

**State of West Virginia
Design-Build Procurement Act**

Monthly Status Report

*This monthly report is being presented to the Design-Build Board as required by **West Virginia Code, §5-22A-2 and Legislative Rules, 148-CSR-11.***

Please forward your completed status report to:

Design-Build Board
c/o West Virginia Department of Administration
1900 Kanawha Boulevard, East
Room E-119
Charleston, WV 25305

PLEASE TYPE OR PRINT CLEARLY ALL INFORMATION

Name of Agency: _____

Address: _____

City/State/Zip: _____

Contact Person: _____

Telephone Number: _____ Fax Number: _____

E-Mail Address: _____

Date Project Approved by Board:

(Please check the appropriate box below)

Task

On Schedule

Criteria Developer Selected?	Yes	___	No	___	Completed	___
Preparation for Invitation for Qualification?	Yes	___	No	___	Completed	___
Release of Invitation for Qualification?	Yes	___	No	___	Completed	___
Responses to Invitation for Qualification received?	Yes	___	No	___	Completed	___
Evaluation of Invitation for Qualification complete?	Yes	___	No	___	Completed	___

Preparation for Invitation for Proposal?	Yes	___	No	___	Completed	___
Release of Invitation for Proposal?	Yes	___	No	___	Completed	___
Responses to Invitation for Proposals received?	Yes	___	No	___	Completed	___
Evaluation of Invitation for Proposal complete?	Yes	___	No	___	Completed	___
Notice of Intent to award contract done?	Yes	___	No	___	Completed	___
Contract Awarded?	Yes	___	No	___	Completed	___
Design Phase Complete?	Yes	___	No	___	Completed	___
Approval of final designs?	Yes	___	No	___	Completed	___
Construction started on required date?	Yes	___	No	___	Completed	___
Construction progressing on schedule?	Yes	___	No	___	Completed	___
Construction progressing on budget?	Yes	___	No	___	Completed	___
Substantial completion?	Yes	___	No	___	Completed	___

Please identify any change orders that have been required on the project and state whether they will delay the construction time line or the project cost that was provided to the Board.

Comments:

As the authorized agent of the Agency named above, I do hereby solemnly swear that the information contained in this "Monthly Status Report" is true and complete to the best of my knowledge.

_____ Title

Name of Representative

Dated this _____ day of _____, 20____.