Washington State Department of Transportation

Consultant Prequalification Form

Type of Request (select one)

☐ Initial Prequalification ☐ Renewal ☐ Modification or Key Personnel Update

Consultant Firm Information (identified as "Firm" in the remainder of application)			
Firm Name		FYE Date	Number of Employees
Address			
City	State	Zip Code	County
Phone	Fax	Company Web Site	
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	
Unified Business Identifier Number (UBI)		NAICS Code & Code Name	
Year Firm Established	FSBE/PWSBE/VOB Certification Number (if applicable)		
Financial Contact		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			

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 Subconsultant 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. 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.

FSBE/PWSBE/VOB Certification: If your firm is certified as a FSBE/PWSBE/VOB enter your firm's certification number. Federal Certifications: Federal Small Business Enterprise (FSBE). State Certifications: Public Works Small Business Enterprise (PWSBE) and Veteran Owned Business (VOB). 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.

ALL FIELDS ON PAGE 1 ARE REQUIRED UNLESS OTHERWISE STATED

Technical Prequalification Categories

Category descriptions can be found on the on the advertisement web page.
Check box for each work type for which prequalification is sought:

☐ Construction Management and Inspection Services
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

☐ Construction Materials Testing Services
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

☐ Cost Risk Assessment and Cost Estimate Validation Process Workshop Services
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

☐ Environmental Services
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

☐ Facilities Architectural Services
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

☐ Facilities Civil Engineering Services
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

☐ Facilities Mechanical and Electrical Engineering Services
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

☐ Facilities Structural Engineering Services
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

☐ Fish Passage Barrier Correction
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

☐ Geophysical
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

☐ Geotechnical
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

☐ Independent Construction Cost Estimating (ICCE) Services
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

☐ Naval Architecture and Marine Engineering Services
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

☐ Other Subconsultant Work
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

☐ Rail, Freight, and Ports - Engineering, Operations, and Planning Services
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

☐ Special Structures Engineering Services
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

☐ Structural Engineering Services
Point of Contact: _____ Email: _____ *Req. Cert./Lic. Number (if applicable): _____

***See Category Description Document for Required Minimum Licenses and/or Certifications**

☐ Subject Matter Expert (SME) Services
Point of Contact: Email: *Req. Cert./Lic. Number (if applicable):

☐ Subsurface Utilities Engineering (SUE) Services
Point of Contact: Email: *Req. Cert./Lic. Number (if applicable):

☐ Surveying Services
Point of Contact: Email: *Req. Cert./Lic. Number (if applicable):

☐ Traffic Engineering Services
Point of Contact: Email: *Req. Cert./Lic. Number (if applicable):

☐ Transportation Design Plans Specs and Estimate Services
Point of Contact: Email: *Req. Cert./Lic. Number (if applicable):

☐ Transportation Planning and Studies Services
Point of Contact: Email: *Req. Cert./Lic. Number (if applicable):

☐ Unstable Slopes
Point of Contact: Email: *Req. Cert./Lic. Number (if applicable):

☐ Value Engineering Services
Point of Contact: Email: *Req. Cert./Lic. Number (if applicable):

☐ VERG Visual Media Production Services
Point of Contact: Email: *Req. Cert./Lic. Number (if applicable):

☐ WSF Terminal Construction Inspection and Management Services
Point of Contact: Email: *Req. Cert./Lic. Number (if applicable):

☐ WSF Terminal Design Engineering, Architectural and Surveying Services
Point of Contact: Email: *Req. Cert./Lic. Number (if applicable):

Certification

By signing below and submitting this application, the applicant certifies that all statements and supporting documentation submitted in this application package are true and correct and include all material information necessary to identify and explain the operations of the applicant. Applicant hereby authorizes and requests any person, agency or firm to furnish any pertinent information requested by the Washington State Department of Transportation deemed necessary to verify the statements made in this application. This certification constitutes a material representation. Any misrepresentation will be grounds for denying or revoking prequalification and for initiating action under federal or state laws concerning false statements.

Signature

Title

Date

Submittal

Complete the “WSDOT Consultant Prequalification” form and submit to the email address below. The application must be submitted as an Adobe Reader compatible (pdf) file. Faxed applications will not be accepted.

Submittal email address: CSOSubmittals@wsdot.wa.gov

Any questions regarding this advertisement should be directed to WSDOT’s Headquarters Contract Services Office at CSOSubmittals@wsdot.wa.gov or 360-704-6397.

Next Steps

WSDOT Contract Services Office (CSO) will notify you when your firm's prequalification application has been accepted. Following acceptance of this application, your firm will be required to provide financial documentation and execute a Master Pricing Agreement before your firm will be eligible to work. Required documentation includes:

- Master Pricing Agreement document
- Indirect Cost Rate (ICR) documentation
- Crosswalk of Firm's employee labor classifications to WSDOTs standard labor classification listing
- Wage Theft Prevention Contractor Certification Form

Feedback - Help Us Help You

Please provide any comments you may have regarding WSDOT's Prequalification program. With your help the Department will continue to improve this process.