

MRSC Comprehensive Scope Development Worksheet

Project Name: _____ No.: _____

General Description	[example: Install new pre-manufactured 20x40 storage building at (address)]
Bidding Process [including schedule]	<input type="checkbox"/> Site Walk: _____ <input type="checkbox"/> Pre-Bid: _____ <input type="checkbox"/> Bidder Responsibility Requirements <input type="checkbox"/> Questions Due/Process: _____ <input type="checkbox"/> Bid Bond: _____ <input type="checkbox"/> Due Date: _____ Time: _____ Format: _____ <input type="checkbox"/> Bid Forms (other forms, bidders' checklist) <input type="checkbox"/> Other: _____
Schedule [Dates]	Project Schedule [Notice to Proceed: _____ Substantial Completion: _____]
Budget	[Estimate, range, or budget] \$ _____
Existing Conditions [include any surveys, pictures, studies, covenants, restrictions, permits, etc.]	[example: Current installation site is heavily vegetated with weeds, brush, and other similar debris.]
Site Preparation	[Site and install area are to be cleared and grubbed, to allow for a clean and level install site. All debris is to be removed. Organic yard waste to be deposited properly. Trash and non-organic and non-compostable items to be disposed. Trees and native plants are to remain, Owner has marked items to remain.]
Detailed Description [If products have been the basis of "design" include what is expected and if necessary, use "or approved equal"]	[From start to end all the expected deliverables and outcomes. Include items such as foundation, style, color, heated/cooled, lighting, code requirements, etc. A bullet list often works.]
Permitting [Is permitting required by the contractor? If the owner has permitted also indicate and attach as existing information]	<input type="checkbox"/> Yes: _____ <input type="checkbox"/> No <input type="checkbox"/> Unknown
Prevailing Wage	<input type="checkbox"/> Yes, Effective Date: _____ Region/Location: _____
Bonding	<input type="checkbox"/> Bid Bond <input type="checkbox"/> Payment Bond <input type="checkbox"/> Performance Bond <input type="checkbox"/> Other: _____
Insurance [Include evidentiary requirements]	<input type="checkbox"/> General Liability <input type="checkbox"/> Auto <input type="checkbox"/> Products Completed Operations <input type="checkbox"/> Additional Insured <input type="checkbox"/> Other <input type="checkbox"/> Employer Liability (Title 51/52)
Payment Process	<input type="checkbox"/> Application Date (i.e., 5 th day of the month): _____ <input type="checkbox"/> Electronic <input type="checkbox"/> Paper <input type="checkbox"/> Cover Page Form <input type="checkbox"/> Backup Requirements: _____
Change Order Process	<input type="checkbox"/> Change Request Form <input type="checkbox"/> Criteria under which a change will be considered
Work Acceptance	[How will the agency review and verify work? Best practice to tie to payment process]
Records Requirements	<input type="checkbox"/> Format: _____ <input type="checkbox"/> List of required submittals <input type="checkbox"/> Retention Period
Legal Requirements/Funding Requirements	[If unknown, consult your legal counsel, grant manager, see other resources on MRSC.org]