

Exhibit D

PROFESSIONAL TEAM FEE PROPOSAL

Submit in an opaque envelope at the beginning of the interview if selected

Project No: _____

Project Name: _____

Institution: _____

Legal Name of Firm: _____

Physical Address of Firm: _____

Phone Number: _____

Fax Number: _____

Professional's form of business: _____

Professional's SSN or Business FEIN: _____

PROFESSIONAL CONSULTANT SERVICES FEE:

Represents the proposed fee percentage for basic consulting services, anticipated additional/specialty consultant services, and construction management/administration services provided by the submitting firm, including all reimbursable expenses. Include a listing of all possible roles that your company will be able to offer for basic, anticipated additional services and specialty consultants, if appropriate and the associated hourly wage, mark-up percentage, and billing rate for each role. Pricing percentage should be submitted based on single project basis to be applied per project.

(Hourly rate X Mark-up % = Billing Rate)

Position of Staff	Position of Staff Hourly Rate	Mark-up (as percentage)	Billing Rate
		%	
		%	
		%	
		%	
		%	
		%	
		%	
		%	
		%	
Reimbursable Expense	Actual Costs	%	Billed Amount

Provide listing of all basic services and additional/specialty services below:

Basic services	Additional/specialty services

Name of Professional Officer

Signature of Professional Officer

Title of Professional Officer