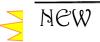


Benefits of the SF 330 Form

- SF 254/255 merged into a single streamlined SF 330 reducing paperwork and manhours to produce
- Expands essential information about qualifications and experience such as the newly required matrix of all
- Facilitates electronic usage by organizing the form in data blocks
- Reflects current architect-engineer disciplines, experience types and technology
- Eliminates information of marginal value such as a list of all offices of a firm

Part 1



ARCHITECT - ENGINEER QUALIFICATIONS

General Information

5a. Has this Joint-Venture previously worked together?

☐ Yes

□ No

neral Information ————————————————————————————————————					
	A. CONTRACT INFORMATION 1. TITLE AND LOCATION (City and State)				
	2. PUBLIC NOTICE DAT	TE	3. SOLICITATION OR PROJECT NUMBER		
STANDARD FORM (SF) 255 Architect-Engineer and Related Services Questionnaire for Specific Project		2a. Commerce Business Daily Announcement Date, if any:	2b. Agency Identification Number, if any:		
2. Firm (or Joint-Venture) Name & Address	3a. N	Name, Title & Telephone Number of Pri	ncipal to Contact	1	
				I THIS CONTRACT	
	3b. <i>A</i>	Address of office to perform work, if diff	erent from Item 3		
Personnel by Discipline: (List each person only once, by primary functions (but the content of the content	inction.) Enter prop	posed consultant personnel to be utilize	d on this project on line (a) and In-		
(A) (B) Architects (A) (B) Estimators (A) (B) Chemical Enginrs (A) (B) Geologists (A) (B) Civil Enginrs (A) (B) Hydrologists (A) (B) Construction Inspct. (A) (B) Interior Designers (A) (B) Draftsmen (A) (B) Landscape Architects (A) (B) Ecologists (A) (B) Mechanical Enginrs	(A) (B) Pla (A) (B) Sal (A) (B) Soi (A) (B) Spe (A) (B) Str (A) (B) Str (A) (B) Sur	ınners: Ürban/Rgnl. (A) (B) Oc nitary Enginrs (A) (B) Ha sils Enginrs (A) (B) En ecifications Writers (A) (B) Na uctural Engineers (A) (B) Tet rveyors (A) (B) Ott	draulic Enginrs ean Enginrs z.Wste Specialists vironmental Specialists val Architect chnical Editor ter		
(A) = Winzler and I (B) = All	Kelly personnel + consu Winzler and Kelly Calif	ultant's personnel for this contract. fornia offices personnel.			
 If submittal is by JOINT-VENTURE- list participating firms and outlin (Attach SF 254 for each if not on file with Procuring Office.) 	ne specific areas o	f responsibility (including administrative	e, technical and financial) for each firm:		
)	
				330 (1/2004) PAGE	

ARCHITECT - ENGINEER QUALIFICATIONS

PART I - CONTRACT-SPECIFIC QUALIFICATIONS

A. CONTRACT INFORMATION

2. PUBLIC NOTICE DATE 3. SOLICITATION OR PROJECT NUMBER

B. ARCHITECT-ENGINEER POINT OF CONTACT

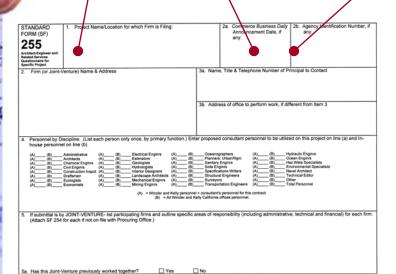
4. NAME AND TYTLE

5. NAME OF FIRM

6. TELEPHONE NUMBER

7. FAX NUMBER

8. E-MAIL ADDRESS



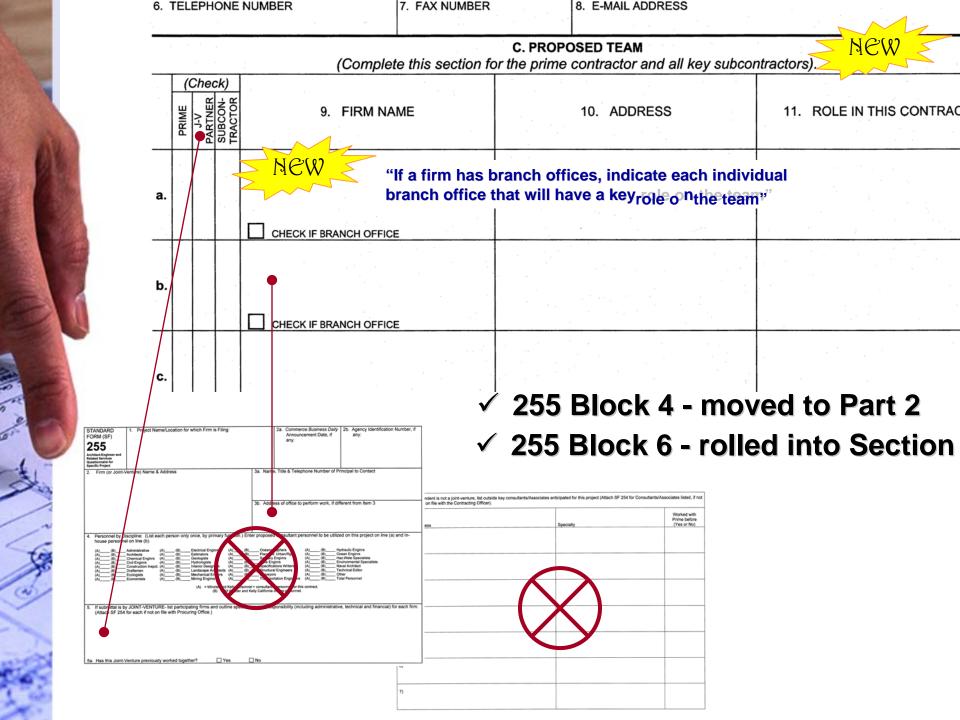
1. TITLE AND LOCATION (City and State)

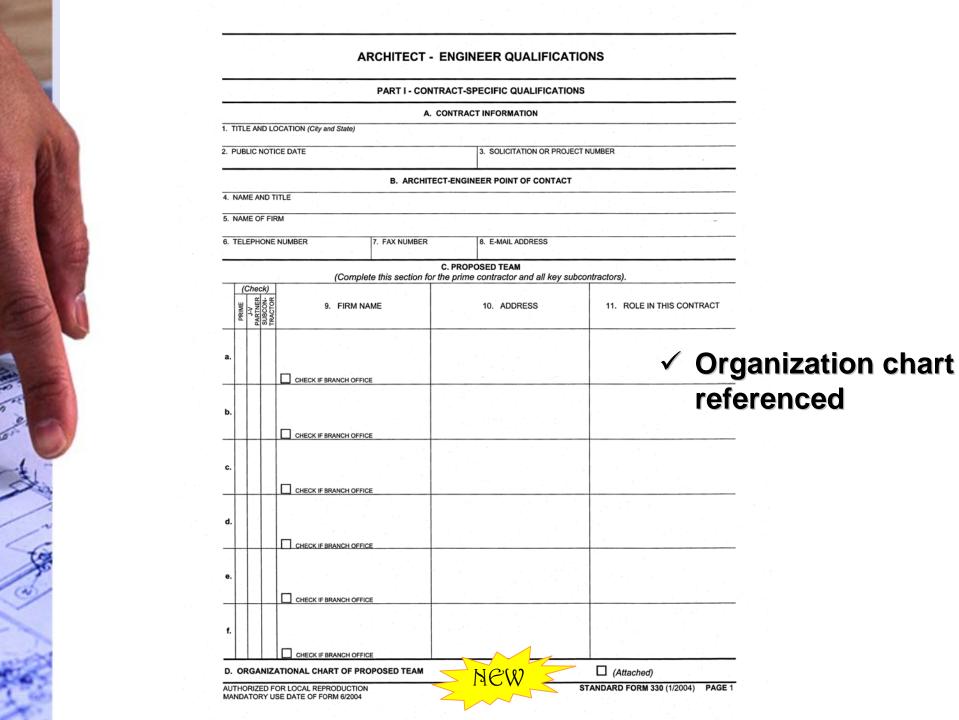
✓ Layout changes

ARCHITECT - ENGINEER QUALIFICATIONS

AKONI	TECT - LINGINGER QUALIFICATIONS
PAR	RT I - CONTRACT-SPECIFIC QUALIFICATIONS
	A. CONTRACT INFORMATION
TITLE AND LOCATION (City and State)	
2. PUBLIC NOTICE DATE	3. SOLICITATION OR PROJECT NUMBER
В.	B. ARCHITECT-ENGINEER POINT OF CONTACT
4. NAME AND TITLE	
5. NAME OF FIRM	
2a. Commerce Business Daily 2b. AgerCy Identification Numb Announcement Date, if any. 2b. AgerCy Identification Numb Announcement Date, if any. 3c. Name, Tible & Feliephone Number of Principal to Contact 3c. Address of office to perform work, if different from Item 3 3c. Address of office to perform work, if different from Item 3 Discipline: (List each person only once, by primary function.) Einter proposed consultant personnel to be utilized on this project on line (a) and Irendiction Intel (b). Administration (A). (B). Electrical Engine (A). (B). Electrical Engine (A). (B). Electrical Engine (A). (B). Parents (Bonfford.). (A). (B). Hydraulic Engine.	✓ Contact information consolidated
Coir Egype (A) (B) epologise (A) (B) epologise (A) (B) spologise (ach firm.

STANDARD FORM (SF) 255





ARCHITECT - ENGINEER QUALIFICATIONS

A. CONTRACT INFORMATION TITLE AND LOCATION (City and State) PUBLIC NOTICE DATE B. ARCHITECT-ENGINEER POINT OF CONTACT	
PUBLIC NOTICE DATE 3. SOLICITATION OR PROJECT NUMBER	
PUBLIC NOTICE DATE 3. SOLICITATION OR PROJECT NUMBER	
P. ADQUITECT ENGINEER POINT OF CONTACT	
B. ARCHITECT-ENGINEER POINT OF CONTACT	
NAME AND TITLE	
NAME OF FIRM	
TELEPHONE NUMBER 7. FAX NUMBER 8. E-MAIL ADDRESS	
C. PROPOSED TEAM	
(Complete this section for the prime contractor and all key subcontractors).	
WIND STATE OF THE	
. CHECK IF BRANCH OFFICE	
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	222
Questions	
CHECK IF BRANCH OFFICE	
D. ORGANIZATIONAL CHART OF PROPOSED TEAM (Attached)	

AUTHORIZED FOR LOCAL REPRODUCTION MANDATORY USE DATE OF FORM 6/2004

STANDARD FORM 330 (1/2004) PAGE 1

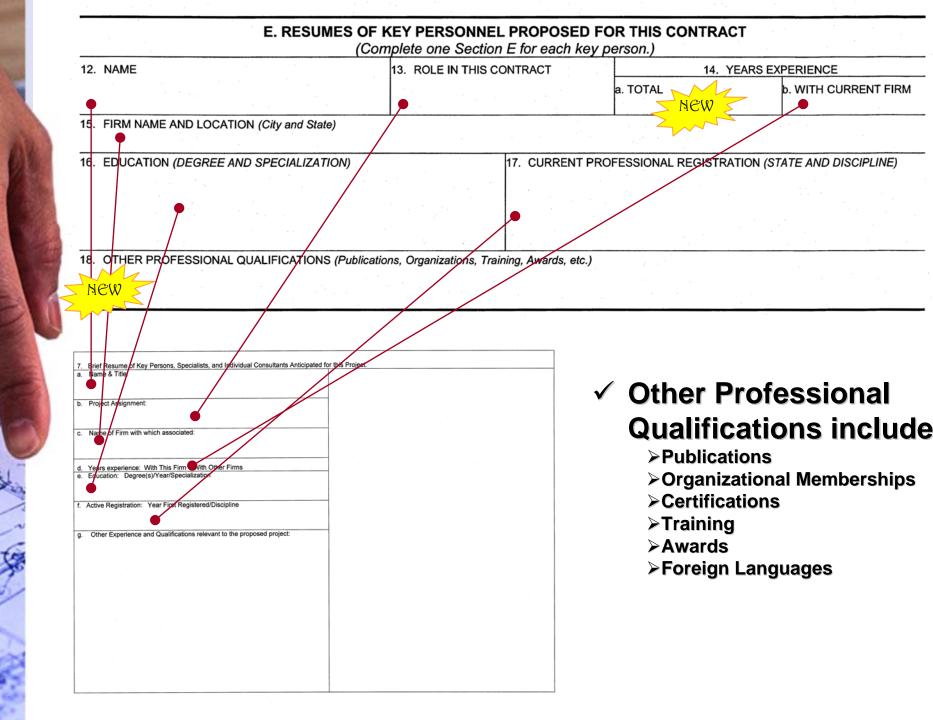
Resumes

New		KEY PERSONNEL PROPOSED FOR THIS CONTRACT mplete one Section E for each key person.)		
14000	13. ROLE IN THIS CONTRACT 14. YEARS EXPERIENCE			
			a. TOTAL	b. WITH CURRENT FIRM
15. FIRM NAME AND LOCAT	ION (City and State)	<u> </u>		

17. CURRENT PROFESSIONAL REGISTRATION (STATE AND DISCIPLINE)

Brief Resume of Key Persons, Specialists, and Individual Consultants Anticipated for	or this Project	
a. Name & Title:	in this Project.	
b. Project Assignment:		/EAR COMPLETED
		ICES CONSTRUCTION (If applicable
c. Name of Firm with which associated:		performed with current firm
d. Years experience: With This Firm With Other Firms		(EAR COMPLETED
e. Education: Degree(s)/Year/Specialization		ICES CONSTRUCTION (If applicable
		performed with current firm
f. Active Registration: Year First Registered/Discipline		
Other Experience and Qualifications relevant to the proposed project:		YEAR COMPLETED
		ICES CONSTRUCTION (If applicable
		performed with current firm
		performed with current limi
		/EAR COMPLETED
		ICES CONSTRUCTION (If applicable
		performed with current firm
		EAR COMPLETED
		/ICES CONSTRUCTION (If applicable
		performed with current firm
		periormed with current firm

16. EDUCATION (DEGREE AND SPECIALIZATION)



	19. RELEVAN	IT PROJECTS	
(1) TITLE AND LOCATION (City and State)			(2) YEAR COMPLETED
		M	PROFESSIONAL SERVICES CONSTRUCTION (If applica
		New	
(3) BRIEF DESCRIPTION (Brief scope, size, co.	st, etc.) AND SPECIFIC ROLE		Check if project performed with current firm
"Provide up to 5 projects in v	which the nerson had	a significant re	ole that demonstrates the
person's capability relevant t	· ·		
(1) TITLE AND LOCATION (City and State)			(2) YEAR COMPLETED
			PROFESSIONAL SERVICES CONSTRUCTION (If application)
		M	"If not complete, leave year completed
(3) BRIEF DESCRIPTION (Brief scope, size, co.	st, etc.) AND SPECIFIC ROLE	Z New Z	blankandpindicaterstatus in brief
			description and specific role"
Name & Title: Project Assignment:	✓ On	ly 5 proj	jects per person
Name of Firm with which associated:			
ears experience: With This Firm With Other Firms	✓ Ca	n use pr	evious experience
dudation: Degree(s)/Year/Specialization		-	-
ctive Registration: Year First Registered/Discipline	as	iong as	box is not checked
Other Experience and Qualifications relevant to the proposed project:	✓ Mu	ıst list ve	ear completed
•		_	
	un	less still	in design or
			•
	COI	nstructio	on

2. NAME	(Complete one Section E for each ke	· · · · · · · · · · · · · · · · · · ·	YEARS EXPERIENCE
and the same	IS. NOLE IN THIS CONTRACT	a. TOTAL	b. WITH CURRENT FIRM
FIRM NAME AND LOCATION (OV			
FIRM NAME AND LOCATION (City and State)			
EDUCATION (DEGREE AND SPECIALIZATION	ON) 17. CURRENT	PROFESSIONAL REGIST	RATION (STATE AND DISCIPLINE)
B. OTHER PROFESSIONAL QUALIFICATIONS	(Publications, Organizations, Training, Awards, etc.	.)	
	19. RELEVANT PROJECTS		
(1) TITLE AND LOCATION (City and State)			YEAR COMPLETED
		PROFESSIONAL SER	RVICES CONSTRUCTION (If applicable
(3) BRIEF DESCRIPTION (Brief scope, size, o		Charle if a series	1
(3) BRIEF DESCRIPTION (Brief scope, size, of	ost, etc.) AND SPECIFIC ROLE	Check if projec	t performed with current firm
the second of the second			
(1) TITLE AND LOCATION (City and State)		(2)	YEAR COMPLETED
(1) THE AND ESSATISITY (SILY UND STUDY			RVICES CONSTRUCTION (If applicable
(3) BRIEF DESCRIPTION (Brief scope, size,	cost, etc.) AND SPECIFIC ROLE	Check if project	t performed with current firm
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The second second			
(1) TITLE AND LOCATION (City and State)			YEAR COMPLETED
		PROFESSIONAL SER	VICES CONSTRUCTION (If applicable
(3) BRIEF DESCRIPTION (Brief scope, size,	ost, etc.) AND SPECIFIC ROLE	Check if projec	t performed with current firm
(A) TITLE AND LOCKTON (C)			VELD COURSETES
(1) TITLE AND LOCATION (City and State)			YEAR COMPLETED RVICES CONSTRUCTION (If applicable)
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(3) BRIEF DESCRIPTION (Brief scope, size,	cost. etc.) AND SPECIFIC ROLF	Check if project	t performed with current
i. C., State Second Horizon Scope, Size, C	in the state of th		performed with current im
		QUI	
(1) TITLE AND LOCATION (City and State)			
(1) TITLE AND LOCATION (City and State)		(2)	YEAR COMPLETED RVICES CONSTRUCTION (If applicable
(1) TITLE AND LOCATION (City and State)		(2)	YEAR COMPLETED
(2) PDIES DESCRIPTION (2)	cost, etc.) AND SPECIFIC ROLE	PROFESSIONAL SER	YEAR COMPLETED
	cost, etc.) AND SPECIFIC ROLE	PROFESSIONAL SER	YEAR COMPLETED RVICES CONSTRUCTION (If applicable
(9) PDIFF PEROPURION OF A CONTROL OF A CONTRO	cost, etc.) AND SPECIFIC ROLE	PROFESSIONAL SER	YEAR COMPLETED RVICES CONSTRUCTION (If applicable
(9) PDIFF PEROPURION OF A CONTROL OF A CONTRO	cost, etc.) AND SPECIFIC ROLE	PROFESSIONAL SER	YEAR COMPLETED RVICES CONSTRUCTION (If applicable

Project Pages



F. EXAMPLE PROJECTS WHICH BEST ILLUSTRATE PROPOSED TEAM'S QUALIFICATIONS FOR THIS CONTRACT

(Present as many projects as requ	estea by tne agency	, or 10 projects,	if not specified
Complete or	e Section F for each	n project.)	

21. TITLE AND LOCATION (City and State)

22. YEAR COMPLETED PROFESSIONAL SERVICES CONSTRUCTION (if applicable)

20. EXAMPLE PROJECT KEY

NUMBER

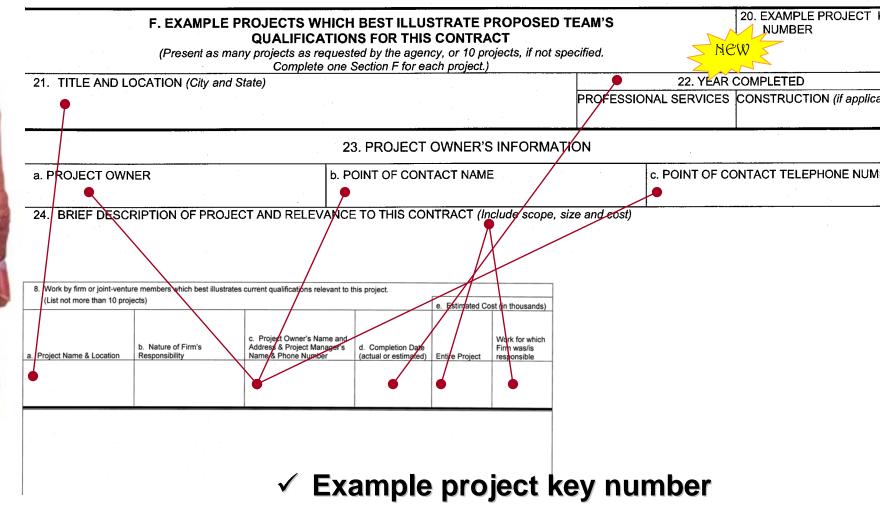
23. PROJECT OWNER'S INFORMATION

a. PROJECT OWNER b. POINT OF CONTACT NAME c. POINT OF CONTACT TELEPHONE NUMBER

24. BRIEF DESCRIPTION OF PROJECT AND RELEVANCE TO THIS CONTRACT (Include scope, size and cost)

Work by firm or joint-venture members which to (List not more than 10 projects)			
a. Project Name & Location	b. Nature of Firm Responsibility		
	,		

(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE



 Dates for professional services as well as construction completion

(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
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(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE

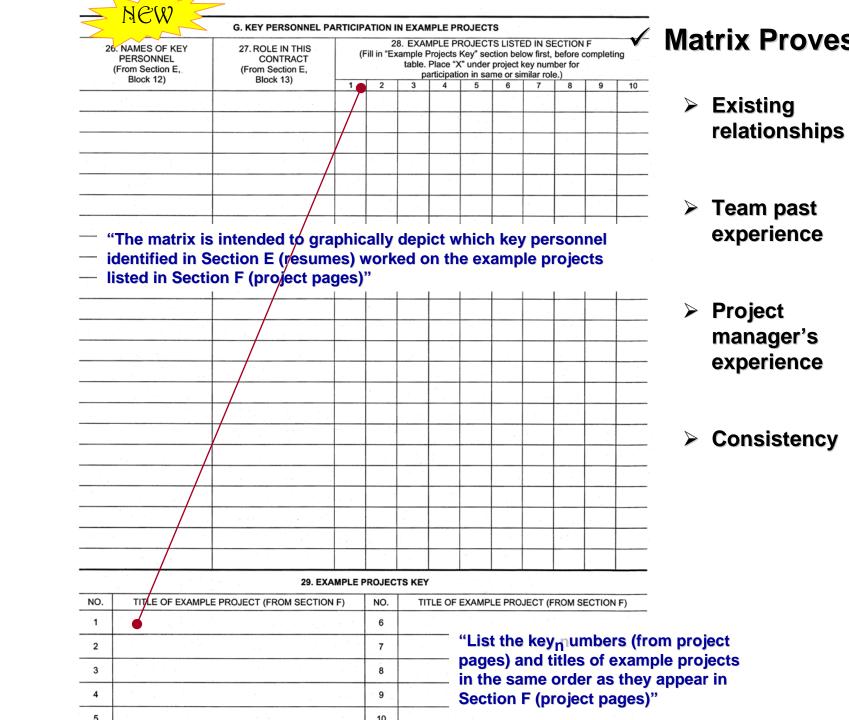
- ✓ Proof of teaming arrangements and past experience with subconsultants listed in proposal
- ✓ Only subconsultants that worked on the project and are on team should be listed
- ✓ May limit outreach, new teaming opportunities

F. EXAMPLE PROJECTS WHICH BEST ILLUSTRATE PROPOSED TEAM'S QUALIFICATIONS FOR THIS CONTRACT (Present as many projects as requested by the agency, or 10 projects, if not specified. Complete one Section F for each project.) 21. TITLE AND LOCATION (City and State) PROFESSIONAL SERVICES CONSTRUCTION (if applicable) 23. PROJECT OWNER'S INFORMATION a. PROJECT OWNER b. POINT OF CONTACT NAME c. POINT OF CONTACT TELEPHONE NUMBER 24. BRIEF DESCRIPTION OF PROJECT AND RELEVANCE TO THIS CONTRACT (Include scope, size and cost) **Questions???**

20. EXAMPLE PROJECT KEY NUMBER 22. YEAR COMPLETED

	4	22	

	(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
а.			
	(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
b.			
	(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
С.			
	(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
d.			
	(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
θ.			
	(1) FIRM NAME	(2) FIRM LOCATION (City and State)	(3) ROLE
f.			

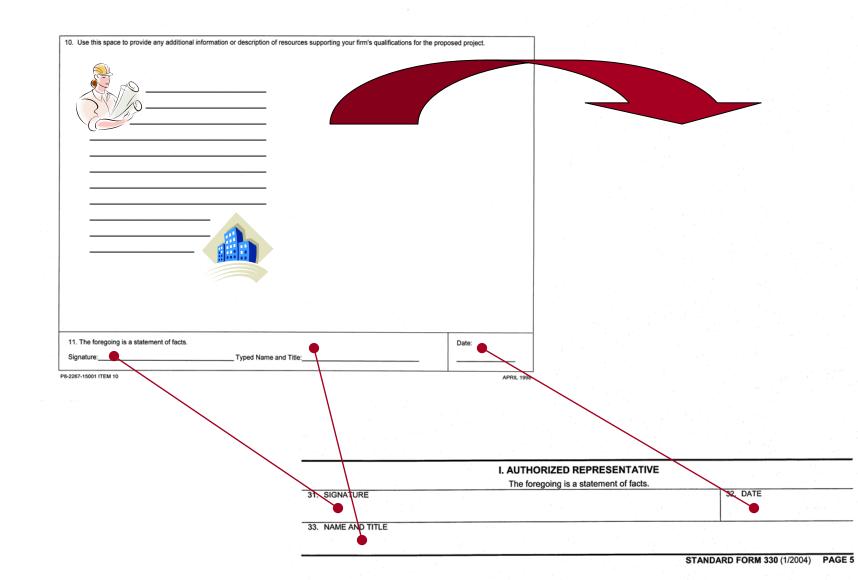


		G. KEY PERSONNEL PA	ARTICIPA						ED IN S	CTION	ı F	·			
Access to the second	26. NAMES OF KEY PERSONNEL (From Section E,	27. ROLE IN THIS CONTRACT (From Section E,	(Fi		ample F table.	Projects Place ">	Key" se (" unde	ection be r project	low first, key num milar rol	before of the ber for		ng			
	Block 12)	Block 13)	1	2	3	4	5	6	7	8	9	10			
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700		29. EXA	MPLE P	ROJEC	IS KEY	,									
(4)	NO. TITLE OF EXAMPLE	E PROJECT (FROM SECTION	1 F)	NO.	TIT	TLE OF	EXAMF	PLE PRO	JECT (F	ROM S	ECTION	IF)			
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	2			7					, field						
HEED!	3			8											
	4			9" ,											
Mr. C.	5			10	-		1 to								

H. ADDITIONAL INFORMATION

30. PROVIDE ANY ADDITIONAL INFORMATION REQUESTED BY THE AGENCY. ATTACH ADDITIONAL SHEETS AS NEEDED.

Additional Information



Questions for SF 330 - Part 1

Part 2

General Information

√ 254 is completely replaced

✓ EPC codes replaced with new experience categories (profile codes)

✓ New discipline codes (function codes)

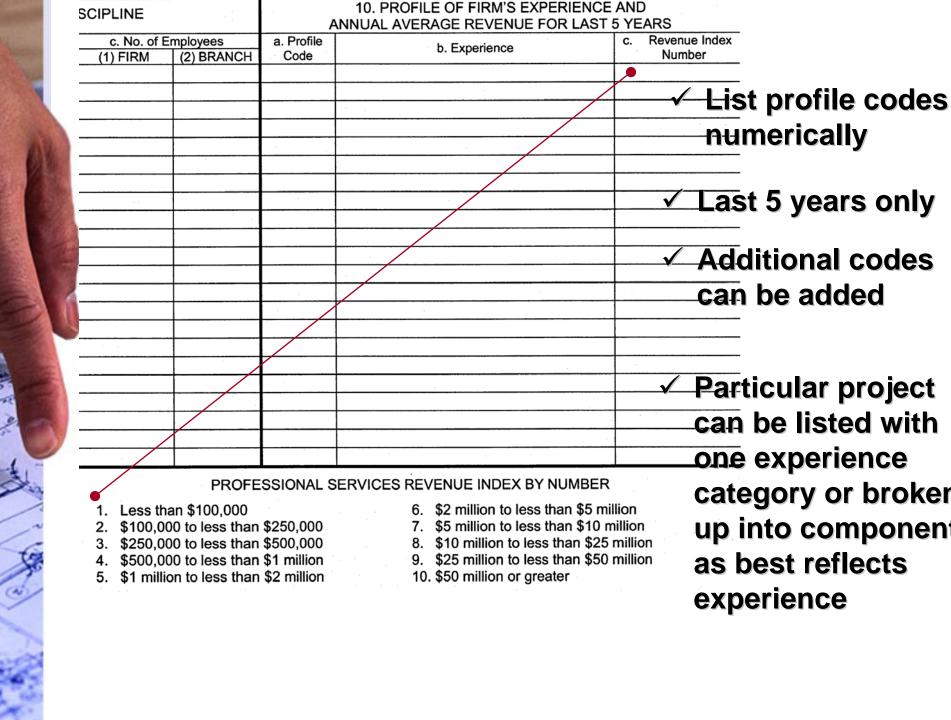
	ARCHITECT-ENG	INEER QU	ALIFICATI	ONS	1. SOLICITATION NUMBER	(Ir any)	
	(If a firm has t			QUALIFICATIO	DNS nch office seeking work.)		
a. FIRM (OF	R BRANCH OFFICE) NAME					4. DUNS NUMBER	
b. STREET		*	 		5. OWN	IERSHIP	
					a. TYPE		
c. CITY			2d. STATE	2e. ZIP CODE	b. SMALL BUSINESS STATU	JS	
a. POINT OF	CONTACT NAME AND TITLE			1	7. NAME OF FIRM (If block	(2a is a branch office)	
b. TELEPHO	ONE NUMBER	6c. EMAIL	ADDRESS		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		
	90 FORME	D EIDM NAME(S)	If anyl		8b. YR. ESTABLISHED	8c. DUNS NUMBER	
	oa. FORME	R FIRM NAME(S) (ii ariy)				
1ew	F EMPLOYEES BY DIS	SCIPLINE		new	F FIRM'S EXPERIE		
ancon	b. Discipline	c. No. of Emp			b. Experience	c. Revenue I	
Code		(1) FIRM (2	BRANCH C	Cod		Number	
-							
				-			
			-				
				·			
	Other Employees Total	-					
11. ANNUA	AVERAGE PROFESSIONAL		PROFESSIO	ONAL SERVICES	REVENUE INDEX BY NUMI	BER	
	ICES REVENUES OF FIRM OR LAST 3 YEARS	1. Less than	\$100.000		6. \$2 million to less than \$	5 million	
	e Index number shown at right)	\$100,000 t	o less than \$250	0,000	7. \$5 million to less than \$10 million 8. \$10 million to less than \$25 million 9. \$25 million to less than \$50 million		
a. Federal W	'ork		o less than \$500 o less than \$1 n				
b. Non-Fede		5. \$1 million t	o less than \$2 n	nillion	10. \$50 million or greater		
c. Total Wor	rk						
			AUTHORIZED RI ne foregoing is a s	EPRESENTATIVE tatement of facts.			
a. SIGNATU	IRE		io ioregoning is a s	tatoment of facts.	b. DATE		
c. NAME AN	ID TITLE						
" INVINE AL	D IIILE						

ARCHITECT-ENGINE	EER QUALIFICATIONS	SOLICITATION NUMBER (If any)
C(8)	PART II - GENERAL QUALIFICATION of the offices, complete for each specific branch	
2a. FIRM (OR BRANCH OFFICE) NAME		3. YEAR ESTABLISHED 4. DUNS NUMBER
2b. STREET		5. OWNERSHIP
		a. TYPE
2c. CITY	2d. STATE 2e. ZIP CODE	b. SMALL BUSINESS STATUS
6a. POINT OF CONTACT NAME AND TITLE		7. NAME OF FIRM (If block 2a is a branch office)
6b. TELEPHONE NUMBER	6c. EMAIL ADDRESS	
8a. FORMER FIF	RM NAME(S) (If any)	8b. YR. ESTABLISHED 8c. DUNS NUMBER

- ✓ If multiple offices submitting, one per office is required
- ✓ Subconsultant must prepared a Part II for each submittal

	9. EMPLOYEES BY I	DISCIPLINE	
a. Function Code	b. Discipline	c. No. of E	Employees
Code		(1) FIRM	(2) BRANCH
·		<u> </u>	
		 	
			-
	<u> </u>		
	Other Employees		
	Total		

- ✓ List function codes numerically
- √ 20 codes (max)
- ✓ Additional disciplines can be added
- ✓ Each person
 counted only once
 (multiple disciplines need to
 have primary)
- ✓ Can be completed for company or branch office



a. SIGNATURE		The foregoing is	a statement of facts.	b. DATE	
c. NAME AND TITLE		<u> </u>			
AUTUODIZED EOD LO	CAL REPRODUCTION			STANDARD FORM	330 (1/2004) PAGE
	TE OF FORM 6/2004				
MANDATORY USE DAT	TE OF FORM 6/2004				
	TE OF FORM 6/2004			Povonuo fa	r firm for
	TE OF FORM 6/2004		_	Revenue fo	

a

				SOLICITATION NUM	BER (If any)	
ARCHITECT-EN	GINEER (QUALIFIC	ATIONS			
			RAL QUALIFICA			
(If a firm has a. FIRM (OR BRANCH OFFICE) NAME	branch office	es, complete i	for each specific	branch office seeking work 3. YEAR ESTABLISHED		
b. STREET						
J. OHLLI					OWNERSHIP	
				a. TYPE	, ,	-
c. CITY		2d. STAT	E 2e. ZIP COD	b. SMALL BUSINESS ST	ATUS	
a. POINT OF CONTACT NAME AND TITLE	7 7			7. NAME OF FIRM (If E	olock 2a is a branch office)	
b. TELEPHONE NUMBER	6c. El	MAIL ADDRESS				
8a. FORM	ER FIRM NAME	(S) (If any)		8b. YR. ESTABLISHED	8c. DUNS NUMBER	
9. EMPLOYEES BY D	ISCIPLINE	-:		. PROFILE OF FIRM'S EXPE		•
a. Function b. Discipline	c. No. of	Employees	a. Profile	AL AVERAGE REVENUE FOR b. Experience	c. Revenue Index	
Code U. Discipline	(1) FIRM	(2) BRANCH	Code		Number	
				-		
						•
						•
						•
						ns??
		-				
						•
Other Employees						•
Total						
11. ANNUAL AVERAGE PROFESSIONAL SERVICES REVENUES OF FIRM FOR LAST 3 YEARS (Insert revenue Index number shown at right)	2. \$100,0	nan \$100,000 000 to less than	\$250,000	6. \$2 million to less tha 7. \$5 million to less tha	n \$5 million n \$10 million	
a. Federal Work		000 to less than 000 to less than		 \$10 million to less the \$25 million to less the 		
b. Non-Federal Work c. Total Work	5. \$1 mill	ion to less than	\$2 million	10. \$50 million or greate	er -	
		12. AUTHORIZ	ED REPRESENTAT	IVE		•*. *
. SIGNATURE		The foregoing	is a statement of fac	ts. b. DA	TE	
				D. DA		
. NAME AND TITLE						

Submittal Requirements

For As-Needed Rotation Lists

Electronic or Paper Submission of SOQs

- A. Submit:
 - One (1) original paper copy with original signatures,
 - One (1) additional paper copy, and
 - Six (6) electronic (CD) copies.

This new option is a PILOT and not a permanent policy change.

- B. Electronic SOQ copies must be submitted in Adobe (PDF) format, on CD, with secure digital signature(s) on each copy.
- C. For each discipline submit six CDs; each CD must contain one (1) PDF file for one discipline (include sub-discipline, if applicable). The PDF file must be encrypted and secured, and must have the print function enabled. A full version of Adobe Acrobat is necessary to meet these requirements. Each CD must also be signed on the top surface label. Submit your CDs in standard 3/8" jewel cases; see the Illustrated Electronic SOQ for further instructions.

- D. Firms not wishing to submit electronic documents may submit one (1) original paper copy with original signatures and seven (7) paper copies.
- E. Upon review of the SOQ, we may ask for corrections. Therefore, please follow all instructions carefully. If you are required to make corrections, we will ask you to provide a new set of SOQs.
- F. Disciplines requiring further review and rating by the Consultant Nominating Committee may require firms to submit additional (up to 8) paper copies. These paper copies <u>must</u> be exact copies of the original SOQ. Any submittal that is found not to be an exact copy may be rejected for non-responsiveness. That firm's SOQ may not be sent to the CNC and may be denied placement on the Consultant Rotation List. SOQs shall be stapled, not bound. Neither plastic covers nor dividers are acceptable as part of your Statement of Qualifications. Submittal envelopes and boxes <u>must</u> be marked on the outside with the name of the discipline and either the word "Large" or the word "Small."