Form C: Experience of Proponent and Subconsultants

(See B9)

Complete one form per reference Project.

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| --- | --- | --- | --- | --- |
| **Proponent**  **Subconsultant** | **Name:** | | | **Project #:** |
| **Project Name:** |  | | | |
| **Start Date:** (Month/Year) | | **Completion Date:** (Month/Year) | | |
| **Project Description:**  *Include project owner, project objectives, size of water or wastewater treatment facility and other relevant information demonstrating similarity to project criteria in B9.3.* | | | | |
| **Costing Services Description:**  *Provide clear and comprehensive description of the costing services provided, details of the role of the proponent / subconsultant.* | | | | |
| **Estimate Details:**  *Provide cost estimate value, associated costing accuracy and indicate the amount and level of design information available at the time the costing services were performed. Indicate the level of detail provided in the cost estimate including the number of costing lines and the sources of the costing lines.* | | | | |
| **Relevance:**  *Provide related information to help disclose the relevance of the costing performed. i.e. comparative actual construction costs, tender closing values, valuation of associated scope changes, narrative of major scope changes or other implicating factors.* | | | | |
| **Reference Name** | **Title/Function** | | **Email** | **Phone Number** |
| **#1** |  | |  |  |
| **#2** |  | |  |  |