

# City of Miami



Daniel J. Alfonso  
City Manager

To Whom It May Concern:

Subject: Reference Letter for **Environmental Specialist (ES)**, as defined in **RFQ No. 16-17-003**.

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

Name of Proposer: \_\_\_\_\_

Name of Proposed ES: \_\_\_\_\_

The above referenced Proposer is responding to a Request for Qualifications (RFQ) that has been issued by the City of Miami. We require that the Proposer provide written references for their proposed **Environmental Specialist**. 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: \_\_\_\_\_

## 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 **ES** serve in this capacity 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 **ES** responsive?  Yes  No

Was the **ES** timely with reviews and submittals?  Yes  No

Did the **ES** 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: \_\_\_\_\_

Name of Project Owner's Representative: \_\_\_\_\_

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

Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Date: \_\_\_\_\_

Sincerely,

Annie Perez, CPPO  
Director  
Procurement Department

# City of Miami



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Please utilize the space below, as necessary.