

Three-Question Matrix and Reference Checks
RFP No. PNC2114364P1
Continuing Engineering Services for Transportation and General
Civil Engineering Projects

Ranking	1	2	3	4
Firm Name	RS&H, Inc.	HDR Engineering, Inc.	Kimley-Horn and Associates, Inc.	Atkins North America, Inc.
Questions				
1. Have the vendors taken any exceptions to the County's Standard Terms and Conditions?	NO EXCEPTIONS	NO EXCEPTIONS	NO EXCEPTIONS	NO EXCEPTIONS
2. Do the vendors have comparable government experience?	Florida Department of Transportation District 4	Monroe County Florida Department of Transportation District 4 Lake-Sumter MPO	Florida Department of Transportation District 4 Boynton Beach Community Redevelopment Agency City of Fort Lauderdale	City of Altamonte Springs Florida Department of Transportation
3. Have the vendors' references been checked?	YES (Attached)	YES (Attached)	YES (Attached)	YES (Attached)



Vendor Reference Verification Form

Broward County Solicitation No. and Title:

RFP PNC2114364P1, Continuing Engineering Services for Transportation and General Civil Engineering Projects

Reference for: RS&H, Inc.

Organization/Firm Name providing reference:

Florida Department of Transportation District Four

Contact Name: Robert Bostian, PE Title: Project Manager Reference date: 01/04/2018

Contact Email: Robert.Bostian@dot.state.fl.us Contact Phone: (954) 777-4427

Name of Referenced Project: I-75 MANAGED LANES

Contract No.	Date Services Provided:	Project Amount:
<u>C-8S79</u>	<u>06/01/2011</u> to <u>11/30/2018</u>	<u>\$ 23,000,000.00</u>

Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor

Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:

As part of our Statewide Public-Private Partnership (P3) and Engineering Support Services contract with the Florida Department of Transportation, RS&H is providing Owner's Representative services to District Four for the \$480-million addition of a managed lanes system in the I-75 median. The managed lanes will extend from I-595 in Broward County to NW 170th Street in Miami-Dade County. The project includes two managed lanes in each direction, five managed lanes ingress/egress locations, and direct connections to the I-595 Express corridor and Florida's Turnpike.

Please rate your experience with the referenced Vendor:

	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service			<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization:			<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:			<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Project completed within budget	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Cooperation with:			<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. Your Firm	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Subcontractor(s)/Subconsultant(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Regulatory Agency(ies)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)

The RS&H project team provided excellent consulting services for this very important FDOT Express Lane Project.

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Verified via: EMAIL VERBAL Verified by: Nirmal Datta Division: HCED Date: 01/04/18

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Broward County Board of
County Commissioners



Vendor Reference Verification Form

Broward County Solicitation No. and Title:

RFP PNC2114364P1, Continuing Engineering Services for Transportation and General Civil Engineering Projects

Reference for: RS&H, Inc.

Organization/Firm Name providing reference:

Florida Department of Transportation District Four

Contact Name: Anson Sonnett, PE Title: Project Manager Reference date: 01/02/2018

Contact Email: anson.sonnett@dot.state.fl.us Contact Phone: (954) 777-4474

Name of Referenced Project: Andrews Avenue Extension

Contract No. C-8E52 Date Services Provided: 03/01/2005 to 04/11/2016 Project Amount: \$ 1,100,000.00

Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor

Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:

RS&H provided design services for preparing a complete set of construction plans and bid documents, as well as right-of-way requirements for the extension of Andrews Avenue from NW 18th Street to north of Copans Road and Copans Road from NW 15th Avenue to the South Florida Rail Corridor. Services included roadway and drainage design, signing and signalization, utility relocation, and post-design.

Please rate your experience with the referenced Vendor:

	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Project completed within budget	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Cooperation with:				
a. Your Firm	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Subcontractor(s)/Subconsultant(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Regulatory Agency(ies)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)

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Vendor Reference Verification Form

Broward County Solicitation No. and Title:

RFP PNC2114364P1, Continuing Engineering Services for Transportation and General Civil Engineering Projects

Reference for: RS&H, Inc.

Organization/Firm Name providing reference:

Florida Department of Transportation District Four

Contact Name: Paul Lampley, PE Title: District Constructor Reference date: 01/09/2018

Contact Email: paul.lampley@dot.state.fl.us Contact Phone: (954) 777-4384

Name of Referenced Project: I-595 Corridor Improvements

Contract No. C-8K05; 4208091-32-02, 42 Date Services Provided: 07/28/2006 to 12/02/2016 Project Amount: \$ 38,426,711.25

Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor

Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:

This project was FDOT's first public-private partnership (P3, design-build-finance-operate-maintain) project and the first availability payment in the United States. The 10.5-mile corridor was widened and expanded from the I-75/Sawgrass Expressway interchange to the I-595/I-95 interchange. The \$1.23-billion improvements included the addition of auxiliary lanes, bypass and braided ramps, collector-distributor roadways, and a tolled reversible express lanes system with a direct connection to Florida's Turnpike.

Please rate your experience with the referenced Vendor:

	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Project completed within budget	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Cooperation with:				
a. Your Firm	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Subcontractor(s)/Subconsultant(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Regulatory Agency(ies)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)

several attempts were made but failed to contact the reference provider

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Broward County Board of
County Commissioners



Vendor Reference Verification Form

Broward County Solicitation No. and Title:

RFP PNC2114364P1, Continuing Engineering Services for Transportation and General Civil Engineering Projects

Reference for: HDR Engineering, Inc.

Organization/Firm Name providing reference:

Monroe County

Contact Name: Judith Clarke *JC* Title: Dir. of Engineering Reference date: 01/05/2018

Contact Email: clarke-judith@monroecounty-fl.gov Contact Phone: 305-295-4329

Name of Referenced Project: Card Sound Toll Conversion Project

Contract No. Date Services Provided: Project Amount:
07/15/2015 to 01/05/2018 \$ 327,339.00

Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor

Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:

multi-phase project assisting Monroe County with conversion of Card Sound Toll from manual collection to all electronic tolling. Work included a Traffic and Revenue Study, Design/Build RFP development, negotiation support for agreements with Turnpike Authority for toll processing services, Transcore for tolling system installation and maintenance services, as well as engineering support services during D/B design and construction of project.

Please rate your experience with the referenced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Project completed within budget	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Cooperation with:				
a. Your Firm	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Subcontractor(s)/Subconsultant(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Regulatory Agency(ies)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)

This is a very complex project; HDR staff has been excellent.

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Broward County Board of
County Commissioners

County of Monroe The Florida Keys



BOARD OF COUNTY COMMISSIONERS

Mayor David Rice, District 4
Mayor Pro Tem Sylvia J. Murphy, District 5
Danny L. Kolhage, District 1
George Neugent, District 2
Heather Carruthers, District 3

**Monroe County
Engineering Department
1100 Simonton Street
Key West, Florida 33040
(305) 295-4329
(305) 295-4321 Fax**

January 8, 2018

RE: HDR Engineering, Inc. Reference

HDR Engineering, Inc. has been a consultant for Monroe County since January, 2010 and they recently were again selected as one of our on call engineering consultants for another four-year term beginning this month. HDR has provided engineering services for multiple county projects and staff has always been responsive to county needs. Staff is professional and they possess the technical expertise to successfully complete a variety of projects for Monroe County.

HDR is currently working with Monroe County on the Card Sound Toll All Electronic Toll Conversion Project. This is a multi-phase project that began in July, 2015 with a Traffic and Revenue Study of Monroe County's Card Sound Toll to support conversion of the manual toll to all electronic tolling. Additional project phases included development of a design/build request for proposals for the toll construction and assistance with negotiating contracts with vendors for the tolling system installation and ongoing maintenance services, as well as with Florida Turnpike Enterprise for toll transaction processing and billing services. HDR is also providing engineering support services during the design and construction of the project.

Monroe County is satisfied with the work performed by HDR and we would recommend them for any future work.

If you should have any questions or need any additional information please feel free to contact me.

Sincerely,

Judith S. Clarke, P.E.
Monroe County Director of Engineering Services
305-295-4329
Clarke-judith@monroecounty-fl.gov

Broward County Board of
County Commissioners



Vendor Reference Verification Form

Broward County Solicitation No. and Title:

RFP PNC2114364P1, Continuing Engineering Services for Transportation and General Civil Engineering Projects

Reference for: HDR Engineering, Inc.

Organization/Firm Name providing reference:

FDOT District 4

Contact Name: Vanita Saini, PE Title: Project Manager Reference date: 01/02/2018

Contact Email: vanita.saini@dot.state.fl.us Contact Phone: 954-777-4468

Name of Referenced Project: 95 Express Corridor Design Consultant

Contract No. 43310813201 Date Services Provided: 05/15/2013 to 12/01/2024 Project Amount: \$ 1,200,000,000.00

Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor

Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:

Preliminary Engineering, Concept Development, Master Plans, RFP, Procurement Support, and full post award services. Design and Construction Phase support.

Please rate your experience with the referenced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Project completed within budget	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Cooperation with:				
a. Your Firm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Subcontractor(s)/Subconsultant(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Regulatory Agency(ies)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)

See attached letter from FDOT PM Vanita Saini.

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Broward County Board of
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Florida Department of Transportation

RICK SCOTT
GOVERNOR

3400 West Commercial Boulevard
Fort Lauderdale, FL 33309

MIKE DEW
SECRETARY

January 2, 2018

To Whom It May Concern:

This letter is to confirm since 2013, the HDR team from South Florida has been providing a variety of transportation related engineering related service to the FDOT District Consultant Management. FDOT Performance Grades can be found in Florida Department of Transportation database Procurement Website, link below:

<http://fdot.gov/procurement/InternetReports.shtm#qual>

HDR was been working on Corridor Design Consultant services for 95 Express Phase 3 and contract grades have average of 4.0. To date, specific tasks performed for the Department on the 95 Express Phase 3 Program have consisted of:

- Roadway Master Plan
- Signing Master Plan
- ITS Master Plans
- Traffic Control Plans
- Lighting Master Plans
- Drainage Design and Regulatory Permitting
- Major Bridge Structural Engineering
- Design-Build Procurement Support
- Cost Estimating and Schedule Development
- Construction Time Estimates and Contractor Incentive/Disincentive Analysis
- Public Involvement

Please feel free to contact me at 954-777-4469 for any questions.

Sincerely,

DocuSigned by:
Vanita Saini
D89321188FFC3406..

Vanita Saini, PE

Consultant Management Project Manager
Florida Department of Transportation District 4

www.fdot.gov

Broward County Board of
County Commissioners



Vendor Reference Verification Form

Broward County Solicitation No. and Title:

RFP PNC2114364P1, Continuing Engineering Services for Transportation and General Civil Engineering Projects

Reference for: HDR Engineering, Inc.

Organization/Firm Name providing reference:

Lake-Sumter MPO

Contact Name: Michael Woods Title: Multimodal Project Reference date: 01/04/2018

Contact Email: mwoods@LakeSumterMPO.com Contact Phone: 352.315.0170

Name of Referenced Project: SR 44 - Dixie Avenue Complete Streets

Contract No. _____ Date Services Provided: _____ Project Amount: _____
06/10/2015 to 10/10/2016 \$ 85,909.00

Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor

Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:

HDR completed the Dixie Avenue Complete Streets project in partnership with the City of Leesburg while working as the General Planning Consultant for the Lake-Sumter MPO. As a part of the study, HDR identified improvements to the intersection, including the addition of lanes on the south side of 9th Street to result in a three-lane northbound approach. HDR has reviewed the crash analysis for this location and has been coordinating with FDOT regarding the SR 44 resurfacing plans, which also includes the intersection.

Please rate your experience with the referenced Vendor:

	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Project completed within budget	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Cooperation with:				
a. Your Firm	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Subcontractor(s)/Subconsultant(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Regulatory Agency(ies)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)

Excellent project team, this project has changed the way FDOT does their 3R projects to include components of Completes Streets elements into 3R projects.

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Broward County Solicitation No. and Title:

RFP PNC2114364P1, Continuing Engineering Services for Transportation and General Civil Engineering Projects

Reference for: Kimley-Horn and Associates, Inc., Marwan H. Mufleh, P.E.

Organization/Firm Name providing reference:
Florida Department of Transportation District 4

Contact Name: Scott Thurman Title: FDOT PM Reference date: 12/27/2017

Contact Email: scott.thurman@dot.state.fl.us Contact Phone: 954-777-4135

Name of Referenced Project: Districtwide Minor Projects Design On-Call

Contract No. _____ Date Services Provided: 10/16/2011 to _____ Project Amount: _____

Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor

Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:

Kimley-Horn is acting as an extension of FDOT District Four staff for this on-call contract. Our team is providing a variety of services ranging from design and construction plan preparation to providing staff to serve at FDOT offices in any of their different departments on an as needed basis. The projects vary from state to federally-funded and include intersection improvements; signal operational improvements; safety improvements; Resurfacing, Restoration, and Rehabilitation (RRR); scoping of projects; cost estimation; environmental; structural; and utility services. It also includes information technology, architecture, and other services that may include developing concept reports, 3D modeling, and request for proposals (RFP) on design-build projects.

Please rate your experience with the referenced Vendor:

	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Project completed within budget	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Cooperation with:				
a. Your Firm	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Subcontractor(s)/Subconsultant(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Regulatory Agency(ies)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)

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Vendor Reference Verification Form

Broward County Solicitation No. and Title:

RFP PNC2114364P1, Continuing Engineering Services for Transportation and General Civil Engineering Projects

Reference for: Kimley-Horn and Associates, Inc., Marwan H. Mufieh, P.E.

Organization/Firm Name providing reference:

Boyton Beach Community Redevelopment Agency

Contact Name: Thuy Shutt Title: CRA Asst. Director Reference date: 12/27/2017

Contact Email: shutt@bbfl.us Contact Phone: 561.600.9098

Name of Referenced Project: Prof. services on multiple projects from roadway plans to capital projects

Contract No. _____ Date Services Provided: 09/01/2010 to 01/04/2018 Project Amount: \$ 696,252.78

Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor

Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:

The design and engineering professionals at Kimley-Horn have provided a range of professional services including project feasibility studies, traffic analysis, County & FDOT permitting services, design-engineering-construction administration for projects ranging from parking lots to City Entry signage.

Please rate your experience with the referenced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Project completed within budget	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Cooperation with:				
a. Your Firm	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Subcontractor(s)/Subconsultant(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Regulatory Agency(ies)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)

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Broward County Board of
County Commissioners



Vendor Reference Verification Form

Broward County Solicitation No. and Title:

RFP PNC2114364P1, Continuing Engineering Services for Transportation and General Civil Engineering Projects

Reference for: Kimley-Horn and Associates, Inc., Marwan H. Mufleh, P.E.

Organization/Firm Name providing reference:

City of Fort Lauderdale

Contact Name: Catherine Prince Title: Mobility PM Reference date: 01/05/2017

Contact Email: cprince@fortlauderdale.gov Contact Phone: 954.828.3794

Name of Referenced Project: Las Olas Boulevard Corridor Safety Improvements & Colee Hammock

Contract No. _____ Date Services Provided: _____ Project Amount: _____
03/01/2015 to 04/15/2017 \$ 153,262.50

Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor

Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:

Kimley-Horn served as the prime consultant for designing safety and traffic calming improvements and was the engineer of record for the project, estimated construction value of \$1.3 million.

Please rate your experience with the referenced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Project completed within budget	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Cooperation with:				
a. Your Firm	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Subcontractor(s)/Subconsultant(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Regulatory Agency(ies)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)

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Vendor Reference Verification Form

Broward County Solicitation No. and Title:

RFP PNC2114364P1, Continuing Engineering Services for Transportation and General Civil Engineering Projects

Reference for: *Atkins North America, Inc.*

Organization/Firm Name providing reference: *City of Altamonte Springs*

Contact Name: *Brett Blackadar, P.E.* Title: *Chief Transportation Engineer* Reference date: *1/2/2018*

Contact Email: *bblackadar@altamonte.org* Contact Phone: *407-571-8538*

Name of Referenced Project: *Master Agreement for Professional Services (API2015A) Transportation Engineering+Planning*

Contract No. *API2015A* Date Services Provided: *8/1/2012 to 7/31/2018* Project Amount: *Various assignments*

Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor

Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor: *They did a great job and provided great quality plans in very tight time schedules. They were always very responsive to all of our requests*

Please rate your experience with the referenced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Project completed within budget	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Cooperation with:				
a. Your Firm	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Subcontractor(s)/Subconsultant(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Regulatory Agency(ies)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)

They have done a great job for us and I would strongly recommend Atkins.

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Vendor Reference Verification Form

Broward County Solicitation No. and Title:

RFP PNC2114364P1, Continuing Engineering Services for Transportation and General Civil Engineering Projects

Reference for: ATKINS

Organization/Firm Name providing reference:

FLORIDA DEPARTMENT OF TRANSPORTATION

Contact Name: FAUSTO GOMEZ Title: PROJECT MANAGER Reference date: 1/5/2017

Contact Email: FAUSTO.GOMEZ@DOT.STATE.FL.US Contact Phone: 954-777-4466

Name of Referenced Project:

Contract No. E4R44 Date Services Provided: 1/2014 to 2/2017 Project Amount: \$290K DESIGN, \$1.1M CONSTRUCTION

Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor

Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:

Please rate your experience with the referenced Vendor:

	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Project completed within budget	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Cooperation with:				
a. Your Firm	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Subcontractor(s)/Subconsultant(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Regulatory Agency(ies)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)

THE CONSULTANT PERFORMED WELL DURING DESIGN AND CONSTRUCTION

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RFP PNC2114364P1, Continuing Engineering Services for Transportation and General Civil Engineering Projects

Reference for: Atkins

Organization/Firm Name providing reference:

FOOT

Contact Name: James Hughe Title: PM Supervisor Reference date: 1/8/18

Contact Email: james.hughes@dot.state.fl.us Contact Phone: 954-777-4419

Name of Referenced Project: A7A from Oakland Park Blvd to Flamingo Ave.

Contract No. 431204-1 Date Services Provided: 7/2014 to Current Project Amount:

Vendor's role in Project: Prime Vendor Subconsultant/Subcontractor

Would you use this vendor again? Yes No If No, please specify in Additional Comments (below).

Description of services provided by Vendor:

Please rate your experience with the referenced Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Timeliness of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Project completed within budget	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Cooperation with:				
a. Your Firm	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Subcontractor(s)/Subconsultant(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Regulatory Agency(ies)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (provide on additional sheet if needed)

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