Form C: Experience of Proponent and Subconsultant

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| [ ] **Proponent**[ ] **Subconsultant**  | **Name:** | **Project # :** |
| **Project Name:** |  |
| **Start Date: Month/Year** |  | **Completion Date:** |  |
| **Project Description:** *Include project owner, project objectives; size of electrical power transmission and transformation system and other relevant information demonstrating similarity to project criteria in B10.3*. |
| **Consultant Services description:***Provide clear and comprehensive description of the consultant services, details of the role of the consultant/ Subconsultant, and assignment outcomes and achievements.* |
| **Original and Final Cost***Provide this information for the consultant services assignment value of scope performed and the construction.* *Identify the amount of scope changes and the reasons for each of them.* |
| **Design and construction schedules***Include anticipated project schedule and actual project delivery schedule, showing design and construction separately and provide the reasons for any discrepancies between the two (if any).* |
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| **Reference Name**  | **Title/Function**  | **Email** | **Phone Number** |
| **#1** |  |  |  |
| **#2** |  |  |  |

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| **Proponent Representative Signature:** | **Subconsultant representative Signature:** |
|  |  |
| **Date:** |  |  |