



May 26, 2016

**TO: HOLDERS LIST**

**SUBJECT: GIS Service Support  
CONTRACT NO. 070159**

**ADDENDUM NUMBER # 01**

This addendum is issued to add, remove, clarify and amend the following:

**PROCUREMENT PROCESS**

**A. Attachment C-Reference Questionnaire**

Updated form with corrected title.

ATTACHMENT C  
REFERENCES QUESTIONNAIRE

**INSTRUCTIONS TO THE PROPOSER:**

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Proposers are allowed three (3) completed reference questionnaires. The completed references questionnaires must be from individuals, companies, or agencies with knowledge of the proposer's experience that is similar in nature to the products or services being requested by this RFP, and are within the last three years from the date this RFP was issued.

If more than three (3) qualifying references are received, the first three (3) fully completed references received will be used for evaluation purposes. References will be averaged.

1. Proposers must complete the following information on page 2 of the "Reference's Response To" document before sending it to the Reference for response.

- a. Print the name of your reference (company/organization) on the "REFERENCE NAME" line.
- b. Print the name of your company/organization on the "PROPOSER NAME" line.
- c. Enter the RFP Closing date and time in Instruction 5 (see the INSTRUCTIONS block.)

2. Send the "Reference's Response To" document to your references to complete.

**NOTE:** It is the proposer's responsibility to follow up with their references to ensure timely receipt of all questionnaires. Proposers may e-mail the Procurement Representative prior to the RFP closing date to verify receipt of references.

**REFERENCE QUESTIONNAIRE  
REFERENCE'S RESPONSE TO:  
RFP Number: 070159  
RFP Title: GIS Service Support**

**REFERENCE NAME (Company/Organization):** \_\_\_\_\_

**PROPOSER NAME (Company/Organization):** \_\_\_\_\_ has submitted a proposal to the Port of Tacoma, provide the following services: GIS Service Support . We've chosen you as one of our references.

**INSTRUCTIONS**

1. Complete **Section I. RATING** using the Rating Scale provided.
2. Complete **Section II. GENERAL INFORMATION** (*This section is for information only and will not be scored.*)
3. Complete **Section III. ACKNOWLEDGEMENT** by manually signing and dating the document. (*Reference documents must include an actual signature.*)
4. E-mail **THIS PAGE** and your completed reference document, **SECTIONS I through III** to:  
  
Procurement: Heather Shadko  
  
E-mail: [procurement@portoftacoma.com](mailto:procurement@portoftacoma.com)
5. This completed document **MUST** be received no later than **June 10, 2016 2:00 p.m.** (Pacific Time). Reference documents received after this time will not be considered. **References received without an actual signature will not be accepted.**
6. DO **NOT** return this document to the Proposer.
7. In addition to this document, the Port may contact references by phone for further clarification if necessary.

## Section I. RATING

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Using the Rating Scale provided below, rate the following numbered items by circling the appropriate number for each item:

| Rating Scale                   |       |
|--------------------------------|-------|
| Category                       | Score |
| Poor or Inadequate Performance | 0     |
| Below Average                  | 1 – 3 |
| Average                        | 4 – 6 |
| Above Average                  | 7 - 9 |
| Excellent                      | 10    |

Circle **ONE** number for each of the following numbered items:

1. Rate the overall quality of the firm's services:

**10    9    8    7    6    5    4    3    2    1    0**

2. Rate the response time of this firm:

**10    9    8    7    6    5    4    3    2    1    0**

3. Rate how well the agreed upon, planned schedule was consistently met and deliverables provided on time. *(This pertains to delays under the control of the firm):*

**10    9    8    7    6    5    4    3    2    1    0**

4. Rate the overall customer service and timeliness in responding to customer service inquiries, issues and resolutions:

**10    9    8    7    6    5    4    3    2    1    0**

5. Rate the knowledge of the firm's assigned staff and their ability to accomplish duties as contracted:

**10    9    8    7    6    5    4    3    2    1    0**

6. Rate the accuracy and timeliness of the firm's billing and/or invoices:

10    9    8    7    6    5    4    3    2    1    0

7. Rate the firm's ability to quickly and thoroughly resolve a problem related to the services provided:

10    9    8    7    6    5    4    3    2    1    0

8. Rate the firm's flexibility in meeting business requirements:

10    9    8    7    6    5    4    3    2    1    0

9. Rate the likelihood of your company/organization recommending this firm to others in the future:

10    9    8    7    6    5    4    3    2    1    0

## **Section II. GENERAL INFORMATION**

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1. Please include a brief description of the services provided by this firm for your business:

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2. During what time period did the firm provide these services for your business?

Month: \_\_\_\_\_ Year: \_\_\_\_\_ to    Month: \_\_\_\_\_ Year: \_\_\_\_\_

## **Section III. ACKNOWLEDGEMENT**

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I affirm to the best of my knowledge that the information I have provided is true, correct, and factual:

\_\_\_\_\_  
Signature of Reference

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email Address