|  |  |
| --- | --- |
| Section | Language to be Inserted by Vendor |
| Page 1: User Agency Name and Contact Information |  |
| Page 1: Contractor Name and Contact Information | [contractor to fill in – consistent with bid proposal] |
| Page 1: Project Name, Location, Description |  |
| Page 1: Design Agent Name and Contact Information |  |
| § 3.3.1 Substantial Completion Date |  |
| § 3.3.2 Substantial Completion Date (if a phased project) |  |
| § 4.1 Contract Sum |  |
| § 4.2.1 Alternates (if any) |  |
| § 4.2.2 Alternate Conditions (if any) |  |
| § 4.5.1 Liquidated Damages |  |
| § 4.5.2 Liquidated Damages (for a phased project) |  |
| § 8.2.1 Owner’s Representative |  |
| § 8.2.2 User Agency’s Representative |  |
| § 8.2.3 Design Agent’s Representative |  |
| § 8.3 Contractor’s Representative | [contractor to fill in – consistent with bid proposal] |

**State of Rhode Island Custom AIA A101 – 2017**

Standard Form of Agreement Between Owner and Contractor where the basis of payment  
is a Stipulated Sum

**State of Rhode Island Custom AIA A104 – 2017**

Standard Abbreviated Form of Agreement Between Owner and Contractor

|  |  |
| --- | --- |
| Section | Language to be Inserted by Vendor |
| Page 1: User Agency Name and Contact Information |  |
| Page 1: Contractor Name and Contact Information | [contractor to fill in – consistent with bid proposal] |
| Page 1: Project Name, Location, Description |  |
| Page 1: Design Agent Name and Contact Information |  |
| § 2.3.1 Substantial Completion Date |  |
| § 2.3.2 Substantial Completion Date (if a phased project) |  |
| § 3.1 Contract Sum | Check the “Stipulated Sum” box |
| § 3.2 The Stipulated Sum |  |
| § 3.3.2 Contractor’s Fee | Remains blank |
| § 3.4.2 Contractor’s Fee | Remains blank |
| § 3.4.3 Guaranteed Maximum Price Section | All fields remain blank |
| § 3.5.1 Liquidated Damages |  |
| § 3.5.2 Liquidated Damages (if a phased project) |  |
| § 19.4 Owner’s Representative |  |
| § 19.5 Contractor’s Representative | [contractor to fill in – consistent with bid proposal] |
| § 19.6 Design Agent’s Representative |  |

**State of Rhode Island Custom AIA 201 – 2017**

General Conditions of the Contract for Construction

(An AIA 201 must accompany the AIA A101, B101, B102)

|  |  |
| --- | --- |
| Section | Language to be Inserted by Vendor |
| Page 1: Project Name and Location |  |
| Page 1: User Ageny Name and Contact Information |  |
| Page 1: Design Agent Name and Contact Information |  |

**State of Rhode Island Custom AIA B102 – 2017**

Standard Form of Agreement Between Owner and Architect without a Predefined Scope of Architect’s Services – Owner and DESIGN AGENT Edition

|  |  |
| --- | --- |
| Section | Language to be Inserted by Vendor |
| Page 1: User Agency Name and Contact Information |  |
| Page 1: Design Agent Name and Contact Information | [Design Agent to fill in – consistent with proposal] |
| Page 1: Project Name, Location, Description |  |
| § 1.1 Design Agent’s Responsibilities |  |
| § 1.3 Design Agent Representative | [Design Agent to fill in – consistent with proposal] |
| § 2.2 Owner’s Representative |  |
| § 2.2.1 User Agency’s Representative |  |
| §6.1 Compensation |  |
| § 9.2.2 Solicitation # |  |
| § 9.2.5 Exhibits |  |

**State of Rhode Island Custom AIA B104 – 2017**

Standard Abbreviated Form of Agreement Between Owner and Architect -   
Owner and DESIGN AGENT Edition

|  |  |
| --- | --- |
| Section | Language to be Inserted by Vendor |
| Page 1: User Agency Name and Contact Information |  |
| Page 1: Design Agent Name and Contact Information | [Design Agent to fill in – consistent with proposal] |
| Page 1: Project Name, Location, Description |  |
| § 1.1 Initial Information |  |
| § 4.1 Supplemental and Additional Services | [if no Supplemental Services, fill in “not any”] |
| § 11.2 Supplemental Services Compensation | [if no Supplemental Services, fill in “not any”] |
| § 13.2.2 Solicitation # |  |

**State of Rhode Island Custom AIA B101 – 2017**

Standard Form of Agreement Between Owner and Architect –   
Owner and DESIGN AGENT Edition

|  |  |
| --- | --- |
| Section | Language to be Inserted by Vendor |
| Page 1: User Agency Name and Contact Information | [Design Agent to fill in – consistent with proposal] |
| Page 1: Design Agent Name and Contact Information |  |
| Page 1: Project Name, Location, Description |  |
| § 1.1.1 The Owner’s Program for the Project |  |
| §1.1.2 Project’s physical characteristics |  |
| § 1.1.3 Owner’s budget for the Cost of the Work |  |
| § 1.1.4.1 Design phase milestone dates, if any |  |
| § 1.1.4.2 Construction commencement date |  |
| § 1.1.4.3 Substantial Completion date or dates |  |
| § 1.1.4.4 Other milestone dates |  |
| § 1.1.5 The Owner intends the following procurement and delivery method for the Project |  |
| § 1.1.6 The Owner’s anticipated Sustainable Objective |  |
| § 1.1.7 Owner’s Representative |  |
| § 1.1.7.1 User Agency’s Representative |  |
| § 1.1.8 The persons or entities, in addition to the Owner’s representative, who are required to review the Design Agent’s submittals to the Owner |  |
| § 1.1.9.1 Geotechnical Engineer |  |
| § 1.1.9.2 Civil Engineer |  |
| § 1.1.9.3 Other consultants/contractors retained by the Owner (if any) |  |
| § 1.1.10 Design Agent Representative | [Design Agent to fill in – consistent with proposal] |
| § 1.1.11.1 Structural Engineer | [Design Agent to fill in – consistent with proposal] |
| § 1.1.11.2 Mechanical Engineer | [Design Agent to fill in – consistent with proposal] |
| § 1.1.11.3 Electrical Engineer | [Design Agent to fill in – consistent with proposal] |
| § 1.1.11.2 Consultants retained under Supplemental Services | [Design Agent to fill in – consistent with proposal] |
| § 1.1.12 Other Initial Information on which the Agreement is based |  |
| § 4.1.1 Supplemental Services | [if no Supplemental Services, fill in “not any”] |
| § 4.1.2.1 Description of Supplemental Services (Design Agent’s responsibility) | [if no Supplemental Services, fill in “not any”] |
| § 4.1.2.2 Description of Supplemental Services (Owner’s responsibility) | [if no Supplemental Services, fill in “not any”] |
| § 11.10.1.2 Sustainability Certification initial payment | [if no Sustainability Certification, fill in “not any”] |
| § 13.2.2 Solicitation # |  |
| § 13.5 Exhibits |  |