**CERTIFIED LOCAL PUBLIC AGENCY**

**CONSULTANT SELECTION**

**EXCEPTION REQUEST**

The Certified Local Public Agency (LPA) must submit this form if the LPA chooses to use a consultant not on the current ODOT pre-approved list. The LPA must demonstrate the consultant is qualified to perform the work. All exceptions must be reviewed and concurred by ODOT. Please submit exception request to the certification mailbox.

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| --- | --- |
| Local Public Agency |       |
| Project Name |       |
| Supplemental Agreement # |       |
| Amount of Contract |       |
| Procurement Type |       |

|  |  |
| --- | --- |
| Consultant Name |       |
| Address |       |
| Contact Number |       |
| E-Mail |       |
| Specialty |       |

|  |  |
| --- | --- |
| Has appropriate LPA staff reviewed qualifications and experience of the selected consultant? | YES [ ]  NO [ ]  |
| Does the consultant have an Active Exclusion on the System for Award Management (SAM) which is available at [**https://sam.gov/**](https://sam.gov/) **?** | YES [ ]  NO [ ]   |
| Unless operating as their [**real and true name**](http://sos.oregon.gov/business/Pages/registering-your-business-name.aspx), does the consultant have an active registration to do business in Oregon ([**Business Registry Search**](http://egov.sos.state.or.us/br/pkg_web_name_srch_inq.login)**)** | YES [ ]  NO [ ]  |
| Does consultant have a fully loaded billing rate (no overhead calculation) that appears reasonable in comparison to other firms providing similar services? | YES [ ]  NO [ ]  |
| If the consultant has an overhead rate, has LPA obtained for procurement file the consultant’s direct rates, overhead breakdown, the [**certification form**](https://www.oregon.gov/odot/Business/Procurement/DocsPSK/ohCert.docx) required by FHWA (see section 3.5 of the [**LPA A&E Requirements Guide**](https://www.oregon.gov/odot/Business/Procurement/DocsLPA/lpaAErequirements.pdf)), and any available audit or cognizant audit documentation?   (Note: ODOT does not provide audit services for LPAs).  |  YES [ ]  NO [ ]  N/A [ ]  |

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| Provide a brief description of the consultant’s qualifications and experience to perform the services required under the prospective Contract: |
|  |
| Provide the following professional registration information if applicable to the needed services: |
| Registered Professional Engineer: | Registration Number: | Jurisdiction of Registration: |
| Registered Professional Land Surveyor: | Registration Number: | Jurisdiction of Registration: |

|  |  |
| --- | --- |
| Submitted by: | Date: |
|       |       |

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| Reviewed by: | Date: |
|       |       |
| Exception Granted | YES [ ]  NO [ ]  |

|  |  |
| --- | --- |
| Master Certification Agreement Number |       |
| Key Number |       |

|  |  |
| --- | --- |
| Comments |       |