



# FORM 5

## REFERENCE

### QUESTIONNAIRE

RFP02172200000025

LOI# AIR/220118

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Proposer's Name: \_\_\_\_\_  
(Insert Name of Company Reference is being submitted for)

Name/Company of individual completing reference: \_\_\_\_\_

The person completing the Reference Questionnaire must provide a response to all the following questions:

1. Describe the services provided by the Proposer to your organization.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Please rate your overall satisfaction with the Proposer on a scale of 1 to 5, with 1 being "least satisfied" and 5 being "most satisfied." \_\_\_\_\_

3. If you answered three (3) or less to the previous question, what could the Proposer have done to improve their rating?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Please indicate your level of satisfaction with the Proposer's project management structures, processes, and personnel. Use a scale of 1 to 5; with 1 being "least satisfied," and 5 being "most satisfied." \_\_\_\_\_

5. If you answered three (3) or less to the previous question, what could the Proposer have done to improve their rating?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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**Continued**

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Proposer's Name: \_\_\_\_\_  
*(Insert Name of Company Reference is being submitted)*

6. How long were past services provided or are the services currently being provided (if current, when did Proposer begin providing services?)

\_\_\_\_\_

7. Would you use the services of the Proposer again? Indicate on a scale of 1 to 5: with 1 being "absolutely not" and 5 being "absolutely yes". \_\_\_\_\_

8. Additional Comments or Feedback:

\_\_\_\_\_  
\_\_\_\_\_

**NOTE: THE RESPONDENT SHOULD SEND THE REFERENCE QUESTIONNAIRE TO THREE REFERENCES.**

**CITY OF OCALA WILL ACCEPT THE REFERENCE FORM ONLY FROM THE INDIVIDUAL COMPLETING THE REFERENCE QUESTIONNAIRE. THE REFERENCE FORM SHOULD BE E-MAILED DIRECTLY TO [emarguez@ocalafl.org](mailto:emarguez@ocalafl.org) WITH THE LOI# AIR/220118 IN THE SUBJECT LINE.**

As part of this solicitation, Respondent references are considered very important. As such, OCALA will contact and evaluate the responses it receives from each reference provided in response to this solicitation. To the extent the required reference questionnaires are not received, contact with proposed references cannot be made, or the proposed references indicate a lack of knowledge or awareness of Respondent, the same will be negatively reflected in OCALA'S evaluation and award of points for this factor. Therefore, prior to proposing references, Respondents are encouraged to contact those individuals or entities being proposed as references to ensure that: (i) their contact information is current and correct; (ii) they are knowledgeable and aware of the issues for which they are being proposed as references; and (iii) they are ready, willing, able and permitted to provide the reference information being sought.

Person Responding to Reference Questionnaire: \_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Signature)

Person's Title: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Date Reference Form Was Completed: \_\_\_\_\_