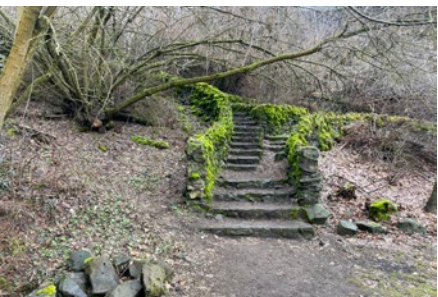




RECONNECTING EAST CENTRAL SPOKANE

Statement of Qualifications PACKET B

February 14, 2024



kpff + lmn

February 14, 2024

421 West Riverside Ave,
Suite 524
Spokane, WA 99201

4801 Second Avenue,
Suite 501
Seattle, WA 98104

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

Re: Request for Qualifications for Reconnecting East Central Spokane

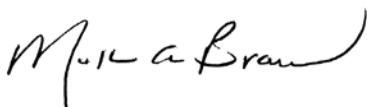
In a special and generational opportunity, WSDOT is partnering with our City and East Central community to restore and revitalize the neighborhood by imagining and realizing an infrastructure solution that will not only reconnect its residents, business owners and visitors, but also restore the ecology, provide social and economic benefits, and become a place the community can be proud of and take ownership in. KPFF Consulting Engineers (KPFF) and our team are highly supportive of this meaningful endeavor and as you will come to find in our SOQ, are also highly motivated by helping our community define, understand, select and realize infrastructure solutions that optimize benefits to our deserving neighborhoods.

Since opening our office in 2018, KPFF has partnered with our local agencies and WSDOT to deliver similar, catalyzing projects in our community, including the U-District Gateway Bridge, Replacement of the Post Street Bridge and the US 395/NSC Shared Use Path. Our urban design partner, LMN Architects has been a leading force in planning and designing civic, transportation, and public projects for the past 40 years in the Puget Sound region and nationwide. Together, we will provide a project approach that centralizes equity, sustainability, affordability and livability while rejoining and reviving the East Central community to provide safe, efficient multi-modal connectivity throughout the area. We believe that a mix of sensitivity to the local Spokane community, strategic thinking, and bold action will establish a cohesive vision for this seminal project.

Our team shares a belief that an inclusive process builds understanding of a project’s purpose and lays the foundation for smart, equitable decision making. Our work in Spokane will be rooted in an inclusive engagement process with business owners, community leaders, and residents who have called the East Central neighborhood home for generations. We are committed to amplifying marginalized voices during this process, and have teamed with local consultant DH to ensure a comprehensive public outreach plan that actively engages the community this reconnection will directly impact. Our team recognizes the groundbreaking and inclusive NSC placemaking efforts WSDOT has employed and will leverage and build upon the successes and relationships, as well as DH’s deep experience engaging local community groups to build trust, collect meaningful input, and create a shared vision of revitalization for this socially bifurcated neighborhood.

Please consider this submittal as the beginning of a productive dialogue as you select the team best suited to help establish a vision and framework for the future of the East Central neighborhood. We would greatly appreciate the opportunity to further demonstrate our team’s credentials, commitment, and approach in the interview stage of your process.

Sincerely,



Mark Brower, PE
KPFF Principal, Project Manager, CRM
mark.brower@kpff.com, 509.385.0922



Stephen Van Dyck, AIA, LEED AP
LMN Partner, Urban Design Partner-in-Charge
svandyck@lmnarchitects.com, 206.695.5651

6 CONTRACTOR CERTIFICATION

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

By: 
Signature of authorized person

Mark Brower, PE
Print Name of person making certifications for firm

Title: Principal
Title of person signing certificate

Place: Spokane, WA
Print city and state where signed

Date: February 13, 2024

**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: 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.

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

By: 
Signature of authorized person

Stephen Van Dyck
Print Name of person making certifications for firm

Title: Partner
Title of person signing certificate

Place: Seattle, WA
Print city and state where signed

Date: February 14, 2024

**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 Transportation 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: Reconnecting East Central Spokane

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

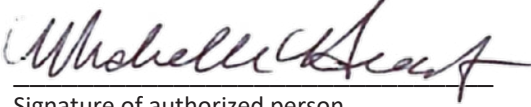
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OR

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: Anderson Environmental Consulting LLC
Name of Contractor/Bidder – Print full legal entity name of firm

By:  Michelle Anderson
Signature of authorized person Print Name of person making certifications for firm

Title: Principal Place: Spokane, WA
Title of person signing certificate Print city and state where signed

Date: 2/8/24

**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 Transportation 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: Reconnecting East Central Spokane

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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: The Berger Partnership, P.S.
Name of Contractor/Bidder – Print full legal entity name of firm

By: 
Signature of authorized person

Guy Michaelson
Print Name of person making certifications for firm

Title: Partner
Title of person signing certificate

Place: Seattle, WA
Print city and state where signed

Date: 1.30.24

**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: 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.

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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: Coffman Industries LLC -
Name of Contractor/Bidder – Print full legal entity name of firm -

By: 
Signature of authorized person

Virginia R Coffman
Print Name of person making certifications for firm

Title: - Owner
Title of person signing certificate

Place: Seattle, WA
Print city and state where signed

Date: - February, 2, 2024

**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 Transportation 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.

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.

Dark Light Consulting, LLC

FIRM NAME: _____
Name of Contractor/Bidder – Print full legal entity name of firm

By:  _____
Signature of authorized person

Jill Cody

Print Name of person making certifications for firm

Title: **Principal**

Title of person signing certificate

Place: **Seattle, WA**

Print city and state where signed

Date: **February 1, 2024**

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 Transportation 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: 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: D'Amato Conversano, Inc. PC dba DCI Engineers
Name of Contractor/Bidder – Print full legal entity name of firm

By: 
Signature of authorized person

Jonathan R. Hammond, Esq.
Print Name of person making certifications for firm

Title: Corporate Counsel
Title of person signing certificate

Place: Spokane, WA
Print city and state where signed

Date: 02/01/2024

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 Transportation 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: 2024 Reconnecting East Central Spokane RFG

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

By: 
Signature of authorized person

Sara Johnston
Print Name of person making certifications for firm

Title: Partner
Title of person signing certificate

Place: Spokane, WA
Print city and state where signed

Date: January 24, 2024

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 Transportation 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: 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: Evans Engineering and Consulting, PLLC
Name of Contractor/Bidder – Print full legal entity name of firm

By: 
Signature of authorized person

Donald R. Evans, Jr.
Print Name of person making certifications for firm

Title: Principal
Title of person signing certificate

Place: Post Falls, Idaho
Print city and state where signed

Date: 02-06-2024

**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: WSDOT, 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: Envirolssues
Name of Contractor/Bidder – Print full legal entity name of firm

By: Lauren Stensland
Signature of authorized person

Digitally signed by Lauren Stensland
DN: cn=Lauren Stensland, o=Envirolssues, ou,
email=lstensland@envirolssues.com, c=US
Date: 2024.02.05 14:02:03 -08'00'

Lauren Stensland
Print Name of person making certifications for firm

Title: Principal
Title of person signing certificate

Place: Seattle, WA
Print city and state where signed

Date: 2/2/24

**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: Reconnecting East Central Spokane - RFQ

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: Fehr & Peers
Name of Contractor/Bidder – Print full legal entity name of firm

By: 
Signature of authorized person

Lysa Wollard
Print Name of person making certifications for firm

Title: Chief Financial Officer
Title of person signing certificate

Place: Walnut Creek, CA
Print city and state where signed

Date: 02/02/2024

**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 Transportation 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: 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.

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FIRM NAME: Gorman Preservation Associates
Name of Contractor/Bidder – Print full legal entity name of firm

By: 
Signature of authorized person

Jennifer Gorman
Print Name of person making certifications for firm

Title: Principal/owner
Title of person signing certificate

Place: Spokane, WA
Print city and state where signed

Date: 1.30.2024

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

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Solicitation Title: Reconnecting East Central Spokane

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FIRM NAME: HWA GeoSciences Inc

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

By: 
Signature of authorized person

Sandy Brodah
Print Name of person making certifications for firm

Title: President
Title of person signing certificate

Place: Bothell, WA
Print city and state where signed

Date: 02/13/2024

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

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Solicitation Title: Reconnecting East Central

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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: Karen Mobley, Artist, Writer, Art Consultant

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

By: Karen A Mobley

Signature of authorized person

Karen Mobley

Print Name of person making certifications for firm

Title: Public Art Facilitator

Title of person signing certificate

Place: Spokane, WA, USA

Print city and state where signed

Date: 2/1/2024

**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 Transportation 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: Reconnecting East Central Spokane

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

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

By: 
Signature of authorized person

Tarelle Osborn, PE
Print Name of person making certifications for firm

Title: Principal & President
Title of person signing certificate

Place: Bellevue, WA
Print city and state where signed

Date: 2/2/24

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

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Solicitation Title: Reconnecting East Central Spokane

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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 NAME: Ott-Sakai & Associates LLC
Name of Contractor/Bidder – Print full legal entity name of firm

By: Kevin Sakai
Signature of authorized person

Digitally signed by Kevin Sakai
DN: C=US, E=kevin@ott-sakai.com,
O=Ott-Sakai & Associates, CN=Kevin Sakai
Date: 2024.01.24 11:09:08-08'00'

Title: Principal
Title of person signing certificate

Date: January 24, 2024

Kevin Sakai
Print Name of person making certifications for firm

Place: Mountlake Terrace, WA
Print city and state where signed

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 Transportation 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: Reconnecting East Central Spokane

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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: Strategic Economics Inc.
Name of Contractor/Bidder – Print full legal entity name of firm

By: Dena Belzer
Signature of authorized person

Dena Belzer
Print Name of person making certifications for firm

Title: President
Title of person signing certificate

Place: Berkeley, CA
Print city and state where signed

Date: February 14, 2024

**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 Transportation 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: 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: Studio Pacifica, Ltd
Name of Contractor/Bidder – Print full legal entity name of firm

By: 
Signature of authorized person

Karen Braitmayer
Print Name of person making certifications for firm

Title: Owner and Principal
Title of person signing certificate

Place: Seattle, WA
Print city and state where signed

Date: 02/01/2024

7 PERFORMANCE EVALUATIONS

Washington State Department of Transportation

Performance Evaluation Completed by Reference

Consultant Name: KPFF Consulting Engineers
Consultant's Project Manager: Mark Brower
Project Name to be Evaluated on: (Work must have been completed within the last 3 years or is currently being performed.) Columbia River Crossing Feasibility Study, CDTC 2023-1

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 <input type="checkbox"/> Sub	Start Date	End Date	Dollar Amount of Services
	05/10/23	04/30/24	256,604.00

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?	8.00
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	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: Chelan-Douglas Transportation Council (CDTC)		
Evaluator's Name: Jeff Wilkens	Evaluator's Title: Executive Director	
Firm/Company Address: 37 S. Washington Ave, Suite C Wenatchee, WA 98801		
Phone: (509) 663-9059	Fax:	Date: 01/30/24

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

Rev. 2014

Consultant Name KPFF Inc. (dba KPFF Consulting Engineers)		Evaluation Type <input type="checkbox"/> Interim <input checked="" type="checkbox"/> Subconsultant <input type="checkbox"/> Final	
Consultant Address 1601 Fifth Avenue, Suite 1600 Seattle, WA 98101		Project Title I-5 and SR 11 Padden Creek Fish Passage Project	
Type of Work <input checked="" type="checkbox"/> Study <input checked="" type="checkbox"/> Design <input type="checkbox"/> R/W <input checked="" type="checkbox"/> PS&E <input checked="" type="checkbox"/> Other (Specify Below): Design-Build		Agreement Number	
Complexity of Work <input checked="" type="checkbox"/> Difficult <input type="checkbox"/> Routine		Date Agreement Approved 2020	
Amount of Original Agreement \$		Total Amount Modifications \$	
Completion Date Including Extensions TBD (in construction as of 8/2022)		Actual Completion Date TBD	
Type and Extent of Subcontracting Prime engineering design as subconsultant to contractor.		Type of Agreement <input type="checkbox"/> Lump Sum <input type="checkbox"/> Hourly Rate <input type="checkbox"/> Cost Plus Fixed Fee <input checked="" type="checkbox"/> Other Design-Build	
Total Amount Agreement \$		Actual Total Paid \$	

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	On the I-5 / Padden Creek project we worked through a couple of change orders that involved negotiations with KPFF as the design lead for the job. In all negotiations, KPFF was cooperative and responsive, fair and willing to negotiate. They kept the project goals and schedule for delivering as a top priority and the change orders were concluded in a timely manor.	AR	
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%)		NA	
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	This project is over 75% complete and to date, all major milestones have been accomplished according to schedule. KPFF, as the Engineer of Record, is prompt to respond to WSDOT's questions on submittals, RFI's that come from the Design-Build team, and, through the Design-Builder, is quick to notify WSDOT of any known schedule changes or risks. Scored as "Meets Requirements" because the project is not complete.	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		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	KPFF's communication is clear and concise in all formats. Oral/ Written instruction does not come from WSDOT since this is a Design-Build project.	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		MR
7. Other Criteria (As agreed)		
Overall Rating	KPFF has been good to work with. They are knowledgeable on WSDOT standards and most policy and review of their design work has not resulted in significant comments or major issues that are not easily resolved. When issues have come up, their proposed solutions are backed with sound engineering judgment. I have rated this a "Meets Requirements" simply because the project is not yet complete, and there are tasks that KPFF still has to complete, however i don't have any concerns that there will be issues and if their past performance on this project continues this rating would be "Above Standards"	MR

Rated By (Project Manager Name and Title) Mikkel Lamay WSDOT Project Engineer	Project Manager Signature 	Date 8/11/2022
Rated By (Area Consultant Liaison Name and Title) NA	Area Consultant Liaison Signature NA	Date
Executive Review (Name and Title) NA	Executive Signature NA	Date

KPFF's work has meet contract standards and WSDOT policies. Their responses to comments are thorough, timely and have gone through the appropriate level of QA/QC. During Procurement of this contract, KPFF and Granite developed an innovative concept for construction of the I-5 bridges which allowed them to complete that work with minimal impact to I-5 traffic. Minimizing Public Impacts was identified as a WSDOT project goal and this concept exceeded WSDOT expectations for minimization.

Distribution: Original: Consultant
Copies: Project Manager - Area Consultant Liaison - Consultant Services Office

**Washington State
Department of Transportation**

**Performance Evaluation
Completed by Reference**

Consultant Name: KPFF Consulting Engineers
Consultant's Project Manager: Aaron Olson & Rachel Liberty
Project Name to be Evaluated on: (Work must have been completed within the last 3 years or is currently being performed.) Coal Creek Bridge No. 3035A Replacement

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 <input type="checkbox"/> Sub	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="text-align: center;">Start Date</td></tr> <tr><td style="text-align: center;">11/08/18</td></tr> </table>	Start Date	11/08/18	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="text-align: center;">End Date</td></tr> <tr><td style="text-align: center;">12/31/23</td></tr> </table>	End Date	12/31/23	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="text-align: center;">Dollar Amount of Services</td></tr> <tr><td style="text-align: center;">899,602.66</td></tr> </table>	Dollar Amount of Services	899,602.66
Start Date									
11/08/18									
End Date									
12/31/23									
Dollar Amount of Services									
899,602.66									

Performance Evaluation	
Rating Criteria	Score
Please rate each criteria on a scale of 1 to 10. 1 being low and 10 being high.	1 - Low to 10 - High

1. Was the firm cooperative and responsive during any negotiations whether they were budget related or work element related?	9.00
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?	7.00
5. Was the firm's communication, both oral and written, clear and concise?	8.00
6. Was the firm's project management system effective?	7.00
Total Score	49.00
(Total the score by adding the scores for criterias 1 through 6.)	
Average Score	8.17
(Average the score by dividing the total score by the total number of criteria that was rated.)	

Evaluator Information:		
Firm/Company Name: King County Department of Local Services		
Evaluator's Name: TingTing Martin	Evaluator's Title: Project Manager	
Firm/Company Address: 201 S Jackson Street, Seattle, WA 98104		
Phone: (206) 477-3562	Fax:	Date: 08/03/23

Distribution: Original: Return to Consultant being evaluated; and Rev. 2014
 Copy: Fax to WSDOT at 360-705-6838 or email to wsdotcso@wsdot.wa.gov

**Washington State
Department of Transportation**

**Performance Evaluation
Completed by Reference**

Consultant Name: KPFF Consulting Engineers
Consultant's Project Manager: Aaron Olson & Rachel Liberty
Project Name to be Evaluated on: (Work must have been completed within the last 3 years or is currently being performed.) Richardson Creek Bridge #300

Type of Work:

Roadway Design
 Plans Specs & Estimates
 Transportation Study
 Right-of-Way
 Other

Other = Structural Engineer

Contract Information: (Work must have been completed within the last 3 years or is currently being performed.)

<input checked="" type="checkbox"/> Prime	Start Date	End Date	Dollar Amount of Services
<input type="checkbox"/> Sub	01/28/21	12/31/23	212,687.53

Performance Evaluation	
Rating Criteria	Score
Please rate each criteria on a scale of 1 to 10. 1 being low and 10 being high.	1 - Low to 10 - High

1. Was the firm cooperative and responsive during any negotiations whether they were budget related or work element related?	9.00
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?	9.00
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: Snohomish County Public Works		
Evaluator's Name: Nolan Anderson, PE	Evaluator's Title: Engineer III	
Firm/Company Address: 3000 Rockefeller Ave, M/S 607, Everett, WA 98201		
Phone: (425) 262-2643	Fax:	Date: 08/02/23

Distribution: Original: Return to Consultant being evaluated; and Rev. 2014
 Copy: Fax to WSDOT at 360-705-6838 or email to wsdotcso@wsdot.wa.gov

Consultant Name KPFF Consulting Engineers		Evaluation Type <input type="checkbox"/> Interim Subconsultant <input type="checkbox"/> Final	
Consultant Address 421 W. Riverside Avenue, Suite 524, Spokane, WA 99201		Project Title US 395 Shared Use Path-Spok Rivr to Columbia	
Type of Work <input type="checkbox"/> Study Design <input type="checkbox"/> R/W PS&E Other (Specify Below): Design-Build		Type of Agreement <input type="checkbox"/> Lump Sum <input type="checkbox"/> Hourly Rate <input type="checkbox"/> Cost Plus Fixed Fee Other	
Complexity of Work <input type="checkbox"/> Difficult <input type="checkbox"/> Routine	Date Agreement Approved		
Amount of Original Agreement \$ N/A - Contract with Graham	Total Amount Modifications \$ N/A - Contract with Graha	Total Amount Agreement \$ N/A - Contract with Graham	
Completion Date Including Extensions Construction Ongoing	Actual Completion Date Construction Ongoing	Actual Total Paid \$ N/A - Contract with Graham	
Type and Extent of Subcontracting KPFF was the lead design firm, providing engineering management, civil, transportation and structural engineering services.			

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	KPFF's design team(s) (civil and structural) were very cooperative and responsive during the design phase. They listened to WSDOT's input, or concerns, as project designs were developed.	AR
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
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
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

<p>5. Communications Clear and concise communication (Oral, written, drawings). Demonstrates an understanding of oral and written instructions Communicated at intervals appropriate for continual progress</p>	<p>Communications went very well with KPFF's design team(s). Meetings were well-prepared and effective. Interactions were positive.</p>	<p>AR</p>
<p>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</p>		<p>MR</p>
<p>7. Other Criteria (As agreed)</p>		
<p>Overall Rating</p>		<p>MR</p>

<p>Rated By (Project Manager Name and Title) Terrence Lynch - WSDOT Project Engineer</p>	<p>Project Manager Signature  <small>Digitally signed by Terrence W. Lynch Date: 2024.02.09 08:29:32 -08'00'</small></p>	<p>Date</p>
<p>Rated By (Area Consultant Liaison Name and Title)</p>	<p>Area Consultant Liaison Signature</p>	<p>Date</p>
<p>Executive Review (Name and Title)</p>	<p>Executive Signature</p>	<p>Date</p>

Distribution: Original: Consultant
Copies: Project Manager - Area Consultant Liaison - Consultant Services Office

CONSULTANT INFORMATION FORMS

Consultant Information Form

Firm Name: KPFF, Inc.		FYE Date: April 30th	Number of Employees: 458 (WA)
Address: 421 W. Riverside Avenue, Suite 524			
City: Spokane	State: WA	Zip Code: 99201	County: King
Phone: 206.289.2300	Fax: N/A	Company Web Site: www.kpff.com	
Remit to Address: 1601 Fifth Avenue, Suite 1600			
City: Seattle	State: WA	Zip Code: 98101	County: King
Phone: 206.622.5822	Fax: N/A		
Statewide Vendor Number (SWV) for Remit to Address: SWV0088974-00		Federal Tax ID Number or Social Security Number: 91-0755897	
Unified Business Identifier Number (UBI): 578-063-612		Date Universal Numbering System (DUNS) Number: 04277729	
Year Firm Established: 1960	UDBE/SBE/MSVWBE Certification Number:: N/A	NAICS Code & Code Name: 541330 Eng. Services	
Proposed Project Manager: Mark Brower, PE		Email: mark.brower@kpff.com	
Financial Contact: Ron Raphael		Email: ron.raaphael@kpff.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. 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

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: LMN Architects		FYE Date: 12/31/2024	Number of Employees: 130
Address: 801 Second Avenue, Suite 501			
City: Seattle	State: WA	Zip Code: 98104	County: King
Phone: 206 682 3460	Fax:	Company Web Site: lmmnarchitects.com	
Remit to Address: 801 Second Avenue, Suite 501			
City: Seattle	State: WA	Zip Code: 98104	County: King
Phone: 206 682 3460	Fax: 206 343 9388		
Statewide Vendor Number (SWV) for Remit to Address: SWV 0169041-00		Federal Tax ID Number or Social Security Number: 91-1081766	
Unified Business Identifier Number (UBI): 604044380		Date Universal Numbering System (DUNS) Number: 148077290	
Year Firm Established: 1979	UDBE/SBE/MSVWBE Certification Number::	NAICS Code & Code Name: 541310 Architectural Services	
Proposed Project Manager: Stephen Van Dyck		Email: svandyck@lmmnarchitects.com	
Financial Contact: Mary Skinner		Email: mskinner@lmmnarchitects.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

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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: Anderson Environmental Consulting, LLC (AEC)		FYE Date:	Number of Employees: 9
Address: 14234 N. Tormey Rd			
City: Nine Mile Falls	State: WA	Zip Code: 99206	County: Spokane
Phone: 509-220-0045	Fax:	Company Web Site: http://aec-enviro.com/	
Remit to Address:			
City:	State:	Zip Code:	County:
Phone:	Fax:		
Statewide Vendor Number (SWV) for Remit to Address:		Federal Tax ID Number or Social Security Number: 45-2523145	
Unified Business Identifier Number (UBI): 603112813		Date Universal Numbering System (DUNS) Number:	
Year Firm Established: 2006	UDBE/SBE/MSVWBE Certification Number:. M4F0020662	NAICS Code & Code Name: NAICS 541620	
Proposed Project Manager: Michelle Anderson		Email: mca@aec-enviro.com	
Financial Contact: Michelle Anderson		Email: mca@aec-enviro.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. 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

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: The Berger Partnership, P.S.		FYE Date: Oct 31	Number of Employees: 23
Address: 1927 Post Alley, Ste. 2			
City: Seattle	State: WA	Zip Code: 98101	County: King
Phone: 206-325-6877	Fax: N/A	Company Web Site: bergerpartnership.com	
Remit to Address: 1927 Post Alley, Ste. 2			
City: Seattle	State: WA	Zip Code: 98101	County: King
Phone: (206) 492-5567	Fax: N/A		
Statewide Vendor Number (SWV) for Remit to Address: SWV0287154		Federal Tax ID Number or Social Security Number: 91-1122916	
Unified Business Identifier Number (UBI): 600 390 443		Date Universal Numbering System (DUNS) Number: 134171461	
Year Firm Established: 1971	UDBE/SBE/MSVWBE Certification Number: : N/A	NAICS Code & Code Name: 541320 Landscape Architectural Services	
Proposed Project Manager: Guy Michaelsen		Email: guym@bergerpartnership.com	
Financial Contact: Stacy Rowland		Email: stacyr@bergerpartnership.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. 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

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: Coffman Industries LLC		FYE Date: 12/31/24	Number of Employees: 1
Address: 4408 Delridge Way SW #403			
City: Seattle	State: WA	Zip Code: 98106	County: King
Phone: 206-355-1170	Fax:	Company Web Site: ginacoffman.com	
Remit to Address: same as above			
City:	State:	Zip Code:	County:
Phone:	Fax:		
Statewide Vendor Number (SWV) for Remit to Address: 0294083-00		Federal Tax ID Number or Social Security Number: 47-5230896	
Unified Business Identifier Number (UBI): 603 545 938		Date Universal Numbering System (DUNS) Number: 122714062	
Year Firm Established: 2015	UDBE/SBE/MSVWBE Certification Number: : D2F0025085, W2F0025085	NAICS Code & Code Name: 541320, Urban Planning Services, 711510, Artist	
Proposed Project Manager: Virginia Coffman		Email: coffmanv@gmail.com	
Financial Contact: same as above		Email:	

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. 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

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: Dark Light Consulting, LLC		FYE Date: 12-31	Number of Employees: 11
Address: 1511 Third Avenue Suite 700			
City: Seattle	State: WA	Zip Code: 98101	County: King
Phone: 206-999-9541	Fax: n/a	Company Web Site: www.darklight-design.com	
Remit to Address: 1511 Third Avenue Suite 700			
City: Seattle	State: WA	Zip Code: 98101	County: King
Phone: 206-999-9541	Fax: n/a		
Statewide Vendor Number (SWV) for Remit to Address: SWV0315291-00		Federal Tax ID Number or Social Security Number: 26-2975610	
Unified Business Identifier Number (UBI): 602 84 5783		Date Universal Numbering System (DUNS) Number: 05-553-6111	
Year Firm Established: 2008	UDBE/SBE/MSVWBE Certification Number: D2F0021743	NAICS Code & Code Name: 541400	
Proposed Project Manager: Jill Cody		Email: jillc@darklight-design.com	
Financial Contact: Kerri Klingfus		Email: kerrik@darklight-design.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. 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

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Consultant Information Form

Firm Name: D'Amato Conversano Inc. PC dba DCI Engineers		FYE Date: Dec. 31	Number of Employees: 419
Address: 818 Stewart Street, Suite 1000			
City: Seattle	State: WA	Zip Code: 98101	County: King
Phone: (206) 332-1900	Fax:	Company Web Site: www.dci-engineers.com	
Remit to Address: 707 W 2nd Avenue			
City: Spokane	State: WA	Zip Code: 99201	County: Spokane
Phone: (509) 455-4448	Fax:		
Statewide Vendor Number (SWV) for Remit to Address:		Federal Tax ID Number or Social Security Number: 91-1403544	
Unified Business Identifier Number (UBI): 601079216		Date Universal Numbering System (DUNS) Number: 042540596	
Year Firm Established: 1998	UDBE/SBE/MSVWBE Certification Number: n/a	NAICS Code & Code Name: 541330 - Engineering Services	
Proposed Project Manager: Roxanne Grimm		Email: rgrimm@dci-engineers.com	
Financial Contact: Ivan Cazares		Email: icazares@dci-engineers.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. 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

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: Desautel Hege, Inc. (communicable name DH)		FYE Date: 1999	Number of Employees: 49
Address: 313 W. Riverside Ave.			
City: Spokane	State: WA	Zip Code: 99201	County: Spokane
Phone: 509.444.2350	Fax: N/A	Company Web Site: wearedh.com	
Remit to Address: 313 W. Riverside Ave.			
City: Spokane	State: WA	Zip Code: 99201	County: Spokane
Phone: 509.444.2350	Fax: N/A		
Statewide Vendor Number (SWV) for Remit to Address: SWV0042963-00		Federal Tax ID Number or Social Security Number: 91-1998502	
Unified Business Identifier Number (UBI): 601 980 540		Date Universal Numbering System (DUNS) Number: 176126910	
Year Firm Established: 1999	UDBE/SBE/MSVWBE Certification Number:: OMWBE: W2F0015980	NAICS Code & Code Name: 541613 Marketing Consulting	
Proposed Project Manager: Jessica Wade, Vice President of Account Services		Email: jessicaw@wearedh.com	
Financial Contact: Kyle Davis, Director of Fianance		Email: kyled@wearedh.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. 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

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Consultant Information Form

Firm Name: Evans Engineering and Consulting, PLLC		FYE Date: 12/31/2022	Number of Employees: 4
Address: 1810 E. Schneidmiller Ave, Ste. 221			
City: Post Falls	State: Idaho	Zip Code: 83854	County: Kootenai
Phone: (208) 262-9908	Fax:	Company Web Site: www.e2cengineers.com	
Remit to Address: 1810 E. Schneidmiller Ave, Ste. 221			
City: Post Falls	State: Idaho	Zip Code: 83854	County: Kootenai
Phone: (208) 262-9908	Fax:		
Statewide Vendor Number (SWV) for Remit to Address: 0256111-00		Federal Tax ID Number or Social Security Number: 46-3748037	
Unified Business Identifier Number (UBI): 603-389-351		Date Universal Numbering System (DUNS) Number: UEI: MZW2W455TGB7	
Year Firm Established: 2013	UDBE/SBE/MSVWBE Certification Number:: D2W0024453; SBA:C00dXE	NAICS Code & Code Name: 541330	
Proposed Project Manager: Jennifer Sims		Email: jsims@e2cengineers.com	
Financial Contact: Jennifer Sims		Email: jsims@e2cengineers.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. 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

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Consultant Information Form

Firm Name: Envirolssues		FYE Date:	Number of Employees: 76
Address: 101 Stewart Street Suite 1200			
City: Seattle	State: WA	Zip Code: 98101	County: USA
Phone: (206) 269-5041	Fax: (206) 269-5046	Company Web Site: enviroissues.com	
Remit to Address:			
City:	State:	Zip Code:	County:
Phone:	Fax:		
Statewide Vendor Number (SWV) for Remit to Address:		Federal Tax ID Number or Social Security Number: 91-1526183	
Unified Business Identifier Number (UBI): 601 328 867		Date Universal Numbering System (DUNS) Number: 785524174	
Year Firm Established: 07/08/1991	UDBE/SBE/MSVWBE Certification Number: DBE: D4F0022763 / MWBE: M4F0022763	NAICS Code & Code Name: 541820 - Public Relations Agencies	
Proposed Project Manager: Iris Picat		Email: ipicat@enviroissues.com	
Financial Contact: Kaila Yoshitomi		Email: kyoshitomi@enviroissues.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. 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

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Consultant Information Form

Firm Name: Fehr & Peers		FYE Date: 12/29/2023	Number of Employees: 358
Address: 601 Union Street, Suite 3525			
City: Seattle	State: WA	Zip Code: 98101	County: King
Phone: 206-576-4220	Fax: 206-576-4225	Company Web Site: www.fehrandpeers.com	
Remit to Address: 100 Pringle Avenue, Suite 600			
City: Walnut Creek	State: CA	Zip Code: 94596	County: Contra Costa
Phone: 925-377-3200	Fax: 925-933-8007		
Statewide Vendor Number (SWV) for Remit to Address: SWV009249900		Federal Tax ID Number or Social Security Number: 68-0065540	
Unified Business Identifier Number (UBI): 602-671-978		Date Universal Numbering System (DUNS) Number: 167316850	
Year Firm Established: 1985	UDBE/SBE/MSVWBE Certification Number: : N/A	NAICS Code & Code Name: 54133 - Engineering Services	
Proposed Project Manager: Chris Breiland		Email: c.breiland@fehrandpeers.com	
Financial Contact: Gina Sharp		Email: g.sharp@fehrandpeers.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. 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

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Consultant Information Form

Firm Name: Gorman Preservation Associates		FYE Date: 2024	Number of Employees: 1
Address: 12020 N. Country Club Drive			
City: Spokane	State: Washington	Zip Code: 99218	County: Spokane
Phone: 509-279-5845	Fax:	Company Web Site:	
Remit to Address: 12020 N. Country Club Drive			
City: Spokane	State: Washington	Zip Code: 99218	County: Spokane
Phone: 509-279-5845	Fax:		
Statewide Vendor Number (SWV) for Remit to Address: 20346848		Federal Tax ID Number or Social Security Number: 47-1535947	
Unified Business Identifier Number (UBI): 603 423 039		Date Universal Numbering System (DUNS) Number: UEI: EYVKQ5XKR4M7	
Year Firm Established: 2014	UDBE/SBE/MSVWBE Certification Number: : D4F0023706/M4F0023706	NAICS Code & Code Name: 541720	
Proposed Project Manager: Jennifer Gorman		Email: jennifer@gormanpreservation.com	
Financial Contact: Jennifer Gorman		Email: jennifer@gormanpreservation.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. 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

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: HWA GeoSciences Inc		FYE Date:	Number of Employees: 57
Address: 21312 30th Dr SE, Suite 110			
City: Bothell	State: WA	Zip Code: 98021	County: King
Phone: 425-774-0103	Fax: 425-447-2714	Company Web Site: hwageo.com	
Remit to Address: 21312 30th Dr SE, Suite 110			
City: Bothell	State: WA	Zip Code: 98021	County: King
Phone: 425-774-0106	Fax: 425-774-2714		
Statewide Vendor Number (SWV) for Remit to Address: SWV0089261-00		Federal Tax ID Number or Social Security Number: 91-1142610	
Unified Business Identifier Number (UBI): 600 404 388		Date Universal Numbering System (DUNS) Number: 103501235	
Year Firm Established: 1978	UDBE/SBE/MSVWBE Certification Number: : M5F0024692	NAICS Code & Code Name: 541330 Engineering Services	
Proposed Project Manager: Will Rosso, PE		Email: wrosso@hwageo.com	
Financial Contact: Vasily Babko		Email: vbabko@hwageo.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. 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

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: Karen Mobley Studio		FYE Date: 12/31/2023	Number of Employees: 1
Address: 3515 S Lee Street			
City: Spokane	State: WA	Zip Code: 99203	County: Spokane
Phone: 509 499 0784	Fax:	Company Web Site: www.karenmobley.com	
Remit to Address: 3515 S Lee Street			
City: Spokane	State: WA	Zip Code: 99203	County: Spokane
Phone: 509 499 0784	Fax:		
Statewide Vendor Number (SWV) for Remit to Address: 0267081-00		Federal Tax ID Number or Social Security Number: 520 82 4155	
Unified Business Identifier Number (UBI): 602073300		Date Universal Numbering System (DUNS) Number:	
Year Firm Established: 2012	UDBE/SBE/MSVWBE Certification Number::	NAICS Code & Code Name:	
Proposed Project Manager: Karen Mobley		Email: karen@karenmobley.com	
Financial Contact: Karen Mobley		Email: karen@karenmobley.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. 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

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: Osborn Consulting, Inc.		FYE Date: 12/31	Number of Employees: 97
Address: 1800 112th Ave NE, Suite 220E			
City: Bellevue	State: WA	Zip Code: 98004	County: King
Phone: 425-451-4009	Fax: 425-955-9347	Company Web Site: www.osbornconsulting.com	
Remit to Address: 1800 112th Ave NE, Suite 220E			
City: Bellevue	State: WA	Zip Code: 98004	County: King
Phone: 425.451.4009	Fax: 425.955.9347		
Statewide Vendor Number (SWV) for Remit to Address: SWV0177176-0		Federal Tax ID Number or Social Security Number: 20-1896054	
Unified Business Identifier Number (UBI): 602 446 858		Date Universal Numbering System (DUNS) Number: CJFDN6N2FAJ5 (UEI)	
Year Firm Established: 2004	UDBE/SBE/MSVWBE Certification Number:: D2F001930	NAICS Code & Code Name: 541339, 541320, 541620, 541690, 541340, 541715	
Proposed Project Manager: Josh Van Wie		Email: joshv@osbornconsulting.com	
Financial Contact: Josh Van Wie		Email: joshv@osbornconsulting.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.

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Consultant Information Form

Firm Name: Ott-Sakai & Associates		FYE Date: 12/31	Number of Employees: 15
Address: PO Box 247			
City: Mountlake Terrace	State: WA	Zip Code: 98043	County: Snohomish
Phone: 206-255-2509	Fax: NA	Company Web Site:	
Remit to Address: Same as above			
City:	State:	Zip Code:	County:
Phone:	Fax:		
Statewide Vendor Number (SWV) for Remit to Address: SWV0204000		Federal Tax ID Number or Social Security Number: 47-3933414	
Unified Business Identifier Number (UBI): 602330314		Date Universal Numbering System (DUNS) Number:	
Year Firm Established: 2015	UDBE/SBE/MSVWBE Certification Number:: D4M0023226	NAICS Code & Code Name: 541330	
Proposed Project Manager: Kevin Sakai		Email: kevin@ott-sakai.com	
Financial Contact: Kimberly McShea		Email: kimberly@ott-sakai.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.

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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.

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Consultant Information Form

Firm Name: Strategic Economics Inc.		FYE Date: 12/31	Number of Employees: 9
Address: 2991 Shattuck Ave Suite 203			
City: Berkeley	State: CA	Zip Code: 94705	County: US
Phone: 510-647-5291	Fax: 510-647-5295	Company Web Site: https://strategiceconomics.com	
Remit to Address:			
City:	State:	Zip Code:	County:
Phone:	Fax:		
Statewide Vendor Number (SWV) for Remit to Address:		Federal Tax ID Number or Social Security Number: 27-1639472	
Unified Business Identifier Number (UBI): 602 993 724		Date Universal Numbering System (DUNS) Number: 125806062	
Year Firm Established: 1998	UDBE/SBE/MSVWBE Certification Number: : WBE 33062	NAICS Code & Code Name: <small>541690 Other Scientific and Technical Consulting Services</small>	
Proposed Project Manager: Dena Belzer		Email: dbelzer@strategiceconomics.com	
Financial Contact: Barbara Mathis		Email: Bmathis@strategiceconomics.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.

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

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Consultant Information Form

Firm Name: Studio Pacifica, Ltd		FYE Date: 12/31	Number of Employees: 8
Address: 2144 Westlake Ave N, Suite F			
City: Seattle	State: WA	Zip Code: 98109	County: King
Phone: 206-292-9799	Fax: N/A	Company Web Site: studiopacificaseattle.com	
Remit to Address: 2144 Westlake Ave N, Suite F			
City: Seattle	State: WA	Zip Code: 98109	County: King
Phone: 206-292-9799	Fax: N/A		
Statewide Vendor Number (SWV) for Remit to Address: In process		Federal Tax ID Number or Social Security Number: 91-1617667	
Unified Business Identifier Number (UBI): 601-504-591		Date Universal Numbering System (DUNS) Number: 956474464	
Year Firm Established: 1993	UDBE/SBE/MSVWBE Certification Number:: Self declared WBE & DOBE	NAICS Code & Code Name: 541310,541410,541611	
Proposed Project Manager: Joyce Wheeler		Email: joycew@studiopacificaseattle.com	
Financial Contact: Stephanie Ray Solum		Email: accounting@braitmayer.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.

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An aerial photograph of a city grid, likely Spokane, Washington, showing a river and a highway interchange. The image is used as a background for a business card.

kpff

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lmn

801 Second Ave,
Suite 501
Seattle, WA 98104

206 682 3460

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