



**SOLICITATION NUMBER**

**VA260-17-R-0117**

**Project Title: Replace Seismically Deficient Building 207**

**Project Number: 692-346**

**GENERAL CONTRACTOR REFERENCE FORM**

*(continued page 2 of 3)*

Offeror: \_\_\_\_\_

Solicitation No: \_\_\_\_\_

Contract No: \_\_\_\_\_ Project No: \_\_\_\_\_

Implementation of Infection Control Requirements: \_\_\_\_\_

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

Describe sustainability requirements (LEED, Green Globes, etc.), the approach and the level attained: \_\_\_\_\_

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

Describe any terminations (partial or complete), the reason (convenience or default) and the surrounding circumstances: \_\_\_\_\_

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Identify specialties of construction demonstrated by this project:

\_\_\_\_\_ New construction of at least one multi-story outpatient medical clinic or multi-story non-residential facility of similar scope and magnitude

\_\_\_\_\_ New construction of at least one seismically enhanced, non-residential facility

\_\_\_\_\_ New construction of at least one physical security hardened, non-residential facility

\_\_\_\_\_ Phased construction

\_\_\_\_\_ Construction with ongoing operations