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| --- | --- | --- |
| Local Education Agency | State Project No. | Phase |
| School | Architect | Date |

DAS - OFFICE OF SCHOOL CONSTRUCTION GRANTS & REVIEW (OSCG&R) PLAN REVIEW CHECKLIST

**PRE-BID CONFORMANCE REVIEW (PCR)**

Use for Project Phases regarding

**FF&E, Technology, and Play Equipment**

**FORM SCG-3008**

* Submit a separate Pre-Bid Conformance Review (PCR) Checklist for FF&E, Technology, and Play Equipment
* Notes: Use “None”, “NPS” (Not in Project Scope), or explain condition
* Status column (by SCG staff): **🗸** Accepted ⭘ Open Item

|  |  |  |
| --- | --- | --- |
|  |  | Status |
|  | Document | Notes |
| 01. | PREP Meeting attendance by:  |  |  |
|  | 1. Local Education Agency (LEA)
 |  |  |
|  | 1. Design team
 |  |  |
| 02. | FORM SCG-042: **Request for Review of Final Plans** Provide page 1 and 2, *or* page 1 with Code Conformity Certification FORM SCG-3028 and/or FORM SCG-3029 as required |  |  |
| 03. | FORM SCG-3000: **Project Team List** Updated contact information |  |  |
|  04. | FORM SCG-4000: **Ineligible Costs and Limited Eligible Costs Worksheet** (ICW) Updated version |  |  |
|  | **Cost Estimate: Requirements for Project Phases** **– current phase project cost estimate** |
| 05. | CSI format - submit detailed cost estimate |  |  |
|  | 1. Hardcopy submission of cost estimate
 |  |  |
|  | 1. Ineligible costs identified
 |  |  |
|  | 1. Alternates - itemized list of all Bid Alternates
 |  |  |
|  | 1. Allowances - itemized list of all Contract Allowances [Refer to FORM SCG-3050]
 |  |  |
|  | 1. Contingencies - itemized list of all Contingencies
 |  |  |
|  | 1. Unit Prices - itemized list of all Unit Prices
 |  |  |
|  | 1. Consultants’ fees line item
 |  |  |
|  | **Cost Estimate: Requirements for All Projects - regardless of total project cost** **or number of phases** [Regulation 10-287c-21(a)(2] |
| 06. | PSCCD - **Public School Construction Cost Database** Electronic cost estimate worksheet submitted for entire project See FORM SCG-2000 & FORM SCG-2000.INST instruction sheet |  |  |
|  | 1. Hardcopy submission of PSCCD cost estimate
 |  |  |
|  | 1. Ineligible costs identified
 |  |  |
|  | 1. Alternates - itemized list of all Bid Alternates
 |  |  |
|  | 1. Allowances - itemized list of all Contract Allowances [Refer to FORM SCG-3050]
 |  |  |
|  | 1. Contingencies - itemized list of all Contingencies
 |  |  |
|  | 1. Unit Prices - itemized list of all Unit Prices
 |  |  |
|  | 1. Consultants’ fees line item
 |  |  |
| 07. | FORM SCG-3028: **Code Conformity Certification** Play Equipment - as required  |  |  |
| 08. | FORM SCG-3029: **Code Conformity Certification** Technology Equipment - as required |  |  |
| 09. | FORM SCG-3031: **LEA Cost Estimate Certification** Note – submission of this form is required |  |  |
| 10. | FORM SCG-3015: **Checklist** Fixtures, Furnishings & Equipment Phase (FF&E) |  |  |
| 11. | FORM SCG-3016: **Checklist** Technology Equipment Phase |  |  |
| 12. | FORM SCG-3017: **Checklist** Play Equipment Phase |  |  |
| 13. | **Scope Letter** by Architect: updated as required |  |  |
|  | 1. Copy of original scope letter for overall project
 |  |  |
|  | 1. Revised scope letter pertinent to phase
 |  |  |
|  | 1. Procurement methods (Bid and/or State Contract)
 |  |  |
|  | 1. Description of eligible work
 |  |  |
|  | 1. Description of ineligible work

[Refer to FORM SCG-4000 and FORM SCG-4015] |  |  |
|  | 1. Allowances [Refer to FORM SCG-3050]
 |  |  |
|  | 1. Alternates
 |  |  |
|  | 1. Contingencies
 |  |  |
|  | **Project Manual**: **Requirements** |
| 14. | Cover: |  |  |
|  | 1. Seals / signatures of design professionals
 |  |  |
|  | 1. Project name, Project number, Project address
 |  |  |
| 15. | Approval and sign-off by Reviewers |  |  |
|  | 1. On cover
 |  |  |
|  | 1. On Table of Contents
 |  |  |
| 16. | Project name and State Project Number throughout |  |  |
| 17. | Dates per FORM SGC-042 throughout |  |  |
| 18. | CSI format throughout |  |  |
| 19. | Table of Contents all-inclusive and clear |  |  |
| 20. | List of Drawings |  |  |
| 21. | Supplementary/Special Conditions: include requirements for: |  |  |
|  | 1. Prevailing Wage Rate place holder page
 |  |  |
|  | 1. Preconstruction/pre-install meeting requirements
 |  |  |
|  | 1. Insurance - with dollar amounts
 |  |  |
|  | 1. Daily clean-up
 |  |  |
|  | 1. Stipulated overhead and profit percentage amounts for Change Orders (20% maximum State reimbursement)
 |  |  |
|  | **Drawings: Requirements** **for Final Construction Documents:**  |
|  22. | Bound, scaled, legible, key plan, and no text reading “Not for Construction” |  |  |
| 23. | Cover with: |  |  |
|  | 1. Signatures/seals of all Design Team members
 |  |  |
|  | 1. Project name, number and location
 |  |  |
|  | 1. List of Drawings
 |  |  |
| 24. | Professional seal/signature throughout |  |  |
| 25. | State project name and number throughout |  |  |
| 26. | Dates per FORM SGC-042 throughout |  |  |
|  | **Procurement: Requirements** |
| 27. | **Competitive Bid Process -** submitBid Form with: |  |  |
|  | 1. Allowances [Refer to FORM SCG-3050]
 |  |  |
|  | 1. Alternates
 |  |  |
|  | 1. Contingencies
 |  |  |
|  | 1. Unit Prices
 |  |  |
| 28. | Advertisement for Bids (legal notice) |  |  |
| 29. | Statement of Bidder’s Qualifications  |  |  |
| 30. | **State Contract Process -** submit copies of: |  |  |
|  | 1. Purchase list - with applicable state contract numbers
 |  |  |
|  | 1. Verification of availability on DAS contract provide portal contract search results to verify contract is current
 |  |  |
|  | 1. Sample Purchase Order referencing applicability of Project Manual and Drawings
 |  |  |
| 31. | **Proprietary specifications:** |  |  |
|  | 1. Copy of Sole Source Procurement Request letter from LEA

[Refer to FORM SCG-3040] |  |  |
|  | 1. Copy of SCG Sole Source approval letter
 |  |  |

**Remarks / Summary of Incomplete Items**

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| --- | --- | --- |
|  | Date | SCG Reviewer |
| Date of Initial Submission |  |  |
| Date Not Accepted (Revisions required, contact SCG to schedule next meeting.) |  |  |
| Date Accepted for Review |  |  |
| Date Submittal Complete |  |  |

|  |  |  |
| --- | --- | --- |
|  | Date | SCG Reviewer |
| Data Entered in System |  |  |
| Approval To Bid Letter  |  |  |