



PACKET B

STATEMENT OF QUALIFICATIONS | MARCH 15, 2023

2023 Toll Division Government Relations/ Communications Support



March 15, 2023

Washington State Department of Transportation (WSDOT)
Submitted via email to CSOSubmittals@wsdot.wa.gov



WSP USA
1001 Fourth Avenue
Suite 3100
Seattle, WA 98154
T +1 206-382-5200
www.wsp.com/usa

Re: Qualifications for WSDOT Toll Division – Government Relations/Communications Support

Dear Selection Committee Members,

With five toll facilities in operation throughout the state and three more in development, the WSDOT Toll Division is poised to be managing an unprecedented amount of toll infrastructure in coming years. WSP USA (WSP) brings a team with a history of partnering with the Toll Division to deliver strategic communications and government relations support. As a major partner to transportation agencies within the Pacific Northwest (PNW) over the last six decades, WSP has led public outreach, community engagement, marketing, and government relations/communications efforts to disseminate information accurately and effectively to applicable audiences. Most importantly, all key personnel on the WSP team have previously worked with WSDOT Toll Division and understand the unique dynamics of communicating about tolling to PNW communities and travelers; we bring proven success informing and educating travelers with accurate information. In addition, our team is bolstered by nationally recognized toll experts who are available to provide best-practice strategic guidance and advice when needed.

Project manager **Charla Skaggs** brings more than 30 years of experience leading government relations and communications efforts for public agencies, including WSDOT Toll Division, and other organizations. She brings significant experience in developing strategies that wed political, community, and business considerations with long-term communications goals. Charla is a seasoned facilitator and communicator with significant experience in developing and executing plans designed to mitigate potential political or legal risks to large agencies. She has been proud to be a long-time member of the Toll Division team.

Enhancing and deepening our services is a team of area-based and highly skilled partners. **Larson Consulting Associates'** (DBE) team members provide toll advisory services to organizations across the U.S. Larson Consulting specializes in policy and planning; program management; operations implementation and oversight; marketing and communications; best practices, and process improvement. **Maul Foster & Alongi** (MFA) brings 40 years of extensive experience working with clients to build and maintain community and stakeholder support for their projects. MFA will leverage federal, state, and local government relationships, and will work together with the team to help achieve WSDOT's Toll Division goals.

The WSP team is ready to continue our partnership working together with WSDOT Toll Division. Please contact us at 206.658.3054 or charla.skaggs@wsp.com if you have any questions regarding our proposal.

Sincerely,

A handwritten signature in black ink that reads 'Helen Devery'. The signature is written in a cursive, flowing style.

Helen Devery, Senior Vice President
Northwest Pacific Business Line Leader, Advisory

A handwritten signature in black ink that reads 'Charla Skaggs'. The signature is written in a cursive, flowing style.

Charla Skaggs, Project Manager
Senior Vice President, Strategic Project and Government Relations

Consultant Information Form

Firm Name: WSP USA		FYE Date: 12/31	Number of Employees: 13,000
Address: 1001 Fourth Avenue, Suite 3100			
City: Seattle	State: WA	Zip Code: 98154	County: King
Phone: (206) 382-5200	Fax: (206) 282-5222	Company Web Site: www.wsp.com	
Remit to Address: 1001 Fourth Avenue, Suite 3100			
City: Seattle	State: WA	Zip Code: 98154	County: King
Phone: (206) 382-5200	Fax: (206) 382-5222		
Statewide Vendor Number (SWV) for Remit to Address: 004 10060-01		Federal Tax ID Number or Social Security Number: 11-1531569	
Unified Business Identifier Number (UBI): 601 886 141		Date Universal Numbering System (DUNS) Number: 05-666-8700	
Year Firm Established: 1933	UDBE/SBE/MSVWBE Certification Number:: N/A	NAICS Code & Code Name: 541330 Engineering Services	
Proposed Project Manager: Charla Skaggs		Email: Charla.Skaggs@wsp.com	
Financial Contact: Karen Doherty		Email: Karen.Doherty@wsp.com	

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:

Firm Name: Please *do not* 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.

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.

Consultant Information Form

Firm Name: Larson Consulting Associates		FYE Date: 12/31	Number of Employees: 4
Address: 3710 N 35th ST			
City: Tacoma	State: WA	Zip Code: 98407	County: Pierce
Phone: 206.979.7974	Fax: N/A	Company Web Site: www.Larson.Consulting	
Remit to Address: 3710 N 35th ST			
City: Tacoma	State: WA	Zip Code: 98407	County: Pierce
Phone: 206.979.7974	Fax: N/A		
Statewide Vendor Number (SWV) for Remit to Address: SW024499300		Federal Tax ID Number or Social Security Number: 47-3311464	
Unified Business Identifier Number (UBI): 603-482-483		Date Universal Numbering System (DUNS) Number:	
Year Firm Established: 2015	UDBE/SBE/MSVWBE Certification Number:: W2F0024749	NAICS Code & Code Name: 541611	
Proposed Project Manager: Catherine Larson		Email: catherine@larson.consulting	
Financial Contact: Catherine Larson		Email: catherine@larson.consulting	

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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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.

Consultant Information Form

Firm Name: Maul Foster & Alongi, Inc.		FYE Date: Dec. 31	Number of Employees: 145
Address: 2815 2nd Avenue, Suite 540			
City: Seattle	State: WA	Zip Code: 98121	County: King
Phone: 206.858.7620	Fax: N/A	Company Web Site: www.maulfoster.com	
Remit to Address: 109 East 13th Street			
City: Vancouver	State: WA	Zip Code: 98660	County: Clark
Phone: 360.694.2691	Fax: N/A		
Statewide Vendor Number (SWV) for Remit to Address: SWV0096714		Federal Tax ID Number or Social Security Number: 91-1730412	
Unified Business Identifier Number (UBI): 601-723-614		Date Universal Numbering System (DUNS) Number: 96-417-3512	
Year Firm Established: 1996	UDBE/SBE/MSVWBE Certification Number:: N/A	NAICS Code & Code Name: 541620	
Proposed Project Manager: Kathryn Murdock		Email: kmurdock@maulfoster.com	
Financial Contact: Nick Petersen		Email: npetersen@maulfoster.com	

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:

Firm Name: Please *do not* 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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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.

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

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

Solicitation Title: Toll Division Government Relations and Communications Support

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: WSP USA, Inc.
Name of Contractor/Bidder – Print full legal entity name of firm

By: 
Signature of authorized person

Lorelei Williams, PE
Print Name of person making certifications for firm

Title: Senior Managing Director
Northwest Pacific District
Title of person signing certificate

Place: Seattle, WA
Print city and state where signed

Date: 3.15.23

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

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Toll Division – Government Relations/
Communications Support

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: Larson Consulting Associates
Name of Contractor/Bidder – Print full legal entity name of firm

By: 
Signature of authorized person

Catherine Larson
Print Name of person making certifications for firm

Title: CEO
Title of person signing certificate

Place: Tacoma, WA
Print city and state where signed

Date: February 24, 2023

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

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Toll Division-Government Relations/

Solicitation Title: Communications Support

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.

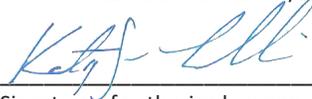
OR

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: Maul Foster & Alongi, Inc.

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

By: 
Signature of authorized person

Kathy Lombardi, PE
Print Name of person making certifications for firm

Title: Principal Engineer
Title of person signing certificate

Place: Vancouver, WA
Print city and state where signed

Date: 3/1/2023

**Washington State
Department of Transportation**

**Performance Evaluation
Completed by Reference**

Consultant Name: WSP
Consultant's Project Manager: Heather Wills
Project Name to be Evaluated on: (Work must have been completed within the last 3 years or is currently being performed.) I-205 Toll Project and Regional Mobility Pricing Project

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 performed.)

<input checked="" type="checkbox"/>	Prime	Start Date 04/22/19	End Date	Dollar Amount of Services 45,610,317.93
<input type="checkbox"/>	Sub			

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?	10.00
2. Did the firm complete the project within the total budgeted amount?	9.00
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?	10.00
Total Score	58.00
(Total the score by adding the scores for criterias 1 through 6.)	
Average Score	9.67
(Average the score by dividing the total score by the total number of criteria that was rated.)	

Evaluator Information:		
Firm/Company Name: Oregon Department of Transportation		
Evaluator's Name: Mandy Putney	Evaluator's Title: Strategic Initiatives Director, Urban M	
Firm/Company Address: 123 NW Flanders St, Portland, OR 97209		
Phone: (503) 720-4843	Fax:	Date: 02/24/23

Distribution: Original: Return to Consultant being evaluated; and
 Copy: Fax to WSDOT at 360-705-6838 or email to wsdotcso@wsdot.wa.gov

**Washington State
Department of Transportation**

**Performance Evaluation
Completed by Reference**

Consultant Name: WSP
Consultant's Project Manager: John Maloney
Project Name to be Evaluated on: (Work must have been completed within the last 3 years or is currently being performed.) I-5 Rose Quarter Improvement Project

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 performed.)

	Start Date	End Date	Dollar Amount of Services
<input type="checkbox"/> Prime	01/07/19		8,536,847.00
<input checked="" type="checkbox"/> Sub			

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?	10.00
2. Did the firm complete the project within the total budgeted amount?	9.00
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?	8.00
6. Was the firm's project management system effective?	9.00
Total Score	55.00
(Total the score by adding the scores for criterias 1 through 6.)	
Average Score	9.17
(Average the score by dividing the total score by the total number of criteria that was rated.)	

Evaluator Information:		
Firm/Company Name: Oregon Department of Transportation		
Evaluator's Name: Megan Channell	Evaluator's Title: Rose Quarter Project Director	
Firm/Company Address: 123 NW Flanders, Portland, OR 97209		
Phone: (503) 509-5882	Fax:	Date: 03/12/23

Distribution: Original: Return to Consultant being evaluated; and
 Copy: Fax to WSDOT at 360-705-6838 or email to wsdotcso@wsdot.wa.gov



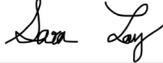
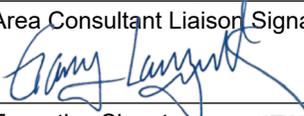
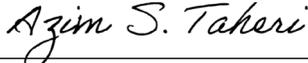
Consultant Name WSP USA INC.		Evaluation Type <input checked="" type="checkbox"/> Interim <input type="checkbox"/> Subconsultant <input type="checkbox"/> Final	
Consultant Address 999 Third Avenue, Suite 3200, Seattle, WA 98104		Project Title SR18 Widening	
Type of Work <input type="checkbox"/> Study <input checked="" type="checkbox"/> Design <input type="checkbox"/> R/W <input type="checkbox"/> PS&E <input type="checkbox"/> Other (Specify Below):		Agreement Number Y12282	
Complexity of Work <input checked="" type="checkbox"/> Difficult <input type="checkbox"/> Routine		Type of Agreement <input type="checkbox"/> Lump Sum <input type="checkbox"/> Hourly Rate <input checked="" type="checkbox"/> Cost Plus Fixed Fee <input type="checkbox"/> Other	
Date Agreement Approved February 26, 2020			
Amount of Original Agreement \$ 8,248,834.00	Total Amount Modifications \$ 606,876.00	Total Amount Agreement \$ 8,855,710.00	
Completion Date Including Extensions January 31, 2023	Actual Completion Date TBD	Actual Total Paid \$ TBD	
Type and Extent of Subcontracting Sub consultants: Traffic Modeling, Traffic Analysis, Structures, Cultural Resource			

Performance Rating Scale (From Average Score Below)

 S
Superior
 AR
Above Std.
 MR
Meets Std.
 BR
Below Std.
 P
Poor

Standard Criteria	Comments (Justify Above & Below Ratings)	Rating
1. Negotiations Cooperative and responsive Adhered to WSDOT guidelines on fee. Met negotiation schedule. Open and honest communications. Willingness to negotiate in good faith	MR MR MR AR - Provide creative and practical scoping solution	MR
2. Cost / Budget Finished within agreed budget, including all supplements Appropriate level of effort (Cost commensurate with work) Reasonable direct, non-salary expenses (Approx. xx% -yy%)	MR MR MR	MR
3. Schedule Complete within agreement schedule including supplements. Achieved schedule (Including all supplements). Prompt response to review comments Adapted to changes by WSDOT Notified WSDOT early regarding schedule issues	MR MR MR AR - Scope reduction exercise performed with agility	MR
4. Technical Quality Work products meet WSDOT design policy & standards Performed appropriate quality control and assurance Responds to review comments in subsequent submission Pursued innovative design solutions Delivered "compatible" electronic files Implemented principles of practical design	MR MR MR AR - Hydraulic design addresses unusual challenges MR	MR

5. Communications Clear and concise communication (Oral, written, drawings). Demonstrates an understanding of oral and written instructions Communicated at intervals appropriate for continual progress	S - Stakeholder meetings and briefings are exemplary MR MR	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	MR MR MR MR MR MR MR MR	MR
7. Other Criteria (As agreed)		
Overall Rating		MR

Rated By (Project Manager Name and Title) Sara Lay PM - NWR Connecting WA	Project Manager Signature 	Date 3/3/22
Rated By (Area Consultant Liaison Name and Title) Gary Langrock NWR Consultant Liaison	Area Consultant Liaison Signature 	Date 3/3/22
Executive Review (Name and Title) Azim Sheikh-Taheri ARA-Prog. Mgmt./Admin. Svcs.	Executive Signature 	Date 3/4/2022