



## Project Rating Proposal Checklist

*This checklist is for the bidder's use to ensure completion of required items.*

**COMPLETED** ✓

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|---|--|
| <b>BIDDER'S LISTING OF PROJECTS COMPLETED WITHIN THE PAST 7 YEARS</b><br>(Provide a minimum of 2 and a maximum of 4)  |  |
| <b>FOR EACH PROJECT:</b>  |  |
| Project Name, Location, and Description provided  |  |
| If requesting aggregation of separately bid projects, relevant information on each of the contracts proposed has been provided to support why aggregation should be permitted     |  |
| Contract Number provided if reference is an NJSDA Project   |  |
| Identification of whether your firm was the Prime or Subcontractor provided   |  |
| Contract Value provided for your firm's portion of the project  |  |
| Date the Project was Completed provided (within past 7 years)   |  |
| Owner's Contact information provided (confirm telephone number is valid and the individual is still employed with the firm)   |  |
| Project's Contact information provided (confirm telephone number is valid and the individual is still employed with the firm)   |  |
| <b>SAFETY</b>   |  |
| Name and Telephone Number of Safety Professional provided   |  |
| Three Questions regarding certifications and licenses answered  |  |
| Current NJ Workers Compensation Insurance Experience Modification Rate (EMR) provided along with the name and telephone number of the individual who can confirm the EMR provided |  |
| <b>PREVAILING WAGE RECORD</b>   |  |
| Appropriate box checked as it relates to your firm's Prevailing Wage history  |  |
| <b>CERTIFICATION</b>  |  |
| Form fully executed, signed in ink and dated by an officer, partner or principal of the firm  |  |
| Form witnessed  |  |



**COMPLETED** ✓

| <b>GENERAL</b>   |  |
|--|--|
| Utilized PRP form provided by NJSDA (05/17/2017 version) (form not to be altered)                                |  |
| Submitted original PRP form to NJSDA by 2:00 PM on due date (faxed or e-mailed submissions will not be accepted) |  |