

REFERENCE FORM

REFERENCE FORM - To be completed by Proposer's Client, not the Proposer. Also note that BSO personnel are prohibited from completing this form.

PROPOSER'S COMPANY NAME: _____

Name of Reference Agency: _____

Address of Reference: _____

Contact Information of Reference:

Name

Title

Phone #

E-Mail Address

1. Reference Company a. Type of Business _____
 b. Estimated # of employees _____
2. Project Name: _____
3. Project Amount: _____
4. Description of services provided by Vendor: _____

5. Vendor's role in Project: ☐ Prime Vendor ☐ Subconsultant/Subcontractor
6. Would you use this vendor again? ☐ Yes ☐ No If No, please explain: _____

7. Contract term - begin/end dates that Proposer has provided Services to you.
(If there were any breaks in services, please state reason and duration of the break): _____

8. Is Proposer still providing services to your agency? If not, please elaborate: _____

9. Is your agency satisfied with the level of service and staffing provided by Proposer? Please elaborate. _____
10. When a problem is encountered, is the Proposer responsive to your Agency's concerns?

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11. What is response time for addressing concerns? _____

12. Please share any information that may be helpful through your experience with your agency's experience regarding the services provided by the Proposer.

Please rate your experience with the Vendor:	Needs Improvement	Satisfactory	Excellent	Not Applicable
1. Vendor's Quality of Service				
a) Responsive				
b) Accuracy				
c) Deliverables				
2. Vendor's Organization:				
a) Staff expertise				
b) Professionalism				
c) Staffing Turnover				
d) Timeliness of Project				
e) Deliverables				
3. Project completed within budget				
4. Cooperation with:				
a) Your Firm				
b) Subcontractor(s)/ Subconsultant(s)				
c) Regulatory Agency(ies)				

Additional Comments: (provide on additional sheet if needed)

All information provided to BSO is subject to verification. Vendor acknowledges that inaccurate, untruthful, or incorrect statements made in support of this response may be used by the BSO as a basis for rejection, rescission of the award, or termination of the contract.

Name & Signature of Agency Representative

Title

Date