Washington State Department of Transportation

PWSBE & VOB On-Site Review for Architect & Engineering and Professional Services Firms

This document is used to ensure compliance with the Commercially Useful Function requirements by Public Works Small Business Enterprise (PWSBE) and Veteran Owned Business (VOB).

WSDOT staff will perform PWSBE and/or VOB On-Site Reviews on each PWSBE and/or VOB A&E Consultant, and Professional Services firm certified by the Office of Minority and Women Business Enterprises (OMWBE) or Washington State Department of Veterans Affairs (WDVA performing work on the project. If the PWSBE and/or VOB is not on the project site, this review will be conducted via phone.

The PWSBE and/or VOB On-Site Review will be performed once during the project and yearly on multi-year projects and must be conducted prior to the completion of the PWSBE and/or VOB firm's work on the project. Please provide as much information as possible when completing the review.

1. Project Title		**2.** Contract Number
3. PWSBE/VOB Firm Name	**4.** Prime Contractor/Consultant	
5. WSDOT Project Engineer/Project Manager/ACL	**6.** Region	
7. Description of Work Being Performed		
8. Is the PWSBE/VOB firm certified by OMWBE/WDVA to perform the above listed work? If No, please explain. ☐Yes ☐No		
9. PWSBE/VOB Start Date	**10.** PWSBE/VOB Anticipated Completion Date	**11.** Date of On-Site Review

PWSBE/VOB Employee Interview Information

12a. First Name	**12b.** Last Name	**12c.** Phone Number
13. Who does the PWSBE/VOB employee report to within their organization? Name: Title:		

14. Is the PWSBE/VOB employee exclusively employed by the PWSBE/VOB firm?
If No, please explain. ☐ Yes ☐ No

15*. Is the PWSBE/VOB employee shown on the PWSBE/VOB firm's monthly invoice or certified payroll?
☐ Yes ☐ No ☐ N/A

16*. Is the PWSBE/VOB employee shown on any other firm's invoice or certified payroll?
If Yes, please explain. ☐ Yes ☐ No

17. Does the work described in box #7 match the type of work listed in the executed contract/agreement?
☐ Yes ☐ No

18. Are any of the PWSBE/VOB employees who are working on this project also performing work for any other firms on this project?
If Yes, please explain. ☐ Yes ☐ No

19. Has another firm performed work that was supposed to be performed exclusively by the PWSBE/VOB firm?
If Yes, please explain. ☐ Yes ☐ No

20. Does the PWSBE/VOB firm appear to have the necessary knowledge, skills, and abilities to perform their work scopes?
If No, please explain. ☐ Yes ☐ No

21. List any additional comments or observations relevant to this review.

***Check instruction guide for additional information on filling out this section**

22. Review Conducted By (Print Name)	23. Title (Print)	
24. Signature		25. Date
This form must be completed in its entirety and submitted to Region OEO Staff within two (2) weeks of completion. If the form is submitted with missing or incomplete information, it may be returned to the WSDOT Project Engineer Office for correction or completion.		

Instruction Guide

Architect & Engineering and Professional Services Firms

Block #1: Enter the full project name.

Block #2: Enter the WSDOT contract number with or without leading zeroes or the Y, i.e. 009206 or 9206 – Y12345 or 12345.

Block #3: Enter name of the PWSBE/VOB firm that is the subject of the on-site review.

Block #4: Enter the name of the Prime Contractor/Consultant.

Block #5: Enter the name of the WSDOT Project Engineer/Project Manager/ACL responsible for this project.

Block #6: Enter the WSDOT Region where the project is located.

Block #7: Enter a description of the actual work being performed or, for Design-Build projects, a description of the work activity.

Block #8: PWSBE/VOB firms are certified by OMWBE and the VOB firms certified by WDVA. Check Office of Minority and Women's Business Enterprises or the WDVA websites for certified firms and associated NAICS/Commodity codes.

Block #9: Enter the date the PWSBE/VOB firm began working on the project.

Block #10: Enter the date the PWSBE/VOB firm is projected to be finished with its contract work.

Block #11: Enter the date the on-site review was conducted. If additional information is to be provided by the WSDOT Project Engineer Office, list the date the PWSBE/VOB employee was interviewed for this review.

Block #12: Provide the name and contact phone number of the PWSBE/VOB firm employee being interviewed for this on-site review.

Block #13: Ask the PWSBE/VOB employee who supervises them.

Block #14: Ask the PWSBE/VOB employee if they work for any other firms and note any other firms they work for.

Block #15: Check the PWSBE/VOB firm payroll to ensure the employee is listed. On Design-Build contracts, there may not be certified payrolls if the work does not require it. Please review invoices or list of employees working on the project on firm letterhead.

Block #16: Check certified payrolls or invoices to see if any of the PWSBE/VOB employees are on any other certified payrolls or invoices.

Block #17: The work actually being performed by the PWSBE/VOB firm should match that detailed in any executed contract or agreement.

Block #18: Ask the PWSBE/VOB employee being interviewed for this review if they are performing work for any other contractors/consultancts/architecture and engineering firms connected with this project.

Block #19: Indicate the names of any other firms that have performed work for the PWSBE/VOB firm and provide a reason for the other firm's performance of the work.

Block #20: In your opinion, do the PWSBE/VOB employees have the appropriate skills and knowledge to perform their subcontracted work to contract standards?

Block #21: List any observations or comments you feel is relevant to the review. There is no such thing as too much information.

Block #22: Print the name of the person performing the PWSBE/VOB On-Site Review.

Block #23: Print the title of the person performing the PWSBE/VOB On-Site Review.

Block #24: Signature associated with Block #23.

Block #25: Date the form was signed.