

STANDARD FORM 1A:
RESPONSE SUBMITTAL - ROW REQUEST FOR
QUALIFICATIONS
THE CITY OF BATON ROUGE/PARISH OF EAST
BATON ROUGE

Revised: October 3, 2019

1. Advertisement Title: Contract for Right of Way Services –

Title/Appraisal/Acquisition/Relocation Assistance (Insert One)

Name of Firm/Individual: (as registered with LA Secretary of State, where applicable)		Contact Principal Information: (Individual with SIGNING AUTHORITY)				
	Nan	ne:	Last	First	 M.I.	
			Laot	1 1100	141.11.	
5. Mailing Address	Title	:				
		ne No:				
Address Unit	Ema	ail:				
City State Zip Code						
		V 84 - 21 - 34 - 1 VIIV I	The state of the s			
7. Key Personnel List	4 Time	Employee				
Name Full Time or Part Employee		Time Employee or Sub-consultant		Licensure, if	Licensure, if applicable	
		,				
8. Please attach a short resume for eac organizational chart outlining their role	and the second	individua	listed in a	#7, as well as a	an	
This is to certify that all information contained staff to perform these services within the des				personally have	sufficient	
Original Signature, in blue ink on Original (shall be same person as #6)			Date			



Project Number	Project Description	Parish	NTP Date (Month/Year)	Number of Units/Parcels	ROW Duties
Number			(Worth real)	Office/Parcers	Duties
2					

					DOW
Agency/Authority	Project Description	Parish	Begin Date (Month/Year)	Number of Units/Parcels	ROW Duties
	6	-			
-					