RFQ Packet B

Request for Qualifications

for

Grants Subject Matter Expert Services for Washington State Ferries

Vendor Name: Spectrum Design

Vendor Representative:

Leslie Ann Rifkin, Owner 31 Norwood Rd # West Hartford, CT 06117 # Phone: 206-551-7997, FAX: 206-892-9643 #

Email: leslierifkin@spectrumdesi.com #



Spectrum Design Transportation Planning, Funding, Administration

December 21, 2023

Consultant Services Office Washington State Dept. of Transportation 310 Maple Park Avenue SE Olympia, WA 98504

RE: Letter of Transmittal –RFQ Grants Subject Matter Expert Services for Washington State Ferries

Consultant Services Office,

Spectrum Design is pleased to submit Packet A and B responses to Washington State Department of Transportation's RFQ for Grants Subject Matter Expert Services for Washington State Ferries.

If you have any questions about this transmittal, please don't hesitate to contact me by phone at (206) 551-7997 or via email at leslierifkin@spectrumdesi.com.

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Leslie Rifkin, Owner Spectrum Design

> 31 Norwood Rd West Hartford, CT 06117 Cell: (206) 551-7997 Fax: (206) 892-9643

Scoring Criteria 5: Contractor Certification – Worker's Rights !

CONTRACTOR CERTIFICATION EXECUTIVE ORDER 18-03 - WORKERS' RIGHTS WASHINGTON STATE GOODS & SERVICES CONTRACTS

Pursuant to the Washington State Governor's Executive Order 18-03 (dated June 12, 2018), the Washington State Department of Transportaion is seeking to contract with qualified entities and business owners who certify that their employees are not, as a condition of employment, subject to mandatory individual arbitration clauses and class or collective action waivers.

Solicitation Title: <u>GRANTS Subject</u> Matter Expert Services for WSF

I hereby certify, on behalf of the firm identified below, as follows (check one):

🕅 NO MANDATORY INDIVIDUAL ARBITRATION CLAUSES AND CLASS OR COLLECTIVE ACTION WAIVERS FOR EMPLOYEES. This firm does <u>NOT</u> require its employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waivers.

- OR
- □ MANDATORY INDIVIDUAL ARBITRATION CLAUSES AND CLASS OR COLLECTIVE ACTION WAIVERS FOR EMPLOYEES. This firm requires its employees, as a condition of employment, to sign or agree to mandatory individual arbitration clauses or class or collective action waivers.

I hereby certify, under penalty of perjury under the laws of the State of Washington, that the certifications herein are true and correct and that I am authorized to make these certifications on behalf of the firm listed herein.

FIRM NAME:SpectRum Design							
	Name of Contractor/Bidder – Print full lega	al entity na	me of firm				
Ву:	Signature of authorized person	Print Na	uslie Riffein me of person making certifications for firm				
Title:	ÓWNER Title of person signing certificate	Place:	West Hantford, CT Print city and state where signed				
Date:	12/21/23						

Scoring Criteria 6: Wage Theft Prevention Contractor Certification -**Professional Services**

CONTRACTOR CERTIFICATION WAGE LAW COMPLIANCE - RESPONSIBILITY CRITERIA **WASHINGTON STATE GOODS & SERVICES CONTRACTS**

Prior to awarding a contract, agencies are required to determine that a bidder is a 'responsible bidder.' See RCW 39.26.160(2) & (4). Pursuant to legislative enactment in 2017, the responsible bidder criteria include a contractor certification that the contractor has not willfully violated Washington's wage laws. See Chap. 258, 2017 Laws (enacting SSB 5301).

Solicitation or Agreement Title: <u>Grants Subject</u> Matter expert services Date or Agreement Start Date: <u>December</u> 14,2023

Solicitation Posting Date or Agreement Start Date:

I hereby certify, under penalty of perjury under the laws of the State of Washington, that the below certification is true and correct and that I am authorized to make the following certification on behalf of the firm listed herein.

CERTIFICATION:

This firm has NOT been determined by a final and binding citation and notice of assessment issued by the Washington Department of Labor and Industries or through a civil judgment entered by a court of limited or general jurisdiction to have willfully violated, as defined in RCW 49.48.082, any provision of RCW chapters 49.46, 49.48, or 49.52 within three (3) years prior to the date of the above-stated date.

Firm N	AME: Spectrum	Desigh	
Name of Consultant/Contractor – Print full legal entity name of firm			
Ву:	Signature of authorized person	Leslie R.Flcin Print Name of person making certifications for firm	
Title:	Owner	Place: West Harcfford, CT	-
	Title of person signing certificate	Print city and state where signed	
Date:	122123		

Submittal Instructions:

- ۲ If submitting a proposal in response to a solicitation, a signed Certification Document for the Prime and all Subs must also be included in your proposal Packet B (see advertisement for additional requirements).
- If requesting to add a Sub to an existing agreement, submit the signed Certification Document ۲ to: ConsultantRates@wsdot.wa.gov.

CONTRACTOR CERTIFICATION -- WAGE THEFT PREVENTION: PROFESSIONAL SERVICES CONTRACTS



WSDOT Ferries Division (WSF) 2901 3rd Avenue, Ste. 500 Seattle, WA 98121-3014 206-515-3400 TTY: 1-800-833-6388 www.wsdot.wa.gov/ferries

December 19, 2023

Spectrum Design Attn: Leslie Rifkin 31 Norwood Road West Hartford Connecticut, CT 06117

Re: Agreement K001192 **WSDOT Grant Management Services Final Performance Evaluation**

Dear Leslie:

Please find enclosed a copy of the final performance evaluation with a superior rating for the above referenced project. Please note that few companies receive the superior rating and this score reflects the outstanding service your company has provided to Washington State Ferries.

Congratulations on an outstanding performance!

Sincerely,

Tharmalingam Bremjit Tharmalingam "Brem" Bremjit, P.E. Consultant Liaison Engineer WSDOT Ferries Division (WSF)

Enclosure: K001192 Final Performance Evaluation

cc: Todd Lamphere John Bernhard CSO File



Washington State Department of Transportation

Performance Evaluation Consultant Services

Consultant Name Spectrum Design	Evaluation Type					
Consultant Address 31 Norwood Road		Project Title WSDOT Grant Management Services				
West Hartford Connecticut CT 06117		Agreement Number K001192				
Type of Work		Type of Agreement				
Study Design R/W P	S&E 🖌 Other (Specify Below):					
Grant Acquisitions & Administration		Hourly Rate				
Complexity of Work	Date Agreement Approved	Cost Plus Fixed Fee				
Difficult Routine	September 1, 2018	Other				
Amount of Original Agreement	Total Amount Modifications	Total Amount Agreement				
\$ 236,400.00	\$1,255,600.00	\$1,492,000.00				
Completion Date Including Extensions August 31, 2023	Actual Completion Date August 31, 2023	Actual Total Paid \$ 1,437,154.05				
Type and Extent of Subcontracting						

None

Performance Rating Scale (From Average Score Below)

S	AR	MR	BR	P	
Superior	Above Std.	Meets Std.	Below Std.	Poor	
Standard Criteria		Comments	s (Justify Above &	Below Ratings)	Rating
1. Negotiations Cooperative and responsive Adhered to WSDOT guidelines on Met negotiation schedule, Open and honest communications Willingness to negotiate in good fa		services and completing it	as sensitive to WSF's n expedited the negotiati ahead of schedule. Sho n a straight-forward ma	on process e conducted	s
2. Cost / Budget Finished within agreed budget, ind Appropriate level of effort (Cost co Reasonable direct, non-salary exp	mmensurate with worl	appropriate for a period of the second se	rovided superior service or this type of work. Sh budget.		s
3. Schedule Complete within agreement sched Achieved schedule (Including all s Prompt response to review comm Adapted to changes by WSDOT Notified WSDOT early regarding s	upplements). ents	reacting to er	as extremely adaptable merging assignments. In ve, which ensured mee	n fact, she was	s
4. Technical Quality Work products meet WSDOT desi Performed appropriate quality con Responds to review comments in Pursued innovative design solutio Delivered "compatible" electronic Implemented principles of practica	trol and assurance subsequent submissions illes	laws and reg n involving Cor Office, wrote	ossesses profound kno ulations, managed the s igress, the Legislature a policies and procedure th FTA, FHWA and MP	strategic planning and the Governor's s, and dealt	S

DOT Form 272-019 Revised 10/2020 Distribution: Original: Consultant Copies: Project Manager - Area Consultant Liaison - Consultant Services Office

5. Communications Clear and concise communication (Oral, written, drawings). Demonstrates an understanding of oral and written instructions Communicated at intervals appropriate for continual progress	Consultant has exceptional writing & verbal skil reflected in policies and procedures. She cultiva relationships with key policy makers to enhance	s	
6. Management Provided creative cost control measures Submitted appropriate, periodic, accurate progress reports Accurate and timely invoicing Conducted meetings efficiently Limited the number of consultant-initiated contract modifications / supplements Collaborated effectively with WSDOT Responsive Managed subconsultants effectively	Consultant served as the Grants Manager, exhi great effectiveness in planning, organizing, dire coordinating and controlling grant acquisitions a administration. She was especially effective in coordinating grant activities at various levels, in WSF, WSDOT, MPOs, FHWA and FTA levels. also very effective at guiding WSF staff in grant application and administrative activities.	S	
7. Other Criteria (As agreed)	NA		
Overall Rating	The consultant has been a key player in acquir hundreds of millions of grant dollars to fund WS capital and operating programs. With out this fu WSF could not have maintained its vessels and terminals in state of good repair and built two te	F's Inding,	S
Rated By (Project Manager Name and Title)	Project Manager Signature	Date	
John Leo Bernhard, Jr. Sr Mgr Budget and Pgm Dev	John Leo Bernhard Gr Area Consultant Liaison Signature	23	
Rated By (Area Consultant Liaison Name and Title)	Area Consultant Liaison Signature	Date	
Brem Bremjit Consultant Services Manager	Tharmalingam Bremjit	023	
Executive Review (Name and Title)	Executive Signature		
Todd Lamphere, Director Finance and Administration	Todd Lamphere Date: 2023.12.19 08:57:34 -08'00'		

Scoring Criteria 8: Cost Factors !



Proposed Billing Rates

Date: December 21, 2023

Company Name: Spectrum Design

Address: 31 Norwood Rd

City / State / Zip: West Hartford, CT 06117

Subject: Proposed Labor Classifications and Hourly Billing Rates for Grants Subject Matter Expert Services for Washington State Ferries

Attention: Manager, Contract Services Office

Below are the highest anticipated hourly billing rates for the identified labor classifications.

Labor Classification	All Inclusive Billing Rate
Leslie Rifkin, Project Manager	\$279.00/hr
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Note: Proposed Billing Rates, as submitted, shall be reviewed, accepted, and incorporated as an exhibit to the agreement. The Proposed Billing Rates shall be effective throughout the life of the agreement in accordance with the agreement payment provision.

Respectfully, Signature Sner υ U Title

DOT Form 224-011 Revised 12/2018

Consultant Information Form !

Firm Name: Spectrum Design					YE Date: ecember 31		Number of Employees: 1
Address: 31 Norwood Rd							
City: West Hartford			Zip Code: 06117			County: Hartford	
Phone: 206-551-7997				Company Web Site:			
Remit to Address: 31 Norwood Rd							
City: West Hartford			Zip Code: 06117		County: Hartford		
Phone: 206-551-7997			Fax: 206-984-3494				
Statewide Vendor Number (SWV) for Remit to Address: SW0190342-00			Federal Tax ID Number or Social Security Number: 46-3612729				
Unified Business Identifier Number (UBI): 601-756-711			Date Universal Numbering System (DUNS) Number: 07-912-4197				
Year Firm Established: 1996		UDBE/SBE/MSVWBE Certif D2F0018019, W2F			NAICS Code & 541611	Code Na	ame:
Proposed Project Manager: Leslie Rifkin			Email: leslierifkin@spectrumdesi.com				n
Financial Contact: Leslie Rifkin			Email: leslierifkin@spectrumdesi.com				

Consultant Information Form

Firm Type:

🔳 Sole Proprietor 🔄 Partnership 🔄 C – Corp. 📄 Limited Partnership 📄 Subchapter S Corp. 📄 Limited Liability Company

Annual Gross Receipt:

🔳 \$0 to \$1 Million 🗌 \$1 Million to \$5 Million 🗋 \$5 Million to \$10 Million 📄 \$10 Million to \$15 Million

Note:

Firm Name: Please <u>do not</u> use: dba's – doing business as; combination names when two firms are working together, unless the combination name is the formation of a legally registered new company such as a joint venture; derivatives of your legal name; acronyms; etc. The firm name shown must be your firm's legal name.

Federal Tax ID Number: Your Federal Tax ID number must be that number registered to your legal firm name. If you do not have a Federal Tax ID number, please use your social security number.

Unified Business Identifier (UBI) Number: Your firm will be *REQUIRED* to acquire a UBI Number prior to execution of an agreement and/or being approved as a Sub-consultant to an existing agreement. This is a Washington State Business license and can be acquired by contacting the Washington State Department of Revenue web site at <u>www.dor.wa.gov</u>

Statewide Vendor (SWV) Number: The Statewide Vendor (SWV) Number is *REQUIRED* for vendors to receive payments. If your firm doesn't already have an SWV number, your firm will be required to acquire a SWV number prior to execution of an agreement. For additional information, please visit the Office of Financial Management (OFM) at https://www.ofm.wa.gov/it-systems/accounting-systems/statewide-vendorpayee-services

FYE Date: Your firm's fiscal year end date.

UDBE/SBE/MSVWBE Certification: If your firm is certified as a UDBE/SBE/MSVWBE enter your firm's certification number. Federal Certifications: Underutilized Disadvantaged Business Enterprise (UDBE), Small Business Enterprise (SBE). State Certifications: Minority, Small, Veteran, Women Business Enterprise. For additional information go to the Washington State Office of Minority & Women's Business Enterprises web site at www.omwbe.wa.gov

It is critical that your firm name is your legal firm name and that it is the same name assigned to your Federal Tax ID number and is the same name utilized for your SWV number.