

DCAM-17-NC-0052

ATTACHMENT K

REFERENCE FORM

BIDDER NAME: _____

DATE ORGANIZED: _____

DATE INCORPORATED: _____

Please list all completed projects within the past three (3) years that are similar in scope to this IFB being bid. Give a detailed description of work, and include the name, telephone number and address of municipalities contracted with (whether federal, state or local).

Name of Municipality/Agency: _____

Contract Person/Title: _____

Telephone Number: _____

Contract Period: From _____ To _____

Description of Services:

[If necessary, please use multiple copies of this form for each Reference]