

STATE OF NEVADA
DEPARTMENT OF TRANSPORTATION

REQUEST FOR QUALIFICATIONS

RFQ #300-18-015

Project Specifications and Instructions
for Submitting a Statement of Qualifications

RENO EARLY ACTION PROJECT (REAP)

Washoe County

Due: July 16, 2018
No later than 3:00 P.M., Local Time

Addendum No. 1 Issued: June 14, 2018

Addendum No. 2 Issued: June 27, 2018



Rudy Malfabon, P.E., Director
Department of Transportation

**FORM DP
DEPARTMENT PROJECT DESCRIPTION**

Instructions: The Proposer is to provide a project description (this Form DP) for every project over \$10 million in construction value (for which the subject firm provided construction work) or over \$1 million in professional services and/or design value (for which the subject firm provided professional services and/or design work) that each Principal Participant and Major Participant is currently completing or has completed for the Department, as a prime or first-tier Subcontractor, within the last ten [10] years. (Note: The Proposer may add one (1) additional page when completing this Form DP. Each Form DP shall be a maximum of three (3) pages.)

Name of Proposer: _____

Name of Firm:
Department Project Name: _____ Project Role: _____ Prime: _____ 1st Tier Subcontractor: _____ Other: _____
Schedule and Budget
Contract Type (e.g., Engineering, Construction): _____ Percent of Total Work Performed by the Firm: _____ Initial Contract Value (US\$): _____ Final Value (US\$): _____ Total value of Contractor-requested change orders (US\$): _____ Reasons for exceeding the initial contract value: _____ _____ _____ Contract Commencement Date: _____ Planned Completion Date: _____ Actual Completion Date: _____ Reasons for exceeding the planned completion date: _____ _____ _____
Department Information
Name of Department Project Manager: _____ Telephone: _____

Department Project Details

Project location and description of work for which the firm was responsible:

**FORM E-1
PAST PROJECT DESCRIPTION**

(Note: The Proposer may add one (1) additional page when completing this Form E-1. Each Form E-1 shall be a maximum of three (3) pages.)

Name of Proposer: _____

Name of Firm:
Project Name: _____
Project Role: _____
Principal Participant: _____ Major Participant: _____
Other: _____
Schedule and Budget
Contract Type (e.g., Engineering, Construction): _____
Percent of Total Work Performed by the Firm: _____
Initial Contract Value (US\$): _____ Final Value (US\$): _____
Total value of Contractor-requested change orders (US\$): _____
Reasons for exceeding the initial contract value: _____ _____ _____
Contract Commencement Date: _____ Planned Completion Date: _____
Actual Completion Date: _____
Reasons for exceeding the planned completion date: _____ _____ _____
Owner
Name of Client (Owner/Agency, Contractor, etc.): _____
Address: _____ _____
Contact Name: _____ Telephone: _____
Owner's Project or Contract No.: _____ Fax No: _____

Project Details
Project location and description of work for which the firm was responsible: