**Guidance for Completing Project Description Form**

***Scope of Work (SOW)***

*(Please email SOW to CPB staff listed below in WORD format)*

The Aging and Long-Term Services Department (hereinafter “ALTSD”) has standardized the requirements for a Project Description/Scope of Work (hereinafter “SOW”) to be incorporated as part of the legal contract for the project. A SOW must be submitted to ALTSD upon notice of a grant award and before a Grant Agreement (hereinafter “GA”) can be drafted. A SOW is also a requirement of the grant application. The following information is required in a SOW:

1. **Name of Grantee** (The City, County, Village, Town, Tribal (Include Fiscal Agent Name if different than Grantee)
2. **Project Title** (Construction, Renovation, Code Compliance, Meals Equipment, Other Equipment, Vehicle
3. **Grant Agreement Number** (As indicated on the notice of grant award letter (example A22G2014)
4. **Background Narrative** – Stating how the project came to be, why the project/purchase is needed and describing what the project will accomplish.
5. **Work Plan** – Consisting of at least one paragraph describing the actual tasks that will be required to execute the project, including details and specifics about what is to be done, who is going to do it, the project proposed completion date, deliverables, and cost. (Example: “the funds will be used to plan, design, and renovate a \_\_ sq. foot addition, to include \_\_ sq. feet of carpet replacement, \_\_ sq. feet of plumbing replacement, \_\_ sq. feet of ceiling tile replacement, installation of \_\_ ADA compliant doors with automatic door opener(s) and construction of \_\_ sq. feet of asphalt pavement including base course and millings.”)
6. **Budget Detail/Project Cost** – The “State Funds” section of the budget must equal the amount appropriated by the legislature for the capital project. Include and describe “other funds” available to the project. Art in Public Places is applicable to new construction or major renovation projects exceeding $100,000. One percent (1%) must be set aside for the acquisition of art for the facility.1
7. **Performance Measures –** Explain specific tasks that will be accomplished and how you will measure that task
8. **Results Expected** **–** Explain the benefits to the community being served and the objectives that will be met.
9. **Time Frame/Milestones** **–** List the activities and tasks to be accomplished in sequential order, in other words – when is purchase being made/delivered, when is construction starting/finishing, and state when major components of the project will be completed.
10. **Responsible Staff** **–** Include the name of the person who will manage the project (very important) and the name of the fiscal/procurement contact, as well as their mailing addresses, email addresses, and phone numbers.

**The SOW (in WORD) must be forwarded to ALTSD Capital Projects Bureau, for review to assure that it is within the legislative intent of the appropriation. Upon approval, the SOW will be incorporated into the Grant Agreement.**

**NOTICE:** Requests for changes to the scope of work must be submitted and approved by the Capital Projects Bureau (CPB) prior to expenditures being made.

**Art in Public Places Program –** In 1986, the Legislature of the State of New Mexico passed, and the Governor signed into law the Art in Public Places Act (§13-4A-1, NMSA 1978, as amended). The legislation declares it to be “a policy of the State that a portion of appropriations for capital expenditures be set aside for the acquisition or commissioning of works of art to be used in, upon, or around public buildings.” (§13-4A-2, NMSA 1978). The resulting AIPP is often referred to as the One Percent for Art Program because of the requirement in the law. The primary provision in the AIPP Act is that “all agencies shall allocate. . . one percent or $200,000, whichever is less, of the amount of money appropriated for new construction or a major renovation exceeding $100,000 to be expended for the acquisition of art (§13-4A-4). For questions about AIPP, please contact staff at: https://www.nmarts.org/art-in-public-places/, in Santa Fe 505-827-6490.

Please contact the ALTSD Capital Projects Bureau (CPB) for additional guidance on the Project Description/Scope of Work.

Barbara Romero, Capital Projects Bureau Chief, 505-365-3660, [Barbara.Romero@altsd.nm.gov](mailto:Barbara.Romero@altsd.nm.gov)

Elizabeth Chavez, Capital Projects Coordinator, 505-365-3804, [Elizabeth.Chavez@altsd.nm.gov](mailto:Elizabeth.Chavez@altsd.nm.gov)

Connie Garcia, Capital Projects Coordinator, 505-487-3730, [Connie.Garcia@altsd.nm.gov](mailto:Connie.Garcia@altsd.nm.gov)

Ernest Adam Saavedra, Finance Coordinator, 505-490-3367, [Ernest.Saavedra@altsd.nm.gov](mailto:Ernest.Saavedra@altsd.nm.gov)

**Project Description Form**

***Scope of Work (SOW)***

*(Please email this completed form to ALTSD in MS Word format)*

1. **Name of Grantee/ Fiscal Agent:**
2. **Project Title:**
3. **Grant Agreement Number:**
4. **Background Narrative**:
5. **Work Plan**:
6. **Budget Detail**:

|  |  |  |
| --- | --- | --- |
| **Project Cost Activities** *(These are only examples. Insert activities specific to the proposed project.)* | **Other Funds** | **State Funds** |
| Architect/Engineer |  |  |
| Construction |  |  |
| Renovation |  |  |
| Improvements for Code Compliance |  |  |
| Equipment  **\*NOTE: Equipment purchased with capital appropriations must be valued at $10,000.00 or more.** |  |  |
| Meals Equipment  **\*NOTE: Equipment purchased with capital appropriations must be valued at $10,000.00 or more.** |  |  |
| Vehicle Purchase |  |  |
| Other Costs (specify) |  |  |
| AIPP (if applicable) |  |  |
| **Totals** |  |  |

1. **Performance Measures**:
2. **Results Expected**:

**Time Frame/ Milestones**: Upon full execution of the Grant Agreement the following tasks will commence to meet the time frame/milestones.

*(These are only examples. Insert milestones specific to the proposed project.)*

|  |  |
| --- | --- |
|  |  |
| RFP/Quotes Secured | Month 1 |
| Bid Closing | Month 2 |
| Bid Award to Contractor/Vendor | Month 3 |
| ***Choose the appropriate project-type from below:*** | ***Type the number of months appropriate to the project-type:*** |
| Meals Equipment – Purchase and Install | Months 4-5 |
| Equipment - Purchase and Install | Months 4-5 |
| Construction | Months 4-16 |
| Renovation | Months 4-8 |
| Code Compliance projects | Months 4-10 |
| Vehicles – Purchase and Equip | Month 6 |
| Project Completion & Review | Month 7 |
| Submit Exhibit 1 – Monthly / Final Report Form & Request for Payment according to contractual requirements as set forth in Articles VIII & IX of the Grant Agreement | Months 1-16 |

1. **Responsible Staff** *(include Project Manager and Fiscal Contact):*

Name:

Title:

Address:

Email:

Phone:

Name:

Title:

Address:

Email:

Phone:

**NOTICE:** The Grant Application, if approved for funding by the Aging and Long Term Services Department (ALTSD) and any attachments to the Grant Application are incorporated by reference into the scope of work. In the event of a conflict between any of the documents that are part of the Agreement, the ALTSD Cabinet Secretary, at the sole discretion of ALTSD, shall resolve that conflict.