

ATTACHMENT F

Professional Qualifications Supplement (PQS) EXPERIENCE NOTE: Complete one 2-page form for each of the 5 "most relevant" projects.

Experience Of (firm and/or person):			
Project Information Project # and Title:	Project Location:		
•	/sub-consultant, or individual experience) and services pro		
Current Status:	Construction Cost:		
LEED-Certified?	Delivery Method (CM, DB, etc.):		
Construction Start (NTP) Date:	Substantial Completion Date:		
Staffing Information (for project above)			
Principal:	· · · · · · · · · · · · · · · · · · ·	☐ YES	□NO
Design Lead:	<u> </u>	☐ YES	□NO
Project Manager.:	On proposed FL Poly team?	☐ YES	□NO
Designer:	On proposed <u>FL Poly</u> team?	☐ YES	□NO
Designer:	On proposed <u>FL Poly</u> team?	☐ YES	□NO
(Other):	On proposed <u>FL Poly</u> team?	☐ YES	□NO
(Other).:	On proposed <u>FL Poly</u> team?	☐ YES	□NO
Narrative description of facility, including space	ce type(s), major building components, and construction ty	/pe(s):	
Explanation of relevance/similarity:			

Attachment F (Experience &	References) continued	
Owner Contact Information		
Owner/Client:	Contact Person or PM:	
Address:		
Phone and Fax:	E-mail Address:	
Builder Contact Information		
Contractor:	Contact Person or PM:	
Address:		
Phone and Fax:	E-mail Address:	
Design Partner Information (engineer if t	this project illustrates experience of architect)	
Firm:	Contact Person or PM:	
Design Discipline:		
Address:		
Phone and Fax:	E-mail Address:	
Design Partner Information (engineer if t	this project illustrates experience of architect)	
Firm:	Contact Person or PM:	
Design Discipline:		
Address:		
Phone and Fax:	E-mail Address:	_
Design Partner Information (architect if to	his project illustrates experience of engineer)	
Firm:	Contact Person or PM:	
Design Discipline:		
Address:		
Phone and Fax:	F-mail Address:	