

**STATE AGENCY
A/E AGREEMENT CHECKLIST (REVISED SEPTEMBER 6, 2012)**

	DATE: _____
AGENCY:	_____
PROJECT NO.:	_____
COORDINATOR:	_____
E-MAIL:	_____ PHONE: _____
A/E:	_____
	(NAME/CITY/STATE/ZIP)

PROJECT DESCRIPTION: _____

CONTRACT PROVISIONS:

Total Project Cost: \$ _____
Total A/E Fee: \$ _____
A/E Fee for Basic Services: \$ _____

DOCUMENTS & CERTIFICATES:

Purchase Order Amount(s): \$ _____
Controlling Board Release: \$ _____ Date: _____ N/A _____
Workers' Compensation Certificate: Date Expires: _____
R.C. 9.24 Verification Check: Date: _____
EDGE Participation: _____ Yes _____ Good Faith Waiver

CONTRACT AWARD:

Were standard contract forms modified?
(added or deleted language) _____ No _____ Yes **If yes, include explanation.**

AGENCY A/E AGREEMENT CHECKLIST (cont'd)

If total A/E fee exceeds \$50,000,
number of firms shortlisted and
interviewed: _____

If less than three, include explanation.

If total A/E fee is less than \$50,000,
was the A/E selection process in Ohio
Revised Code Section 153.71
followed?

(See <http://codes.ohio.gov/orc/153.71>;
for questions, please contact Business
Counsel.)

_____ Yes _____ No **If no, include explanation.**

SUBMITTED BY: _____

Date: _____

(SIGNATURE OF PROJECT COORDINATOR)

**APPROVED BY ATTORNEY
GENERAL:** _____

Date: _____

**When submitting an A/E Agreement for Attorney General approval,
please also submit copies of the following:**

- Secretary of State website printout showing the A/E's name;
- Purchase Order;
- Unexpired BWC Certificate;
- Approved Controlling Board request (when applicable);
- 9.24 Search printout, initialed by the Project Coordinator; and
- Relevant exhibits to the A/E Agreement. **ATTACH EXHIBIT E, AND EXHIBITS B AND C IF THEY CONTAIN ANY CHANGES TO THE TERMS AND CONDITIONS.**

Once fully executed, the Attorney General's Office should return the A/E Agreement and checklist to:

- The Project Coordinator listed above.**
- The individual(s) listed on cover correspondence accompanying this checklist.**
- _____