**Attachment I**

**Evaluation Criteria Summary Table**

*Respondents not providing a response to each of the criteria listed in this solicitation may be considered non-responsive and ineligible for consideration.*

*Additional pages outside of what is provided under the Response Format and Page Limits Columns will not be evaluated. Available as a Word documents on the website.*

| **EvaluationCriteria** | **Points** | **Description** | **Response Format and Page Limits** | **Submission Reminders**  |
| --- | --- | --- | --- | --- |
| **Team Experience and Qualifications** | **20 pts** | 1. Respondent shall provide an organizational chart identifying:
* All proposed key team members to include Respondent’s personnel, as well as key sub-consultants who will work on the project
	+ Key team members should include, at a minimum, the Project Manager, Cost Estimator, Quality Assurance and Quality Control Review lead and technical reviewers, and all Design Team Leads.
 | **One (1) page** | * Ensure sub-consultants identified match those listed on the Good Faith Effort Plan
* Ensure key personnel identified are included in the org chart
 |
|  |  | * Percentage of time each key team member will be committed to the Project, as well as their role
 |  |  |
| 1. Provide resumes for the following key personnel only: (including sub-consultants as necessary) Project Manager, Cost Estimator, Quality Assurance and Quality Control Leader and Reviewers, Design Team Leader(s). Resumes for Design Team Leader(s) are limited to no more than three (3) regardless of the number of Design Team Leads. The Project Manager’s resume should be included first. Team members resumes should include the following:
* Name, title, education
* Description of professional qualifications (to include licenses, certifications, and associations)
* Brief overview of professional experience
* Identify three (3) projects and provide a detailed description of capabilities and project experience and role in project relevant to the Scope of Services requested within this RFQ
* List of all active projects the team member is currently assigned to for the duration of the Project, to include the phase and percentage of time allocated to each of the other projects.
 | **Eight (8) page limit.**  | * Key personnel resumes should not include an exhaustive list of projects, but should focus on projects that are relevant to the scope of services within this RFQ to include their role
 |
| 1. Using the Sub-Consultant table within the Evaluation Criteria form, describe your firm’s most relevant experience, as well as the Respondent’ sub consultants role in performing work as it relates to the Scope of Services identified within this RFQ.
 | **Use table provided.** No additional narrative is required | * Use experience relevant to the scope
 |
| **Similar Projectsand PastPerformance** | **25 pts** | 1. Complete the Project table provided within the Evaluation Criteria forms identify five (5) relevant projects, of similar size and scope to the Scope of Services & Additional Requirements identified within this RFQ that were **completed** within the past five (5) years. Identify key personnel, who are part of the proposed team, and their roles and responsibilities for at least three (3) of the five (5) projects.

• SAWS may take into account previous work performed by the Respondent on any project, including but not limited to SAWS’ projects, projects that the Respondent provides as references, and any other projects that SAWS has been a participant (i.e., City of San Antonio projects) | **Use project table provided.** No additional narrative is required. | * Similar projects are considered wastewater/ water projects of similar scope, pipe diameter and contract value
* A minimum of three (3) of the projects identified were performed by Respondent
* Ensure contact information for references is correct and up to date
 |
| 1. Using the table within the Evaluation Criteria form, provide information for the three (3) completed projects submitted in section 1) of this criteria, as well as three (3) additional projects, as it relates to the accuracy of the Opinions of Probable Construction Cost (OPCC) and change orders, comparing the 100% design phase estimate to approved construction awards.
 | **Use table provided.** No additional narrative is required | * Three (3) of five (5) projects provided are to be performed by the Respondent, not sub-consultants.
 |
| **Work OrderApproach** | **30 pts** | 1. Describe the team’s approach to quickly understand the scope and complete the work orders, to include managing risk between design related issues, coordination with other governmental/non-governmental agencies and constructability as well as maintaining the schedule and overall project budget.
 | **Narrative. Six (6) page limit** | * Responses to this criteria should clearly demonstrate Respondent’s familiarity with the Scope of Services identified within this RFQ**.**
 |
| 1. Identify Respondent’s team’s suggested alternative innovative approaches to accomplishing the scope of services identified within this RFQ that would result in a more successful and timely completion of the Work Order.
 |
| 1. Describe Respondent’s team’s approach to preparing deliverables to meet deadlines associated with fast track schedules without compromise to quality. Include schedule risks and mitigation measures, schedule recovery approach and other issues relative to schedule maintenance on similar projects
 |
| **Quality Management/Quality Control Plan** | **10 pts** | Describe Respondent’s Quality Control Plan (QCP) plan for this project. Include the following:* Overview of the QCP process for this project, the independent technical review team and their roles
* Plan for how design issues will be identified, tracked and resolved.
* How the independent quality review team will confirm design documents will result in project that is biddable, constructible, operable, maintainable, permittable and cost effective.
* QCP schedule
* Respondent’s role compared to SAWS’ role
* Approach to becoming familiar with local construction practices and requirements, standard products and material costs, local and regional market conditions, and the conditions (i.e. environmental, regulatory, etc.) influencing design and construction decisions for each project
* How the accuracy and completeness of independent cost estimates are derived for each of the design phase of the project.
 | **Narrative. Two (2) pages** | * Responses to this criteria should clearly demonstrate Respondent’s familiarity with the Scope of Services identified within this RFQ**.**
 |
| **Small, Minority, and Woman,owned (SMWB)BusinessParticipation.** | **15 pts** | Complete Exhibit B indicating Respondent’s commitment to SAWS’ SMWB policy, which will be based on meeting or exceeding the minimum SMWB goal of 25%. All sub-consultants should be included on this form, regardless of their SMWB status (both SMWB and non-SMWB). | **ExhibitB**  | * Ensure sub-consultants listed on the org chart are included on the GFEP
 |

**Attachment II**

**Evaluation Criteria Forms: Team Experience and Qualifications**

**Sub-Consultant Table**

*When filling out the form below, use only the space provided in this form, unless otherwise indicated. If all fields are not completed, the Respondent is at risk for being rejected due to non-responsiveness. It is not acceptable to indicate “see attached” on this form.*

Using the table, describe the role of the Respondent most relevant experience. Include a description of the role of the sub-consultants the Respondent is proposing and their experience.



|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Respondent’s and ProposedSub-consultants Role on this Project*****(e.g., hydraulic modeling, utility coordination, permitting, electrical engineering, I&C engineering, structural engineering, mechanical engineering, geotechnical engineering, topographic survey, subsurface utility engineering, cost estimating, etc.)*** | **Respondent** | **Sub 1:** | **Sub 2:** | **Sub 3:** | **Sub 4:** | **Sub 5:** | **Sub 6:** | **Sub 7:** | **Sub 8:** |
|  |  |  |  |  |  |  |  |  |  |
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**Attachment III**

**Evaluation Criteria Forms: Similar Projects and Past Performance**

*When filling out the forms below, use only the space provided in this form, unless otherwise indicated. If all fields are not completed, the Respondent is at risk for being rejected due to non-responsiveness. It is not acceptable to indicate “see attached” on this form. Please confirm all reference contact information.*

Provide detailed information for the five (5) completed relevant projects in the last five (5) years in which Respondent has performed services similar to those sought in this RFQ.

**Identify Key Personnel who participated in previous project and are part of the proposed team, and their roles and responsibilities.**

|  |  |
| --- | --- |
| **Project #1 Name:** |  |
| Utility Owner (Name, City, and State): |  |
| Utility Representative Name, Title, and **Current** Contact Information (Phone and Email): | John DoeEngineering Manager(XXX) XXX-XXXXJohn.Doe@XXXXX.org |
| Design Contract NTP: |  |
| Design Duration in Months (from Contract Award to Award of Construction Contract): |  |
| Construction Contract NTP |  |
| Construction Duration in Months (from NTP to Final Completion): |  |
| Construction Contract Value: |  |
| Detailed Project Description: |  |
| Provide an explanation for how this project is similar to the Project within this RFQ |  |
| Key Personnel (to include Personnel Titles and Specific Project Tasks). |  |
| Total Number of Change Orders and Number of Owner-requested Change Orders: |  |

**Attachment III**

**Evaluation Criteria Forms: Similar Projects and Past Performance**

*(continued)*

*When filling out the forms below, use only the space provided in this form, unless otherwise indicated. If all fields are not completed, the Respondent is at risk for being rejected due to non-responsiveness. It is not acceptable to indicate “see attached” on this form. Please confirm all reference contact information.*

Provide detailed information for the five (5) completed relevant projects in the last five (5) years in which Respondent has performed services similar to those sought in this RFQ.

**Identify Key Personnel who participated in previous project and are part of the proposed team, and their roles and responsibilities.**

|  |  |
| --- | --- |
| **Project #2 Name:** |  |
| Utility Owner (Name, City, and State): |  |
| Utility Representative Name, Title, and **Current** Contact Information (Phone and Email): | John DoeEngineering Manager(XXX) XXX-XXXXJohn.Doe@XXXXX.org |
| Design Contract NTP: |  |
| Design Duration in Months (from Contract Award to Award of Construction Contract): |  |
| Construction Contract NTP |  |
| Construction Duration in Months (from NTP to Final Completion): |  |
| Construction Contract Value: |  |
| Detailed Project Description: |  |
| Provide an explanation for how this project is similar to the Project within this RFQ |  |
| Key Personnel (to include Personnel Titles and Specific Project Tasks). |  |
| Total Number of Change Orders and Number of Owner-requested Change Orders: |  |

**Attachment III**

**Evaluation Criteria Forms: Similar Projects and Past Performance**

*(continued)*

*When filling out the forms below, use only the space provided in this form, unless otherwise indicated. If all fields are not completed, the Respondent is at risk for being rejected due to non-responsiveness. It is not acceptable to indicate “see attached” on this form. Please confirm all reference contact information.*

Provide detailed information for the five (5) completed relevant projects in the last five (5) years in which Respondent has performed services similar to those sought in this RFQ.

**Identify Key Personnel who participated in previous project and are part of the proposed team, and their roles and responsibilities.**

|  |  |
| --- | --- |
| **Project #3 Name:** |  |
| Utility Owner (Name, City, and State): |  |
| Utility Representative Name, Title, and **Current** Contact Information (Phone and Email): | John DoeEngineering Manager(XXX) XXX-XXXXJohn.Doe@XXXXX.org |
| Design Contract NTP: |  |
| Design Duration in Months (from Contract Award to Award of Construction Contract): |  |
| Construction Contract NTP |  |
| Construction Duration in Months (from NTP to Final Completion): |  |
| Construction Contract Value: |  |
| Detailed Project Description: |  |
| Provide an explanation for how this project is similar to the Project within this RFQ |  |
| Key Personnel (to include Personnel Titles and Specific Project Tasks). |  |
| Total Number of Change Orders and Number of Owner-requested Change Orders: |  |

**Attachment IV**

**Evaluation Criteria Forms: Similar Projects and Past Performance**

*(continued)*

**Opinion of Probable Construction Cost (OPCC) Table**

Using the table below, provide project cost information for the six (6) completed projects submitted in Similar Projects and Past Performance section, item (2) of the **Attachment I Evaluation Criteria Details and Requirements**, as it relates to the accuracy of the OPCC, comparing the Engineer’s 100% design phase estimate to approved construction contract awards.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Project Name** | **Final Estimate(100% OPCC)** | **Low ResponsibleBidder – ContractAward Value** | **% Differencebetween OPCCand Contract Award** | **NumberofBidders** | **Average of AllOther Bids** | **Total Valueof All ChangeOrders** | **Change Ordersas % of ContractAward** |
| Project 1 | $ | $ | % |  | $ | $ | % |
| Project 2 | $ | $ | % |  | $ | $ | % |
| Project 3 | $ | $ | % |  | $ | $ | % |