|  |  |
| --- | --- |
| MASTER CONTRACT # AND TITLE: |  |
| AGENCY: |  |
| EMMA CTR NUMBER: |  |
| FUNCTIONAL AREA(S):(IF APPLICABLE) |  |
| MANUFACTURER:(IF APPLIABLE) |  |

**INSTRUCTIONS:** FILL IN THE INFORMATION ABOVE AND COMPLETE THE SECTIONS BELOW TO CREATE / ASSEMBLE THE AWARD RECOMMENDATION PACKAGE. THE ATTACHED DOCUMENTS SHALL BE SENT WITH REFERENCE TO THE PART NUMBER IN THE DOCUMENT TITLE, SUCH AS 04-EMMA, 05A-PORFP AS ADVERTISED, ETC.

[ ]  **PART 1 – SBR DESIGNATION**

INDICATE IF THE PORFP WAS DESIGNATED SMALL BUSINESS RESERVE (SBR).

[ ]  YES [ ]  NO

[ ]  **PART 2 - RANKING TABLE**
LIST EACH QUALIFIED BID IN ASCENDING ORDER FROM LOWEST TO HIGHEST BID AMOUNT.

|  |  |
| --- | --- |
| **BIDDERS** | **AMOUNTS** |
| *LIST THE MASTER CONTRACTOR* *INCLUDE THEIR (CITY, STATE)* *AND SBE, MBE, VSBE (AS APPLICABLE)* | *LIST THE BID AMOUNTS FROM LOWEST TO HIGHEST* |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

[ ]  **PART 3 - PROCUREMENT OFFICERS' DETERMINATION**

PROVIDE A WRITTEN SUMMARY OF THE RATIONALE FOR SELECTING THE RECOMMENDED MASTER CONTRACTOR'S BID FOR AWARD.

*AT A MINIMUM, THE WRITTEN SUMMARY SHALL INCLUDE THE FOLLOWING INFORMATION:*

* *PORFP RELEASE DATE AND CLOSING DATE.*
* *NUMBER OF QUALIFIED MASTER CONTRACTORS THAT RECEIVED THE PORFP.*
* *NUMBER OF BIDS RECEIVED.*
* *NUMBER OF BIDS THAT MET MINIMUM QUALIFICATIONS.*
* *NUMBER OF BIDS FOUND NOT SUSCEPTIBLE AND WHY (DO NOT LIST NON-SUSCEPTIBLE BIDS IN PART 2 – RANKING TABLE).*
* *TOTAL AWARD PRICE.*
* *TERM.*
* *JUSTIFICATION OF RECOMMENDED BIDDER.*

[ ]  **PART 4 - NOTICE OF SOLICITATION**

PROVIDE A PDF COPY OF THE EMMA SOLICITATION POSTING, AND EMAIL/S USED TO DIRECT SOLICIT THE PORFP TO MASTER CONTRACTORS.

[ ]  **PART 5 - SOLICITATION AS ISSUED**PROVIDE A COPY OF THE FOLLOWING:

1. PORFP AS ISSUED TO MASTER CONTRACTORS.
2. ANY AMENDMENTS ISSUED (AS APPLICABLE).
3. OSP PRG APPROVAL EMAIL (AS APPLICABLE).

[ ]  **PART 6 - BIDS RECEIVED**PROVIDE A COPY OF THE FOLLOWING:

1. WINNING MASTER 'CONTRACTOR'S BID. ENSURE IT INCLUDES THE FOLLOWING:
	* 1. SIGNED COPIES OF ALL REQUIRED AFFIDAVITS (AS APPLICABLE)
		2. CORPORATE DIVERSITY ADDENDUM (AS APPLICABLE)
		3. MBE FORMS (AS APPLICABLE FOR PORFPS WITH AN MBE GOAL)
2. ALL QUALIFIED BIDS RECEIVED
3. ALL NO-BID RESPONSES

[ ]  **PART 7 - PRICE ANALYSIS (AS APPLICABLE)**

IF RECOMMENDING AN AWARD BASED ON A SINGLE BID, A DETERMINATION THAT THE PRICE IS FAIR AND REASONABLE IS REQUIRED. REFER TO THE BPW ADVISORY 2016-1. ([HTTPS://BPW.MARYLAND.GOV/PAGES/ADV-2016-1.ASPX](https://BPW.MARYLAND.GOV/PAGES/ADV-2016-1.ASPX))

[ ]  **PART 8 - PROCUREMENT OFFICER APPROVAL**FOR THE REASONS FOUND ABOVE, I RECOMMEND THE AWARD OF THIS CONTRACT TO List Master CONTRACTOR RECEIVING THE AWARD.

SIGNATURE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*PROCUREMENT OFFICER NAME (TYPE): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*DATE COMPLETED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SUBMIT THIS COMPLETED FORM AND ALL PARTS OF THE AWARD PACKAGE VIA EMAIL TO: DOIT.INTAKE@MARYLAND.GOV