# Exhibit D

# Forms

Form D-1 Qualification Package Cover Sheet

Form D-2 Reference Form

Form D-3 Key Team Qualifications

Form D-4 List of Subcontractors

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Form D-6 Recent Client List

Form D-7 Firm Qualifications and Financial Stability

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Form D-11 Acknowledgement of Receipt of Addenda

Form D-12 Non-Collusion Form (Corporation)

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Form D-15 Non-Collusion Form (Limited Liability)

Form D-16 Non-Collusion Form (Partnership)

# Form D-1

# Qualification Package

# Cover Sheet Form

**NORTH CAROLINA TURNPIKE AUTHORITY**

**BACK OFFICE SYSTEM**

**REQUEST FOR PROPOSALS**

**EXECUTION:** In compliance with this Request for Proposal, and subject to all the conditions herein, the undersigned offers and agrees to furnish any or all Services or goods upon which prices are offered, at the price(s) offered herein, within the time specified herein. By executing this offer, I certify that this offer is submitted competitively and without collusion.

Failure to execute/sign offer prior to submittal shall render Proposal invalid. Late offers are not acceptable.

|  |  |  |  |
| --- | --- | --- | --- |
| BIDDER: | | | |
| STREET ADDRESS: | | P.O. BOX: | ZIP: |
| CITY & STATE & ZIP: | | TELEPHONE NUMBER: | TOLL FREE TEL. NO: |
| PRINT NAME & TITLE OF PERSON SIGNING: | | FAX NUMBER: | |
| AUTHORIZED SIGNATURE: | DATE: | E-MAIL: | |

Offer valid for two hundred and forty days (240) days from Proposal Due Date.

# Form D-2

# Reference Form

Proposer shall use this from to clearly demonstrate how it meets the qualification requirements with regard toexperience in **Section IV, Qualification Package Response and Submission Instructions,** **Section I.2 Qualification Requirements**. Each reference provided may be contacted by NCTA. Copy this form as needed to comply with the requirements outlined in the RFP for each of the Implementation and Operations and Maintenance Phase minimum requirements.

**Proposer’s Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Prime  Subcontractor

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Reference Company/Agency Name: | | | | |
| City: | | State: | | |
| Project Manager/Owner Reference: | | Project Manager/Owner Reference Contact Information (Phone Number and/or E-mail Address): | | |
| Start and End Dates of the Project: | | Cost of the Project: | | |
| Number and Cost of Change Orders (to date): | | | | |
| **Alternate Reference\*:** | | | | |
| Phone Number: | | E-mail: | | |
| Alternate Reference Role on Referenced Project: | | | | |
| **\*Must be completed in addition to the Project Manager**/**Owner Reference** | | | | |
| **Back Office System (BOS):**   1. Please place a mark next to each item for which this reference is intended to address. | | | | |
| Design  Implementation  Development  Operations and Maintenance  Private cloud  Infrastructure-as-a-Service  Disaster Recovery  Data Mart Reporting  Customer account creation, management and maintenance  Transaction processing  Customer Billing  Case Management | Call Center Dashboards  Developed and managed real-time data exchange interfaces to external entities  Transponder Inventory Management and Fulfillment  Integrated with DMVs  Integrated with Cloud-based Telephony/IVR  Integrated with Automatic Call Distributor (ACD)  Integrated with Bank/Credit Card Gateway  Integrated with Roadside Systems  Integrated with Collection Agency Systems | | | Southern States Interoperability  E-ZPass Interoperability  Legacy Data Conversion and Migration  Integrated with Collection Agency  Integrated with Banks  Integrated with 3rd Party Printing/Mail Services  Integrated with 3rd Party Credit Card Processing Hosts  Integrated with 3rd Party Parking Entities  Integrated with SAP  Retail Transponder Sales |
| **BOS Account Management Website:** | | | | |
| Design  Development on Multiple Browsers  Implementation  Operations and Maintenance | | | Website Integration with a Mobile Application  Formatting Websites for Smart Phones  Integrated web applications associated with a Back Office System  Developed and managed real-time data exchange interfaces to external entities | |
| **BOS Mobile Application:** | | | | |
| Design  Development on Apple Operating Systems  Development on Google Operating Systems  Development for Multiple Android Devices  Implementation  Operations and Maintenance | | | Mobile Application with full website capability  Integrated mobile applications associated with a Back Office System  Experience with the mobile application certification process for both Google Play and the Apple App Store  Developed and managed near real-time data exchange interfaces to external entities | |
| ***Please provide detailed explanation for each item below:*** | | | | |
| 1. Description of the referenced project, and its relevance to NCTA’s Back Office System project with regard to successfully designing, developing, and implementing a back office solution for at one (1) toll agency project (or similar Project type) in the United States.   **Note**: The back office solution must be able to process financial, account-based transactions (including the production and mailing of toll bills or similar), and it must support account quantities and annual transaction volumes similar to, in excess of, NCTA’s current numbers listed in Attachment 1. The Proposer shall have maintained the system for at least one (1) year as of October 2017. | | | | |
| 1. For the referenced project, describe your approach to system enhancements and change order management: | | | | |
| 1. For the referenced project, describe the number and types of real-time data exchange interfaces to internal and external entities, and the process undertaken and coordination efforts needed to develop, implement and maintain those interfaces. Highlight any experience with regard to interface development with interoperable agencies for the exchange of transactions and revenue: | | | | |
| 1. For the referenced project, describe your approach to schedule/deliverable management, and how your team performed with regard to meeting schedule milestone delivery dates for design, development, testing and implementation of the a back office system: | | | | |
| 1. For the referenced project, describe any performance requirements you had to meet, and your approach to ensuring your system met those requirements: | | | | |
| 1. For the referenced project, describe any required data migration tasks. Also describe your approach to planning the migration of legacy system data into a new account-based solution, and your experience in implementing your migration plan (e.g. migrating, testing, and implanting the new system inclusive of both legacy and new system data). | | | | |
| 1. Description of the certification processes undertaken for the Back Office System mobile application developed for the referenced project, and its relevance to NCTA’s Back Office System project (e.g. successfully designed, developed, tested, and obtained certification for mobile applications within the last two (2) years for both Google Play and the Apple Application store(s)): | | | | |

# Form D-3

# Key Team Qualifications Form

Proposer shall use this form for Key Personnel Team member references. Each reference provided may be contacted. Copy this form as needed to comply with the requirements of the RFP and the number of references cited.

|  |  |
| --- | --- |
| Key Team Member’s Name: | Position: |
| Relevant Prior Project and Role: | |
| Agency/Client: | Agency/Client Contact Name and Role: |
| Agency/Client Phone Number: | Agency/Client Email Address: |
| Total number of years of experience Key Personnel team member has in similar role to one proposed for NCTA’s Back Office System Project: | |
| Description of prior project scope, cost, start / end dates, etc.: | |
| Description of their role on prior project, including dates of participation and job description: | |
| Key Personnel team member’s major contributions and highlights: | |

# Form D-4

# List of Subcontractors Form

(Separate attachment)

# Form D-5

# Subcontractor RS-2 Form

(Separate attachment)

# Form D-6

# Recent Client List Form

(Separate attachment)

# Form D-7

# Proposer Qualifications and

# Financial Stability Form

Proposer Qualifications and Financial Stability

Proposer shall use this from to clearly demonstrate how it meets the minimum qualification requirements for Proposals with regard toexperience in **Section IV Qualification Package Response and Submission Instructions, Section 1.2 Qualification Requirements**. Each reference provided may be contacted by NCTA. Copy this form as needed to comply with the requirements outlined in the RFP for each of the Implementation and Operations and Maintenance Phase minimum requirements.

**Proposer’s Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| Company Name: |
| 1. A brief history and description of the Proposer’s organizational structure, including size, number of employees, capability and area(s) of specialization: |
| 1. A detailed discussion of the Proposer’s qualifications and experience related to **Section III, Scope of Work and Requirements:** |
| 1. Registration to do business with the North Carolina Office of the Secretary of State: |
| 1. Annual revenues for the firm and for the subsidiary, division or group responsible for this Project: |
| 1. Attach financial statements for the past two years:   Audited financial statements  Unaudited financial statements  Types of Statements:  Lines of Credit  Balance Sheet  Statement of Income  Statement of Cash Flow  Tax Return |

# Form D-8

# Requirements Conformance Matrix

(Separate attachment)

# Form D-9

# Proposer Questions Form

(Separate attachment)

# Form D-10

# Proposer Industry Comment Form

(Separate attachment)

Form D-11

Acknowledgement of Receipt

of Addenda Form

**ACKNOWLEDGEMENT OF RECEIPT OF ADDENDA**

The Proposer shall acknowledge receipt of each addendum to this Request for Proposal by completing this form and including it in the Qualification Package.

Addenda Date By

Failure to confirm receipt of addenda may result in rejection of the Proposer’s Qualification Package.

Dated , 2017

Legal Name of Firm

By

Signature

Title

NOTE: Attach additional pages as necessary.

# Forms D-12 to D-16

# Non-Collusion Forms

(Separate attachments. Please complete a single form that is applicable to your firm’s structure.)