INSTRUCTIONS FOR
DESIGN & CONSTRUCTION SERVICES TEAM QUALIFICATION SUPPLEMENT (DCSQS) FORM

DATE: August 2018

USF PROJECT NUMBER: 558
USF PROJECT NAME: USF Wellness Center Complex Phase 1

UNIVERSITY OF SOUTH FLORIDA
TAMPA CAMPUS

A. GENERAL INSTRUCTIONS:

1. The design and Construction Services Team Qualifications Supplement (DCSQS) form (and required attachments) are to be included as Section 2 of your submittal as noted in “Submittal Requirements” in the Request for Qualifications and are included in the eighty (80) numbered pages limit. Do not include these instructions as part of your submittal.

2. Only legal entities at the time of application may apply.

3. When up to ten related projects are requested in Item 5 Project Experience of the DCSQS, do not list more than ten. Excess examples will not be reviewed and will count toward eighty (80) numbered pages limit.

4. Where provisions of the Owner's Notice to Design/Build Teams– Request for Qualifications advertisement is in conflict with these instructions, the notice shall prevail.

5. The Design & Construction Services Team Qualification Supplement (DCSQS) form may be retyped and items increased in size to provide information.

B. DETAILED INSTRUCTIONS: Complete the Design & Construction Services Team Qualification Supplement (DCSQS) dated: August 2018, as follows:

Item 1: PROJECT INFORMATION: Enter the project number and project name as it appears in the public announcement for design/build services in the Florida Administrative Register (FAR).

Item 2: DESIGN & CONSTRUCTION SERVICES TEAM APPLICANT INFORMATION (Contract Entity): Enter all information on the DCSQS, identifying the name of the applicant (contract entity), including all contact information.

2a. Enter the legal name of the applicant (contract entity), the address, of the office in charge, contact name, telephone number and other requested information including FEID, charters and licenses. If the applicant firm has multiple office locations, the office in charge is considered to be the office location where the work is to be done, and whose address is provided in this Item.

Item 3: DCST MEMBER FIRMS AND YEARS OF SERVICE:

3a. Enter the DCST member firms, and respective addresses.

3b. Applicant’s years providing Services: Indicate each member's years of experience in providing services for design/build projects, construction management projects, and general contracting projects.

3c. Years of experience for team together: Indicate the number of years experience in providing services together for design/build projects, construction management projects and general contracting projects.

3d. Number of projects for Team together: Indicate the number of projects the team has completed together for design/build projects, construction management projects and general contracting projects.

3e. CBE Participation: Identify the CBE firms and Indicate total % of scope of services/work to be performed by CBE firms.
Item 4. PERSONNEL: (Summary of Key Personnel Information as provided in Section 3 Team Qualifications of the RFQ submittal)

4a. KEY MEMBERS of the Proposed DCST by Name: Name all key personnel who will be part of the design professionals and construction management team for this project and provide their cities of residence. Indicate each member’s projected “percentage” of commitment to the project for the design and construction phases.
(Note: Key Personnel must be committed to this project for its duration unless a replacement is approved by the Owner)

Item 5. PROJECT EXPERIENCE: (Summary of Project Information as provided in Section 4 Team Experience of the RFQ submittal)

List up to ten projects for which your firm has provided/is providing design/build, design and/or construction services which are most related to this project. In determining which projects are most related, consider: related size and complexity; how many members of the proposed team worked on the listed project; and, how recently the project was completed. List the projects in priority order, with the most related project listed first.

For each of the listed projects, provide the following information: location, current phase, construction cost and completion date, type of services provided (i.e., design, CM at risk with GMP, design/build, general contractor-low bid, negotiated general contract, subcontractor to prime, etc.).

Item 6. REFERENCES: (summary of Owner's Contact Information as provided in Section 4 Team Experience of RFQ submittal)

For the projects listed in response to Item 5 Project Experience, provide the project name, the Owner, and the Owner's representative's name, telephone number and e-mail addresses. References for consultants may be requested at the option of the Design & Construction Services Team Selection and Certification Committee (Selection Committee).

The applicant must verify that all contact information is current prior to submittal.

Item 7. PROFESSIONAL REGISTRATIONS, LICENSES & CORPORATE CHARTERS: Attach a reproduction of the current Florida Contractor's License(s), Professional License(s) and Corporate (or joint venture if applicable) Charters for the Design and Construction Services Team (DCST).

Attach a copy of the current Florida Corporate Charter Certificate (or Joint Venture if applicable).

Attach copies of the current Florida Professional Licenses for DCST members.

Attach copies of other registrations & certifications (i.e. LEED Accreditations, etc.)

Item 8. BONDS & INSURANCES: (Failure to provide letter of intent may result in disqualification)

Letter of Intent from Surety: Attach a letter of intent from a surety company indicating the Team's bondability for this project, for construction. The surety shall acknowledge that the Team may be bonded for 100% of the value of the contract. The surety company must be licensed to do business in the State of Florida, must have a Best Rating of A, and a required financial size of Class IX.

Letter of Intent from Insurance Company: Attach a letter of intent from an insurance company indicating the Team's insurability for the following. Insurance coverage's will provide that the University Board of Trustees is named as additional insured.

<table>
<thead>
<tr>
<th>TYPE</th>
<th>LIMITS OR AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commercial General Liability:</td>
<td>$1,000,000 per occurrence</td>
</tr>
<tr>
<td>Worker's Compensation</td>
<td>Statutory limit per Chapter 440, F.S.</td>
</tr>
<tr>
<td>Automobile Liability:</td>
<td>$1,000,000 per occurrence</td>
</tr>
<tr>
<td>Builder's Risk:</td>
<td>Replacement value</td>
</tr>
<tr>
<td>Professional Design Liability:</td>
<td>$3,000,000</td>
</tr>
</tbody>
</table>
**Item 9. ACKNOWLEDGMENT OF DCS:** Check the appropriate box in Item DCSQS that acknowledges if the: 
Applicant (contract entity) is a corporation that provides design and construction services (in-house Design/Build).
Applicant (contract entity) has consultant(s) to perform the design services, construction services, or both services; and acknowledges that the applicant and consultant(s) have agreement(s) at the time of application to formally contract for consulting services.
Applicant (contract entity) is a Joint Venture to perform the design and construction services with the Joint Venture registered by the Department of State to do business in the State of Florida at the time of application. Attach a copy of your joint venture agreement and a statement that indicates specifically the percentage of responsibility by each party and each party’s role in the project to each copy of the submittal. Duplicate the signature block and have a principal or officer sign on behalf of each party to the joint venture. The joint venture agreement and statement will not be counted in the eighty (80) numbered pages limit.

**Item 10. ACKNOWLEDGEMENT:** Acknowledge and sign, and certify by Notary Public. One submittal shall have original signature and shall be notarized. The number of additional required submittals may include photocopies of the signed pages.

File: CMS Exhibit 2A (CMQS Instructions).doc