



CITY OF COLUMBIA

Office of Business Opportunities Compliance
1401 Main Street, 4th Floor | Columbia, South Carolina 29201
Phone: 803-545-3950

PROTÉGÉ ASSESSMENT SURVEY Professional Services

I. General Business Data:

A. Business Address & Ownership:

Name:

E-mail:

Address:

Website:

Contact Person:

Owner's Name: (If Proprietorship)

Telephone No.:

Nature of Business:

Cell:

Year of Establishment: _____

Years in Business: _____

B. Work Experience

Please list three major projects completed in the past three years:

PROJECT	TYPE OF WORK	CLIENT NAME	DATE COMPLETED	CONTRACT AMOUNT

II. Human Resources

A. Number of Employees:

TYPE	FULL TIME	PART TIME	PERMANENT	TEMPORARY
Management				
Administrative				
Support Staff				
Engineers				
Estimator				
Bookkeeper				
Comptroller				

B. Consultants

LEGAL	CPA	ARCHITECT	ENGINEER

III. Technical Skills

A. Estimating:

1. Do you have an estimator on staff? _____
 - a. If no; who prepares your estimates? _____
 - b. Do you get a second opinion? _____
2. Describe steps you take to prepare an estimate after you obtain plans and specifications:

3. Describe how you arrive at costs for services:

B. Scheduling:

1. Do you prepare detailed time schedules for your projects? _____
If yes; what scheduling method do you use?

2. Do you update your schedule? (yes or no) _____
If yes; how often? _____
3. Do you attend pre-construction conferences to enable you to understand the detailed work schedules? (yes or no) _____
4. Are you familiar with any of the following methods / schedules?
 - a. Critical Path Methods _____
 - b. Bar Charts _____
 - c. Written list of phases, with beginning and ending dates? _____
 - d. Organized list of phases of your work on paper with estimated time for each one? _____
5. Do you prepare your own schedule? (yes or no) _____
If no; who prepares you schedule? _____

IV. Project Management

A. Field Operations:

1. Do you appoint a management team for each project? (yes or no) _____
If yes; how do you select the team?

2. Do you have a project file for each project? (yes or no) _____
If yes; what do you include in the file?

3. Do you meet with your field staff during the project? (yes or no) _____
If yes; how often:

4. Do you have a wall chart to show the status of each of your active projects, with detailed progress and estimated completion dates? _____

5. Do you prepare periodic progress reports? (yes or no) _____

6. What items are included in these reports?

7. What steps do you normally take when starting a new project?

8. What steps do you normally take to close out a project after you have completed the work?

B. Change Orders

1. What is your definition of a change order?

2. Do you always request a written change order when asked to do work beyond the scope of your original contract? _____

3. Do you insist on a written change order before you begin to work on such changes? _____

4. Do you accept verbal directions for work beyond the scope of your contract? _____

5. When asked to perform work beyond the scope of your contract, what steps do you usually take?

6. Does your accountant review the change order? _____

V. Accounting

1. Do you have an accounting system? _____
2. Is your accounting system automated or manual? _____
3. Do you have a chart of accounts? _____
4. Does your company have an in-house accountant? _____
5. Does your company have an audited financial statement? _____
6. If yes; when was your company last audited? _____
7. Does your accounting system provide you with the aging of accounts receivable and accounts payable? _____
8. What is your current Credit Score? _____
9. Does your company have an established cost system? _____
10. Which accounting method is used by your company for bidding purpose?
 - a. Completed Contract Method? _____
 - b. Percentage of Completion Method? _____
11. None of the above? _____
12. Does your company have a Job Cost System? _____
13. How do you process payroll?

VI. General Observation

1. What do you consider to be your three major strengths?

- A. _____
- B. _____
- C. _____

2. What do you consider to be your three weaknesses?

- A. _____
- B. _____
- C. _____

VII. Risk Management

1. Company Name

2. Company Address

3. Contact Person:

4. Assessment Survey

5. Insurances Required:

1. General Liability _____

Effective dates _____

Limits _____

Claims _____

2. Risk Management Program? _____

Protégé Signature

Print Name

Date