



Miami-Dade County Public Schools
RELATED EXPERIENCE FORM

(Make copies of this form and use to list projects for categories 3A, 3B & 3C. Submit separate form(s) for each category).

PROPOSER / APPLICANT NAME: _____

APPLICATION DATE: _____

CATEGORY: 3A 3B 3C

PROJECT	Contract Type	Owner (project user / agency's representative)	Contract Value	Completion Date	Services Provided
<ul style="list-style-type: none"> • Facility Name • Project Title • Location 	P = Project Specific T = Term Contract	<ul style="list-style-type: none"> • Name • Address • Current Phone • E-mail address (see note #1 below)	(in Terms of Fees Paid to the Proposer)		(check all applicable services) <ul style="list-style-type: none"> <input type="checkbox"/> Pre-Construction Services <input type="checkbox"/> Periodic Field Inspections <input type="checkbox"/> Air Distribution T&B or Re-balance <input type="checkbox"/> Hydronic System T&B or Re-balance <input type="checkbox"/> Major Component Performance Analysis <input type="checkbox"/> Duct Pressure Test <input type="checkbox"/> Corrective Action Inspection/Report <input type="checkbox"/> Trouble Shooting <input type="checkbox"/> HVAC/Systems Commissioning <input type="checkbox"/> Other: *

* DESCRIPTION OF OTHER SERVICES PROVIDED:

Notes:

1. In addition to owner information, provide additional name, address and current phone number of contact person if services were provided to a professional A/E firm or other firm other than the owner.
2. A maximum of three (3) projects under term contracts may be listed as individual projects.