revised 01/08/2013

PROCUREMENT DOCUMENT REVIEW FORM

Instructions: Program Liaison, please complete sections 1-3a or 3b and 5 as thoroughly as possible.

1. General Information

Date received from Agency: _____ Grant Program: _____

Program Liaison: _____

Grant Amount: _____ SA Number: _____

Project Description: _____

ITS Project: ☐ Yes ☐ No	Regional ITS Architecture Compliant: ☐ Yes ☐ No ☐ N/A
☐ ITS compliance form completed & on file	

Sole Source: ☐ Yes ☐ No	Sole Source Justification Form completed: ☐ Yes ☐ No ☐ N/A

2. Subrecipient Information

Agency Name: _____

Contact: _____ Phone: _____ Ext.: _____

Address: _____ email: _____

City: _____ Zip Code: _____ Caltrans District: _____ County: _____

3a. Bid Review

Type of Bid: _____

Completed FTA Clause Matrix Attached: ☐ Yes ☐ No

Solicitation Document Attached: ☐ Yes ☐ No

Bidders List Attached: ☐ Yes ☐ No

Independent Cost Estimate Attached: ☐ Yes ☐ No

Schedule:

Bid Release Date: _____

Bid/Scoring Summary Attached: ☐ Yes ☐ No

Selected Contractor: _____

Selected Contractor Debarred: ☐ Yes ☐ No

Draft or Final Contract Attached: ☐ Yes ☐ No

Contract Award Date: _____

Bid Approved: _____ Award Approved: _____

3b. 3rd Party Contract Review

Type of Contract: ☐ Operations ☐ Maintenance ☐ Capital

Other: _____

Bid Solicitation Attached: ☐ Yes ☐ No

Bid Summary Attached: ☐ Yes ☐ No

Staff Report Attached: ☐ Yes ☐ No

Contract Terms:

Contract Amount: _____

Base Period: _____

Options: _____

Contract Compliant: ☐ Yes ☐ No

Date Approved: _____

4. Procurement Review

Procurement Reviewer: _____ Initial Review Date: _____

5. Program Comments

_____

6. Procurement Comments

_____

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