



Request for Qualifications  
No. 730-00030-A-06

***ADDENDUM 1***  
*to the*  
**RFQ for ODOT's Small Contracting Program**  
*for*  
**Professional and Technical Services**

**A&E / Non-A&E Projects**  
**Oregon Department of Transportation**

***Ongoing Acceptance of Statement of Qualifications***  
***through NOVEMBER 30, 2010 4:00 PM/PDT***

**RFQ #730-00030-A-06 ~ Addendum 1**  
**ODOT SMALL CONTRACTING PROGRAM FOR**  
**PROFESSIONAL AND TECHNICAL SERVICES**

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The Oregon Department of Transportation (ODOT), Office of Procurement (OPO) is changing the status of the *Small Contracting Program for Professional and Technical Services* from a Portland/Metro Area (ODOT Region 1) pilot program to a STATEWIDE program for firms desiring to do business with ODOT, effective as of the date this Addendum 1 is posted on ORPIN. Firms that are currently registered under the pilot program are automatically registered in the statewide program and do not need to reapply. This Request for Qualifications (RFQ) is intended to register qualified firms across the State to provide professional and technical services, prior to the actual need for services. (This Addendum 1 RFQ document replaces the existing RFQ document.)

### **BACKGROUND**

As part of ODOT's commitment to complete required improvement projects, this (RFQ) registration will be used to expand ODOT's outreach and outsourcing efforts by providing contracting opportunities to small business entities including, but not limited to, Disadvantaged Business Enterprises (DBE), Emerging Small Businesses (ESB), Minority Business Enterprises (MBE), and Women Business Enterprises (WBE). The *Small Contracting Program* will assist in building effective working relationships and allow firms to benefit from the knowledge and experience of working as prime consultants on ODOT projects.

### **SUBMISSION REQUIREMENTS & TIMELINES**

E-mail or faxed submittals **will not be accepted**. Firms must ensure that the signed original *plus* three copies of the application materials are received by ODOT at the following address: **ODOT OPO**, 123 NW Flanders Street, Portland, OR 97209, ATTENTION: Gail Samura. To request a copy of the RFQ material in a fillable (MS-Word) format, telephone (503) 731-3254; fax the request to (503) 731-8259; download the RFQ material from the Internet at <http://orpin.oregon.gov/open.dll> or e-mail the request to: [gail.samura@state.or.us](mailto:gail.samura@state.or.us). The RFQ materials are also available at ODOT's Office of Civil Rights' Small Business Support web site at: [www.oregon.gov/ODOT/CS/CIVILRIGHTS/small\\_business.shtml](http://www.oregon.gov/ODOT/CS/CIVILRIGHTS/small_business.shtml).

All firms must complete and submit **ALL THREE PARTS** of the *ODOT Small Contracting Program for Professional and Technical Services* form to be considered responsive to this RFQ. All RFQ submittals will be reviewed and evaluated by OPO. ODOT may validate the qualifications of any firm under consideration, may require confirmation of information furnished by a firm and may require additional evidence of qualifications to perform the work described in this RFQ. ODOT reserves the right, in its sole and absolute discretion and without recourse by any firm, to take any of the following actions: 1) reject any or all registration submittals; 2) issue a new RFQ; 3) cancel, modify or withdraw the RFQ.

Acceptance of registration forms for contract awards under the (expanded) statewide program will be ongoing through **November 30, 2010**. Accepted registration information will be entered into the program database by OPO staff, sorted by discipline.

### **SELECTION PROCESS:**

ODOT anticipates awarding multiple contracts to firms with values Not to Exceed (NTE) \$75,000.00, but makes no guarantee of a contract or the specific amount of work or compensation for services to be provided.

Firms shall provide professional and technical services in any or all of the following disciplines:

- Survey
- Roadway Engineering Design Services

- Bridge and Structure Engineering Design Services
- Geotechnical/Geological Engineering Design Services
- Hydraulic & Storm water Engineering Design Services
- Traffic Operations and Engineering Services (including mobility, access, and traffic design)
- Environmental Services
- Construction and Inspection Services
- Construction Scheduling Services
- Computer Aided Drafting Services
- Graphics Support Services
- Right-of-Way Appraisal & Acquisition Services
- Program and Project Management Services
- Training Services
- Community Outreach Services
- Other Services as Identified by ODOT based on firm's responses

Following is a synopsis of the selection process for firms for contract awards:

1. ODOT Region identifies a small contract outsourcing need, verifies funding and notifies OPO of the proposed outsource work;
2. OPO notifies all registrants on the specific discipline list for the type of work required and requests a written indication of interest by a stated deadline.
  - a) If 10 or fewer firms in the specific discipline indicate interest, all responding registrants will be invited to participate in the selection process;
  - b) If more than 10 total firms in the specific discipline indicate interest, at least 5 firms will be invited to participate in the selection process, using the following criteria:
    - Qualified firms that have no current or previous contracts as a prime consultant with ODOT.
    - Specific project or work experience as deemed responsive to ODOT needs.
    - Geographic proximity to and familiarity with the physical location of the project.

The foregoing selection process may include evaluations of written responses to predetermined questions, in-person interview responses to predetermined questions, telephone interview responses or a combination of the above.

3. The firms chosen for further evaluation by the foregoing process will be issued a brief Request for Proposal (RFP). The Region will then select a firm(s) for contract award based on any or all of the following selection criteria, the firm's response to the RFP, and any other criteria or factors as may be included in the RFP:
  - Responsiveness and availability to perform the work request
  - Reference check results
  - Written response to work order-specific questions
  - Interview and response to work order-specific questions
4. OPO awards the work and prepares the contract.

#### **WORK ASSIGNMENTS:**

The Region and the selected firm will negotiate the final description of work tasks and deliverables, costs, and payment methodologies for inclusion in the contract. The Region will request and OPO will process a specific contract (with terms and provisions as determined by ODOT), to initiate services for each awarded project. No services will begin until a contract is signed by the selected firm and ODOT and the appropriate Notice to Proceed (NTP) is issued by the Region.

**RFQ #730-00030-A-06: OREGON DEPARTMENT OF TRANSPORTATION  
 ODOT Small Contracting Program Professional and Technical Services Registration Form**

**SUBMIT ORIGINAL COMPLETED REGISTRATION FORM & THREE COPIES TO:**

ODOT OPO  
 123 NW Flanders Street  
 Portland, Oregon 97209-4012  
 ATTENTION: Gail Samura, (503) 731-3254

**PART 1. Firm Contact Information**

Legal Name of Firm:	DBA (if different than Legal Name):		
Street Address:	City:	State:	Zip Code:
Mailing Address (if different than above):	City:	State:	Zip Code:
Web Site:	Phone Number:	Fax Number:	County:
Contact Person: <input type="checkbox"/> Ms. <input type="checkbox"/> Mr.	First Name:	Last Name:	
Title:	Phone Number:	Email Address:	

<b>FOR ODOT OFFICE USE ONLY</b>	
Date Application received _____	Received by _____
Initial review date _____	Reviewed by _____
Pre-Application complete? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If complete, approval date _____	Approved by _____
<b>If incomplete:</b>	
Date completion materials requested _____	Date received _____ Received by _____
Review Date _____	Reviewer _____
Approval Date _____	Approved by _____
Comments: _____	
_____	

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**PART 2. Firm's Information**

1. Select the type of business you are and fill in the information requested:

<input type="checkbox"/> Firm is a Corporation <input type="checkbox"/> Professional (ORS Ch. 58) <input type="checkbox"/> Private/Business (ORS Ch. 60) <input type="checkbox"/> Non-Profit (ORS Ch. 65) <input type="checkbox"/> Cooperative (ORS Ch. 62) State where incorporated _____ Date of incorporation _____ Name of CEO: _____ Name of Oregon representative: _____	<input type="checkbox"/> Firm is a Limited Liability Company (LLC) State where organized _____ Date of organization _____ Name of Manager: _____ Name of Oregon representative: _____
<input type="checkbox"/> Firm is a Partnership <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Limited Liability Partnership (LLP) Date of organization _____ Name of Managing Partner: _____ Home City and State: _____ Name of Oregon representative: _____	<input type="checkbox"/> Firm is a Sole Proprietorship Date of establishment _____ Name of Sole Proprietor: _____ Home City and State: _____ Name of Oregon representative: _____

2. What is your Firm's Federal Tax Identification Number? \_\_\_\_\_

3. What is your Firm's Oregon Secretary of State Corporation Division's Registration Number? \_\_\_\_\_  
 (Secretary of State's web site is; [www.filinginoregon.com/index.htm](http://www.filinginoregon.com/index.htm) , phone is (503) 986-2200)

4. How many years has the firm been in business under this or any other name? \_\_\_\_\_

5. How many years of experience has the firm had as a Prime Consultant? \_\_\_\_\_ Sub-consultant? \_\_\_\_\_

6. Is the firm currently certified by the State of Oregon as a:

	YES	NO	IF YES, CERTIFICATION NUMBER(S):
Disadvantaged Business Enterprise (DBE)	<input type="checkbox"/>	<input type="checkbox"/>	_____
Emerging Small Business (ESB)	<input type="checkbox"/>	<input type="checkbox"/>	_____
Minority Owned Business Enterprise (MBE)	<input type="checkbox"/>	<input type="checkbox"/>	_____
Women Owned Business Enterprise (WBE)	<input type="checkbox"/>	<input type="checkbox"/>	_____

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7. Has your firm been disbarred by any local, state or federal agency?  YES  NO

If **Yes**, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. List up to a maximum of three (3) projects the firm has completed during the last five (5) years or is currently working on, either as a Prime Consultant or Subconsultant that pertains to the discipline(s) your firm is interested in performing. These contacts may be used as references. Please include the completion date of the project, your Firm's project contract amount, the type of work your firm performed, the name of the owner and/or contract officer, and the contract officer's address, city, state, zip code, and telephone number and/or email.

A) Project: Name \_\_\_\_\_ Completion Date: \_\_\_\_\_  
Prime Consultant  Subconsultant  Your Firm's Project Contract Amount \$ \_\_\_\_\_  
Type of Work \_\_\_\_\_  
Owner/Contract Officer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email \_\_\_\_\_

B) Project: Name \_\_\_\_\_ Completion Date: \_\_\_\_\_  
Prime Consultant  Subconsultant  Your Firm's Project Contract Amount \$ \_\_\_\_\_  
Type of Work \_\_\_\_\_  
Owner/Contract Officer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email \_\_\_\_\_

C) Project: Name \_\_\_\_\_ Completion Date: \_\_\_\_\_  
Prime Consultant  Subconsultant  Your Firm's Project Contract Amount \$ \_\_\_\_\_  
Type of Work \_\_\_\_\_  
Owner/Contract Officer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email \_\_\_\_\_

9. List the names of individuals and their titles that are authorized to submit, approve, sign and/or execute proposals and contracts on the firm's behalf.

Name _____	Title _____

10. Number of professional staff (e.g., engineers; surveyors; landscape architects; biologists; etc.) certified or licensed in Oregon and employed by the Firm \_\_\_\_\_

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**PART 3. Firm’s Technical Capability Information**

Identify the Professional or Technical services for which the Firm may propose by listing any related licenses and/or certifications, and the number of years the Firm has provided the specified services. Please fill in the number of staff for each of the related licenses or certifications employed by your firm. **EXAMPLE:** under the Services category “Survey”: a firm has 3 employees who have PLS licenses and 2 employees that have PE licenses. In this example, the number of employees for each license type is: #PLS = 3, #PE = 2.

Indicate Services Offered. Check <input type="checkbox"/> all that apply:	Services	Type of Related Licenses/Certifications & Number of Staff	Number of Years Firm Has Provided Services
<input type="checkbox"/>	Survey	#PLS= #PE=	
<input type="checkbox"/>	Roadway Engineering Design Services	#PE=	
<input type="checkbox"/>	Bridge and Structure Engineering Design Services	#PE= #SE=	
<input type="checkbox"/>	Geotechnical/Geological Engineering Design Services	#PE= #CEG=	
<input type="checkbox"/>	Hydraulic and Stormwater Engineering Design Services	#PE=	
<input type="checkbox"/>	Traffic Operations and Engineering Services (including mobility, access, and traffic design)-	#PE=	
<input type="checkbox"/>	Environmental Services (specify if all services or identify specialty): _____	#Certified Bio = #Wetland =	
<input type="checkbox"/>	Construction and Inspection Services	#PE=	
<input type="checkbox"/>	Construction Scheduling Services	#PE=	
<input type="checkbox"/>	Computer Aided Drafting Services	N/A	
<input type="checkbox"/>	Graphics Support Services	N/A	
<input type="checkbox"/>	RW Appraisal & Acquisition Services	#Cert. Appr =	
<input type="checkbox"/>	Program and Project Management Services	#OPMA= #PMI= #PE=	
<input type="checkbox"/>	Training Services	N/A	
<input type="checkbox"/>	Community Outreach Services	N/A	
<input type="checkbox"/>	Other Service (be specific): _____		
<input type="checkbox"/>	Other Service (be specific): _____		

## Registration Form Certification Statement

I hereby certify that I am a duly authorized representative of the Firm and that the information contained within this Pre-Qualification Application is true and accurate to the best of my knowledge. I hereby authorize and request any person, agency or firm to furnish any pertinent information requested by the Oregon Department of Transportation deemed necessary to verify the statements made in this application.

Printed name of person signing below \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title