**AGENCY:**

**PROJECT NAME:**

**PROJECT NUMBER:**

**ORIGINAL AGREEMENT DATE:**

**REVISION #:**       **DATE:**       **REVISION #:**       **DATE:**

**REVISION #:**       **DATE:**       **REVISION #:**       **DATE:**

**REVISION #:**       **DATE:**       **REVISION #:**       **DATE:**

**COMMENTS:**

The purpose of this SLA is to establish milestones and deliverables for each anticipated activity in the project development and procurement process for the above state project. Both Parties agree to abide by the scheduled timeframe below. If the timeframe is not adhered to, then a new schedule must be mutually agreed upon and implemented. If the agency fails to meet timeframes set, the job may be delayed as it will have to be rescheduled according to the OSE Project Manager’s available time.

|  |  |  |
| --- | --- | --- |
|  | **OSE Project Manager** | **Name:**      **Phone:**      **Email:**       |
|  | **Agency Project Manager** | **Name:**      **Phone:**      **Email:**       |
|  | **Agency Program/End-User** | **Name:**      **Phone:**      **Email:**       |
|  | **Agency requests approval of Alternative Delivery Method from State Engineer** | **Date:**       |
|  | **Phase I PIP Approval (A-1 approval date)** | **Date:**       |
|  | **OSE advertised for A/E Services in SCBO** | **Date:**       |
|  | **Agency conducts interviews for A/E Services** | **Date:**       |
|  | **Agency requests authority to execute Professional Services Contract** | **Date:**       |
|  | **Agency submits CM-R Selection Plan to OSE for approval** | **Date:**       |
|  | **OSE approves CM-R Selection Plan** | **Date:**       |
|  | **Selection Committee assembles CM-R RFP and advertisement.** | **Date:**       **N/A [ ]**  |
|  | **OSE advertises RFP in SCBO** | **Date:**       **N/A [ ]**  |

|  |  |  |
| --- | --- | --- |
|  | **Deadline for receipt of proposals per the RFP** | **Date:**       |
|  | **Agency Project Manager evaluates proposals for responsiveness** | **Date:**       |
|  | **Selection Committee reviews proposals, shortlists firms and determines if interviews are necessary** | **Date:**       |
|  | **If necessary, Selection Committee interviews and ranks shortlisted firms** | **Date:**       **N/A [ ]**  |
|  | **Selection Committee sends Agency Head recommendation for approval** | **Date:**       |
|  | **Agency Head approves Selection Committee’s recommendation** | **Date:**       |
|  | **Agency completes negotiations and requests concurrence from OSE to post Notice of Intent to Award** | **Date:**       |
|  | **OSE reviews proposed award package and concurs with the posting of the Notice of intent to Award** | **Date:**       |
|  | **Agency posts Notice of Intent to Award** | **Date:**       |
|  | **A/E submits Schematic Design Documents to OSE for review** | **Date:**       |
|  | **OSE, owner, A/E and CM-R jointly review Schematic Design Documents** | **Date:**       |
|  | **OSE sends Schematic Design comments to Agency** | **Date:**       **N/A [ ]**  |
|  | **Phase II PIP Approval (A-1 approval date)** | **Date:**       |
|  | **Agency and CM-R agree on GMP** **(Note: GMP may be phased)** | **Date:**       |
|  | **A/E submits Properly Completed Construction Documents to OSE for review** | **Date:**       |
|  | **OSE sends Construction Documents comments to Agency / A/E** | **Date:**       |
|  | **Agency sends Building/Construction Permit to OSE for approval** | **Date:**       |
|  | **OSE sends approved Building/Construction Permit to Agency** | **Date:**       |
|  | **Agency amends CM-R contract to begin construction** | **Date:**       |
|  | **CM-R/Contractor begins Construction** | **Date:**       |
|  | **Agency and A/E schedule Substantial Completion and Certificate of Occupancy/Use Inspections with OSE agreement** | **Date:**       |

|  |  |  |
| --- | --- | --- |
|  | **Agency sends executed Certificate of Substantial Completion to OSE** | **Date:**       |
|  | **Agency sends Certificate of Occupancy/Use to OSE for approval** | **Date:**       |
|  | **OSE sends approved Certificate of Occupancy/Use to Agency** | **Date:**       |
|  |       |       |
|  |       |       |

***OSE Project Manager Name (Print) Agency Project Manager Name (Print)***

***(Signature) (Signature)***