

**FLORIDA POLYTECHNIC UNIVERSITY  
PROFESSIONAL QUALIFICATIONS SUPPLEMENT (PQS)  
FEBRUARY 2014**

**GENERAL INSTRUCTIONS:**

1. Submittals are not to exceed twenty (20) double-sided (information on front and back), 8 ½" x 11", sheets with consecutively numbered pages (two pages per sheet, not to exceed a total of 40 numbered pages), including the PQS form dated February 2014, the letter of interest, submittal requirements (in the sections and order as listed in the Submittal Requirements of the Project Fact Sheet and any additional information, but excluding cover sheets, divider sheets (as long as such sheets do not include any promotional material, such as proposal language, pictures of past projects, etc.) and joint venture agreements. Number each page that contains information consecutively.

- The submittals shall have no hard covers, no laminated sheets, and no plastic dividers. Card stock cover sheets and section divider sheets are acceptable.
- The submittals are to be bound with plastic comb binding.
- Submittals must be typed.

**Any submittal exceeding 20 double-sided pages may be penalized.**

2. A portion of the score will be based on the Applicant's ability as demonstrated in the list of projects submitted.
3. The Instructions portion of this PQS form (pages 1-3) need not be included as part of the submittal.
4. This form may be retyped and sections increased in size to provide additional information or pictures, provided that the requested information is provided in the order requested.
5. Where provisions of the University's "Notice to Professional Consultants" are in conflict with these instructions, the provisions in the Notice shall prevail.

**SPECIFIC INSTRUCTIONS FOR COMPLETING THIS PQS SUPPLEMENT:**

**(Note: The numbers on these instructions correspond to the numbered items on the Florida Polytechnic University Professional Qualifications Supplement form (pages 4 through 8). Use additional sheets when necessary, following the format on the Professional Qualifications Supplement.)**

1. **PROJECT INFORMATION:** Enter the discipline as it appears in the public Notice to Professional Consultants in the *"Florida Administrative Weekly"*.
2. **APPLICANT IDENTIFICATION:** Enter the legal name, the address, telephone number and other requested information for the Applicant. If the applying firm has multiple office locations, the applicant is considered to be only the office location where the work is to be done, and whose address is provided in this section, and shall be hereafter referred to as "Applicant". Consider only the specific office listed in response to this question as the "Applicant" when completing all other sections of the Professional Qualifications Supplement. Other branch offices are not to be considered when completing the PQS form. Attach a copy of the Applicant's current Professional License. If the Applicant is a corporation, include a copy of the corporate charter certificate from the Florida Department of State. If the Applicant is an out-of-state corporation, enter the foreign qualification number and provide a copy of the Department of State certificate.

**3. Proof of Applicant's Professional Liability Insurance or General Liability Insurance (if applicable).**

**4. SERVICES TO BE PROVIDED:** For the disciplines listed, note which are being provided as part of Basic Services by entering the name of the firm providing the services and professional license number from the appropriate Florida Licensing Board in the space provided. Use names and license numbers of the firm as a whole, rather than of individuals in the firms. Enter the number of previous projects on which the Applicant has worked with each listed consultant.

**5a. WORK IN PROGRESS:** List each project currently under contract, including contracts as a consultant to another firm. If the Applicant's office is providing services for a contract held by another office location of the same firm, include a representative proportion of fee based on man-hour records.

NOTE: For projects for which the fee is \$20,000 or less, the entry may be combined onto one line.

(Ex.: 3 studies, 4 small projects Fee Remaining = \$84,200.)

- **For all projects**, enter the total amount of fee remaining (unearned), including fees for additional service authorizations, but excluding fees payable to consultants in the "Fees Remaining" column. **Failure to list all work in progress will be penalized.**
- For projects under contract, but on hold for a long or indefinite period of time, enter the amount of fee remaining as described above in the "**On Hold**" column, and provide a letter from the Owner verifying that the project is on hold. Typically projects on hold due to funding issues or projects simply awaiting approvals to proceed into the next phase are not considered to be on hold. If a letter from the Owner is not provided, then that project will be considered to be active, and will be factored into the total Work in Progress amount. Also include projects awarded to the Applicant firm, but not yet under contract in this column with an estimated fee amount.

**5b. PROFESSIONAL AND TECHNICAL STAFF, excluding consultants:** Provide the number of permanent staff in each category, and calculate the total. Exclude secretarial and marketing staff, and any staff members whose technical duties comprise less than 70% of their responsibilities. Only employees assigned to the office location identified in response to Question 2 shall be included. If an employee works part-time, or divides his/her work between the Applicant office and another office location, use an appropriate fraction. Provide the name, title, and length of time with the firm, and city of residence for each individual included in the Total Professional and Technical Staff on an attachment in the format provided.

**5c. FEE PER PERSON:** Conduct the required calculation.

**6. RELATED EXPERIENCE:** List up to ten minor projects of a comparable type, size and complexity, accomplished by the Applicant. Do not list more than ten projects. **DO NOT LIST PROJECTS ACCOMPLISHED BY ANOTHER BRANCH OFFICE, UNLESS AN INDIVIDUAL ON THIS PROJECT TEAM WAS INVOLVED IN THE PROJECT.** Provide the requested information regarding each project: public or private client; completion date (actual or anticipated); project location; and, construction cost (or fee amount if the project was a study). In the shaded areas, list individual members of the team proposed for these projects, including consultants, who were involved on the listed project and their role in that project. Provide the information in the format provided on this PQS form: do not attach a project list on any other agency's form.

For the column headed "**Role in Project**", enter the following:

- "**Principal**" if the project was accomplished by the "Applicant" firm office location identified in response to Question 2 (if the project was done by a different office location, refer to "IE" below);

- **"Consultant"** if the project was accomplished as a consultant to another firm; and,
  - **"IE"** (individual experience) if the project represents experience of an individual on the Project Team while working for another firm or of another branch of the Applicant firm (in such cases, identify the individual by name and indicate what role the individual played in the project, e.g., project manager, principal-in-charge, project architect, etc.).
7. **PROPOSED PROJECT TEAM:** List by name the key members of the proposed team to be assigned to various projects per discipline as assigned by Florida Polytechnic University for the Applicant. If categories are not applicable, so note. For "Other Key Members," insert their titles inside the parentheses. For all individuals listed, note their license number, the disciplines of registration/training and cities of residence; and attach résumés.
8. **REFERENCES:** For the projects listed in response to Question No. 8, provide the project name, the Owner, and the name and telephone number **and e-mail address** of the Owner's representative. Provide the estimated or actual information for the "Completion Date" and "Construction Cost" columns. References for consultants may be requested at the option of the selection committee.
9. **SIGNATURE:** Sign and date the form. Type the name and title of the officer or principal of the firm who signs the form. **Forms must be signed by the Applicant's authorized individual.**

**(NOTE: Signature indicates that the information provided on the PQS form is accurate and in accordance with the PQS instructions (pages 1-3). Signature also indicates Applicant's profession, and that Applicant has not been disqualified from applying for state work under suspension resulting from conviction of any public entity crime as described in Section 287.133, F.S. Information submitted is subject to the Laws of Perjury as stated in Chapter 837, Florida Statutes. Signature further denotes the Applicant's agreement that if information contained in the PQS is found to be false, the Applicant may be disqualified from applying for University work for up to three years.)**

**FLORIDA POLYTECHNIC UNIVERSITY  
PROFESSIONAL QUALIFICATIONS SUPPLEMENT – FEBRUARY 2014**

1. FPU PROJECT   N/A   PROJECT NAME:   CONTINUING PROFESSIONAL SERVICES  

2. APPLICANT COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ ZIP: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_ FAX NO: \_\_\_\_\_

FEDERAL I.D. NUMBER: \_\_\_\_\_ PROF. LICENSE NO. \_\_\_\_\_ FLA. CORP. CHARTER NUMBER: \_\_\_\_\_

APPLICANT CONTACT NAME: \_\_\_\_\_ APPLICANT E-MAIL ADDRESS: \_\_\_\_\_

3. **PROFESSIONAL LIABILITY INSURANCE AND/OR GENERAL LIABILITY INSURANCE (AS APPLICABLE)**

**PROOF OF PROFESSIONAL LIABILITY INSURANCE:**

\_\_\_\_\_  
Carrier Limits Expiration Date Certificate Number

**PROOF OF GENERAL LIABILITY INSURANCE:**

\_\_\_\_\_  
Carrier Limits Expiration Date Certificate Number

4. SERVICES TO BE PROVIDED	CONSULTANT NAME/REGISTRATION NO., If applicable	# OF PROJECTS W/CONSULTANT

**FLORIDA POLYTECHNIC UNIVERSITY  
PROFESSIONAL QUALIFICATIONS SUPPLEMENT – FEBRUARY 2014**

5a. WORK IN PROGRESS		
PROJECTS	Work on Hold (Fee Remaining)	Fee Remaining
TOTAL		

5b. PROFESSIONAL AND TECHNICAL STAFF, EXCLUDING CONSULTANTS	
NUMBER	CATEGORY
	Registered Professionals
	Technical Staff (Graduate Design Professionals, Spec. Writers, Estimators, Interior Designers, Landscape Designers, etc.)
	Drafters (including CADD operators)
	TOTAL PROFESSIONAL AND TECHNICAL PERSONNEL

5c. FEE PER PERSON	
<p align="center">Total Fee (5a) divided by Total Staff (5b)</p> <p align="center">_____ / _____ = _____</p>	<p align="center">Fee Per Person</p>

**(Attach a listing of all permanent employees included in total in 5b using the following format.)**

Name	Title	Time w/Firm	City of Residence

**FLORIDA POLYTECHNIC UNIVERSITY  
PROFESSIONAL QUALIFICATIONS SUPPLEMENT – FEBRUARY 2014**

<b>6. RELATED EXPERIENCE (No more than 10 projects of comparable type, size and complexity)</b>					
In shaded areas for each listed project, list members of the proposed team who worked on that project and describe the extent of their involvement.					
PROJECT	PUBLIC/PRIVATE CLIENT	COMPLETION DATE	LOCATION	CONSTRUCTION COST	ROLE IN PROJECT (see instruct.)
1)					
2)					
3)					
4)					
5)					
6)					
7)					
8)					
9)					
10)					

**FLORIDA POLYTECHNIC UNIVERSITY  
PROFESSIONAL QUALIFICATIONS SUPPLEMENT – FEBRUARY 2014**

<b>7. KEY MEMBERS OF PROPOSED TEAM BY NAME</b>				
<b>ROLE</b>	<b>NAME</b>	<b>Professional Registration #</b>	<b>DISC. OF REG./TRAINING</b>	<b>CITY OF RESIDENCE</b>
Principal-in-Charge				
Project Manager				
Project Professionals				
Project Const. Administrator				
Other Key Member (            )				
Other Key Member (            )				

**FLORIDA POLYTECHNIC UNIVERSITY  
PROFESSIONAL QUALIFICATIONS SUPPLEMENT – FEBRUARY 2014**

**8. REFERENCES – for each project listed in response to Question No.6, provide the following information:**

PROJECT	OWNER	OWNER'S REP. (name & phone no. <b>AND E-MAIL ADDRESS</b> )	COMPLETION DATE	CONSTRUCTION COST
1)				
2)				
3)				
4)				
5)				
6)				
7)				
8)				
9)				
10)				

9. I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE, THE INFORMATION CONTAINED IN THIS PQS IS ACCURATE IN ACCORDANCE WITH THE PQS INSTRUCTIONS WHICH MAKE UP THE FIRST THREE PAGES OF THIS FORM. (Subject to Perjury Laws, Chapter 837, Florida Statutes) I understand that the provision of false information could be cause for my firm's disqualification from applying for other University work for a period of up to three years.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Type Name and Title of Person Signing**

\_\_\_\_\_  
**Date**