## STANDARD FORM: APG-1001

STANDARD FORM: APG-1001	(10/2008)	
Professional Engineering and Related Services		
1. Project title	2. Project number	
3a. Firm (as registered with the Louisiana Secretary of State) and mailing address of the office to perform work	3b. Name, title, telephone number, and e-mail address of the official with <b>signing authority</b> for this contract	
	3c. Name, Title, telephone number, e-mail address and registration number of full-time LA licensed engineer in responsible charge of the project (not required for non-engineering projects)	
3d. I certify that the following information is accurate and complete	e to the best of my knowledge (must be same person as 3b):	
Signature:	Date:	
4. Full-time personnel on Firm's payroll who are located at the prina. Civil Engineers, with current Louisiana P.E. registration	mary work location identified in 3a above:	
b. Environmental Engineers, with current Louisiana P.E. registr	ration (not included in 4a)	
c. Land Surveyors, with current Louisiana P.L.S. registration		
d. Engineers In Training, with current Louisiana E.I. registration		
e. Designers/Draftsmen		
f. Survey Party Chiefs		
g. Real Estate Professionals (Agents and Certified Appraisers)		
h. Other personnel not included in above categories		
Total personnel at primary work location (sum of a – h)		
<ul><li>5. Full-time personnel on Firm's payroll, not located at the primary project:</li><li>a. Civil Engineers</li></ul>	y work locations, to be used on this	
b. Environmental Engineers (not included in 5a)		
c. Land Surveyors, with current Louisiana P.L.S. registration		
d. Engineers In Training, with current Louisiana E.I. registration		
e. Designers/Draftsmen	<u></u>	
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f. Survey Party Chiefs  Real Estate Professionals (Aposto and Contifed Apossions)		
g. Real Estate Professionals (Agents and Certified Appraisers)		
h. Other personnel not included in above categories	<del></del>	
Total personnel not located at the primary work location (sur	m of a – h)	

6. Do you presently have sufficient staff to perform these services in the designated time frame? (Yes/No)
7. Identify the element of work (as defined in the advertisement), and the % of the element to be performed by the firm. Also, identify % of work for the overall project to be performed by the firm (must be at least 50%).

8. Do you intend to use a Sub-consultant(s)? yes no (For use by the Prime Consultant only) All Sub-consultants/Associates listed for this project must attach a signed Form APG-1001		
Name and address	Identify the element of work (as defined in the advertisement), and the % of the element to be performed by the Sub-consultant Also, identify the % of work for the overall project to be performed by the Sub-consultant.	Worked with prime before? (Yes/No)
1.		
2.		
3.		
4.		
5		
5.		

9. Staffing Plan – A Diagram showing all personnel specifically assigned to each work element of the project, their duties, and immediate Supervisors. The Staffing Plan should also include the same information for Sub-consultants (if applicable).

10. Brief résumé of key persons anticipated to work on this pr	roject	
a. Name, title & domicile	b. Position or Assignment for this project	
c. Name of Firm by which employed full time	d. Years experience:  With this Firm: With other Firms:	
e. Education: Degree(s) / Years / Specialization	f. Active registration: Year registered:  Branch: State: License No.:	
g. Specific experience and qualifications relevant to the proposed project:	License No.:	

11. Work by Firm which best illustrates project experience relevant to this project (List not more than 10 Projects)				
a. Project name & location	b. Project description	c. Nature of Firm's responsibility & firm members involved	d. Client's name, address, and telephone number	e. Completion date or Percent Complete & cost in thousands

12. All work by Firm (all offices) currently being performed for or selected by Ascension Parish Government (as Prime or Sub-consultant)				
a. Project name, and location*	b. Nature of your Firm's responsibility (also identify if prime or Sub-consultant)	c. Percent complete (by phase/type of work)	d. Contract fees (in thousands)** (by phase/type of work)	
			Total	Remaining
* For master contracts, list open task orders individually  ** Do not include Sub-consultant's fees  Total				

13. Use this space to provide any additional information or description of resources supporting your firm's qualifications for the proposed project. This section may also be used to submit proposed prices, if required. A maximum of two (2) additional sheets may be utilized to answer this question. All other sheets not specifically requested shall be excluded.



