questions.	25
TOTAL POINTS	100

**THIS ATTACHMENT IS NOT INCLUDED
IN THE 40-PAGE LIMITATION REQUIREMENT**