To Whom It May Concern:

Subject: Reference Letter for Health and Safety Manager

Health and Safety Manager as defined in the solicitation:      .

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| The Following Section to be Completed by the Proposer. |

Name of Proposer:

Name of Proposed Health and Safety Manager:

The above referenced Proposer is responding to a Request for Proposals (RFP) that has been issued by the City of Miami. We require that the Proposer provide written references for their proposed Health and Safety Manager (HSM). The Proposer is requesting that you, as the Owner of the referenced project, provide the following information as well as any other pertinent information. Your insight is appreciated.

Name of Project:

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| The Following Section to be Completed by the Project Owner. |

Scope of Work for Referenced Project:

Value of Project: $      Value of Construction: $

Type of Project: [ ]  Design-Bid-Build [ ]  CM@Risk [ ]  Design-Build [ ]  Other (      )

Construction completed on time and within budget? [ ]  Yes [ ]  No

How long did the proposed HSM serve in the capacity as HSM on this project?

Quality of Work: [ ]  Above Expectations [ ]  Average [ ]  Below Expectations

Errors and Omissions: [ ]  Above Expectations [ ]  Average [ ]  Below Expectations

(Above expectations indicates fewer errors and omissions than anticipated by Project Owner.)

Did Errors and Omissions result in increased construction cost? [ ]  Yes [ ]  No

Was the HSM responsive? [ ]  Yes [ ]  No

Was the HSM timely with reviews and submittals? [ ]  Yes [ ]  No

Did the HSM effectively resolve issues in a timely manner? [ ]  Yes [ ]  No

Please type in the field below to provide comments (Please use the attached additional page, as necessary):

Name of Project Owner:       Date:

Signature of Project Owner’s Representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title:

Telephone:       E-mail:

Please utilize the space below, as necessary.