

**\*This Exhibit is available as a fillable form. To request, please contact the County contact listed in Paragraph 8.1 of the RFQ.**

## REQUEST FOR QUALIFICATIONS (RFQ) TRANSMITTAL TO REQUEST A REQUIREMENTS REVIEW

***Proposer requesting a Requirements Review must submit this form to the County within the timeframe identified in the RFQ document.***

Proposer Name:	Date of Request:
RFQ Title:	RFQ No.:

A **Requirements Review** is being requested because the Proposer asserts that they are being unfairly disadvantaged for the following reason(s): *(check all that apply)*

- Application of **Minimum Requirements**
- Application of **Review Criteria**
- Due to **unclear instructions**, the process may result in the County not receiving the best possible responses

For each area contested, Proposer must explain in detail the factual reasons for the requested review. *(Attach supporting documentation.)*

Request submitted by:

\_\_\_\_\_

*(Name)*

*(Title)*

<b><i>For County use only</i></b>
Date Transmittal Received by County: _____ Date Solicitation Released: _____
Reviewed by: _____