Consulting Services Questionnaire

1.	Project name				
2.	Date Submitted				
3.	Specify type of ownership and indicate if applicable:				
	Private corporation Pu Partnership Small busin Woman owned business	ness Mino	rity owned business		
4a.	Firm (or joint venture) name, mailing address, telephone number				
4b.	Firm's owners				
4c.	Name, title, telephone, and fax number of principal to contact				
4d.	Name, title, telephone, and fax number of proposed project manager				
5.	Full time personnel assigned to project				
	Number Position/Title				
6.	Is submittal a joint venture?a. If so, has joint venture worked together before?b. If a joint venture, name of lead firm.				
7.	Summary of professional service fees received in (insert index number)				
	2012 2011 2010 () () ()	2009	2008		
	Use index below:				
	<u>Index</u>				
	1. less than \$250,000 2. \$250,000 to \$1,000,0 3. \$1,000,000 to \$3,000	00 5.	63,000,000 to \$6,000,000 66,000,000 or greater		
8.	Brief resumes of key persons anticipated for this project. Please indicate male/female,				

8.

minori	ity/majority and parish of domicile.				
a.	Name and title				
b.	Project assignment				
c.	Name of firm by which employed full time and location of office				
d.	Years experience with this firm With other firms in the New Orleans market				
e.	Highest Academic Degree: Year Received				
	Specialization				
	Other Professional Training				
f.	Experience and qualification relevant to the proposed project				
g.	Names of public officials, political candidates and/or public agencies, especially in Louisiana for which the firm has provided service since July 1, 2008, with dates of the service and brief description.				
h.	Contracts using public funds (city, state or federal) administered b	y firm.			
curren	by firm's personnel members to be assigned to this job which best it qualifications relevant to this project (list not more than 5 projects ence with governmental issues).				
a.	Project Name & Location and Owner's Name				
b.	Project Description				
c.	Nature of Firm's Responsibilities				
d.	Completion Date (Actual or Estimated)				
e.	Estimated Fees for Entire Project				
	le any additional information or description of resources supporting cations for the proposed project.	your firm's			
		Provide four references including name/title, phone number			

9.

10.

11.

and address.