1. Minimum Qualifications Checklist

*Complete this form and attach it to your firm’s Proposal*

I, Insert Name, am a Insert Title at Insert Firm and am authorized to execute this Certification on its behalf.

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| **Minimum Qualifications** | | |
| Proposals will be accepted only from firms that meet the following required qualifications:  Please check box if your firm meets these qualifications:     |  |  | | --- | --- | |  | The proposer has been actively and normally engaged for the past five years immediately preceding the issuance of this RFP in providing the type of transportation demand management planning and stakeholder engagement as described in the Scope of Work, including work for public agencies similar to the Scope of Work, one (1) of which must have been in the State of California. | |  | The proposer has completed at least three (3) jurisdiction-wide Transportation Demand Management Plans for public agencies. | |  | The proposer’s Project Manager shall have a minimum of four (4) years of experience relevant to the services defined in the Scope of Work. | | | |
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| **Required Registration** | | |
| Please check box to indicate your firm is registered with the System for Award Management (SAM).  Proposer is required to be in good standing with https://sam.gov/SAM/ | | |
| |  |  | | --- | --- | |  | Registered as Business Name    DUNS No. Business Number | | |  |
|  | | |

I certify that the foregoing information is true and correct as of the date of this Certificate.

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_