Commonwealth of Massachusetts

Department of Housing &

Community Development

Charles D. Baker, Governor ◆ Karyn E. Polito, Lt. Governor ◆ Jennifer Maddox, Undersecretary





**DHCD AE-3 PROJECT SPECIFIC APPLICATION REQUIREMENTS**

Architects and Engineers applying for local housing authority (LHA) projects for which the estimated construction cost exceeds $300,000 or the fee for designer services exceeds $30,000, and which are funded by the Department of Housing & Community Development (DHCD), (whose Designer Selection Committee (DSC) is a part of the Designer Selection Board (DSB) jurisdiction), must file a written “disclosure statement” in accordance with M.G.L. c. 7C, § 48. The statement provides the basis for the DSB informational database and verifies that the designer meets certain general qualification and ownership requirements detailed in M.G.L. c. 7C, § 44 and 48. To help firms meet this requirement, the Designer Selection Board provides an online registration system that can be accessed at:

[**https://dsb-dev.formverse5.com/FORMVERSESERVER-DSB/WebApp/Login.aspx**](https://dsb-dev.formverse5.com/FORMVERSESERVER-DSB/WebApp/Login.aspx)

Firms must register on this platform to submit the required disclosure statement; paper disclosure statement submissions are no longer accepted. As part of applying for a particular project, firms must verify that the information provided remains accurate and up-to-date or, if necessary, submit updated information.

Instructions for first time log in can be found on our webpage at: <https://www.mass.gov/files/documents/2019/12/04/Designer-Selection-Board-Application-Access-Add-New-User.pdf> Once a firm has filed a “disclosure statement” it may apply to LHAs advertising for design services for specific projects by completing DHCD Form AE-3**. The AE-3 form is available on line at** [**www.mass.gov/dhcd**](http://www.mass.gov/dhcd)**.** Interested firms may locate a LHA's advertisement in a local newspaper, a regional newspaper or the Central Register.

The following should be submitted by email **to the advertising Local Housing Authority (LHA):**

1. Submit a PDF copy of the [Application for Designer Services (AE-3)](https://www.mass.gov/doc/ae3-ae-application-requirements-and-form-for-application-1/download) to the Local Housing Authority email address listed in the RFS document. No paper copies will be accepted.
	1. Applications should be accompanied by a concise cover letter that is a maximum of two pages in length. A PDF copy of the cover letter should be attached to each copy of the application.
	2. Applicants may supplement this proposal with graphic materials and photographs that best demonstrate design capabilities of the team proposed for this project. **Limit additional information to a maximum of 6 - 8½”x 11” PDF pages.**
	3. Applicants are advised that professional references are very important in the designer selection process. Outdated or incomplete reference information places the applicant at a distinct disadvantage.  To achieve the best possible chance of being selected, the applicant must ensure that relevant projects appear in the A/E3 form, and must verify the client contact information is current, accurate and that the reference is available for email contact.

**IMPORTANT NOTES TO APPLICANTS**

The mission of the Designer Selection Committee (DSC) is to select the most appropriate firm with the best qualifications for each project. To that end, the DSC thoroughly reviews each application. It is unfortunate when an otherwise very capable firm is disqualified because their project specific A/E Application for Designer Services (DHCD Form AE-3) is incomplete or inappropriately filled-out.

In an effort to improve the quality of the applications and a firm’s chances for selection, applicants should consider the following points when completing the forms.

**Carefully review the requirements in the Request for Services (RFS).** Each RFS describes **­Minimum** qualifications and **Preferred** qualifications. Make sure that each is adequately addressed. Failure to address **Minimum** qualifications will result in a rejection of the application. Failure to adequately address **Preferred** qualifications will result in your firm not being given the consideration it deserves.

**Properly identify the appropriate registered professional that will be responsible for the project.** Part 4 of the application (DHCD Form AE-3) requires the name and title of the Principal-in-Charge with MA registration and discipline. Part 3e requires the name of the proposed Project Manager and MA registration. **Failure to identify the registered professional who will be responsible for the project or identifying an inappropriately registered professional (e.g. an architect instead of an engineer or vice versa) may result in rejection of the application.**

**Identify ALL team members requested in the RFS.** Part J of the RFS may provide a list of specific categories of work for which team members must be identified. **Failure to identify the team member responsible for these categories of work may result in rejection of the application.**

**Provide registration/license numbers.** Part 4 of the application request information on all key persons to be involved on the project. Make sure that all applicable architectural or engineering registration numbers are provided as well as license numbers of other professionals that will be involved (such as Lead Paint Inspectors).

**Examples of project experience should be specific to the project in question.** In part 5 of the application, make sure that the examples listed will demonstrate that the applicant has the experience required for this specific project.

**Sign the application.** In Part 9, the completed form must be signed and dated by an architect or engineer principal of the firm acting as the House Doctor Primary Role – an electronic signature is required.

DSC takes note of the care taken by each applicant in providing the requested information and that the information provided is pertinent to the subject project. Those applicants that are most responsive to the application and RFS requirements will be given the highest consideration by the committee.

**INSTRUCTIONS FOR FILLING OUT THE DHCD FORM AE-3 APPLICATION**

**Purpose:**

These instructions are designed to aid a Designer in completing DHCD Form AE-3, the form to be filed when applying for a specific DHCD-funded project. Responses should be as complete and accurate as possible, contain data relative to the specific project for which you wish to be considered, and should be provided, by the required due date, to the Local Housing Authority (LHA). This form will be used only for the specified project. Do not refer to this submittal in response to other requests or public announcements.

**Definitions:**

**“Principals”** are those individuals in a firm who possess legal responsibility for its management. They may be owners, partners, corporate officers, associates, administrators, etc.

**“Discipline”** as used in this questionnaire, refers to the primary technological capability of individuals in the responding firm. Possession of an academic degree, professional registration, certification, or extensive experience in a particular field of practice normally reflects an individual’s primary technical discipline.

**“Joint Venture**” is a collaborative undertaking by two or more firms or individuals for which the participants are both jointly and individually responsible.

**“Key Persons, Specialists, and Individual Consultants”** as used in this questionnaire, refer to individuals who will have major project responsibility or will provide unusual or unique capabilities for the project under consideration.

**INSTRUCTIONS FOR FILLING APPLICATION:** (Numbers below correspond to numbers contained in the form)

**Part 1 - Overview**

1. Show name, address of the individual or firm, and former name, if any, for the firm which is submitting this form for the solicitation.
2. Provide the date that the firm was established.
3. Provide the Fed ID #.
4. Provide name and title of principal-in-charge who will serve as the point of contact. Be sure to include phone number and email address (required). Such an individual must be empowered to speak for the firm on policy and contractual matters. Massachusetts’s registration is required.

**Part 2 – SDO & Employee Information**

1. Check appropriate boxes indicating if firm is SDO Certified minority business enterprise (MBE), SDO Certified woman business enterprise (WBE), or SDO Certified minority woman business enterprise (M/WBE)
2. Show total number of employees on full time payroll, by discipline, in submitting office. (Average number employed throughout the preceding 6 month period) Indicate numbers of employees with MA Registration for indicated disciplines by including number in brackets. While some personnel may be qualified in several disciplines, each person should be counted only once in accord with his or her primary function. Include clerical personnel as “administrative”.
3. Indicate if the application is a Joint-Venture

**Part 3 - Insurance**

Show the requested information regarding professional liability insurance for the firm:

1. Provide a list of all projects on which monies were paid by you, or on your behalf, as a result of Professional Liability Claims.
2. Name of Sole Proprietor or names of all firm partners and officers.
3. If corporation, provide names of all members of the Board of Directors.
4. Names of all owners (stocks or other ownership).

**Part 4 – Project Organizational Chart and Key Resumes**

Complete the Organizational Chart and Resumes for Key Members of the team. Be sure to list Mass. Registration numbers.

**Part 5 – Prime Consultant Current and Relevant Experience**

List up to five projects that demonstrate the firm’s competence to perform work in the discipline listed in Part 1. The more recent such projects, the better. Prime consideration will be given to projects which illustrate respondent’s capability for performing work similar to that being sought.

**Required information:** (a) Role the Firm played on the project, (b) Project name, Principle-in-Charge, location of project, and brief project description, (c) total construction cost of completed project (or where no construction was involved, the approximate cost of your work) and completion date (actual when available, otherwise estimated), (d) approximate fee the firm received for the project, and (e) name of the owner of that project (if Government agency, indicate responsible office), phone number, and email of individual to contact for reference (preferably the owner's project manager – verify that the contact listed is available through the contact information provided). For purposes of Parts 5, 6 and 7, the following definitions apply: “P” = principal; “C” = consultant; “JV” = joint venture.

**Part 6 – Work with Public Agencies**

Give details of projects for public agencies within the Commonwealth for which the applicant has performed or has entered into a contract to perform design services within the five year period immediately preceding the filing of information required in this section. Only the most recent 5 are required.

**Part 7 – Work with Non-Public Agencies**

Give details for projects for non-public agencies for which the applicant has performed or entered into a contract to perform design services within the five-year period immediately preceding the filing of information required in this section. Only the most recent 5 are required.

**Part 8 – Work by Sub-Consultants that best illustrates current qualifications in the areas in advertisement – 5 Projects per Sub-Consultant**

Give details for projects for work by Sub-Consultants that best illustrates current qualifications in the areas listed in the advertisement. (List up to but not more than 5 projects for each Sub-Consultant.) Additional sheets should be provided only as required for the number of Sub-Consultants requested in the advertisement and they must be in the format provided

**Part 9 SDO Requirements**

1. Please identify how you intend to satisfy the M/WBE requirements set forth in the RFS (Check all that apply). The use of “To Be Determined” or “TBD” or “Not Applicable” or “NA” is not acceptable.

**Part 10 – Certification & Signature**

1. Completed forms should be signed by the architect-engineer principal responsible for the conduct of the work or by the chief executive officer of the joint venture (thereby attesting to the concurrence and commitment of all members of the joint venture).

**ALL INFORMATION CONTAINED IN THE FORM SHOULD BE CURRENT AND FACTUAL.**

All applicants must be Registered and have Declarations on file on the new DSB web application (previously the Master File Brochure, DHCD Form AE-4). Registration must be current (less than 3 months old from the application due date of January 29, 2020). Registration procedures for the DSB web database are located at <https://dsb-dev.formverse5.com/FORMVERSESERVER-DSB/WebApp/Login.aspx>. It is not necessary to submit a copy of the registration, but your application will not be reviewed by the DSC if you have not completed the registration and declaration.

Department of Housing & Community Development, Bureau of Housing Development and Construction - DHCD FORM AE-3 APPLICATION

**Local Housing Authority & Development Number** which work is to be performed:

 Xx Housing Authority / Development: xx

**Brief Description of Work**: Click or tap here to enter text.

**PART 1 - Overview**

**1A. Name of Firm or Joint Venture to Perform Work**: Click or tap here to enter text.

**Former Name** (if any): Click or tap here to enter text.

**Business Address**: Click or tap here to enter text.

**1B. Date Firm was Established**: Click or tap to enter a date. **1C.** **Federal ID**#: Click or tap here to enter text.

**1D. Contact Information**

**Email Address**: Click or tap here to enter text. **Telephone No**.: ( ) - **Fax Number:** ( ) -

**PART 2 – SDO Certification of Prime & Employee Information**

**2A. SDO Certifications** - Place an "X" next to the Certification if your firm is:

[ ]  Minority Business Enterprise [ ]  Woman Business Enterprise [ ]  Minority Woman Business Enterprise

**2B. Personnel by Discipline:** List each person only once by primary function -- average number employed throughout the preceding 6-month period. Indicate both the total number in each discipline and, within brackets, the total number holding Massachusetts registrations.

Administrative 0 ( 0 )

Architects 0 ( 0 )

Acoustical Engineers 0 ( 0 )

Civil Engineers 0 ( 0 )

Construction Inspectors 0 ( 0 )

Drafters 0 ( 0 )

Ecologists 0 ( 0 )

Economists 0 ( 0 )

Electrical Engineers 0 ( 0 )

Energy Specialists 0 ( 0 )

Estimators 0 ( 0 )

Fire Protection Eng. 0 ( 0 )

Industrial Hygienist 0 ( 0 )

Interior Designers 0 ( 0 )

Landscape Architects 0 ( 0 )

Life Safety Code 0 ( 0 )

Licensed Site Prof. 0 ( 0 )

Mechanical Engineer 0 ( 0 )

Planners: Urb./Reg. 0 ( 0 )

Sanitary Engineers 0 ( 0 )

Soils Engineers 0 ( 0 )

Specification Writers 0 ( 0 )

Structural Engineers 0 ( 0 )

Surveyors 0 ( 0 )

Transportation Eng. 0 ( 0 )

Other (Please specify) 0 ( 0 )

Other (Please specify) 0 ( 0 )

Other (Please specify) 0 ( 0 )

Other (Please specify) 0 ( 0 )

Other (Please specify) 0 ( 0 )

Total Personnel 0 ( 0 )

**2C.** Is this submission a Joint- Venture? [ ]  Yes [ ]  No Has this Joint-Venture previously worked together? [ ]  Yes [ ]  No

If submittal is by JOINT-VENTURE, list participating firms and outline specific areas of responsibility (including administrative, technical and financial) for each firm: (Please note: An up-to-date copy of the DHCD FORM AE4 Master File Brochure must be on file with the Designer Selection Committee for each participating firm.)

List Participating firms.

**PART 3 - Insurance**

**Professional Liability Insurance**: **Aggregate Amount: Policy Number: Expiration Date:**

Name of Company Amount Number Date

**3A.** Have monies been paid by you, or on your behalf, as a result of Professional Liability Claims (in any jurisdiction) occurring within the last 5 years and in excess of $50,000 per incident? Answer YES or NO. If YES, please include the name(s) of the Projects(s) and Client(s), and an explanation.

[ ]  **YES** [ ]  **NO**

Please provide an explanation.

**3B.** Name of Sole Proprietor or names of all firm partners and officers:

**Name: Title: MA Reg #: Status/Discipline:**

a. Name a. Title a. Number a. Status/Discipline

b. Name b. Title b. Number b. Status/Discipline

c. Name c. Title c. Number c. Status/Discipline

**3C.** If Corporation, provide names of all members of the Board of Directors:

**Name: Title: MA Reg #: Status/Discipline:**

a. Name a. Title a. Number a. Status/Discipline

b. Name b. Title b. Number b. Status/Discipline

c. Name c. Title c. Number c. Status/Discipline

**3D.** Names of all owners (stock or other ownership):

**Name: Title: MA Reg #: Status/Discipline:**

a. Name a. Title a. Number a. Status/Discipline

b. Name b. Title b. Number b. Status/Discipline

c. Name c. Title c. Number c. Status/Discipline

**PART 4 – Project Organizational Chart and Resumes for Key Team Members**

List **ONLY** those Prime and Sub-Consultant personnel specifically requested in the Advertisement. This information should be presented below in the form of an organizational chart. Include name of firm and name of the one person in charge of the discipline, with Mass. Registration number, as well as MBE/WBE status, if applicable:

LHA

DHCD

Prime Consultant

Principal-in-Charge

Project Manager

[Mass. Registration #]

Project Architect / Engineer

[Mass. Registration #]

**Discipline**

(from RFS)

[Name of Firm]

[Person in Charge of Discipline]

[Mass. Registration #]

[MBE/WBE Certified (if applicable)]

**Discipline**

(from RFS)

[Name of Firm]

[Person in Charge of Discipline]

[Mass. Registration #]

[MBE/WBE Certified (if applicable)]

**Discipline**

(from RFS)

[Name of Firm]

[Person in Charge of Discipline]

[Mass. Registration #]

[MBE/WBE Certified (if applicable)]

**Discipline**

(from RFS)

[Name of Firm]

[Person in Charge of Discipline]

[Mass. Registration #]

[MBE/WBE Certified (if applicable)]

**Discipline**

(from RFS)

[Name of Firm]

[Person in Charge of Discipline]

[Mass. Registration #]

[MBE/WBE Certified (if applicable)]

**Discipline**

(from RFS)

[Name of Firm]

[Person in Charge of Discipline]

[Mass. Registration #]

[MBE/WBE Certified (if applicable)]

**Discipline**

(from RFS)

[Name of Firm]

[Person in Charge of Discipline]

[Mass. Registration #]

[MBE/WBE Certified (if applicable)]

**Discipline**

(from RFS)

[Name of Firm]

[Person in Charge of Discipline]

[Mass. Registration #]

[MBE/WBE Certified (if applicable)]

Provide a brief RESUME of ONLY those Key Staff of Firm and Sub-Consultant Personnel requested in the Advertisement. Confine responses to the space provided on the form and limit resumes to ONE person per discipline requested in the Advertisement. Additional sheets should be provided only as required for the number of key personnel requested in the Advertisement and they must be in the format provided. By including a Sub-Consultant, the firm certifies that the listed Sub-Consultant has agreed to work on this project, should the team be selected.

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |
| **Insert First Name, Last Name, Credentials** |  | Please provide here and on subsequent pages the résumés of all design team key personnel requested in the Public Notice, including team leaders as listed in section 3. Please make note if work was completed by a different firm.  |
| Insert Project Role: Click or tap here to enter text. |
|  |
| Years w/ Firm: | # |
| Total Years of Experience:  | # |
| MA Registration  | Type and # |
| Other: | Type and # |
| Availability | X% |
| Applicant Office Address: |
| Address 1: Click or tap here to enter text.Address 2: Click or tap here to enter text. City, State: Click or tap here to enter text.  |
|  |  |  |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |
| **Insert First Name, Last Name, Credentials** |  | Please provide here and on subsequent pages the résumés of all design team key personnel requested in the Public Notice, including team leaders as listed in section 3. Please make note if work was completed by a different firm.  |
| Insert Project Role: Click or tap here to enter text. |
|  |
| Years w/ Firm: | # |
| Total Years of Experience:  | # |
| MA Registration  | Type and # |
| Other: | Type and # |
| Availability | X% |
| Applicant Office Address: |
| Address 1: Click or tap here to enter text.Address 2: Click or tap here to enter text. City, State: Click or tap here to enter text.  |

**PART 5 – Prime Consultant Current and Relevant Experience – No more than 5 Projects**

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

**PART 6 – Work with Public Agencies – No more than 5 Projects**

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

**PART 7 – Work with Non-Public Agencies – No more than 5 Projects**

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

**PART 8 – Work by Sub-Consultants that best illustrates current qualifications in the areas in advertisement – 5 Projects per Sub-Consultant**

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

|  |  |
| --- | --- |
| **Firm Name** | **Service(s) Provided (e.g. Architecture)** |

**Project Name**: Click or tap here to enter text. **Client Contact**

**Project Description**: Click or tap here to enter text. **Name**: Click or tap here to enter text.

**Project Relevance**: Click or tap here to enter text. **Phone Number**: Click or tap here to enter text.

**Location**: Click or tap here to enter text. **Email**: Click or tap here to enter text.

**Key Members**: Click or tap here to enter text.

**Construction Cost**: Click or tap here to enter text.

(insert optional image)

**PART 9– SDO Requirements**

SDO Certification – Indicate Name of certified firm or company Indicate percentage of fee the SDO certification represents

[ ]  Applicant Firm is a SDO-certified M/WBE: Click or tap here to enter text. %

[ ]  Plan distribution firm is a SDO-certified M/WBE: Click or tap here to enter text. %

[ ]  Sub-Consultant is a SDO-certified M/WBE: Click or tap here to enter text. %

[ ]  Testing firm is a SDO-certified M/WBE: Click or tap here to enter text. %

 [ ]  Printing firm is a SDO-certified M.WBE: Click or tap here to enter text. %

[ ]  Other ancillary service firms are SDO-certified: Click or tap here to enter text. %

**PART 10 – Certification & Signature**

**I certify that the undersigned as and Authorized Signatory of Firm and is a Principal or Officer of Firm. I further certify that this firm is a “Designer”, as that term is defined in Chapter 7C, Section 44 of the Massachusetts General Laws. The principal-in-charge has updated their required disclosure statement with the DSB web application, to be current as of the date of this application. The information contained in this application is true, accurate and sworn to by the undersigned under the pains and penalties of perjury.**

Electronic Signature Printed Name and Title Date

**Electronic Signature Printed Name and Title Date**