ATTACHMENT 1 – REFERENCE FORM

Request for Proposal No. BUD/270057
NON-AD VALOREM FIRE ASSESSMENT STUDY

In order to be deemed responsive and responsible, Proposer must be able to provide: (a) proof of verifiable experience supplying and delivering products of a similar scope as those outlined in this Solicitation to a governmental agency, for a period of no less than ten (10) years. For each reference identified, proposer must provide the name of the entity, contact person, phone number, email address. This **Attachment 1 – Reference Form** should be utilized to provide the foregoing information.

COMPANY NAME

Name of Entity:			
Contact Name:		**Title:**	
Address:			
Telephone:		**E-Mail:**	
Length of Business Relationship:			
Description of Services Performed:			

Name of Entity:			
Contact Name:		**Title:**	
Address:			
Telephone:		**E-Mail:**	
Length of Business Relationship:			
Description of Services Performed:			

Name of Entity:			
Contact Name:		**Title:**	
Address:			
Telephone:		**E-Mail:**	
Length of Business Relationship:			
Description of Services Performed:			

If additional pages are needed, please attach additional sheets to this page.

Printed Name of Authorized Signatory Signature Date