

**City of Covington
Professional Services Form**

(Rev. September 2022)

<p>1. Project Title:</p> <p>City of Covington Engineering Services Pool 2023-2026</p>	<p>2a. Announcement Date</p> <p>October 2022</p>	<p>2b. CCE #:</p> <p>222-102</p>
<p>3a. Firm (as registered with the Louisiana Secretary of State):</p>	<p>4a. Name, title, telephone number, and e-mail address of the official with signing authority for this firm:</p>	
<p>3b. Firm License Number (as registered with the Louisiana Professional Engineering and Land Surveying Board (LAPELS)):</p>	<p>4b. Name, title, telephone number, and e-mail address of project point of contact (if different from 4a.)</p>	
<p>3c. Mailing address of the office to perform work:</p>	<p>4c. Name, title, and telephone number of full-time LA licensed engineer in charge:</p>	

5. Full-time personnel on firm's payroll:	Personnel Domiciled in City of Covington	Personnel Domiciled in LA (not in Covington)	Personnel NOT Domiciled in LA
a. Civil Engineers, with current Louisiana P.E. registration	_____	_____	_____
b. Environmental Engineers, with current Louisiana P.E. registration (not included in 6a)	_____	_____	_____
c. Electrical Engineers, with current Louisiana P.E. registration (not included in 6a)	_____	_____	_____
d. Engineer Interns	_____	_____	_____
e. Technical Support Personnel (non-engineers)	_____	_____	_____
f. Environmental Personnel (non-engineers)	_____	_____	_____
g. Planning Personnel (non-engineers)	_____	_____	_____
h. Surveying Personnel (non-engineers)	_____	_____	_____
i. Real Estate Professionals (Agents and Certified Appraisers)	_____	_____	_____
j. Other Personnel not included in above categories	_____	_____	_____
<p>_____</p> <p>Total Personnel (a-j)</p>			

Company Name _____

6. If one or more sub-consultants will be used, provide the information requested below for each.

Name and Address	Sub-consultant Specialty	Has the firm worked with this sub-consultant before? (Yes/No)
1.		
2.		
3.		

7. Project Staffing Plan – Provide an organizational chart showing all key prime consultant and sub-consultant (if applicable) personnel assigned to each work element of the project, specific duties for each, and immediate supervisors.

Blank area for providing the Project Staffing Plan, including an organizational chart, personnel assignments, specific duties, and immediate supervisors.

Company Name _____

8. Use the table below to identify full-time staff (prime/sub-consultant) designated to work on this project meeting the minimum personnel requirements specified in the request for qualifications.

MINIMUM PERSONNEL REQUIREMENTS

Requirement (as stated in advertisement) (See RFQ Information Packet Section 3.1)	Personnel Meeting Requirement	License / Certification Expiration Date
<p>The Prime Consultant under consideration shall have the following:</p> <ul style="list-style-type: none"> • At least one principal who is a registered professional Civil Engineer licensed to work in the State of Louisiana with a minimum of 10 years' experience in municipal infrastructure projects. • Must employ on a full-time basis, or using Sub-Consultant(s), one Professional Civil Engineer registered in the State of Louisiana with a minimum of 5 years of experience in a minimum of three of the following project categories: local roadway systems, sewer treatment systems, sewer collection systems, water treatment systems, water distribution systems and storm sewer systems. Multiple personnel may be used to meet this requirement and/or one Professional Civil Engineer may be used to meet all of the listed project categories if qualified. 		

Company Name _____

9. Provide short résumés for project personnel previously identified in Section 8.

a. Name, Title & Domicile

b. Name of firm by which employed full time

c. Years experience:

With this firm: _____ With other firms: _____

d. Education: Degree(s) / Years / Specialization

e. Active registration:

Year registered: _____

Branch: _____ State: _____

License No.: _____

f. Project Roles/Responsibilities (Brief Description)

g. Experience and qualifications **relevant to the proposed project classifications**; i.e. “local roadway systems”, “sewer treatment systems”; “sewer collection systems”, etc.

10. Firm's **most** relevant project experience (List **no more than 10 projects** and include no more than two pages **per project**).

Describe the project including the firm's role, members involved (highlight members to be utilized in work for the City of Covington) and % of work performed in Louisiana.				Estimated Cost (in thousands)		
Project Name and Location	Nature of Individual or Firm's Responsibility	Project Manager Name, Address and Contact Information	Beginning and End Dates (Actual or Estimated)	Project Type	Eng. Cost	Construction Cost
1)						
2)						
3)						
4)						
5)						

Company Name _____

				Estimated Cost (in thousands)		
Project Name and Location	Nature of Individual or Firm's Responsibility	Project Manager Name, Address and Contact Information	Beginning and End Dates (Actual or Estimated)	Project Type	Eng. Cost	Construction Cost
6)						
7)						
8)						
9)						
10)						

Company Name _____

11. List any current and/or past prime or sub-consultant work performed by all of your firm's offices, either directly for or via award by the City of Covington.

a. City project number, type, name, and location*			b. Contract Details		c. Contract fees (in thousands)** (by phase/type of work)	
City Project #:	Project Type	Project Name and Location	Project Manager/Contact Person	% Complete and/or Date of Work Completion	Total	Remaining

Company Name _____

12. Firm's current design capabilities. (Fill in all areas that apply)

		Number of Personnel with Experience	Average Years of Experience	Name of Senior Experienced Personnel	Senior Personnel's Years of Experience	Average Time of Completion
SURVEYING	Topographic Surveying					
	Bathymetric Surveying					
	Property Surveying					
ROADS & BRIDGES	Bridge Design					
	Load Ratings					
	Traffic Counts					
	Concrete Road Design					
STORMWATER	Asphalt Road Design					
	Hydologic & Hydraulic Study					
WASTEWATER	Drainage Design					
	Wastewater Treatment Plants					
	Sewer Lift Stations, Wet Wells, Force Mains, & Pumps					
DRINKING WATER	Gravity Sewer					
	Water Wells					
	Water Towers					
ARCHITECTURE	Water Lines & Valves					
	Commercial Buildings					
	Municipal Buildings					
	Bathroom Facilities					
	Building Renovations					

Company Name _____

		Number of Personnel with Experience	Average Years of Experience	Name of Senior Experienced Personnel	Senior Personnel's Years of Experience	Average Time of Completion
MISCELLANEOUS	Trenchless Pipe Replacement/Rehabilitation					
	Parks					
	Planning					
	Sidewalks					
	ADA Paths & Ramps					
	Hurricane Ratings					
	Boat Launches, Docks, & Piers					
	Recreation Facilities					
	Utility Location & Mapping Services					
	Sport Facility Design					
	Electrical Engineering					
	Environmental Engineering					
	Mechanical Engineering					
	Other (Please list)					
	Other (Please list)					
Other (Please list)						

Company Name _____

13. Provide a summary supporting your firm's qualifications with the four selection criteria. **NOTE:** This section response shall be limited to four pages or less.

(1) **Firm Experience on Similar Projects**

(2) **Qualifications of Assigned Staff**

(3) **Firm's Ability to Complete Work**

(4) **Local Involvement and Knowledge**

(5) **Provide a minimum of 3 municipalities for which your firm has completed similar projects as a Prime Consultant (other than The City of Covington) and provide a point of contact for each.**

14. This is to certify that all information contained herein is accurate and true, and that I presently have sufficient staff to perform these services within the designated time frame. (NOTE: A FACSIMILE OR SCANNED SIGNATURE WILL BE ACCEPTED FOR SUBCONSULTANTS ONLY)

Signature of Official (same as 4a): _____ Date: _____

Company Name _____