

Department of Veterans Affairs
National Cemetery Administration
Design-Build Installation of Iron Filtration System At Florence NC, Florence, SC

Factor 1: Volume I – Tab A

Corporate Relevant Specialized Experience (Offerors should submit for at least three projects).

Your firm's name _____

Name of Project/Location _____

General Scope of Project _____

Your role (prime, joint, subcontractor) and work your company self-performed _____

Percentage of Work completed by Prime Contractor Personnel: _____ %

Construction Cost:

At Award \$ _____

Reason for the cost growth: _____

Final Cost \$ _____

Award Date: _____

Scheduled Completion: _____

Reason for the time growth: _____

Actual Completion: _____

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Extent and type of work you subcontracted out

Owner's Point of Contact (POC) for reference (name and company and telephone number)

Safety Performance and Record: Experience Modification Rate (ERM)

Please provide additional clarification if an ERM calculation is greater than 1.1
In the case of a joint venture, ERM information should be considered for both contractors.

Additional Information:
