ATTACHMENT D

EXHIBIT "A"
CONSTRUCTION EXPERIENCE PROJECT DATA SHEET – OFFEROR
N62473-15-R-1012

This form is to be completed by the Offeror. Submit (one per project) in order to provide supporting project information for Factor 1, Experience. Only projects that are within the project description parameters of the solicitation will be considered relevant. Submit five (5) projects. All other projects will not be considered.

Project No. (check one): ☐ **- 1** ☐ **- 2** ☐ **- 3** ☐ **- 4** ☐ **- 5**

Contractor:

1. Offeror Name: _____

Firm who performed the work: _____

Performed this work as: ☐ Prime Contractor ☐ Subcontractor ☐ Joint Venture

☐ Other (explain): _____

If subcontractor, name of prime: _____ Phone #: _____

If the firm who performed this project differs from the Offeror proposing on this contract, identify the firm's relationship to the Offeror:

☐ Joint Venture Partner ☐ Subsidiary
☐ Partner ☐ Satellite Office
☐ Subcontractor ☐ Predecessor Company
☐ Parent Company ☐ Other:

Explain how this firm will have meaningful involvement in the performance of the contract:

_____

Construction Contract:

2. Contract/Project No.: _____ **Delivery/Task Order Number:** _____

Title: _____

Location: _____

3. Award Date (mm/dd/yy): _____ **Award Amount: $** _____

Completion Date (mm/dd/yy): _____ **Final Price: $** _____

This is the: ☐ total project ☐ subcontract price

4. Type of Contract: (check one) ☐ Design-Build. If D-B, design firm was: _____

☐ Design-Bid-Build

Customer:

5. Name: _____

Point of Contact Name/Title: _____

POC Phone Number: _____ POC Email Address: _____

Project Description:

6. Type of Work (check all that apply): ☐ New Construction ☐ Renovation ☐ Repair

SOURCE SELECTION SENSITIVE INFORMATION
DISCLOSURE LIMITATIONS AS OUTLINED IN FAR 2.101 & 3.104 APPLY

ATTACHMENT E

EXHIBIT B - NAVFAC PAST PERFORMANCE QUESTIONNAIRE (Form PPQ)

CONTRACT INFORMATION (Contractor to complete Blocks 1-4)

1. Contractor Information:

Firm Name:
Address:
Phone Number:
Point of Contact: Contact Phone Number:

2. Work Performed as: ☐ Prime Contractor ☐ Sub Contractor ☐ Joint Venture ☐ Other (Explain)

Percent of project work performed:
If subcontractor, who was prime (Name/Phone #):

3. Contract Information

Contract Number:
Delivery/Task Order Number (if applicable):
Title:
Location:

Award Date (mm/dd/yy):
Completion Date (mm/dd/yy):

Award Amount:
Final Price:

4. Project Description:

CLIENT INFORMATION (Client to complete Blocks 5-8)

5. Client Information

Name:
Title:
Phone Number:
Email Address:

6. Describe the client's role in the project:

7. Date Questionnaire was completed:

8. Client's Signature:

ATTACHMENT F

EXHIBIT "C"
SAFETY DATA SHEET
N62473-15-R-1012

This form is to be completed by the Offeror. Use this form to provide safety information for the Safety factor. EMR and DART rates shall not be submitted for subcontractors.

Joint Venture (JV) or Partnership: Provide a Safety Data Sheet for each contractor who is part of the JV or partnership; however, only one safety narrative is required.

1. Offeror Name:

Name of JV partner providing the information below (if applicable):

Offeror's Three Previous Complete Calendar Years of Reported Safety Data:

Only complete year safety data will be considered. Indicate data rates as decimal figures, not whole numbers.

	2012	2013	2014
2. Total Recordable Case (TRC) Rate:			

3a. Explain any extenuating circumstances resulting in any TRCs greater than 1.0:

3b. Explain any upward or downward TRC trends:

3c. If you do not have an TRC for a given year, state so here and explain why:

4. Insurance Carrier Information:
Insurance Carrier Name:

Agent's name: Phone No.: Email:

	2012	2013	2014
5. U.S. Dept. of Labor, OSHA Days Away from Work, Restricted Duty, or Job Transfer (DART) Rate			

6a. Explain any extenuating circumstances resulting in any DART Rates of 3.0 or greater:

6b. Explain any upward or downward DART Rate trends:

6c. If you do not have a DART Rate for a given year, state so here and explain why:

SOURCE SELECTION SENSITVE INFORMATION
DISCLOSURE LIMITATIONS AS OUTLINED IN FAR 2.101 & 3.104 APPLY