Jacobs

Packet B 2024 Reconnecting East Central Spokane

Statement of Qualifications for WSDOT

February 14, 2024



Jacobs

Challenging today. Reinventing tomorrow.

Suite 500 Bellevue, WA 98004-5118 **United States** T +1.425.453.5000

1100 112th Avenue NE

www.jacobs.com

February 14, 2024

Attn: Consultant Services Office Washington State Department of Transportation CSOSubmittals@wsdot.wa.gov

Subject: 2024 Reconnecting East Central Spokane

Dear Evaluation Committee,

Washington State Department of Transportation (WSDOT) is embarking on an exciting opportunity to reconnect East Central Spokane. To address the unique needs of this project—most importantly, empowering the community to drive the project—Jacobs has assembled a team with an inclusive approach backed with the right expertise. We are delighted to offer you the following benefits:

#1 Blended delivery infused with Spokane knowledge.

Jacobs offers proven WSDOT programmatic and project experience from our active General Engineering Consultant (GEC) contracts across Washington. As valued by WSDOT, we adapt where and how you need us, blending your staff with ours to do what's needed. This blended delivery model is enhanced with the Spokane staff and team's experience and community ties from our partners Commonstreet, Big Sky Public Relations (BSPR), and Bernardo Wills.

#2 Community-centric process to plan the project with them. We are community builders! We know this area has been historically underserved and marginalized. Using continuous collaboration with WSDOT and the City of Spokane and targeted public engagement throughout the project, Jacobs, BSPR, and Bernardo Wills will cocreate a new public park to be proud of!

#3 Technical excellence in environmental protection.

Jacobs team led by local subject matter experts, brings extensive recent experience with environmental planning and permitting to help WSDOT and your community partners: right-size and accelerate NEPA/SEPA, complete local/state/federal regulatory permitting, and work collaboratively with outside agency partners. The result is achieving your project objectives with reduced risk and schedule certainty.

#4 Cost-saving innovation. Since 2007, Jacobs has saved WSDOT more than \$500M in design innovations on some of your largest programs. Our alternative delivery design for design-build capabilities means we know how to harness our team's creative thinking for budget-friendly structural solutions. Trusted partners **TranTech** and **Concord** are adept in collaborating with us this way.

Leveraging our integrated project delivery approach proven on both of our active General Engineering Consultant (GEC) contracts, we are eager to partner with you to complete this awesome project!

Jacobs Engineering Group Inc.

Ed Toavs, PE | Project Manager

406.899.5653 | Ed.Toavs@jacobs.com

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Performance Evaluation Instructions

- How
 - Form should be reviewed and discussed with the Consultant prior to contract negotiations. Establish performance expectations.
 - Performance evaluation ratings include a reflection of sub-consultants used by the prime consultant.
 - Evaluation may include additional criteria, noted as 7. "Other Criteria (As Agreed)", as mutually agreed to by both parties in advance of performing contract work(e.g. public involvement or volume of work
 - Provide justification for performance ratings above or below "Meets Std." Include examples.
 - The evaluator and the consultant should understand and discuss at the beginning of the work and during the
 evaluation process that a "Meets Standard" score should be interpreted as a positive score. It simply means that
 the product was delivered as expected and that it meets the requirement of the work. As a reference, a "Meets
 Standard" score would indicate that the product was similar to what WSDOT would expect from a typical design
 team from WSDOT.

When

Final Evaluation

• Complete and distribute a performance evaluation at the point of termination of the agreement. Distribute the form as specified at bottom of form.

Interim Evaluation

- Interim evaluations should be performed as follows:
 - 1. At phase transitions
 - 2. When project management changes occur
 - 3. Provide consultant with constructive feedback in order to correct poor performance
 - 4. Annually if none of the other conditions occur Distribute as specified at the bottom of the form.
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Subconsultant Evaluation

- For sub-consultants with significant project participation (more than \$100,000) an evaluation is recommended. Ensure coordination and review with the prime consultant prior to distribution.
- Performance evaluation ratings include a reflection of sub-consultants used by the prime consultant.
- Distribute as specified at the bottom of the form, including prime consultant and sub-consultant.

Why

Meaningful evaluations provide consultants with constructive feedback to improve performance and meet WSDOT
expectations. Scores from these evaluations factor into "Past Performance" ratings, which are used to help
determine selection of future consultants. In addition, poor ratings may lead to being disqualified to perform WSDOT
work and elimination from pre-qualification status.



Performance Evaluation Consultant Services

Consultant Name Jacobs Engineering Group Inc.		Evalua Inte	ation Type erim	consultant	nal		
Consultant Address				Project Title General Tolling Consultant			
1100 112th Ave NE, Suite 500, Bellevue		Agreement Number					
				Y-110			
Type of Work ✓ Study ✓ Design □ R/W □ P	C9F	(C a. a.id	fy Below):		of Agreement		
✓ Study ✓ Design ☐ R/W ☐ P	S&E V Ollie	i (Specii	iy below).	∐Lu	mp Sum		
				_	urly Rate		
Complexity of Work	Date Agreeme	ent Appro	oved	✓ Co	st Plus Fixed F	ee	
✓ Difficult	6/10/2010			Otl	ner		
Amount of Original Agreement \$ 3,000,000	Total Amo \$ 57,000,		ifications		Total Amount \$ 60,000,000		
Completion Date Including Extensions 6/30/2023	Actual Coi 6/30/2023		Date		Actual Total P \$ 47,000,000		
Type and Extent of Subcontracting					l		
Primary Subcontractor is WSP providing project level technical support throughout the Program. Additional Subconsultants inclue Vision (Technical System & Roadside Expertise), Larson Consulting (Policy and CSC Operations Support), Silicon Transportati Consultants (Subject Matter Expertise in National Toll Interoperability).							
Performance Rating Scale (From Average	ne Score Relow	<i>'</i>)					
Performance Rating Scale (From Average		')	MR	R	R	P	
S	ge Score Below AR bove Std.		MR eets Std.	B Belov		P Poor	
S	AR		eets Std.	Belov	v Std.	P Poor elow Ratings)	Rating
Superior A	AR		comments (Below Justify	Above & Bo	elow Ratings)	Rating
Superior A Standard Criteria 1. Negotiations Cooperative and responsive	AR		Comments (Negotiations we	Below Justify re coope	Above & Berrative and with	elow Ratings) out controversy.	Rating
Superior A Standard Criteria 1. Negotiations Cooperative and responsive Adhered to WSDOT guidelines on fee.	AR		Comments (Negotiations we WSDOT guidelin	Below Justify re coope nes were	Above & Berrative and with adhered to. Al	elow Ratings) out controversy.	Rating AR
Superior A Standard Criteria 1. Negotiations Cooperative and responsive Adhered to WSDOT guidelines on fee. Met negotiation schedule.	AR		Comments (Negotiations we	Below Justify re coope nes were	Above & Berrative and with adhered to. Al	elow Ratings) out controversy.	
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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 progre	Communication was frequent, consistent, a moving projects toward completion.	and helpful in	AR		
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	Superior management of work, consistently		AR		
7. Other Criteria (As agreed)					
Overall Rating	The GTC team has worked consistently over years to augment Toll Division staff, transfer expertise, support major initiatives, and impute WSDOT Toll program.	er technical	AR		
Rated By (Project Manager Name and Title)	Project Manager Signature	Date			
Jennifer Charlebois, Toll Division Deputy Director	Jennifer Charlebois	8/16/2022	2		
Rated By (Area Consultant Liaison Name and Title)	Area Consultant Liaison Signature	Date			
Rick Naten, Toll Division Contracts Manager	Rick Naten	Rick Naten 8/16/202			
Executive Review (Name and Title) Edward Barry, Toll Division Director	Executive Signature	Date 08/16/20	022		



Performance Evaluation Consultant Services

				Evaluation Type Interim Subconsultant Final			
Consultant Address				Project Title Olympic Region General Engineering Consultant			
1100 112th Ave NE, Suite 500, Bellevue, WA 98004				Agreement Number Y-12554			
Type of Work ☐ Study ✓ Design ☐ R/W ✓ P	S&E	✓ Other (Speci	ify Below):	l —	f Agreement mp Sum		
					urly Rate		
Complexity of Work ✓ Difficult Routine		e Agreement Appr 9/2021	roved	!=	st Plus Fixed Fee		
Amount of Original Agreement \$ 20,500,000	17		lifications		Total Amount Agreement \$ 40,000,000		
Completion Date Including Extensions June, 30, 2023	Ā	Actual Completior on-going	n Date		Actual Total Paid \$ 10,449,833 to date		
Type and Extent of Subcontracting							
Assist Olympic Region in delivering projects to include pre-design, design, PS&E, contract administration, and staff augmentation.							
Performance Rating Scale (From Average	ne Sco	ore Relow)					
• • •		JIC DCIOW)					
S	AR	<u> </u>	MR	В			
		<u> </u>	MR leets Std.	B Belov		1	
	AR	<u> </u>	leets Std.	Belov		Rating	
Superior A	AR	<u> </u>	Jacobs Engineer cooperative and Region. Commun	Below ustify ing Grouvery respirations	v Std. Poor	Rating AR	
Superior A Standard Criteria 1. Negotiations Cooperative and responsive Adhered to WSDOT guidelines on fee. Met negotiation schedule. Open and honest communications. Willingness to negotiate in good faith 2. Cost / Budget Finished within agreed budget, including Appropriate level of effort (Cost commen	AR sbove	Std. M	Jacobs has appli	Below ustify ing Grouvery resolications est and interest	Above & Below Ratings) up, Inc. (Jacobs) has been ponsive to the needs of Olympic and negotiations have been		
Superior A Standard Criteria 1. Negotiations Cooperative and responsive Adhered to WSDOT guidelines on fee. Met negotiation schedule. Open and honest communications. Willingness to negotiate in good faith 2. Cost / Budget Finished within agreed budget, including	all sunsurates (App	upplements e with work) prox. xx% -yy%) g supplements.	Jacobs has applimonitor budgets. Jacobs has commonitor budgets budget.	Below ustify ing Grou very res vications est and re ed the a to succe municate ges. Mo e not ant	Above & Below Ratings) up, Inc. (Jacobs) has been ponsive to the needs of Olympic and negotiations have been refreshingly effective.	AR	

5. Communications Clear and concise communication (Oral, written, drawings). Demonstrates an understanding of oral and written instructions Communicated at intervals appropriate for continual progres	Communication has been transparent and effect concise and has an intended purpose. It is approand promotes a project first environment.		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	Jacobs has managed this agreement well. They knowledgeable of all the task orders status, any how to resolve them and work collaboratively w WSDOT to improve the GEC program.	issues,	AR
7. Other Criteria (As agreed)			
Overall Rating	Jacobs has embodied the partnering culture that WSDOT strives for. They have become a true of WSDOT in the pursuit of excellent project de	extension	AR
Rated By (Project Manager Name and Title)	Project Manager Signature	Date	
	granen Boon	9/14/2	022
Rated By (Area Consultant Liaison Name and Title)	Area Consultant Liaison Signature	Date 9/14/2	022
Executive Review (Name and Title)	Executive Signature/	Date	
JoAnn Schueler, Olympic Region ARA	4711	9/14/2022	



Performance Evaluation Instructions

How

- Form should be reviewed and discussed with the Consultant prior to contract negotiations. Establish performance
 expectations.
- Performance evaluation ratings include a reflection of sub-consultants used by the prime consultant.
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 the product was delivered as expected and that it meets the requirement of the work. As a reference, a "Meets
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 team from WSDOT.

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 - 2. When project management changes occur
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work and elimination from pre-qualification status.



Performance Evaluation Consultant Services

Consultant Name Jacobs Engineering Group, Inc.			Evalua Inte	ition Typ erim	_	onsultant	Fir	nal
Consultant Address				Project Title SCR General Engineering Consultant				
1100 112th Avenue NE, Suite 500 Bellevue, Wa 98004				Agreement Number Y-11855				
Type of Work ✓ Study ✓ Design ✓ R/W ✓ PS	S&E ✓ Other (Spec	ify Below):	Lui	of Agree				
Complexity of Work ☐ Difficult	Date Agreement Appr March 17, 2016	roved	!=		e Fixed Fe	ee		
Amount of Original Agreement \$ 5,000,000	Total Amount Mod \$ 75,000,000	difications		Total A \$ 80,0		greement		
Completion Date Including Extensions June 30, 2025	Actual Completion	n Date		Actual \$ 35,6	Total Pa 65,318	aid		
Type and Extent of Subcontracting Engineering, Environmental, Planning, Utility, Public Involvement, Project Control, Surveying, Material Testing & Inspection Support.								
Performance Rating Scale (From Average	e Score Below)							
T onemand rating could (Frem two ag	e ocore below)							
S	AR	MR leets Std.	B Belov			P Poor		
S	AR		Belov	v Std.	 e & Be	Poor	ngs)	Rating
Superior A	AR	leets Std.	Below ustify or exceed and hone:	Above ded the st in cor	standar nmunica	Poor Iow Rati rd criteria li ations and	sted.	Rating AR
Superior A Standard Criteria 1. Negotiations Cooperative and responsive Adhered to WSDOT guidelines on fee. Met negotiation schedule. Open and honest communications.	AR bove Std. N all supplements surate with work)	Jacobs has met of They are open ar to negotiate while	Below ustify or excee nd hone making	Above ded the st in cong an effo	standar nmunica ort to del	Poor Iow Rati rd criteria li ations and viver project	sted.	
Superior A Standard Criteria 1. Negotiations Cooperative and responsive Adhered to WSDOT guidelines on fee. Met negotiation schedule. Open and honest communications. Willingness to negotiate in good faith 2. Cost / Budget Finished within agreed budget, including Appropriate level of effort (Cost commen	all supplements surate with work) (Approx. xx% -yy%)	Jacobs continuous	Below ustify or excee and hones a making usly striv ated. a to mee easily d roject's	Above ded the st in con g an effor res to str t timelin one whe needs.	standar nmunica ort to del ay withir es and/o	Poor Iow Rati rd criteria li ations and v iver project n or below or deliver e	sted. willing ts early. nes	AR

5. Communications Clear and concise communication (Oral, written, drawings). Demonstrates an understanding of oral and written instructions Communicated at intervals appropriate for continual progress	Jacobs has provided appropriate communication listed, and has been very responsive to question clarifications as needed in a timely manner.		MR
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	Jacobs management is effectively and efficiently providing all listed in this section. Jacobs mana is quick to respond to any questions and provide additional information/clarification if requested. are accurate and submitted consistently and tim Jacobs-initiated supplements to task orders are and collaboration with WSDOT and management sub-consultants is effective.	gement es Reports nely. limited	AR
7. Other Criteria (As agreed)			
Overall Rating	Jacobs continues to meet or exceed expectation timely, efficient, and collaborative communication delivery. Management and technical quality of deliverables are efficient.		AR
Rated By (Project Manager Name and Title)	Project Manager Signature	Date	
Doug Darwood, SCR Project Control Engr. (ACLL	Douglas A. Darwood Date: 2022.09.13 15:27:49-07'00'	9/13/2022	
Rated By (Area Consultant Liaison Name and Title)	Area Consultant Liaison Signature	Date	
Doug Darwood, SCR Project Control Engr. (ACL)	Douglas A. Darwood Date: 2022.09.13 15:28:20 -07'00'	9/13/2022	
Executive Review (Name and Title)	Executive Signature	Date	
W. Brian White Assistant Region Administrator	Digitally signed by Brian White Date: 2022.09.13 20:24:53 -07'00'		

Firm Name:				F	FYE Date:		Number of Employees:	
Jacobs Engineering Group Inc.				S	Sept 30		54,000	
Address:								
Main Office 1999 Bryan	Stre	et, Suite 1200						
City:	State: Zip Code: County:					:		
Dallas	TX		75201			USA		
Phone:		Fax:	l	Com	pany Web Site:			
214-638-0145		214-638-0447		ww	w.jacobs.co	m		
Remit to Address:		I		1				
1100 112th Ave NE, Sui	te 50	00						
City:	State:		Zip Code:			County	:	
Bellevue	WA		98004			USA		
Phone:			Fax:					
425-453-5000			202-78	5-47	' 55			
Statewide Vendor Number (SWV) for	Remit t	o Address:	Federal Tax ID Number or Social Security Number:					
601 008 037			95-4081636					
Unified Business Identifier Number (U	JBI):		Date Universal Numbering System (DUNS) Number:					
			71 410 3508					
Year Firm Established:		UDBE/SBE/MSVWBE Certifi	ication Number	cation Number:: NAICS Code & Code Name:				
1987					541330			
Proposed Project Manager:			Email:					
Ed Toavs			ed.toavs@jacobs.com					
Financial Contact:			Email:					
Ed Toavs			ed.toavs@jacobs.com					
Firm Type:	1		1: 🗖 a	1 1				
Sole Proprietor Partners	snip [■ C – Corp.	nersnip 🔲 St	ıbcnap	ter S Corp. \[\Bigcup L	imited L	iability 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: Please look at our 10K f	Note: Please look at our 10K file at the SEC							
Firm Name : Please <u>do not</u> use: dba's formation of a legally registered new c								

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:					FYE Date:		Number of Employees:	
Bernardo Wills Architects, PC							40	
Address:				•				
153 S Jefferson S	stree	et						
City:	State:	State: Zip Code: County:					<i>y</i> :	
Spokane	WA	\	99201			Spo	okane	
Phone:	•	Fax:			ompany Web Site:	•		
5098384511		5098384605		W	ww.berna	ardo	wills.com	
Remit to Address: 153 S Jefferson S	Stree	et						
City:	State:		Zip Code:			County	y:	
Spokane	WA	\	99201			Spo	okane	
Phone:	I		Fax:			I		
5098384511			50983	84	605			
Statewide Vendor Number (SWV) for	Remit t	o Address:	Federal Tax ID Number or Social Security Number:					
			91-1520016					
Unified Business Identifier Number (U	JBI):		Date Universal Numbering System (DUNS) Number:					
601 317 114								
Year Firm Established:		UDBE/SBE/MSVWBE Certif	ication Number	::	NAICS Code &	Code N	ame:	
1991					541320 Landscape architectural services			
Proposed Project Manager:			Email:		-			
Julia Culp, ASLA			jculp@bernardowills.com					
Financial Contact:			Email:					
Gretchen Renz			grenz@bernardowills.com					
Firm Type:								
☐ Sole Proprietor ☐ Partner	ship [☐ C – Corp. ☐ Limited Parts	nership 🔳 Su	ıbcha	apter S Corp. 🔲 I	Limited I	Liability Company	
Annual Gross Receipt:					-		-	
	llion to	\$5 Million \$5 Million to \$	10 Million	1 ¢ 1 () Million to \$15 Mil	lion [Over \$15 Million	
☐ \$0 to \$1 MIIIIOII ☐ \$1 MII	mon to	g of hollilivi ce 🔳 Hollilivi ce	10 MIIIIOII L	. 110	, iviillion to \$13 MIII	поп [1 Over \$12 minion	
Note:	1 :	1	1 . ~		1:	1 .1	1	
Firm Name: Please do not use: dba's	doing	business as; combination name	s when two firm	ns ar	e working together,	uniess th	e combination name is the	

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:
Big Sky Public Relation	S			12	2/31		10
Address:							
111 S Main St Suite 20	0						
City:	State:		Zip Code:			County	<i>y</i> :
Kalispell	Mon	tana	59901			Flath	ead County
Phone:		Fax:	I	Con	npany Web Site:	1	
406-270-6114		n/a		ww	w.bigskypu	ıblicre	lations.com
Remit to Address:				1			
111 S Main St Suite 20	0						
City:	State:		Zip Code:			County	<i>T</i> :
Kalispell	Mon	tana	59901			Flath	ead County
Phone:	Phone:					1	
406-270-6114			n/a				
Statewide Vendor Number (SWV) for	r Remit	to Address:	Federal Tax	ID Nun	nber or Social Sec	curity Nur	mber:
SWV0259966			90-0448676				
Unified Business Identifier Number (UBI):		Date Universal Numbering System (DUNS) Number:				
604083425			080031944				
Year Firm Established:		UDBE/SBE/MSVWBE Certif	fication Numbe	r::	NAICS Code &	& Code N	ame:
2011		D2F0026328			541820		
Proposed Project Manager:			Email:				
Shae Fanning			shae@bigskypublicrelations.com				com
Financial Contact:			Email:				
Stephanie Rodriguez			stephanie@elevatedaccounting.com				
Firm Type:			•				
Sole Proprietor Partne	ership	☐ C – Corp. ☐ Limited Part	nership S	ubchap	oter S Corp.	Limited I	Liability Company
	1	. —	. —	r	. —		, , , , , , , , , , , , , , , , , , ,
Annual Gross Receipt: \$\sum \\$0 \text{ to \$1 Million} \sum \\$1 M	fillion to	\$5 Million	10 Million - F	۱ \$ 1 0 7	Million to \$15 Mil	llion [Over \$15 Million
□ \$0 to \$1 Million ■ \$1 M	1111011 10	do minion C do minion to a	OTO MIIIIOII L	_ 101	IVIII W \$13 IVIII	111011	Over \$12 MIIIIOII
Note:		1 2 2 2	1			.1	
Firm Name: Please <u>do not</u> use: dba'	s – doing	s ousmess as, combination name	s when two III	ms are	working together,	uniess tr	ie comomation name is the

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:	Consulting 11	\overline{C}		YE Date: Dec 31		Number of Employees:		
Commonstreet Consulting, LLC Dec 31 44								
16789 39th Ave NE								
City: Zip Code: County:								
Lake Forest Park WA 98155 King								
Phone:	Fax:			npany Web Site:				
(844) 769-2378	N/A		W۱	ww.csr	OW.	com		
92 Lenora St., F	MB 125 (not	for pa	ym	ents)				
•	ate:	Zip Code:	_		County			
Seattle V	VA	9812	1		Kir	ng		
(844) 769-2378		N/A						
Statewide Vendor Number (SWV) for Res	0	Federal Tax ID Number or Social Security Number: 82–1456894						
Unified Business Identifier Number (UBI)	:	Date Universal Numbering System (DUNS) Number:						
604-107-152		112887628						
Year Firm Established:	UDBE/SBE/MSVWBE Certi	fication Number	r::	NAICS Code & Code Name:				
2017	N/A			541618, Other Management Consulting Services				
Proposed Project Manager:		Email:		O				
Morgan Bishop		morgan@csrow.com						
Financial Contact:		Email:						
Melinda Diaz		accounting@csrow.com						
Firm Type:								
☐ Sole Proprietor ☐ Partnership	☐ C – Corp. ☐ Limited Part	enership S	ubchap	ter S Corp. 🔳 I	Limited L	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: Billing contact:	Samri Laney, sa	ımri@c	sro	w.com				
Firm Name: Please <u>do not</u> use: dba's – d					unless th	e 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.

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Firm Name:				FYE Date:			Number of Employees:	
Concord Engineering, Inc.				12/31			46	
Address:				ı				
2285 116th Aven	ue N	NE						
City:	State:		Zip Code:			County		
Bellevue	WA	WA 98004 King					g	
Phone:		Fax:			pany Web Site:			
206.682.0567				htt	ps://www	v.cor	ncordengr.com	
Remit to Address:								
2285 116th Aven	ue l	NE						
City:	State:		Zip Code:			County		
Bellevue	WA	4	98004			Kin	g	
Phone:			Fax:					
206.682.0567								
Statewide Vendor Number (SWV) for		to Address:			nber or Social Sec	urity Nun	nber:	
SWV 0208035 00			46-1648854					
Unified Business Identifier Number	(UBI):		Date Universal Numbering System (DUNS) Number:					
603263621			078822949					
Year Firm Established:		UDBE/SBE/MSVWBE Certi		::		e & Code Name:		
Jan. 1, 2013		DBE: D4F002	22699		541330	30		
Proposed Project Manager:			Email:					
Syed Rahman			Syed.	Rah	nman@C	Conc	cordengr.com	
Financial Contact:			Email:					
Xiaoping Zhang			Xiaoping.Zhang@Concordengr.com					
Firm Type:								
• •	ership	☐ C – Corp. ☐ Limited Par	tnership 🔳 Sı	ubchap	ter S Corp.	Limited L	iability Company	
	•	-	-	1	. –		·	
Annual Gross Receipt: \$\Begin{align*} \text{ \$0 to \$1 Million } \Begin{align*} \text{ \$1 M} \te	fillion to	\$5 Million II \$5 Million to \$	\$10 Million F	1 \$ 1 0 N	Million to \$15 Mil	lion [l Over \$15 Million	
\$0 to \$1 141111011 \$1 14		φο Minion (ο φ	,10 Million	_ ψ101	, πιτοπ το φ1 <i>5</i> τ ν πι		1 0 . 01 0 13 minion	
Note: Firm Name: Please do not use: dba	's — doing	thusiness as combination name	es when two firm	ns are	working together	unless th	e combination name is the	
formation of a legally registered new								

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:
TranTech Engineering	g, LLC	>		12/31			60
Address:							l
365-118th Ave SE	E, Sui	te 100					
City:	State:	State: Zip Code:				County	7:
Bellevue	W	А	98005			King	3
Phone:		Fax:	•	Com	pany Web Site:		
425.453.5545		425.453.6779		tra	ntecheng.cor	n	
Remit to Address:							
365-118th Ave SE, Su	ite 10	0					
City:	State:		Zip Code:			County	7:
Bellevue	W	A	98005			King	
Phone:	•		Fax:				
425.453.5545			425.453.6779				
Statewide Vendor Number (SWV) for	Remit	to Address:	Federal Tax ID Number or Social Security Number:				
SWV015683400			68-0607809				
Unified Business Identifier Number (U	ЈВІ):		Date Universal Numbering System (DUNS) Number:				
602507862			78-649-5288				
Year Firm Established:		UDBE/SBE/MSVWBE Certif					
2005		D2W0025137	541330, Engineering Consulting Services; 237 Highway, Street, and Bridge Construction				onsulting Services; 237310, ridge Construction
Proposed Project Manager:			Email:		•		
Kash Nikzad, PhD, PE			knikzad	@traı	ntecheng.com	1	
Financial Contact:			Email:				
Shadi Farbood			sfarbood@trantecheng.com				
Firm Type:							
☐ Sole Proprietor ☐ Partner	ship	☐ C – Corp. ☐ Limited Part	nership 🔲 St	ubchap	ter S Corp. 🔳 I	Limited L	Liability Company
Annual Gross Receipt:							
□ \$0 to \$1 Million □ \$1 Mi	\$5 Million	10 Million	\$10 N	Million to \$15 Mill	ion [Over \$15 Million	
Note:							
Firm Name: Please do not use: dba's	– doing	business as: combination name	s when two firm	ns are	working together	unless th	e combination name is the

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

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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.

 $\begin{array}{lll} \textbf{Solicitation Title:} & \underbrace{\textbf{Reconnecting East}}_{\textbf{Consulting Services}} & \textbf{Central Spokane} \\ \hline \textbf{Consulting Services Selection} \\ \end{array}$

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: Jacobs Engineering Group Inc. Name of Contractor/Bidder – Print full legal entity name of firm Gregory Lucas Huck By: Print Name of person making certifications for firm Signature of authorized person Place: Yakima, WA Client Account Manager Title: Title of person signing certificate Print city and state where signed Date: 2/12/2024

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

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Solicitation Title: Reconnecting East Central Spokane

I hereby	cer	tify, on behalf of the firm identified below	w, as fol	lows (check one):		
	X	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.				
		0	R			
	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.					
•	re t	rue and correct and that I am authorized		e State of Washington, that the certifications ke these certifications on behalf of the firm		
FIRM N	AME:	Bernardo Wills Architects, PC Name of Contractor/Bidder – Print full legal	entity na	me of firm		
Ву:	Sigr	nature of authorized person		latch, ASLA me of person making certifications for firm		
Title:		ncipal e of person signing certificate	Place:	Spokane, Washington Print city and state where signed		
Date:	02	/05/2024				

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

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Solicitation Title: Reconnecting East Central Spokane 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: Big Sky Public Relations Name of Contractor/Bidder – Print full legal entity name of firm Kata Hodge
Signature of authorized person Katie Hodge Print Name of person making certifications for firm Missoula, MT Title: Place: Title of person signing certificate Print city and state where signed

By:

Date:

Feb. 6, 2024

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

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Reconnecting East Central Spokane 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. FIRM NAME: Commonstreet Consulting, LLC. Name of Contractor/Bidder – Print full legal entity name of firm David Fineran David Fineran Print Name of person making certifications for firm Signature of authorized person Place: Salem, OR Director of Business Development Title of person signing certificate Print city and state where signed

By:

Title:

Date:

February 5, 2024

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

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Solicitation Title: Reconnecting East Central Spokane

I hereby	cer	tify, on behalf of the firm identified belo	ow, as foll	lows (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					
herein a listed he	ire t ereir	EMPLOYEES. This firm requires its emp agree to mandatory individual arbitrat tify, under penalty of perjury under the I rue and correct and that I am authoriz n.	loyees, a on clause	CLASS OR COLLECTIVE ACTION WAIVERS FOR s a condition of employment, to sign or es or class or collective action waivers. e State of Washington, that the certifications ke these certifications on behalf of the firm				
FIRM N	AME:	Concord Engineering, Inc.						
		Name of Contractor/Bidder – Print full leg	al entity na	me of firm				
Ву:		Graging sharry		Xiaoping Zhang				
	Sign	Signature of authorized person		Print Name of person making certifications for firm				
Title:	Ρ	resident	Place:	Bellevue, WA				
	Titl	e of person signing certificate		Print city and state where signed				
Date:	2	2/6/2024						

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

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Solicitation Title: Reconnecting East Central Spokane

	X	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.					
	ire t	rue and correct and that I am authorized		e State of Washington, that the certifications ke these certifications on behalf of the firm			
TranTech Engineering, LLC							
Name of Contractor/Bidder – Print full legal entity name of firm							
Ву:	 Sign	nature of authorized person		Kash Nikzad, PhD, PE me of person making certifications for firm			
Title:		Principal Owner e of person signing certificate	Place:	Bellevue, WA Print city and state where signed			
		February 6, 2024					