SELECTION CRITERIA (ATTACHMENT A)

{The selection criteria should be developed to focus on the specific needs of the project. Several examples are provided below but they are not an exhaustive list of such criteria.}

Design ability. Ability as it can be evaluated by examination of the functional, technical, economic, and aesthetic qualities of projects done for the University or other clients.

Research potential. Capability to undertake appropriate research to resolve design problems specific to the needs of the program or project under consideration.

Program responsiveness. Previous experience that demonstrates success in completing projects consistent with program schedule, budget, and technical requirements, and that indicates the ability to complete the proposed project in a manner that is responsive to the specifics of the program.

Evaluation of engineering consultants proposed to be employed. Previous experience with special engineering requirements appropriate to the project under consideration with evidence or expression that appropriate consulting advice can be obtained as required.

Production capability. Evidence of ability to perform all design phases of the work, to produce construction documents of superior quality and to meet the completion schedule for each phase.

Coordination and supervision. Evidence of ability to provide efficient and comprehensive project management during the construction phase of the project, including review of shop drawings and other requirement submittals, substitution requests, prompt resolution of claims, technical direction of the University's and the design professional's inspectors, technical supervision of the work, and prompt decision-making; and enforcement of the provisions of contract documents.

Proximity to the project location, or willingness to establish a local office.

Client relationships. Recognition of the need to work harmoniously with administrative and academic staff.

Management. Ability to manage complex projects and effectively coordinate with the University and other participants.

Experience. Experience in the preparation of LRDPs and specialized experience in the development of LRDPs for the University.

License Requirements. The services require the following license {PROVIDE SPECIFIC REQUIREMENTS}

Equal Opportunity. The commitment of the University to equal opportunity applies to the selection of consultants.
# UNIVERSITY OF CALIFORNIA CONSULTANT EXPERIENCE FORM

<table>
<thead>
<tr>
<th>Campus:</th>
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<tbody>
<tr>
<td>Project:</td>
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**Specialty** (include information for all specialties & consultants on proposed design team)  
*Note which is Prime Consultant*

<table>
<thead>
<tr>
<th>Consultant/Firm</th>
<th>Active UC projects - campus/project (list all for each firm)</th>
<th>Claims* or litigation (Yes** or No)</th>
<th>All UC projects within last 5 years - campus/project (list all for each firm)</th>
<th>Claims* or litigation? (Yes** or No)</th>
<th>All other projects with any claims* - active &amp; past 5 years (list all for each firm)</th>
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<tbody>
<tr>
<td>Architect</td>
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<tr>
<td>Mechanical Engineer</td>
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<td>Structural Engineer</td>
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<td>Lab Consultant</td>
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<td>Electrical</td>
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<tr>
<td>Civil</td>
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<tr>
<td>Other Consultants (list all)</td>
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</table>

The information provided on this experience form was prepared the office of the prime consultant listed above, who verifies under penalty of perjury that all information set forth on this form, to the best of my knowledge, is complete and accurate as of the date of submission of the Statement of Qualifications.

(Date) ______________________ (Signature) ______________________

* Attach additional pages if necessary for any category

** Claims includes all pending, unresolved claims of professional negligence or breach of contract for professional services against your firm or any owner or principal of your firm.

** If yes, explain

(Name) ______________________  (Title) ______________________
STATEMENT OF QUALIFICATIONS (ATTACHMENT B)

Firm Name: ________________________________________________________________

Business Address: __________________________________________________________

Firm Established: (Year) _______ Telephone: ________________________________

Type of Organization: (Check one)

a. Sole Proprietorship ( ) b. Partnership ( ) c. Corporation ( ) d. Joint Venture ( )

If a sole proprietorship or partnership provide the required information for each Principal (P) and Associates (A) to be utilized on the project: (Check “P” or “A” for each) If a corporation, provide the names of the corporate officer responsible and the required information on each principal employee to be assigned to the project.

NAME  P  A  DEGREE OR CERTIFICATION  INSTITUTION

a. __________________________________________
   b. __________________________________________
   c. __________________________________________
   d. __________________________________________

Average staff employed in home office: (Average of past 5 years)

   a. Architects  
   b. Engineers  
   c. Landscape Architects  
   d. Interior Designers  
   e. Drafting Technicians  
   f. Clerical  
   g. Other  

List 5 major projects within past 5 years that indicate your experience with similar projects:

PROJECT  OWNER  YEAR  BUILDING COST (IF APPLICABLE)

a. __________________________________________
   b. __________________________________________
   c. __________________________________________
   d. __________________________________________
   e. __________________________________________
References:

a. 

b. 

c. 

-----------------------------------------------------------------------------------------------
By: 

Date: 

Please attach to this form any other information you wish us to consider, such as your firm's brochure or a discussion of your recent work.

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STATEMENT OF PRICING INFORMATION (ATTACHMENT C)

{The Facility may request that pricing information be submitted with the Statement of Qualifications. This may be appropriate when

1. The services to be provided will be paid at the published hourly or daily rate basis
2. Hourly rates are to be utilized in pricing additional services when the basic services to be acquired are to be performed are for architectural, landscape architectural, engineering, environmental, or land surveying services.
3. A request for a fee proposal when the consultant services to be performed are not those listed in the preceding paragraph.
4. If the contract will be for both types of services the Facility may elect to request a fee proposal for those services not listed in paragraph 1.
5. There is a need to commence negotiations immediately in order to commence services. However, the fee proposal shall not be used to determine the most qualified applicant.
6. Other circumstances that dictate a need to request pricing information at the time the Statement of Qualifications is submitted.}

NOTE: THE CONSULTANT REPRESENTS BY THE SUBMISSION OF THE RATES BELOW THAT THEY ARE NOT HIGHER THAN THE RATES IT CHARGES FOR THE SAME OR SIMILAR SERVICES WHEN PROVIDING SUCH SERVICES TO ITS MOST FAVORED CUSTOMERS AND THAT SUCH RATES DO NOT EXCEED THOSE CHARGED TO ANY OTHER GOVERNMENT ENTITY.

{INSERT REQUESTED INFORMATION E.G. CATEGORY [ SURVEYOR, ENVIRONMENTAL CONSULTANT, SCHEDULE CONSULTANT, ETC.]

CATEGORY        HOURLY RATE         DAILY RATES ETC.}

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