

NEW YORK CITY SCHOOL  
CONSTRUCTION AUTHORITY

Tax ID# or SS# \_\_\_\_\_

Date of Submission: \_\_\_\_\_

Architect/Engineer/Construction Related Service Qualification Statement

All information should be current to date of submission.

Home Office Information:

Firm Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: ( ) \_\_\_\_\_ Fax #: ( ) \_\_\_\_\_  
Principal/Officer contact: \_\_\_\_\_

New York State Office, if different:

Firm Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: ( ) \_\_\_\_\_ Fax #: ( ) \_\_\_\_\_  
Principal/Officer contact: \_\_\_\_\_

Number of full-time Professional Staff: \_\_\_\_\_ Number of years firm in Business: \_\_\_\_\_

An Architectural or Engineering firm shall submit qualifications to do business with the SCA either singularly or as a joint venture for a Prime Contract. A firm will be considered in only one category.

Is this an association or joint venture?  Yes  No

If yes, provide the following information on the firm with which you are collaborating. A letter must be attached and signed by both firms indicating the nature and percent of each participating firm.

(Note: Each firm is required to independently submit this form.)

Associate or Joint Venture Firm:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: ( ) \_\_\_\_\_ Fax #: ( ) \_\_\_\_\_  
Principal/Officer contact: \_\_\_\_\_

Is your company A:  Partnership  Professional Corporation  Sole Proprietorship?

B:  MBE  WBE  LBE

Please attach a list of all projects, including dollar value and client name, that the associate or joint venture has completed in the last five years.

6. Please provide a brief resume of current Partners and Associate Partners in the New York office. This page may be photocopied for additional professionals. Indicate the number of supplemental sheets.

Name: \_\_\_\_\_

Professional Affiliations:

Title: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Years of Experience:

This firm: \_\_\_\_\_

Personal awards/recognition:

Other firms: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Professional role within firm: \_\_\_\_\_  
\_\_\_\_\_

Active NY Registration: Yes [ ] No [ ]

Experience and qualifications relevant to school/educational facilities or projects similar in scope:

Year first registered: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Discipline: \_\_\_\_\_

Registration No.: \_\_\_\_\_

Education:  
(degrees/years/specializations)

\_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_

Professional Affiliations:

Title: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Years of Experience:

This firm: \_\_\_\_\_

Personal awards/recognition:

Other firms: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Professional role within firm: \_\_\_\_\_  
\_\_\_\_\_

Active NY Registration: Yes [ ] No [ ]

Experience and qualifications relevant to school/educational facilities or projects similar in scope:

Year first registered: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Discipline: \_\_\_\_\_

Registration No.: \_\_\_\_\_

Education:  
(degrees/years/specializations)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Summary of Professional Services Fees received in the New York Office:

Index	Government contract work (by index #)	Last Five Years (most recent year first)				
1 Less than \$100,000						
2 \$100,000 to \$500,000						
3 \$500,000 to \$1 Million	All other Domestic work (by index #)					
4 Greater than \$1 Million						

8. Profile of New York Office Project Experience -- Cumulative for the Last Five Years

	Profile Code	Number of Projects	Total Gross Fee
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

	Profile Code	Number of Projects	Total Gross Fee
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

List of Profile Codes

- 01 Acoustics/Noise Abatement
- 02 Air Pollution Control
- 03 Auditoriums/Theaters
- 04 Automation;Controls/Instrumentation
- 05 Building Codes/Standards/Ordinances
- 06 Cold Storage/Refrigeration
- 07 Commercial Kitchens/Dining Halls
- 08 Communications Systems/TV/Microwave/Telephones
- 09 Computer Facilities/Computer Service
- 10 Construction Management
- 11 Corrosion Control/Cathodic Protection/Electrolysis
- 12 Cost Estimating
- 13 Ecological/Archeological Investigations
- 14 Educational Facilities/Classrooms
- 15 Elevators/Escalators/People-Movers
- 16 Energy Management Systems
- 17 Environmental Impact Studies/Assessments or Statements
- 18 Fallout Shelters/Blast-Resistant Design
- 19 Field Houses/Gyms/Stadiums
- 20 Fire Protection
- 21 Forensic Engineering
- 22 Garages/Vehicle Maintenance Facilities
- 23 Graphic Design Signage
- 24 Heating/Ventilating/Air Conditioning
- 25 Highways/Streets/Parking Lots
- 26 Historical Preservation
- 27 Hospitals/Clinics/Laboratories

- 28 Interior Design
- 29 Landscape Architecture
- 30 Libraries
- 31 Lighting (Exterior)
- 32 Lighting (Interior)
- 33 Modular Systems Design/Prefabricated Structures
- 34 Planning (Site & Community)/Zoning
- 35 Pneumatic Structures/Air Support Buildings
- 36 Product Machine & Equipment Designing/Shop Equipment
- 37 Recreational Facilities
- 38 Resource Recovery/Recycling
- 39 Roofing Consulting
- 40 Safety Engineering/Accident Studies/OSHA Studies
- 41 Security System/Intruder & Smoke Detention
- 42 Seismic Designs & Studies
- 43 Sewage Collection, Treatment and Disposal
- 44 Soils & Geologic Studies/Foundations
- 45 Solar Energy
- 46 Space Planning
- 47 Special Environments/Clean Rooms, etc.
- 48 Surveying
- 49 Swimming Pools
- 50 Materials Testing/Inspection Services
- 51 Value Engineering
- 52 \_\_\_\_\_
- 53 \_\_\_\_\_

9. Professional/Technical Staff by Discipline :

Indicate the number of professionals currently on payroll in each specialty at New York and Home Offices. Total the numbers at the bottom of each column. List individuals only once by area of discipline.

Professional Discipline/Specialty/ Job Title	In New York Office		In Home Office	
	Number of Professionals with current NY License*	Number of Staff not Licensed	Number of Professionals with current NY License*	Number of Staff not Licensed
Architects				
Engineers				
Structural Engineers				
HVAC				
Plumbing/Drainage				
Electrical Engineers				
Landscape Architects				
Planners				
Interior Designers				
Others: List				
Administrative/Clerical				
<b>TOTALS</b>				

\* Architects, Engineers and Landscape Architects

Specialties: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Organization: Describe the firm's management structure (attach-org. chart)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

10. List all work by the New York office which construction was completed within the last five years and which is relevant or analogous in scope or complexity to educational facilities. Include both new work and modernization/rehabilitation work. List your most recent work first. (This page may be photocopied for additional projects. Indicate the number of supplemental sheets).

---

Project Name: \_\_\_\_\_ Owner's Name: \_\_\_\_\_

Type of Project: \_\_\_\_\_ Address: \_\_\_\_\_

Type of Services: \_\_\_\_\_

SCA or BOE work? Yes [ ] No [ ] \_\_\_\_\_

Location: \_\_\_\_\_ Architect Name: \_\_\_\_\_

Principal/Officer: \_\_\_\_\_

[ ] Prime [ ] Joint Venture [ ] Association [ ] Consultant

If other than Prime, with whom? \_\_\_\_\_

If Prime, name Consultants: \_\_\_\_\_

Project Status: \_\_\_\_\_ Completion date of design documents: \_\_\_\_\_

Commencement Date: \_\_\_\_\_ Estimated construction cost (in thousands): \_\_\_\_\_

If work is currently in progress give percentage of design documents completed. \_\_\_\_\_ Total project cost: \_\_\_\_\_

\_\_\_\_\_ Firm's percentage of total Design Services: \_\_\_\_\_

\_\_\_\_\_ Completion date of construction: \_\_\_\_\_

Please note extraordinary or unusual aspects about the project for SCA consideration.

\_\_\_\_\_

\_\_\_\_\_

---

Project Name: \_\_\_\_\_ Owner's Name: \_\_\_\_\_

Type of Project: \_\_\_\_\_ Address: \_\_\_\_\_

Type of Services: \_\_\_\_\_

SCA or BOE work? Yes [ ] No [ ] \_\_\_\_\_

Location: \_\_\_\_\_ Architect Name: \_\_\_\_\_

Principal/Officer: \_\_\_\_\_

[ ] Prime [ ] Joint Venture [ ] Association [ ] Consultant

If other than Prime, with whom? \_\_\_\_\_

If Prime, name Consultants: \_\_\_\_\_

Project Status: \_\_\_\_\_

Commencement Date: \_\_\_\_\_ Completion date of design documents: \_\_\_\_\_

If work is currently in progress give percentage of design documents completed. \_\_\_\_\_ Estimated construction cost (in thousands): \_\_\_\_\_

\_\_\_\_\_ Total project cost: \_\_\_\_\_

\_\_\_\_\_ Firm's percentage of total: \_\_\_\_\_

\_\_\_\_\_ Completion date of construction: \_\_\_\_\_

Please note extraordinary or unusual aspects about the project for SCA consideration.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

11. Affirmative Action Data for SCA Architect/Engineer/Construction Service Qualifications Statement

FIRM: \_\_\_\_\_

DATE: \_\_\_\_\_

CURRENT BREAKDOWN OF EMPLOYEES (List each person only once)

JOB CATEGORY	MALE EMPLOYEES					FEMALE EMPLOYEES				
	WHITE	MINORITY				WHITE	MINORITY			
		AFRICAN-AMERICAN	NATIVE AMERICAN	SPANISH SURNAME	ASIAN		AFRICAN-AMERICAN	NATIVE AMERICAN	SPANISH SURNAME	ASIAN
Partners										
Associates										
Project Architect/Manager										
Professional Staff										
Administrative/ Clerical										

TOTAL EMPLOYEES

PRINCIPAL'S SIGNATURE \_\_\_\_\_

PRINCIPAL'S NAME \_\_\_\_\_

---

12. List the firms Quality Assurance Program procedures.

---

---

---

---

---

13. Describe your firm's computer design capabilities.

---

---

---

---

---

14. Please list the New York office's Design Awards, Citations and Publications within last five years.

---

---

---

---

15. Any other relevant comments: \_\_\_\_\_

---

---

---

---

---

---

