**EXHIBIT B – MANAGEMENT PROPOSAL FORM**

Items marked “mandatory” must be included as part of the bid, quotation, and/or proposal to be considered responsive; however, these items are not scored. Items marked “scored” are those that are awarded points as part of the evaluation conducted by the evaluation team.

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| **A. PROJECT MANAGEMENT (SCORED)** | | |
| **A1. PROJECT TEAM STRUCTURE/INTERNAL CONTROLS (SCORED)**  All Bidders/Applicants are **REQUIRED** to provide a description of the proposed project team structure and internal controls to be used during the course of this project, including any Subcontractors. Include who will provide invoices and other contract administration duties.  Include who within the business will have prime responsibility and final authority for the work. | | |
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| **A2. STAFF QUALIFICATIONS/EXPERIENCE (SCORED)**  All Bidders/Applicants are **REQUIRED** to identify staff, including Subcontractors, who will be assigned to the potential contract. Indicate responsibilities and qualifications of each staff member and include the amount of time each will be assigned to the project. Resumes are not required as indicated in Section 3.2 Bidder/Applicant Checklist. Any staff substitution MUST have the prior approval of the Agency. | | |
| **STAFF NAME** | **RESPONSIBILITIES & QUALIFICATIONS** | **ESTIMATED**  **TIME ON**  **PROJECT** |
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| **A3. SCHEDULE**  All Bidders/Applicants are **REQUIRED** toprovide a written work plan for how the Scope of Work will be completed. Include estimated timelines, crews, and/or equipment used, and how the firm will deal with unanticipated disruptions to the schedule. This schedule should be described in detail in **EXHIBIT F** – Project Proposal. | | |

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| **B. EXPERIENCE** | | |
| **B1. KNOWLEDGE, SKILLS, AND ABILITIES – REQUIRED (PASS/FAIL)**  All Bidders/Applicants are **REQUIRED** to check each box verifying that their experience meets the required knowledge, skill, or ability identified. | | |
| **CHECK FOR**  **VERIFICATION** | **REQUIRED KNOWLEDGE, SKILLS, AND ABILITIES** | |
| ☐ | Bidder/Applicant has all the required knowledge, skills, and abilities to successfully complete their proposed project within the given time frame. | |
| **B2. EXPERIENCE OF THE BIDDER/APPLICANT (SCORED)**  Describe in detail the experience the Bidder/Applicant and any Subcontractors have in projects similar to the project proposed herein. | | |
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| **C. RELATED INFORMATION (MANDATORY)** | | |
| **C1. TERMINATION FOR DEFAULT (PASS/FAIL)**  HAS THE BIDDER/APPLICANT OR SUBCONTRACTOR HAD A CONTRACT  TERMINATED FOR DEFAULT IN THE LAST FIVE (5) YEARS? ☐ Yes☐ No  Termination for default is defined as notice to stop work due to the Bidder’s/Applicant’s nonperformance or poor performance and the issue of performance was either a) not litigated due to inaction on the part of the Bidder/Applicant or b) litigated and such litigation determined that the Bidder/Applicant was in default. | | |
| If the Bidder/Applicant answered yes above, describe the incident. Submit full details of the terms of default including the other party’s name, address, and phone number. Present the Bidder’s/Applicant’s position on the matter. The Agency will evaluate the facts and may, at its sole discretion, reject the bid, quotation, and/or proposal on the grounds of past experience. | | |
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| **C2. CURRENT/FORMER STATE EMPLOYEE (PASS/FAIL)**  Identify any current or former state employees employed by the state in the past 24 months, currently employed by or on the governing board of the firm or any Subcontractor as of the date of the date of bid, quotation, and/or proposal submittal. Include their position and responsibilities within the Bidder’s/Applicant’s or Subcontractor’s organization. If following a review of this | | |

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| information, it is determined by the Agency that a conflict of interest exists, the Bidder/Applicant may be disqualified from further consideration for the award of a contract. | | | | | | |
| CURRENT/FORMER STATE EMPLOYEE NAME: | |  | | | | |
| AGENCY WHERE CURRENTLY/FORMERLY EMPLOYED: | |  | | | | |
| POSITION HELD: | |  | | | | |
| SEPARATION DATE: | |  | | | | |
| POSITION WITHIN BIDDERS FIRM: | |  | | | | |
| RESPONSIBILITY WITHIN BIDDERS FIRM: | |  | | | | |
| **D. REFERENCES (SCORED)**  Demonstrating reliability, customer service, conflict resolution.  Provide at least **1** reference. By submitting a bid, quotation, and/or proposal, the Bidder/Applicant grants permission to the Agency to contact these references and others, who from the Agency’s perspective, may have pertinent information. Current Agency staff CAN be used as references. | | | | | | |
| BUSINESS REFERENCE NAME: |  | | | | | |
| NAME OF AUTHORIZED CONTACT: |  | | | | | |
| ADDRESS: |  | | | | | |
| CITY: |  | | STATE: |  | ZIP: |  |
| CELL PHONE: |  | | | | | |
| OFFICE PHONE: |  | | | | | |
| E-MAIL: |  | | | | | |
| TIME FRAME OF SERVICES PROVIDED: |  | | | | | |
| DESCRIPTION OF SERVICES PERFORMED: |  | | | | | |
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| BUSINESS REFERENCE NAME: |  | | | | | |
| NAME OF AUTHORIZED CONTACT: |  | | | | | |
| ADDRESS: |  | | | | | |
| CITY: |  | | STATE: |  | ZIP: |  |
| CELL PHONE: |  | | | | | |
| OFFICE PHONE: |  | | | | | |
| E-MAIL: |  | | |  | | |
| TIME FRAME OF SERVICES PROVIDED: |  | | |  | | |
| DESCRIPTION OF SERVICES PERFORMED: |  | | |  | | |
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| NAME OF AUTHORIZED CONTACT: |  | | |  | | |
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| CITY: |  | | STATE: |  | ZIP: |  |
| CELL PHONE: |  | | |  | | |
| OFFICE PHONE: |  | | |  | | |
| E-MAIL: |  | | |  | | |
| TIME FRAME OF SERVICES PROVIDED: |  | | |  | | |
| DESCRIPTION OF SERVICES PERFORMED: |  | | |  | | |

SIGNATURE OF AUTHORIZED PERSON DATE

SIGNED

RETURN FORM TO: APPLICATION COORDINATOR WITH YOUR BID, QUOTATION, AND/OR PROPOSAL AS INDICATED WITHIN.