



Statement of Qualifications

Geotechnical Engineering & Project Delivery (Area 2) Washington State Department of Transportation

March 13, 2024



EWSHANNON & WILSON

March 13, 2024

Washington State Department of Transportation CSOSubmittals@wsdot.wa.gov

RE: Statement of Qualifications for Geotechnical Engineering & Project Delivery (Area 2)

Dear Members of the Selection Committee:

We are pleased to submit our statement of qualifications to help WSDOT's State Geotechnical Office (SGO) deliver projects for Area 2 and any other geotechnical assistance that you need. We have unmatched experience in acting as an extension of your staff and can provide the requested services, including specialized geotechnical expertise, report development, project delivery, construction support and related activities on large complex transportation projects statewide.

With S&W's breadth of geotechnical projects across Washington state; thorough understanding of the WSDOT GDM, AASHTO LRFD BDS, and other WSDOT manuals and standards; knowledge of the processes involved in DBB and DB projects; and recent history of providing the same kind of support to WSDOT as requested by the RFQ, we are confident our team has the ability to provide the SGO with the professional services they require.

One the biggest benefits of our team is that we are proposing **Monique Anderson** to be the **SLGE** for this contract, continuing in the role she has excelled in for the last five years. Monique already knows how to successfully deliver as an integrated member of WSDOT's SGO staff, having led more than 100 task orders for the SGO. She will be supported by five impressive Selected Senior Staff, each with more than a decade of geotechnical management experience, and a combined history with fish passage, seismic, ferries, and highway design experience. In addition, we will be supported by S&Ws large geotechnical force as well as our selected DBE firms.

We value our long-term relationship with WSDOT, are committed to providing you with superior quality services, and look forward to continued success as we work together on this important contract. If you have any questions about our qualifications and experience, please feel free to contact Monique at (206) 695-6837.

Sincerely,

SHANNON & WILSON

Vm.20

Michael D. Harney, PE, ENV SP Vice President Seattle Office Manager

Criteria 4. Contractor Certification – Worker's Rights

Shannon & Wilson has included the following Contractor Certifications for every firm on the team.

Firms Included

Shannon & Wilson, Inc. (Prime)

Ciani & Hatch Engineering PLLC

CADCAB LLC

Bolima Drafting & Design, Inc.

Stell Environmental Enterprises, Inc.

Scarlet Plume LLC

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: Geotechnical Engineering & Project Delivery Area 2

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 N	Shannon & Wilson, Inc.			
	Name of Contractor/Bidder – Print f	ull legal entity na	me of firm	
By:	MullDthm	Micha	el D. Harney	
,	Signature of authorized person	Print Name of person making certifications for firm		
Title:	Vice President	Place:	Seattle, WA	
	Title of person signing certificate		Print city and state where signed	
Date:	11Mar2024			

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: _____Geotechnical Engineering & Project Delivery Area 2

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

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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 NA	AME: Ciani & Hatch Engineering, PLLC					
	Name of Contractor/Bidder – Print full le	gal entity na	me of firm			
By:	vancii	Whitr	ney Ciani			
	Signature of authorized person	Print Name of person making certifications for fir				
Title:	President	Place:	Boise, ID			
	Title of person signing certificate		Print city and state where signed			
Date:	March 6, 2024					

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: Geotechnical Engineering & Project Delivery Area 2

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

M 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.

FIRM NAME: ____

Name of Contractor/Bidder – Print full legal entity name of firm

By:

Calory Taylor Signature of authorized person

Cabryn Taylor

Print Name of person making certifications for firm

owner Title: Title of person signing certificate

Edmonds, WA Place:

Print city and state where signed

3/7/2024 Date:

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: Geotechnical Engineering & Project Delivery Area 2

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.

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□ 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: Bolima Drafting & Design, Inc.

Name of Contractor/Bidder – Print full legal entity name of firm

By:

Signature of authorized person

President

Title of person signing certificate

Date: March 6, 2024

Title:

William Bolima

Print Name of person making certifications for firm

Place: Seattle, Washington Print city and state where signed

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: Geotechnical Engineering & Project Delivery Area 2

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.

FIRM NAME: _Stell Environmental Enterprises, Inc. DBE Stell Name of Contractor/Bidder – Print full legal entity name of firm

By:

Signature of authorized person

Title: President and Chief Executive Officer Title of person signing certificate

Julie Erickson

Print Name of person making certifications for firm

Redmond, WA Place: Print city and state where signed State

Date: _3/5/2024_____

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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: Scarlet Plume LLC

Name of Contractor/Bidder - Print full legal entity name of firm

By: <u>Ranae A. LaFerney</u> Signature of authorized person

Title: Member Title of person signing certificate

Date: March 6, 2024

Ranae A. LaFerney

Print Name of person making certifications for firm

Place: Port Angeles, Washington

Print city and state where signed

Criteria 5. References/Past Performances

Shannon & Wilson has included the following performance evaluations:

Client	Evaluator(s)	Project Name
WSDOT	Andrew Fiske	Geotechnical Engineering Personnel Augmentation
WSDOT	Steven Fuchs, Ionna Kladou, Dewayne Matlock	SR 167/I-5 to SR 161 New Expressway (XL5105)
WSP USA Inc.	Aaron Fieser	SR 167/I-5 to SR 161 New Expressway and SR 167/I-5 to SR 509 New Expressway



Shannon & Wilson

Geotechnical Engineering Personnel Augmentation

400 N 34th Street, Suite 100 Seattle, WA 98043

Y-12544

Geotechnical Studies

6/18/2021

3,500,000

3,000,000

6,500,000

12/31/2024

Complete geotechnical projects for the State Geotechnical Office (SGO), including project management, field coordination, data evaluation, geotechnical analyses, geotechnical reporting, and geotechnical support during construction. Support SGO with internal training and improvements, including support of standard plan development and update of the Geotechnical Design Manual.

> S&W demonstrated exceptional performance in meeting guidelines on fee adherence, meeting all negotiation S schedules, fostering open and honest communications, and consistently negotiating in good faith. S&W successfully completes projects within agreed S budgets, demonstrating a commendable balance between cost/effort, including reasonable expenses. S&W delivers on time, adapting seamlessly to changes and promptly addressing review comments, S demonstrating exceptional schedule management. S&W consistently meets WSDOT standards, delivering innovative designs with responsive revisions and compatible files.

S&W excels in clear, concise communication,

demonstrating a strong understanding of instructions and S maintaining timely intervals for continual progress.

S&W demonstrates excellence in cost control, delivering creative measures, accurate progress reports, and timely invoicing. Efficient meetings, limited modifications, and effective collaboration with WSDOT.

S

S

Andrew Fiske State Geotechnical Engineer

Digitally signed by Andrew Fiske Date: 2023.12.15 16:20:29 -08'00'

Consultant Liaison Signature



Shannon & Wilson

SR 167/I-5 to SR 161 New Expressway (XL5105)

400 N 34th Street, Suite 100 Seattle, WA 98043 Y-12544 Task AH

Geotechnical Studies

	11/22/2021	
678,010	-100,010	578,000
6/30/2024	tbd	

Coordinate collection of geotechnical data, perform conceptual geotechnical design, support preparation of the RFP, and prepare reference and contract geotechnical deliverables including geotechnical reference memoranda, a geotechnical data report, and a geotechnical baseline report.

Monique did a good job of estimating the level of effort that would be needed for Stage 2 based on past MR experience and we agreed. Monique did a good job of focusing the efforts of her MR team to be commensurate with the needed deliverables and is trending under budget. Monique and her team are always very responsive to review comments and have been flexible to address AR project needs when they arise. Deliverable are always on time or ahead of schedule. Monique has been open and flexible to look at various design solutions, but in all cases, she ensures that her team follows the policies established by the Geotechnical AR Office. Quality control has been good on all deliverables.

Monique is a good communicator and is good at asking clarifying questions. Her written communication is concise yet accurate.

Monique is always good at keeping meetings short and to the point and to solve the issues at hand. She is well respected among her WSDOT peers and she collaborates well to solve issues.

AR

AR

AR

12/19/2023

12/20/2023

Steve Fuchs, SR 167 Completion Project Manager

_Steven D. Fuchs	12/17/2023

ultant Liaison Signat

Ioanna Kladou

xecutive Signature

Dewayne Matlock, Deputy Program Administrator

Ioanna Kladou, Geotechnical Design & Project Development Manager

Washington State Department of Transportation

Consultant Name: Shannon & Wilson	
Consultant's Project Manager: Monique Anderson	
Project Name to be Evaluated on: (Work must have been completed within the last 3 years o SR 167/I-5 to SR 161 New Expressway and SR 167/I-5 to	
Type of Work: Roadway Design Plans Specs & Estimates Transportation	n Study Right-of-Way Other
Contract Information: (Work must have been completed within the last 3 years or is currently Start Date End Date 05/01/19 06/30/24	/ being performed.) Dollar Amount of Services 985,000.00
Performance Evaluati	on
Rating Criteria Please rate each criteria on a scale of 1 to 10. 1 being low and 10 being high	Score
1. Was the firm cooperative and responsive during any negotiations whether they were 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?	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?	10.00
Total Score (Total the score by adding the scores for criterias 1 through 6.)	60.00
Average Score (Average the score by dividing the total score by the total number of criteria that was rated.)	10.00
Evaluator Informatio	n:
Firm/Company Name: WSP USA INC.	
Evaluator's Name: Aaron Fieser Evaluator's Ti	^{lle:} SR 167 Design Manager and Y-11918
F' (G A 11	

Firm/Company Address: 1001 4th Ave, Suite 3100, Seattle, WA 98154

Phone: (206) 234-1077	Fax:	Date: 12/17/23	
Distribution: Original: Return to Con	nsultant being evaluated; and	Rev. 2	201

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

Consultant Information Sheets

Shannon & Wilson has included Consultant Information Sheets for every firm on the team.

Firms Included

Shannon & Wilson, Inc. (Prime)

Ciani & Hatch Engineering PLLC

CADCAB LLC

Bolima Drafting & Design, Inc.

Stell Environmental Enterprises, Inc.

Scarlet Plume LLC

Firm Name:				FY	FYE Date:		Number of Employees:	
Shannon & Wilson, Inc.			12	12-28-2024		369		
Address:								
400 North 34th Street, Suite	100							
City:	State:		Zip Code: County:					
Seattle	WA		98103	98103				
Phone:	1	Fax:		Com	pany Web Site:			
206.625.6413				wwv	v.shannonwil	son.cc	om	
Remit to Address:				1				
PO Box 300303								
City:	State:		Zip Code:			Count	y:	
Seattle	WA		98103			King		
Phone:	1		Fax:					
206.632.8020			206.695.6777					
Statewide Vendor Number (SWV) for	Remit	to Address:	Federal Tax ID Number or Social Security Number:					
SWV0033499-00			91-0745357					
Unified Business Identifier Number (U	JBI):		Date Universal Numbering System (DUNS) Number:					
578 058 207			04-403-7802					
Year Firm Established:		UDBE/SBE/MSVWBE Certit	cation Number:: NAICS Code & Code Name:			ame:		
1954		N/A			541330 Eng	541330 Engineering services		
Proposed Project Manager:		1	Email:					
Monique Anderson			monique.anderson@shanwil.com					
Financial Contact:			Email:					
Peter Gowell			peter.gowell@shanwil.com					
Firm Type:	Firm Tune:							
Sole Proprietor Partnership C – Corp. Limited Partnership Subchapter S Corp. Limited Liability Company								
Annual Gross Receipt:	11	95 Million 🗖 95 Million (* 19	10 M(11)		10110 4- @1.6 X 411	1: 📼	Orean \$15 Million	
S0 to \$1 Million \$1 Million to \$5 Million \$5 Million \$5 Million to \$10 Million \$10 Million \$10 Million to \$15 Million \$15 Million \$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

Firm Name:				F	YE Date:	Number of Employees:		
Ciani & Hatch Engineering P	PLLC				12/31/2024		3	
Address:								
18875 67th Dr NE, Unit 1								
City:	State:		Zip Code:			County		
Kenmore	WA		98028 King					
Phone:	1	Fax:	Company Web Site:					
425-473-1850				ww	vw.CHEgeotech	n.com		
Remit to Address:								
Same as above								
City:	State:		Zip Code:			County		
Phone:	1		Fax:		1			
Statewide Vendor Number (SWV) for	Remit t	o Address:	Federal Tax ID Number or Social Security Number:					
SWV0310885-00			93-1548438					
Unified Business Identifier Number (U	JBI):		Date Universal Numbering System (DUNS) Number:					
605250198								
Year Firm Established:		UDBE/SBE/MSVWBE Certif						
2023		DBE: D2F0028657, SBE: WBE: W2F0028657	21346634	541330				
Proposed Project Manager:			Email:					
Whitney Ciani			wciani@CHEgeotech.com					
Financial Contact:			Email:					
Mikayla Hatch			mhatch@chegeotech.com					
Firm Type:								
	ship	C – Corp. Limited Parti	nership 🗌 Su	ibchap	ter S Corp. 🛛 🛛 L	imited L	iability Company	
-	1 1		1	r .	r – –		5 I 5	
Annual Gross Receipt:				1 # 1 0 -		. –		
🔀 \$0 to \$1 Million 🗌 \$1 Million to \$5 Million 🔲 \$5 Million to \$10 Million 🗌 \$10 Million to \$15 Million 🗍 Over \$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 www.dor.wa.gov.

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. Please contact WSDOT TRAINS Help Desk at 360-705-7514 for assistance.

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.

Firm Name: Cadcab, LLC		FYE Da		Number of Employees:			
Address: 21202 92nd F	PI W						
City: Edmonds	State:	Zip Code: 9802		S	nohomish		
Phone: 206-417-1414	Fax:	Fax: Company Web Site: Cadcab.com					
Remit to Address: 21202 92nd PI W							
Edmonds	State: Wa	Zip Code: 9802	0		nohomish		
Phone: 206-417-1414	Fax:						
Statewide Vendor Number (SWV) for	Federal Tax ID Number or Social Security Number: 82-1727300						
Unified Business Identifier Number (U 604 111 135	/BI):	Date Universa	l Numbering	g System (DUNS) Number:		
Year Firm Established: 2007	UDBE/SBE/MSVWBE Certit	tification Number:: NAICS Code & Code Name: V2F0025277 541340					
Proposed Project Manager: Cabryn Taylo	r		n@o	cadca	b.com		
Financial Contact: Cabryn Taylo	cabryn@cadcab.com						
Firm Type: Image: Sole Proprietor Partnership C – Corp. Limited Partnership Subchapter S Corp. Limited Liability Company Annual Gross Receipt: Image: Subchapter S Corp. Image: Subchapter S Corp. Image: Subchapter S Corp. Image: Subchapter S Corp.							
So to \$1 Million \$1 Million to \$5 Million \$5 Million to \$10 Million \$10 Million \$10 Million to \$15 Million Over \$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.

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Firm Name:				FYE Date:		Number of Employees:		
Bolima Drafting &	De	sign, Inc.		1	12/31		16	
Address:								
1904 3rd Ave, Su	ite 7	711						
City:	Zip Code: County:							
Seattle	WA	Ą	98101 King			g		
Phone: Fax:					pany Web Site:			
206-332-9729		206-374-2686		WV	vw.bolim	a.co	om	
Remit to Address:								
1904 3rd Ave, Su	ite	/11						
City:	State:		Zip Code:			County		
Seattle	WA	Ą	98101			King	g	
Phone:	1		Fax:					
206-332-9729			206-374-2686					
Statewide Vendor Number (SWV) for	Remit t	to Address:	Federal Tax ID Number or Social Security Number:					
SWV0229517-00			91-1621432					
Unified Business Identifier Number (U	JBI):		Date Universal Numbering System (DUNS) Number:					
601-512-071			167009500					
Year Firm Established:		UDBE/SBE/MSVWBE Certif						
1987		D1M0005127/M	1M0005127 541340 – CADD Drafting Se			D Drafting Services		
Proposed Project Manager:			Email:					
William Bolima			wbolima@bolima.com					
Financial Contact:			Email:					
Erin Bolima			ebolima@bolima.com					
Firm Type:								
🗌 Sole Proprietor 🔲 Partnership 🔲 C – Corp. 🔲 Limited Partnership 🔳 Subchapter S Corp. 📄 Limited Liability Company								
Annual Gross Receipt:								
So to \$1 Million \$1 Million to \$5 Million \$5 Million \$5 Million to \$10 Million \$10 Million to \$15 Million Over \$15 Million								

Note:

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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 <u>https://www.ofm.wa.gov/it-systems/accounting-systems/statewide-vendorpayee-services</u>

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

Firm Name:				F	YE Date:		Number of Employees:	
Stell Environmental Enterprises, Inc. 12/31				90				
Address:		Quite 100						
6100 219th St S	•	Sulte 480	1					
City:	State:	•	Zip Code:			County		
Mountlake Terrace	98043			Sno	ohomish			
Phone: Fax:			•		pany Web Site:			
206-717-7010		206-717-701	0	ste	ellee.co	m		
Remit to Address:								
6100 219th St S	VV,	Suite 480						
City:	State:	_	Zip Code:			County		
Mountlake Terrace	WA	4	98043	3		Sno	ohomish	
Phone:			Fax:					
206-717-7010			206-717-7010					
Statewide Vendor Number (SWV) for H	Remit t	o Address:	Federal Tax ID Number or Social Security Number:					
SWV019026100			20-0785631					
Unified Business Identifier Number (U	BI):		Date Universal Numbering System (DUNS) Number:					
603-056-267			14481	77	85			
Year Firm Established:		UDBE/SBE/MSVWBE Certif	fication Number:: NAICS Code & Code Name:			ame:		
2004		W2F0023788/D	2F00237	788	541620-E	nviror	nmental Consulting	
Proposed Project Manager:		I	Email:					
Danielle Gascoy	ne,	, PMP	dgascoyne@stellee.com					
Financial Contact:		_	Email:					
Julie Erickson, PMP			jerickson@stellee.com					
Firm Type:								
☐ Sole Proprietor ☐ Partnership ☐ C – Corp. ☐ Limited Partnership								
Annual Gross Receipt:								
So to \$1 Million □ \$1 Million to \$5 Million □ \$5 Million to \$10 Million ■ \$10 Million to \$15 Million □ Over \$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.

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Firm Name:					FYE Date:		Number of Employees:
Scarlet Plume LLC				12/31			1
Address:							
266 Seagull Drive							
City:	State:		Zip Code:			County:	
Port Angeles	WA		98363		Clallam		
Phone:		Fax:			pany Web Site:		
206-230-8478				www.scarlet		letp	lume.com
Remit to Address:							
266 Seagull Drive							
City:	State:	n	Zip Code:			County:	
Port Angeles	WA	4	98363	63		Clallam	
Phone:	Fax:						
206-230-8478							
Statewide Vendor Number (SWV) for Remit to Address:			Federal Tax ID Number or Social Security Number:				
SWV0125172-0	537-48-8636						
Unified Business Identifier Number (U	Date Universal Numbering System (DUNS) Number:						
602-726-930	041010475						
Year Firm Established:		UDBE/SBE/MSVWBE Certification Number:		::	NAICS Code & Code Na		ame:
2007 (as LLC)		W2F0014745			561410		
Proposed Project Manager:			Email:				
Ranae LaFerney			ranae@scarletplume.com				
Financial Contact:	Email:						
Same as above			Same as above				
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 □ Over \$15 Million							

Note:

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