Professional: Name of Firm

Address

City, State, Zip

**Attention: Contact Name**

**Email:** [**Contact**](mailto:GCarballada@foit-albert.com) **Email**

**TERMS AND CONDITIONS:**

Services shall be rendered in accordance with the terms and conditions specified in Contract 193896.

The MBE/WBE/SDVOB goals for this contract are 20% MBE, 12% WBE and 2% SDVOB and are applicable to the entire value of the contract. A completed Utilization Plan listing all sub consultants must be submitted thru the NYS Contract System regardless of the dollar value of the work authorization. A searchable directory of certified M/WBE firms is available at <https://ny.newnycontracts.com> and a directory of certified SDVOB firms is available at <http://www.ogs.ny.gov/Core/SDVOBA.asp>. Only those firms certified M/WBE by NYS and perform commercially useful functions may be counted toward M/WBE utilization.

When the plan is ready for your completion, you will receive an email from the NYS Contract System.

**PROJECT DESCRIPTION:**

Name of Project (Project # / CR #)

**SCOPE OF SERVICES:**

In accordance with Term Contract 123456, the Professional and it’s subconsultants shall provide:

Design and Construction Phase Services

* Preschematic through Post Construction Deliverables

**PROVISIONS FOR PAYMENT:**

The Owner shall pay, and the Professional agrees to accept, as compensation for the Professional’s Required Services, the following amounts at the successful submission of each deliverable of the Professional’s Required Services:

|  |  |  |
| --- | --- | --- |
| Deliverable | Dollar Amount |  |
| Preschematic | $3,675.00 | LS |
| Schematic Design | $7,350.00 | LS |
| Design Development | $13,230.00 | LS |
| Design Development – Quality Control | $1,470.00 | LS |
| Construction Documents | $24,990.00 | LS |
| Construction Documents – Quality Control | $2,940.00 | LS |
| Bid Phase | $3,675.00 | LS |
| Construction Administration | $7,350.00 | LS |
| Construction Fieldwork | $7,350.00 | AE |
| Post Construction Deliverables | $1,470.00 | LS |
| Reimbursable Expenses | $500.00 | AE |
| **Total** | **$74,000.00** | **NTE** |

AE = Actual Expense LS = Lump Sum NTE = Not to Exceed

*The fees calculated for Preschematic through Post Construction Deliverables were established by the DASNY Fee Schedule per the approved construction budget of $500,000.00.*

**COMPLETION DATE:**

The Professional Services described in this Work Authorization shall be completed on or before

Month Day, Year.

Approved: Date:

Authorized Officer

Dormitory Authority of the State of New York

/Initials