

# PACKET B

# Freight Mobility Strategic Investment Board Six-Year Plan Preparation



Prepared by: TRANSPO GROUP 12131 113th Ave NE, Ste 203 Kirkland, WA 98034 425.821.3665

# LETTER OF TRANSMITTAL

March 25, 2024

#### SUBJECT: FMSIB Six-Year Plan Preparation

Dear Selection Committee:

Transpo Group USA, Inc. (Transpo) is pleased to submit our statement of qualifications to provide services for the FMSIB Six-Year Plan Preparation. Our firm has excellent qualifications and the commitment to provide the FMSIB with the consulting services to complete this important prioritization effort for the State Legislature. The team was specifically assembled to bring together the needed expertise to provide the FMSIB with background and knowledge, and a proven ability to manage a prioritization exercise and develop a six-year program report that will involve the input of a range of stakeholders across the State.

I will be your project manager and will work closely and collaboratively with the FMSIB staff and board members to guide the project work program, recommendations, and plan deliverables. The team and approach to delivering the plan are based upon a collaborative and engaging process with the FMSIB Board, staff, and stakeholders. I had the opportunity to lead the development of a similar report to the Legislature for FMSIB in 2018 regarding the prioritization of rail crossing improvements across the State. I have also been assisting other fright providers in advancing freight priorities, programs, and projects. I have been managing transportation services contracts for the Port of Seattle, Port of Tacoma, and Northwest Seaport Alliance over the last 6+ years, with tasks that have helped advance policies, programs, and projects that improve freight mobility in the region. I recently completed a project for the Port of Tacoma to help identify their next step of freight project priorities by developing a multi-criteria based decision-making process to help understand the cost-benefit of a range of infrastructure investments.

Our team provides FMSIB with the following benefits:

- Accomplished Project Manager. I have managed dozens of complex policy and planning studies for public agencies, with direct experience working for FMSIB on a similar effort.
- Relevant Experience. Transpo has a range of experience working to develop and present recommendations to the State Legislature and other legislative bodies. We managed the Joint Transportation Committee's Road-Rail Conflict Study, engaged with Senator Cantwell's office to develop a similar program as part of the Federal Infrastructure Package, and assisted FMSIB in prioritizing rail crossing improvements across the state.
- **Capacity and Commitment.** Myself and our key team members assigned to the project have good availability and are committed to successful delivery of the plan for FMSIB.
- Freight Relationships. Having led several statewide and regional freight planning projects over the years, we know many of the stakeholders such as MPOs, RTPOs, Ports, freight providers, and local agencies.

We look forward to working closely with FMSIB on this important effort, and are available to answer any questions you have on our qualification materials.

Sincerely,

JAC

Jon Pascal, PE, Project Manager 425.821.3665, jon.pascal@transpogroup.com



# **CONSULTANT INFORMATION FORM**

# Consultant Information Form

Firm Name:			F	FYE Date:		Number of Employees:	
Transpo Group USA, Inc.				12/31			75
Address:		,					
12131 113th Ave NE,	Ste.	203					
City:	State:		Zip Code:		Cou		ý:
Kirkland	WA	A	98034		King		
Phone:		Fax:		Com	Company Web Site:		
425-821-3665			v		www.transpogroup.com		
Remit to Address:							
SAME AS ABOVE							
City:	City: State:		Zip Code:			County	y:
Phone:	1		Fax:				
Statewide Vendor Number (SWV) for	Remit	to Address:	Federal Tax ID Number or Social Security Number:				
0170501-00		46-1523472					
Unified Business Identifier Number (UBI):		Date Universal Numbering System (DUNS) Number:					
603 258 009		079240015					
Year Firm Established:		UDBE/SBE/MSVWBE Certif	ication Number	ion Number:: NAICS Code & Code N		Code N	ame:
1975		N/A			541-900		
Proposed Project Manager:		Email:					
Jon Pascal		jon.pascal@transpogroup.com					
Financial Contact:		Email:					
Anissa Corea		anissa.corea@transpogroup.com					
Firm Type:							
	ship	C – Corp. Limited Part	nership 🕅 Si	ubchap	ter S Corp. 🛛 I	Limited I	Liability Company
Annual Gross Receipt:				r	<u> </u>		· · ·
-	llion to	\$5 Million 🔲 \$5 Million to \$	10 Million 🕅		Aillion to \$15 Mill	lion [	Over \$15 Million
		¢∂ winnon (0 ¢		9 0 I O I	-innon to \$15 Will		
Note: Firm Name: Please <u>do not</u> use: dba's	- doing	husiness as: combination name	s when two firr	ns are s	working together	unless th	e combination name is the
formation of a legally registered new of 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 <a href="https://www.ofm.wa.gov/it-systems/accounting-systems/statewide-vendorpayee-services">https://www.ofm.wa.gov/it-systems/accounting-systems/accounting-systems/statewide-vendorpayee-services</a>

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.

# 6. CONTRACTOR CERTIFICATION - WORKERS' 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.

> FMSIB Six-Year Plan Preparation Solicitation Title:

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 NOT 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.

Transpo Group USA, Inc. FIRM NAME: Name of Contractor/Bidder – Print full legal entity name of firm

By:

Title:

Signature of authorized person

Title of person signing certificate

Jon Pascal, PE

Print Name of person making certifications for firm

Kirkland, WA Place:

Print city and state where signed

March 22, 2024 Date:

Project Manager

# 7. 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:	FMSIB Six-Year Plan Preparation
Solicitation Posting Date or Agreement Start Date:	Posted February 8, 2024

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 <u>NOT</u> 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 <u>RCW 49.48.082</u>, any provision of RCW chapters <u>49.46</u>, <u>49.48</u>, or <u>49.52</u> within three (3) years prior to the date of the above-stated date.

FIRM N	AME: Transpo Group USA, Inc.		
	Name of Consultant/Contractor -	Print full legal entity	y name of firm
By:	JAC	J	Ion Pascal, PE
•	Signature of authorized person	Print Nan	ne of person making certifications for firm
Title:	Project Manager	Place:	Kirkland, WA
	Title of person signing certificate		Print city and state where signed
Date:	March 22, 2024		

#### Submittal Instructions:

- 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 to: <u>ConsultantRates@wsdot.wa.gov</u>.



# 8. REFERENCES/PAST PERFORMANCES

### **Performance Evaluation Completed by Reference**

Consultant Name: The Transpo	Group						
Consultant's Project Manager: Jon Pa	ascal						
Project Name to be Evaluated on: (Worl Martimie Env Rvw & Per							
Type of Work:	ans Specs & Estimates	<b>V</b> Transportation	Study	Right-of-Way	Other		
Contract Information: (Work must have	been completed within the	last 3 years or is currently	being perfo	rmed.)			
Start Date	-	End Date		Dollar Am	nount of Services		
Prime Sub 11/09/22		11/09/24		31.	388.39		
	Perfc	ormance Evaluation	on				
	Rating Criteria				Score		
	on a scale of 1 to 10. 1 bein	0 0 0		I - Low	v to 10 - High		
1. Was the firm cooperative and response budget related or work element related?	0,00	whether they were			10		
2. Did the firm complete the project wit	thin the total budgeted amou	int?			10		
3. Did the firm complete the project wit	3. Did the firm complete the project within the contract schedule(s)?						
4. Did the firm meet all of your technica	al standards and quality expo	ectations?			10		
5. Was the firm's communication, both oral and written, clear and concise?				10			
6. Was the firm's project management system effective?				10			
Total Score					60		
(Total the score by adding the scores for	(Total the score by adding the scores for criterias 1 through 6.)						
Average Score (Average the score by dividing the total s	score by the total number of	f criteria that was rated.)			10		
·		t T Commention					
Eirm/Company Nama		uator Information	1:				
Firm/Company Name: Port of Sea	attle						
Evaluator's Name: Geraldine Poo	or	Evaluator's Titl	Evaluator's Title: Regional Transpo Sr Mgr				
Firm/Company Address: PO Box 1	1209, Seattle WA,	98111					
Phone: 206-390-9047		Date: 3/22/24					

Distribution: Original: Return to Consultant being evaluated; and

Copy: Fax to WSDOT at 360-705-6838 or email to wsdotcso@wsdot.wa.gov

## **Performance** Evaluation **Completed by Reference**

Consultant Name: Transpo Group USA, Inc				
Consultant's Project Manager:				
Jon Pascal				
Project Name to be Evaluated on: (Work must have been completed within the Allen Street Corridor Study	e last 3 years or is currently being performed.)			
Type of Work: Roadway Design Plans Specs & Estimates	Transportation Study Right-of-Way Other			
Contract Information: (Work must have been completed within the last 3 year	rs or is currently being performed.)			
Start Date End	Date Dollar Amount of Services			
✔         Prime           Sub         11/28/22         06/3	449,933.25			
Performanc	e Evaluation			
Rating Criteria	Score			
Please rate each criteria on a scale of 1 to 10. 1 being low and				
1. Was the firm cooperative and responsive during any negotiations whether budget related or work element related?	they were 10.00			
2. Did the firm complete the project within the total budgeted amount?	10.00			
3. Did the firm complete the project within the contract schedule(s)?	9.00			
4. Did the firm meet all of your technical standards and quality expectations?	10.00			
5. Was the firm's communication, both oral and written, clear and concise?	10.00			
6. Was the firm's project management system effective?	9.00			
Total Score				
(Total the score by adding the scores for criterias 1 through 6.) 58.0				
Average Score	hat was rated ) 9.67			
(Average the score by dividing the total score by the total number of criteria t				
Evaluator	Information:			
Firm/Company Name: City of Kelso				
Evaluator's Name:	Evaluator's Title:			
Michael Kardas	Community Development Director			
Firm/Company Address:				
PO Box 819, Kelso WA 98626				
Phone: 747-8454 Fax: 999-9999	Date: 3/19/24			
Distribution: Original: Return to Consultant being evaluated; an	nd Rev. 2014			

Copy: Fax to WSDOT at 360-705-6838 or email to wsdotcso@wsdot.wa.gov

Consultant Name: Transpo Group USA, Inc		
Consultant's Project Manager: Jon Pascal		
Project Name to be Evaluated on: (Work must have been completed within the I-5 Skagit Transportation Study (STS)	last 3 years or is currently being performed.)	
Type of Work:  Roadway Design Plans Specs & Estimates T	ransportation Study Right-of-Way Other	
Contract Information: (Work must have been completed within the last 3 years		
Start Date End		
Sub 03/22/24 03/2	2/24 219,224.00	
Performance	Evaluation	
Rating Criteria	Score	
Please rate each criteria on a scale of 1 to 10. 1 being low and		
1. Was the firm cooperative and responsive during any negotiations whether the budget related or work element related?	10.00	
2. Did the firm complete the project within the total budgeted amount?	10.00	
3. Did the firm complete the project within the contract schedule(s)?	10.00	
4. Did the firm meet all of your technical standards and quality expectations?	9.00	
5. Was the firm's communication, both oral and written, clear and concise?	9.00	
6. Was the firm's project management system effective?	9.00	
Total Score	57.00	
(Total the score by adding the scores for criterias 1 through 6.)		
Average Score (Average the score by dividing the total score by the total number of criteria that was rated.)		
Evaluator In	nformation:	
Firm/Company Name: Washington State Department of Tr	ansportation	
Evaluator's Name: John Shambaugh Evaluator's Title: Transportation Planning Manager		
Firm/Company Address: 1019 Andis Road		
Phone: (360) 757-5981 Fax:	Date:03/22/20	
Distribution: Original: Return to Consultant being evaluated; and	Rev. 2014	
Copy: Fax to WSDOT at 360-705-6838 or email to v	vsdotcso@wsdot.wa.gov	

## **Performance Evaluation Completed by Reference**

Consultant Name: Transpo Group USA, Inc.					
Consultant's Project Manager: Jon Pascal, PE					
Project Name to be Evaluated on: (Work must have been completed within the last 3 years or is currently being performed.) Meridian Avenue (SR 161) Corridor Study					
Type of Work:       Roadway Design       Plans Specs & Estimates       Transportation Study       Right-of-Way       Other					
Contract Information: (Work must have been completed within the last 3 years or is currently being performe         Start Date         Prime         Sub	d.) Dollar Amount of Services				
Performance Evaluation					
Rating Criteria	Score				
Please rate each criteria on a scale of 1 to 10. 1 being low and 10 being high.	1 - Low to 10 - High				
1. Was the firm cooperative and responsive during any negotiations whether they were budget related or work element related?	9				
2. Did the firm complete the project within the total budgeted amount?	8				
3. Did the firm complete the project within the contract schedule(s)?	8				
4. Did the firm meet all of your technical standards and quality expectations?	9				
5. Was the firm's communication, both oral and written, clear and concise?	9				
6. Was the firm's project management system effective?	8				
Total Score	T I THAT				
(Total the score by adding the scores for criterias 1 through 6.)	5/ 2002				
Average Score (Average the score by dividing the total score by the total number of criteria that was rated.)	8.5 0.00				
Evaluator Information:					
Firm/Company Name: CITY OF EDGE WOOD					
Evaluator's Name: JEREMY METZVER Evaluator's Title: PUBLI	c workes Director				
Firm/Company Address: 2224 104 <sup>TH</sup> AVE E, EDGEWOOD, WA	98372				
Phone: 253 952 3299 Fax: N/A Date: 3/19	9/2024				
Distribution: Original: Return to Consultant being evaluated; and	Rev. 2014				
Copy: Fax to WSDOT at 360-705-6838 or email to wsdotcso@wsdot.wa.gov					



9. COST FACTORS

# transpogroup 7



Date: March 22, 2024

Company Name: \_\_\_\_\_Transpo Group USA, Inc.

Address: 12131 113th Ave NE, Ste. 203

City / State / Zip: \_\_Kirkland, WA, 98034

Subject: Proposed Labor Classifications and Hourly Billing Rates for FMSIB Six-Year Plan Preparation

Attention: Manager, Contract Services Office

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

Labor Classification	All Inclusive Billing Rate
Engineer/Planner/Analyst/Principal/Director - Level 7	\$355
Engineer/Planner/Analyst/Assoc Prin/Proj Adm - Level 6	\$275
Engineer/Planner/Analyst/Tech/Proj Adm - Level 5	\$255
Engineer/Planner/Analyst/Tech/Proj Adm - Level 4	\$210
Engineer/Planner/Analyst/Tech/Proj Adm - Level 3	\$180
Engineer/Planner/Analyst/Tech/Proj Adm - Level 2	\$160
Engineer/Planner/Analyst/Tech/Proj Adm - Level 1	\$145

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

Title Project Manager, Managing Principal

DOT Form 224-011 Revised 12/2018