## LOUISIANA SELECTION BOARDS FOR DESIGN SERVICES

APPLICATION FORM – LSB -1 2019 EDITION

	Architects   (Check <u>only</u> the ap	Engineers propriate selection board		cape Architects   ion is being made)
				***********
	Schedule Number:	WBS Number:		AFC:
2.	PROJECT LOCATION:			
**	************************************	********	*******	**********
3.	APPLICANT/FIRM NAME:  JOINT VENTURE □ Yes □	No (If yes, list partners	in question 8.)	Firm La. License No.
<b>4</b> .	PRINCIPAL OFFICE ADDRESS: _			
5.	LOCAL OFFICE ADDRESS:			Miles from site:
	(If different from Principal address. The off	fice at this location shall be adequ	ately staffed and equippe	ed to administer this project)
6.	TELECOM: Voice:	E-Mail:		Fax:
7.	PRIME PROFESSIONAL TO CONTA	ACT:		La. License No.
	<ul> <li>A. Has joint venture previously worked t</li> <li>B. If yes, how often?Tim</li> <li>C. Describe and explain the proposed as:</li> </ul>	nes	□ No  If the joint venture m	nembers/partners.
9.	LIST BY DISCIPLINE THE TOTAL CONSULTANTS OR ASSOCIATES.			
		Energy Specialists Estimators		Professional Interns Sanitary Engineers
		Field Administrators		Soils Engineers
		Geologists		Specification Writers
		Interior Designers Landscape Architects		Structural Engineers Surveyors
		Mechanical Engineers		Transportation Engineers
Ec	conomists	Planners: Urban/regional		OTHER
El	ectrical Engineers			
TO	OTAL PROFESSIONAL PERSONNEL:		TOTAL PERS	ONNEL

(Architects, Engineers, and Landscape Architects)

Continuation of Item 9.  NAMES OF PERSONNEL Show all personnel, including Joint Venture personnel and Principals but not Consultants or associated architects. Show each person only once. Part time personnel shall be represented as full time equivalents.		To be assigned to project  Architect  Civil Engineer  Mechanical Engineer  Electrical Engineer  Landscape Architect  Interior Designer  Professional Intern  Specification Writer  Civil Engineer  Chandscape Architect  Administration  On  Cher											
		Architect	Civil Engineer	Mechanical Engineer	Electrical Engineer	Landscape Architect	Interior Designer	Professional Intern	Specification Writer	Field Administrator	Drafter	Administration	Other
1													
2													
3													
4													
5 6													
7													
8													
9													
10													
11													
12													
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21 22													
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25													
26													
27													
28													
29													
30													
31													
32													
Other Personnel*													
TOTALS													

Record these totals in item 9 on sheet 1.

\*Applicants with more than 32 persons may summarize additional personnel as numbers of persons in each discipline.

NO			•	•		• •	-	five (5) years, been involved in /or design inadequacies?	
projects in design and the total construction cost of all projects under construction. For work that is not conventional design and/or construction (i.e., programming, master planning, etc.) describe on pages 8 and 9 and check this box.   A. Number and Value of applicant's current workload by Phase:    No.   Total Construction Cost   No.   Total Construction Cost	NO □	]	YES		If "yes", expla	ain on pages 8 and 9	€		
No. Total Construction Cost    No. Total Construction Cost   No. Total Construction Cost	projects in design	gn and t	the total o	construction cost	of all projects i	under construction	. For	work that is not conventional de	
Under Constr.: Under \$500,000:	A. Number an	d Value	of applica	ant's current work	doad by Phase:	B. Number and	Value	of applicant's current workload by	Cost:
Under Constr.: Under \$500,000:		No.	Total C	Construction Cost			No.	Total Construction Cost	
12. Give a brief resume of each key professional/employee of the firm whom will be available for this project.  Check here if pages 8 and/or 9 have been used to list additional personnel.  Name:  License No.:  Year First Licensed:  No. of Years with Firm:  Degrees and Certificates Earned:  Other Experience relevant to this project including, but not limited to, formal or special training and seminars attended:  Name:  Name:  Year First Licensed:  No. of Years with Firm:  Degrees and Certificates Earned:  Other Experience relevant to this project including, but not limited to, formal or special training and seminars attended:  Other Experience relevant to this project including, but not limited to, formal or special training and seminars attended:  Name:  Discipline:  Name:  Name:  Discipline:  No. of Years with Firm:	In Design:		-		<u></u>	Over \$500,000:			
Check here if pages 8 and/or 9 have been used to list additional personnel.    Name:	Under Constr.:					Under \$500,000	:		
License No.: Year First Licensed: No. of Years with Firm:  Degrees and Certificates Earned:  Other Experience relevant to this project including, but not limited to, formal or special training and seminars attended:  Name:	12. Give a brief			• •	- •			ilable for this project.	
License No.:	Name:					Discip	line: _		
Degrees and Certificates Earned:  Other Experience relevant to this project including, but not limited to, formal or special training and seminars attended:  Name:  Discipline:  License No.:  Year First Licensed:  Other Experience relevant to this project including, but not limited to, formal or special training and seminars attended:  Other Experience relevant to this project including, but not limited to, formal or special training and seminars attended:  Name:  Discipline:  Discipline:  Name:  Name:  Discipline:  No. of Years with Firm:	License No.:			Year Fi	irst Licensed:		N	lo. of Years with Firm:	
Name: Discipline:	Degrees and Certi	ficates Ea	arned:						
License No.: Year First Licensed: No. of Years with Firm:  Degrees and Certificates Earned:  Other Experience relevant to this project including, but not limited to, formal or special training and seminars attended:  Name: Discipline:  License No.: Year First Licensed: No. of Years with Firm:	Nama					Dissin	lino.		
Degrees and Certificates Earned:  Other Experience relevant to this project including, but not limited to, formal or special training and seminars attended:  Name:  Discipline:  License No.:  Year First Licensed:  No. of Years with Firm:						•	_	I. of V	
Other Experience relevant to this project including, but not limited to, formal or special training and seminars attended:  Name: Discipline: License No.: Year First Licensed: No. of Years with Firm:								io. of Years with Firm:	
License No.: Year First Licensed: No. of Years with Firm:								ninars attended:	
License No.: Year First Licensed: No. of Years with Firm:	Nama					Diagin	lina		
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								· <u></u>	

Other Experience relevant to this project including, but not limited to, formal or special training and seminars attended:

other professional relationships, other than joint venture, with the	applicant for this project may be listed here and only here.
$\Box$ Check here if pages 8 and/or 9 have been used to list addi	tional consultants.
ARCHITECTURAL Firm Name:	
Address:	
MECHANICAL Engineering Firm Name:	
Address:	
ELECTRICAL Engineering Firm Name:	
Address:	
CIVIL Engineering Firm Name:	
Address:	
STRUCTURAL Engineering Firm Name:	
Address:	
LANDSCAPE ARCHITECT Firm Name:	
Address:	
OTHER Consulting Firm Name:	
Address:	
OTHER Consulting Firm Name:	
Address:	
OTHER Consulting Firm Name:	Discipline:
Address:	
OTHER Consulting Firm Name:	
Address:	
OTHER Consulting Firm Name:	
Address:	
OTHER Consulting Firm Name:	D'a dalla a
Address:	

13. List consultants who will be retained for this project. All consultants must be listed. Firms that are "associated" or have

	Project Name or Description	Completion Date	Construction Cost	Project Location	Applicant's Responsibility
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dsca	meeting by any State of Louisiana and appearchitecture design services, sulfification.  Project Name or Description				
	J	Date	Cost		Completion Da
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·		nave been used to lis	t additional projects.		

ographs of projects by the applicant that demonstrate his/her qualifications. Any photographs and/or graphic mation may be reproduced only on this page and any unused space on pages 7, 8 and 9. Examples of work for wh	experience and information that best illustrates the applicant's qualifications for this work. Applicants may providuphs of projects by the applicant that demonstrate his/her qualifications. Any photographs and/or graphic ion may be reproduced only on this page and any unused space on pages 7, 8 and 9. Examples of work for which the twas not the architect, engineer, or landscape architect of record may be listed. However, any such examples shall		Selection Date	Construction Cost	Current Phase	Estimated Phase Completion Date
st experience and information that best illustrates the applicant's qualifications for this work. Applicants may pagraphs of projects by the applicant that demonstrate his/her qualifications. Any photographs and/or graphic mation may be reproduced only on this page and any unused space on pages 7, 8 and 9. Examples of work for wheant was not the architect, engineer, or landscape architect of record may be listed. However, any such examples	experience and information that best illustrates the applicant's qualifications for this work. Applicants may provide aphs of projects by the applicant that demonstrate his/her qualifications. Any photographs and/or graphic ion may be reproduced only on this page and any unused space on pages 7, 8 and 9. Examples of work for which the twas not the architect, engineer, or landscape architect of record may be listed. However, any such examples shall					
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19.	Continuation of Item 18

## $\frac{FOR\ EXTENSIONS\ TO\ QUESTIONS\ 10,\ 11,\ 12,\ 13,\ 15,\ and\ 18}{\text{NUMBER\ EACH\ ITEM\ BELOW\ TO\ CORRESPOND\ TO\ THE\ PROPER\ APPLICATION\ NUMBER}$

## FOR EXTENSIONS TO QUESTIONS 10, 11, 12, 13, 15, and 18 Number each item below to correspond to the proper application number 20. I certify that I am duly authorized to contract under the laws of the State of Louisiana to provide architectural, engineering, or landscape architecture services and to represent the applicant for this project. I further certify that the foregoing information is accurate and complete to the best of my knowledge and belief and I have read and understand the instruction sheet of LSB-1, 2019 edition. SIGNATURE: DATE: PRINTED NAME AND TITLE \_\_\_\_

LOUISIANA ARCHITECT'S, LANDSCAPE ARCHITECT'S OR ENGINEER'S LICENSE NUMBER OF

THE PRIME PROFESSIONAL

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