

**REFERENCE FORM  
 NORTHEAST MARYLAND WASTE DISPOSAL AUTHORITY  
 REQUEST FOR QUALIFICATIONS  
 REPRESENTATIVE PROJECT INFORMATION AND REFERENCE FORM**

**PART A: PROJECT INFORMATION FORM - TO BE FILLED OUT BY OFFEROR/CONTRACTOR**

To: \_\_\_\_\_  
 (NAME OF REFERENCE)

\_\_\_\_\_  
 (NAME OF OFFEROR/CONTRACTOR)

is applying for qualification with the Northeast Maryland Waste Disposal Authority in order to propose on services for the \_\_\_\_\_ Project.

We have chosen you as a reference based on our work on the project identified below.

Please complete Part B, Reference of this Form and return both pages to Northeast Maryland Waste Disposal Authority, by email to [procurement@nmwda.org](mailto:procurement@nmwda.org)

Thank you for your assistance.

\_\_\_\_\_  
 (SIGNATURE) (DATE)

\_\_\_\_\_  
 (FIRM/COMPANY)

\_\_\_\_\_  
 (PRINTED NAME)

\_\_\_\_\_  
 (ADDRESS)

\_\_\_\_\_  
 (TITLE)

**PROJECT INFORMATION**

**REPRESENTATIVE PROJECT ID #:**

Project Title: \_\_\_\_\_

Bid/Initial Construction Cost: \$ \_\_\_\_\_

Project Location: \_\_\_\_\_

Owner Initiated Changes: \$ \_\_\_\_\_

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

Non-Owner Initiated Changes: \$ \_\_\_\_\_

Project Description: \_\_\_\_\_

Final Construction Cost: \$ \_\_\_\_\_

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

| Amount of Work Completed by Prime Contractor & Major Subcontractors |  | List Actual \$ OR % of Total Construction Cost |   |
|---|--|--|---|
| Prime Contractor:   |  | \$   | % |
| Sub-Contractors:  |  |  |   |
| 1   |  | \$   | % |
| 2   |  | \$   | % |
| 3   |  | \$   | % |
| 4   |  | \$   | % |
| 5   |  | \$   | % |

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**PART B: TO BE FILLED OUT BY REFERENCE**

Is the project information on Page 1 correct? \_\_\_\_\_

What was your role in the project? \_\_\_\_\_

Circle the appropriate ratings for each listed factor:

|   |      |                  |         |                  |           |
|---|------|------------------|---------|------------------|-----------|
| I | Poor | Below<br>Average | Average | Above<br>Average | Excellent |
|---|------|------------------|---------|------------------|-----------|

**PROJECT EXECUTION**

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| Scheduling and Coordination of Work           | 1 | 2 | 3 | 4 | 5 |
| Scheduling and Coordination of Subcontractors | 1 | 2 | 3 | 4 | 5 |
| Responsiveness to Changing Conditions         | 1 | 2 | 3 | 4 | 5 |
| Time to Complete Project                      | 1 | 2 | 3 | 4 | 5 |
| Project Closeout                              | 1 | 2 | 3 | 4 | 5 |
| Professionalism/Courtesy                      | 1 | 2 | 3 | 4 | 5 |

**QUALITY**

|                                       |   |   |   |   |   |
|---------------------------------------|---|---|---|---|---|
| Ability to Perform                    | 1 | 2 | 3 | 4 | 5 |
| Accuracy and Quality of Documentation | 1 | 2 | 3 | 4 | 5 |
| Overall Quality of Work               | 1 | 2 | 3 | 4 | 5 |
| Quality of Subcontractors             | 1 | 2 | 3 | 4 | 5 |

TOTAL RATING (sum of points above): \_\_\_\_\_

**Note:** A perfect score on this evaluation is 50 points.

Would you recommend the Contractor to other entities to perform similar work?

|     |    |
|-----|----|
| YES | NO |
|-----|----|

GENERAL COMMENTS (Your comments are greatly appreciated):

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Based on my knowledge of the aforementioned firm, I have evaluated their performance for the referenced construction project and rated them in comparison to other contractors performing similar work. I have included in the General Comments section additional information regarding this firm, which may be of assistance in evaluating the quality of their work. It is my understanding that all the above information supplied here shall be considered **STRICTLY CONFIDENTIAL**.

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
(FIRM)

\_\_\_\_\_  
(PRINTED NAME)

\_\_\_\_\_  
(ADDRESS)

\_\_\_\_\_  
(DATE)

\_\_\_\_\_  
(CITY, STATE, ZIP CODE)

\_\_\_\_\_  
(PHONE NUMBER)

\_\_\_\_\_  
(FAX NUMBER)