



ASSOCIATION of GOVERNMENTS

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Ventura County: Linda Parks, Ventura County • Glen Becerra, Simi Valley • Carl Morehouse, San Buenaventura • Toni Young, Port Hueneme

Orange County Transportation Authority: Art Brown, Buena Park

Riverside County Transportation Commission: Robin Lowe, Hemet

Ventura County Transportation Commission: Keith Millhouse, Moorpark

REQUEST FOR PROPOSAL NO. 08-027

PALMDALE EMERGENCY/DISASTER PREPAREDNESS

I.

SUMMARY

The Southern California Association of Governments (SCAG) is soliciting proposals in response to Request for Proposal (RFP) No. 08-027, Palmdale Emergency/Disaster Preparedness.

SCAG and the City of Palmdale are seeking a qualified consultant to develop a citywide building footprint dataset using GIS technology.

The RFP is comprised of the following nine (9) parts presented herein as Attachments:

1. Proposal Information, Organization, and Content
2. Scope of Work
3. Price Sheet
4. Proposal Evaluation Form
5. Interview Evaluation Form
6. Debarment and Suspension Certification
7. SCAG Conflict of Interest Form
8. Disadvantaged Business Enterprise (DBE)
9. Form W-9 and Attachment to Form W-9

II.

PROPOSAL SUBMISSION

One (1) original hard copy (clearly marked/stamped as such), and seven (7) hard copies shall be received by SCAG's receptionist by 3:00 p.m. PST (time to be determined by SCAG's time clock) on November 29, 2007 and directed to:

Lori Grebbien, Contracts Administrator
Southern California Association of Governments
818 W. 7th Street, 12th Floor
Los Angeles, CA 90017-3435
Email: grebbien@scag.ca.gov

All submissions are considered a matter of public record.

Your proposal must be received at SCAG by the deadline specified above. Late submittals will not be accepted. Also, faxed or electronically sent proposals will not be accepted. Any proposal received after the deadline will be returned to the proposer without further consideration.

Note: Proposer, Consultant, Contractor, and Firm are used interchangeably throughout this document.

III. QUESTIONS AND ANSWERS

The deadline to submit questions is November 8, 2007. Questions must be submitted in writing to the attention of:

Lori Grebbien, Contracts Administrator
Fax: (213) 236-1825
Email: grebbien@scag.ca.gov

Answers to the questions will be posted on SCAG's solicitation management system under the corresponding RFP typically no later than three (3) working days after the deadline to submit questions.

IV. BUDGET PARAMETERS

Any proposal exceeding the budget specified in this RFP will not be accepted.

Budget Range: \$65,000 – \$75,000

Contract Type: Firm Fixed Price

Funding for this project is contingent upon availability of funds at the time of contract award.

V. PERIOD OF PERFORMANCE

Project completion will be on or before June 30, 2008.

VI. PROJECTED TIMELINE

	<u>DATE</u>	<u>TIME</u>
RFP Released	November 1, 2007	
Deadline to Submit Questions	November 8, 2007	5:00 p.m.
Posting of Answers to Questions	November 12, 2007	5:00 p.m.
RFP Due Date	November 29, 2007	3:00 p.m.
Proposal Evaluations	December 6, 2007	
Consultant Interviews	December 13, 2007	
Final Selection	December 14, 2007	
Contract Execution/NTP	December 20, 2007	

VII. SELECTION PROCESS

- Proposals will be ranked in accordance with the criteria described in Attachments 4 and Attachment 5.
- Proposers may be invited for an interview.

VIII. SCAG RIGHTS

1. SCAG reserves the right to:
 - A. Disqualify any and all proposals that are not submitted in accordance with the required format described in this RFP
 - B. Reject any and all proposals submitted
 - C. Request additional information
 - D. Award all or part of the work contemplated in this RFP
 - E. Remedy errors in the RFP
 - F. Cancel the entire RFP
 - G. Issue subsequent RFP
 - H. Approve or reject the use of a particular subcontractor/supplier
 - I. Negotiate with any, all or none of the proposers. If SCAG is unable to negotiate final contract Terms and Conditions that are acceptable to SCAG, SCAG reserves the right to award the contract to another proposer.
 - J. Accept other than the lowest priced proposal
 - K. Award a contract without interviews, discussions or negotiations
 - L. Award a contract to one or more proposers
2. All proposers should be aware of the Insurance Requirements for Contract Award. The Certificate of Insurance must be provided by the successful proposer prior to contract award. A contract may not be awarded if insurance requirements are not met. The insurance requirements may be viewed on SCAG's website at: <http://scag.ca.gov/business/> under Section 41 of SCAG's Contract Template.
3. SCAG does not reimburse proposers for the cost of proposal preparation, even in the event of RFP cancellation.
4. Ring binders will not be accepted. Comb binding is preferred.
5. Debriefings will not be provided by SCAG.
6. Communication between the proposer and any member of the Proposal Review Committee during the selection process is prohibited, except when and in the manner expressly authorized in this Request for Proposal. Violation of this restriction is grounds for disqualification.
7. The contract for this work will be awarded to the firm that the Proposal Review Committee deems best qualified.
8. Every proposal submitted is considered a firm offer that must be valid for a minimum of ninety (90) calendar days.
9. If applicable, SCAG prefers that software developed, under SCAG's contract, not incorporate proprietary and/or third party software components. This does not preclude the development of deliverables which interface with commonly-available off-the-shelf software. However, contractors must determine in advance whether SCAG already has, or is willing to procure, appropriate licenses for any proprietary and/or third party software that would be required.

Contractors must also provide the impacts of any enhancements and upgrades. SCAG will require delivery of documentation and source code for all electronic intellectual property developed under a SCAG contract prior to releasing final payment to the contractor.

IX. NOTIFICATION OF RIGHT TO PROTEST CONTRACT AWARD

Proposers have the right to protest the contract award in compliance with SCAG's Policy on Contract Award Protests, which can be viewed online at www.scag.ca.gov under "Doing Business with SCAG." A written protest must be filed with SCAG's Deputy Director within five (5) working days after posting of the Notice of Intent to Award. SCAG will not accept any verbal protests. The protest must be a detailed, written statement of the protest grounds and reference the RFP number and name of the designated Contracts Administrator. The protest must be submitted to SCAG's Deputy Director via both certified mail and fax using the following address and fax number:

Deputy Director
Southern California Association of Governments
818 W. 7th Street, 12th Floor
Los Angeles, CA 90017-3435
Fax: (213) 236-1825

The contract award is held up when SCAG's Deputy Director receives the protest on time. The contract may not be awarded until the protest is either withdrawn or SCAG's Deputy Director has rendered a decision.

X. CONTACT INFORMATION

Any questions regarding this RFP may be directed to:

Lori Grebbien, Contracts Administrator
Phone: (213) 236-1957
Fax: (213) 236-1825
Email: grebbien@scag.ca.gov

PROPOSAL INFORMATION, ORGANIZATION, AND CONTENT

All proposals shall contain, at a minimum, the following information:

TITLE PAGE

The following must be provided on the title page:

- RFP Number
- Title of the Project
- Name and Address of Firm
- Phone/Fax of Firm
- Prime Contact Person
- Email of the Prime Contact Person
- Signature of the Individual Authorized/Obligated to Commit the Firm to this Project

TABLE OF CONTENTS

A clear identification of the materials by section and page numbers.

TECHNICAL APPROACH

- A statement and discussion of the project objectives, concerns, and key issues.
- The technical approach for performing the tasks must include a detailed Scope of Work along with the process for executing the requirements and objectives of the project.
- A discussion of the difficulties expected or anticipated in performing the tasks, along with a discussion of how the consultant proposes to overcome or mitigate against those difficulties.
- A detailed schedule for completion of the work, including performance and delivery schedules indicating phases or segments of the project, milestones, and significant events.
- A statement of the extent to which the consultant's proposed approach and Scope of Work will meet or exceed the stated objectives discussed in this RFP. Furthermore, a discussion of how the consultant would modify the project, schedule, and/or cost to better meet these objectives without exceeding the stated budget amount.

PROFILE OF FIRM

- A statement indicating if the firm is local or national and a summary of representative experience relevant to the work described in the Scope of Work for this RFP.
- The location and telephone number of the office from which the work is to be done.
- Identification of the individuals who will perform the work, including officers, project manager and key staff. State the time commitment and include resumes for key individuals.

REFERENCES

- Provide a list of at least three references, including the names of contact persons within the firms. References should not include any SCAG staff or SCAG Regional Council Members.

REQUIRED FORMS

- Attachment 3 – “Price Sheet” – Each Proposer must include this Price Sheet filled out with their proposal
- The Debarment and Suspension Certification (Attachment 6) **must be fully completed by all parties to the proposal (prime and all subconsultants).**
- The SCAG Conflict of Interest Form (Attachment 7) must be fully completed by all parties to the proposal whose portion of the overall work is valued at \$25,000 or more. All persons or firms seeking contracts valued at \$25,000 or more must complete and submit this SCAG Conflict of Interest Form along with the proposal. This requirement also applies to all proposed subconsultants whose portion of the overall work is valued at \$25,000 or more.
- A “Bidder’s List of Subconsultants (DBE and Non-DBE) – Part I” (Attachment 8A) and a “Bidder’s List of Subconsultants (DBE and Non-DBE) – Part II” (Attachment 8B) must be completed by the proposer.
- All proposers should ensure that they have completed and submitted a Form W-9 and Attachment to Form W-9 (Attachment 9). Form W-9 may also be obtained on-line at www.scag.ca.gov under “Doing Business with SCAG.” The form is mandatory for the prime consultant.

SCAG STANDARD CONSULTANT AGREEMENT

The successful consultant will be required to sign SCAG’s standard consultant agreement in order to receive the contract award. **Proposer must identify in their proposal any concerns or objections they would have with any of the contract terms and conditions if selected for contract award.** Consultant shall propose alternative language for consideration. If SCAG is unable to negotiate final contract Terms and Conditions that are acceptable to SCAG, SCAG reserves the right to award the contract to another proposer. The contract template may be viewed on SCAG’s website at: <http://scag.ca.gov/business/>

CONTRACT LANGUAGE IS SUBJECT TO CHANGE BY SCAG PRIOR TO CONTRACT EXECUTION

SCOPE OF WORK

Palmdale Emergency/Disaster Preparedness (08-040.NLAC2)

Project Background:

The ability to access data both quickly and efficiently in an emergency situation can mean the difference between life and death. Having accurate data and a plan to respond to emergencies can greatly improve outcomes. SCAG and the City of Palmdale are seeking a qualified consultant to develop a citywide building footprint dataset using GIS technology. The database must be linked to building elevations, floor plans, site plans, emergency evacuation plans, and linked to footprints of city-owned building and facilities. Vertical public building information should also be included. The building footprint data layer will be used for planning, analysis, and information purposes. The public facility building footprint data layer will also be used for emergency preparedness, response, and planning purposes. The database will be integrated into the City's MapGuide GIS application.

Project Objectives:

The purpose of this project is to provide SCAG and their members, Palmdale planners and the public with an application that will provide an accurate building footprint GIS database within North Los Angeles sub region. The main objectives are:

- To provide a system to integrate the database with building emergency elevation plan;
- To provide a system to address the efficient use of transportation infrastructure in order to maximize emergency responsiveness;
- To provide a system to increase public safety and security; and
- To provide a system that will create an easy to use, point and click application with the ability to print maps and databases using the City's MapGuide GIS.

Work Tasks and Schedule:

Task 1: Kick-off Meeting - Once the Notice to Proceed has been issued, a kick-off meeting will be held to discuss project goals and objectives, project schedule and other administrative issues required prior to the project commencement.

Timeline: Within 5 business days from the Notice to Proceed.

Task 2: Develop project methodology and strategies – Define project plan including goals, objectives, and project schedule.

Timeline: Within 2 weeks of the Notice to Proceed.

Task 3: Develop the GIS database - Digitize building footprints using aerial imagery provided by the City of Palmdale. Create a simple database that will be tied to each building identifying its type (e.g. residential, commercial, industrial,

recreation, public facility, etc.). Identify and evaluate key transit and transportation corridors which will be utilized for the evacuation of the residents and workers located in the City of Palmdale. The key transit and transportation corridors will be provided in a GIS format.

Timeline: Within 4 months from the Notice to Proceed.

- Task 4: Metadata Development - Metadata is required for all acquired datasets. Metadata will be collected following the standards outlined in the Spatial Data/Metadata Requirements document which is found in the SCAG contract template located at SCAG's website at: <http://scag.ca.gov/business/>

Timeline: Within 4 months from the Notice to Proceed.

- Task 5: Testing the System – The system test will be conducted to ensure that the solution is performing as required.

Timeline: Within 5 months from the Notice to Proceed.

- Task 6: System Demonstration and Presentation – Consultant should prepare one (1) presentation and demonstration to the City of Palmdale and SCAG of the system.

Timeline: Within 5 months from the Notice to Proceed.

- Task 7: Submit draft database and report (3 hard copies and 3 CD Roms each) - Consultant will submit electronic and hard copy maps for review.

Timeline: Within 6 months from the Notice to Proceed.

- Task 8: Submit final report (8 hard copies and 2 CD-Roms) and data deliverables (2 CD-Roms) – Consultant prepares and submits final project report. The report will include project objectives, methodology of the system development, and any suggestions/recommendations.

Timeline: Within 6 months from the Notice to Proceed.

Deliverables:

- Draft building footprint dataset
- Draft MapGuide application solution
- GIS file of evacuation infrastructure
- Metadata on all datasets
- Final building footprint dataset
- Final MapGuide application solution
- Final deliverable data sets in specified format

Budget:

Total budget for this project is between \$65,000 and \$75,000.

Price Sheet

Consultant: _____

Tasks	Cost
Task 1	\$
Task 2	\$
Task 3	\$
Task 4	\$
Task 5	\$
Task 6	\$
Task 7	\$
Task 8	\$
Total Cost:	\$

PROPOSAL EVALUATION FORM

RFP No. 8-027

Consultant Name: _____

Evaluation Criteria	Max. Possible Points	Points Earned	Comments
PROJECT COST - Realistic cost for services to be performed - Allocation of cost to tasks & activities	50		
TECHNICAL APPROACH - Tasks & approach clearly described - Creative/innovative approach - Project intent has been met	35		
REASONABLENESS OF SCHEDULE - Total time allocated for each task is realistic - Logical & realistic timing of each task - Overall schedule consistent with SCAG's SOW	10		
CONSULTANT FIRMS: <u>Prime Consultant:</u> - Familiar with regional & local issues - Capability to reallocate resources as needed to meet project schedule - Experience with similar project of the same size and scope <u>Sub-Consultant(s):</u> - Each sub provides unique service(s) to the team - Subs are fully capable of performing their tasks	5		
REFERENCES Similar projects completed on time and within budget	Pass/ Fail		
TOTAL	100		

Name of Evaluator (print): _____ Agency: _____

Signature of Evaluator: _____ Date: _____

INTERVIEW EVALUATION FORM

RFP No. 08-027

Consultant Name: _____

Evaluation Criteria	Max. Possible Points	Points Earned	Comments
TECHNICAL APPROACH • Tasks & approach clearly described • Creative/innovative approach • Project intent has been met	50		
CONSULTANT FIRMS: <u>Prime Consultant:</u> • Familiar with regional & local issues • Capability to reallocate resources as needed to meet project schedule • Experience with similar project of the same size and scope <u>Sub-Consultant(s):</u> • Each sub provides unique service(s) to the team • Subs are fully capable of performing their tasks	25		
PROJECT MANAGEMENT • Reasonable total number & distribution of hours • Qualifications of key individuals • Time commitment of key individuals	15		
REASONABLENESS of SCHEDULE • Total time allocated for each task is realistic • Logical & realistic timing of each task • Overall schedule consistent with SCAG's SOW	10		
TOTAL:	100		

Name of Evaluator (print): _____ Agency: _____

Signature of Evaluator: _____ Date: _____

TITLE 49, CODE OF FEDERAL REGULATIONS, PART 29

DEBARMENT AND SUSPENSION CERTIFICATION

RFP No. 08-027

- 1) All persons or firms, including subconsultants, must complete this certification and certify, under penalty of perjury, that, except as noted below, he/she or any person associated therewith in the capacity of owner, partner, director, officer, or manager:
 - a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency;
 - b) Have not, within the three (3) year period preceding this certification, been convicted of or had a civil judgement rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction, violation of Federal or state antitrust statutes, or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses listed in subparagraph (1)(b) of this certification; and
 - d) Have not, within the three (3) year period preceding this certification, had one or more public transactions (Federal, state, and local) terminated for cause or default.
- 2) If such persons or firms later become aware of any information contradicting the statements of paragraph (1), they will promptly provide that information to SCAG.

If there are any exceptions to this certification, insert the exceptions in the following space.

Exceptions will not necessarily result in denial of award, but will be considered in determining proposer/bidder responsibility. For any exception noted above, indicate below to whom it applies, initiating agency, and dates of actions.

Name of Firm

Signature (original signature required)

Date

SCAG CONFLICT OF INTEREST FORM

RFP No. 08-027

SECTION I: INSTRUCTIONS

All persons or firms seeking Federal funded contracts must complete and submit a SCAG Conflict of Interest Form along with the proposal. This requirement also applies to any proposed subconsultant(s). Failure to comply with this requirement may cause your proposal to be declared non-responsive.

In order to answer the questions contained in this form, please review SCAG's Conflict of Interest Policy, the list of SCAG employees, and the list of SCAG's Regional Council members. All three documents can be viewed online at www.scag.ca.gov. The SCAG Conflict of Interest Policy is located under "Doing Business with SCAG," whereas the SCAG staff and Regional Council members lists can be found under "About SCAG."

Any questions regarding the information required to be disclosed in this form should be directed to Justine Block, SCAG Deputy Legal Counsel.

Name of Firm: _____

Name of Preparer: _____

Project Title: _____

RFP Number: _____ **Date Submitted:** _____

SECTION II: QUESTIONS

- During the last twelve (12) months, has your firm provided a source of income to employees of SCAG or members of the SCAG Regional Council, or have any employees or Regional Council members held any investment (including real property) in your firm?

☐ YES ☐ NO

If "yes," please list the names of those SCAG employees and/or SCAG Regional Council members and the nature of the financial interest:

Name	Nature of Financial Interest
_____	_____
_____	_____
_____	_____
_____	_____

2. Have you or any members of your firm been an employee of SCAG or served as a member of the SCAG Regional Council within the last twelve (12) months?

☐ YES ☐ NO

If "yes," please list name, position, and dates of service:

Name	Position	Dates of Service
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. Are you or any managers, partners, or officers of your firm related by blood or marriage/domestic partnership to an employee of SCAG or member of the SCAG Regional Council that is considering your proposal?

☐ YES ☐ NO

If "yes," please list name and the nature of the relationship:

Name	Relationship
_____	_____
_____	_____
_____	_____
_____	_____

4. Does an employee of SCAG or a member of the SCAG Regional Council hold a position at your firm as a director, officer, partner, trustee, employee, or any position of management?

☐ YES ☐ NO

If "yes," please list name and the nature of the relationship:

Name	Relationship
_____	_____
_____	_____
_____	_____
_____	_____

5. Have you or any managers, partners, or officers of your firm ever given (directly or indirectly), or offered to give on behalf of another or through another person, campaign contributions or gifts to any current employee of SCAG or member of the SCAG Regional Council (including contributions to a political committee created by or on behalf of a member/candidate)?

☐ YES ☐ NO

If "yes," please list name, date gift or contribution was given/offered, and dollar value:

Name	Date	Dollar Value
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SECTION III: VALIDATION STATEMENT

This Validation Statement must be completed and signed by at least one General Partner, Owner, Principal, or Officer authorized to legally commit the proposer.

DECLARATION

I, (printed full name) _____, (Social Security Number; optional) _____ hereby declare that I am the (position or title) _____ of (firm name) _____, and that I am duly authorized to execute this Validation Statement on behalf of this entity. I hereby state that this SCAG Conflict of Interest Form dated _____ is correct and current as submitted. I acknowledge that any false, deceptive, or fraudulent statements on this Validation Statement will result in rejection of my contract proposal.

Signature of Person Certifying for Proposer
(original signature required)

Date

NOTICE

A material false statement, omission, or fraudulent inducement made in connection with this SCAG Conflict of Interest Form is sufficient cause for rejection of the contract proposal or revocation of a prior contract award.

DISADVANTAGED BUSINESS ENTERPRISE (DBE) INFORMATION

RFP No. 08-027

The requirements of 49 Code of Federal Regulations (CFR) Part 26 applies to this RFP.

DBEs and other small businesses are strongly encouraged to participate in the performance of Agreements financed in whole or in part with federal funds (See 49 CFR 26, "Participation by Disadvantaged Business Enterprises in Department of Transportation Financial Assistance Programs"). The Consultant should ensure that DBEs and other small businesses have the opportunity to participate in the performance of the work that is the subject of this solicitation and should take all necessary and reasonable steps for this assurance. The proposer shall not discriminate on the basis of race, color, national origin, or sex in the award and performance of subcontracts.

DBE DEFINITION

A DBE is a-for-profit "small business concern" that is at least 51 percent owned and controlled by one or more socially and economically disadvantaged individuals. One or more such individuals must also control the management and daily business operations. These individuals must be citizens (or lawfully admitted permanent residents) of the United States and (1) any individual who a recipient finds to be a socially and economically disadvantaged individual on a case-by-case basis, or (2) who are either Black Americans, Hispanic Americans, Native Americans, Asian-Pacific Americans, Subcontinent Asian Americans, women, or any other group found to be socially and economically disadvantaged by the Small Business Administration.

DBE PARTICIPATION AND GENERAL INFORMATION

It is the proposer's responsibility to be fully informed regarding their requirements of 49 CFR, Part 26. Particular attention is directed to the following:

- A. A DBE must be a small business firm defined pursuant to 13 CFR 121 and be certified through the California Unified Certification Program (CUCP)
- B. A certified DBE may participate as a prime consultant, subconsultant, or as a vendor of material or supplies.
- C. A DBE must perform a commercially useful function pursuant to 49 CFR 26.55; that is, a DBE firm must be responsible for the execution of a distinct element of the work and must carry out its responsibility by actually performing, managing, and supervising the work.
- D. A prime consultant who is a certified DBE is eligible to claim all of the work in the Agreement toward the DBE participation except that portion of the work to be performed by non-DBE subconsultant.

PROPOSER'S/BIDDER'S LIST OF SUBCONSULTANTS (DBE AND NON-DBE)

The proposer shall submit the attached "Proposer's List of Subconsultants (DBE and non-DBE) – Part I" form, Attachment 8A, with the proposal listing all subconsultants participating in the performance of this project.

Additionally, the proposer shall submit the attached "Proposer's List of Subconsultants (DBE and non-DBE) – Part II" form, Attachment 8B, with the proposal listing all subconsultants who provided a quote/bid to the proposer, but were not selected to participate as a subconsultant in the performance of this project.

SUBMISSION OF DBE INFORMATION

A "Local Agency Proposer-DBE Information Form" will be included in the Agreement documents to be executed by the successful proposer/bidder. The purpose of the form is to collect data required under 49 CFR 26. Even if no DBE participation will be recorded, the successful proposer must execute and return the form.

DBE SOURCES

Consultants interested in locating DBE subconsultants may refer to the following source:

Statewide DBE Database of the CUCP (California Unified Certification Program):

<http://www.californiaucp.com/>

Click on "General Information"

Click on "[CUCP Statewide DBE Directory](#)"

Also, the following agency may be contacted for assistance in locating DBE firms in California:

Caltrans Office of Certification
1-866-810-6346

DBE CERTIFICATION

The DBE firm must hold a current California Unified Certification Program (CUCP) DBE certification at the time of proposal submission. DBE certifications outside of California will not be accepted. Firms that are DBE certified outside of California may apply for a CUCP DBE certification by contacting one of the six certifying agencies listed below.

For DBEs located within the southern California region, certification must be from one of the following agencies:

- | | |
|--|---|
| 1. Department of Transportation (Caltrans) | http://www.dot.ca.gov/ |
| 2. City of Los Angeles | http://www.lacity.org/bca/ |
| 3. Metropolitan Transportation Authority (Metro) | www.metro.net |
| 4. Orange County Transportation Authority (OCTA) | www.octa.net |
| 5. City of San Diego | www.sandiego.gov |
| 6. San Diego County Regional Airport Authority | www.san.org |

BIDDER'S LIST OF SUBCONSULTANTS (DBE AND NON-DBE) – PART I

The proposer shall list all subconsultants (both DBE and non-DBE) in accordance with Title 49, Section 26.11 of the Code of Federal Regulations. The listing is required in addition to listing DBE subconsultants elsewhere in the proposal. Photocopy this form for additional firms.

Firm Name/ Address/ City, State, ZIP	Contact/ Phone/ FAX	Annual Gross Receipts ☐ < \$1 million ☐ < \$5 million ☐ < \$10 million ☐ < \$15 million ☐ > \$15 million	Description of Portion of Work to be Performed	SCAG Use Only (Certified DBE?) ☐ YES ☐ NO <i>If YES list DBE #</i>
				Age of Firm (Yrs.)
Firm Name/ Address/ City, State, ZIP	Contact/ Phone/ FAX	Annual Gross Receipts ☐ < \$1 million ☐ < \$5 million ☐ < \$10 million ☐ < \$15 million ☐ > \$15 million	Description of Portion of Work to be Performed	SCAG Use Only (Certified DBE?) ☐ YES ☐ NO <i>If YES list DBE #</i>
				Age of Firm (Yrs.)
Firm Name/ Address/ City, State, ZIP	Contact/ Phone/ FAX	Annual Gross Receipts ☐ < \$1 million ☐ < \$5 million ☐ < \$10 million ☐ < \$15 million ☐ > \$15 million	Description of Portion of Work to be Performed	SCAG Use Only (Certified DBE?) ☐ YES ☐ NO <i>If YES list DBE #</i>
				Age of Firm (Yrs.)
Firm Name/ Address/ City, State, ZIP	Contact/ Phone/ FAX	Annual Gross Receipts ☐ < \$1 million ☐ < \$5 million ☐ < \$10 million ☐ < \$15 million ☐ > \$15 million	Description of Portion of Work to be Performed	SCAG Use Only (Certified DBE?) ☐ YES ☐ NO <i>If YES list DBE #</i>
				Age of Firm (Yrs.)

The proposer shall list all subconsultants who provided a quote or bid but were not selected by the proposer to participate as a subconsultant on this project. This is required for compliance with Title 49, Section 26 of the Code of Federal Regulations. Photocopy this form for additional firms.

Firm Name/ Address/ City, State, ZIP	Contact/ Phone/ FAX	Annual Gross Receipts	Description of Portion of Work to be Performed	SCAG Use Only (Certified DBE?)
				☐ YES
				☐ NO
				If YES list DBE #
				Age of Firm (Yrs.)
Firm Name/ Address/ City, State, ZIP	Contact/ Phone/ FAX	Annual Gross Receipts	Description of Portion of Work to be Performed	SCAG Use Only (Certified DBE?)
				☐ YES
				☐ NO
				If YES list DBE #
				Age of Firm (Yrs.)
Firm Name/ Address/ City, State, ZIP	Contact/ Phone/ FAX	Annual Gross Receipts	Description of Portion of Work to be Performed	SCAG Use Only (Certified DBE?)
				☐ YES
				☐ NO
				If YES list DBE #
				Age of Firm (Yrs.)
Firm Name/ Address/ City, State, ZIP	Contact/ Phone/ FAX	Annual Gross Receipts	Description of Portion of Work to be Performed	SCAG Use Only (Certified DBE?)
				☐ YES
				☐ NO
				If YES list DBE #
				Age of Firm (Yrs.)

Form **W-9**
(Rev. January 2005)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the
requester. Do not
send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)	
Business name, if different from above	
Check appropriate box: ☐ Individual/ Sole proprietor ☐ Corporation ☐ Partnership ☐ Other ▶	☐ Exempt from backup withholding
Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code	
List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I Instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number								
or								
Employer identification number								

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

**Sign
Here**

Signature of
U.S. person ▶

Date ▶

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or

- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien.

Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.

4. The type and amount of income that qualifies for the exemption from tax.

5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments (after December 31, 2002). This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester, or
2. You do not certify your TIN when required (see the Part II instructions on page 4 for details), or
3. The IRS tells the requester that you furnished an incorrect TIN, or
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your social security card. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your social security card on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

Limited liability company (LLC). If you are a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Treasury regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line. Check the appropriate box for your filing status (sole proprietor, corporation, etc.), then check the box for "Other" and enter "LLC" in the space provided.

Other entities. Enter your business name as shown on required Federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

Note. You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

Exempt From Backup Withholding

If you are exempt, enter your name as described above and check the appropriate box for your status, then check the "Exempt from backup withholding" box in the line following the business name, sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

Exempt payees. Backup withholding is not required on any payments made to the following payees:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
2. The United States or any of its agencies or instrumentalities,
3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,

7. A foreign central bank of issue,
8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
9. A futures commission merchant registered with the Commodity Futures Trading Commission,
10. A real estate investment trust,
11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
12. A common trust fund operated by a bank under section 584(a),
13. A financial institution,
14. A middleman known in the investment community as a nominee or custodian, or
15. A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt recipients listed above, 1 through 15.

IF the payment is for ...	THEN the payment is exempt for ...
Interest and dividend payments	All exempt recipients except for 9
Broker transactions	Exempt recipients 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker
Barter exchange transactions and patronage dividends	Exempt recipients 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt recipients 1 through 7 ²

¹See Form 1099-MISC, Miscellaneous Income, and its instructions.

²However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees; and payments for services paid by a Federal executive agency.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-owner LLC that is disregarded as an entity separate from its owner (see *Limited liability company (LLC)* on page 2), enter your SSN (or EIN, if you have one). If the LLC is a corporation, partnership, etc., enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.socialsecurity.gov/online/ss-5.pdf. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses/ and clicking on Employer ID Numbers under Related Topics. You can get Forms W-7 and SS-4 from the IRS by visiting www.irs.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Writing "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt recipients, see *Exempt From Backup Withholding* on page 2.

Signature requirements. Complete the certification as indicated in 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
5. Sole proprietorship or single-owner LLC	The owner ³
For this type of account:	Give name and EIN of:
6. Sole proprietorship or single-owner LLC	The owner ³
7. A valid trust, estate, or pension trust	Legal entity ⁴
8. Corporate or LLC electing corporate status on Form 8832	The corporation
9. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10. Partnership or multi-member LLC	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one). If you are a sole proprietor, IRS encourages you to use your SSN.

⁴ List first and circle the name of the legal trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, and the District of Columbia to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.

ATTACHMENT TO FORM W-9**SECTION 1. GENERAL CONTACT INFORMATION**

Primary Contact _____
 Title _____
 Telephone No. _____ Fax No. _____
 E-mail Address _____
 Company Website Address _____

SECTION 2. REMITTANCE ADDRESS (IF DIFFERENT FROM FORM W-9)

Company Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Telephone No. _____ Fax No. _____

SECTION 3. BIDDERS' LIST INFORMATION (REQUIRED)

Is your firm a Disadvantaged Business Enterprise (DBE)? ☐ Yes ☐ No

As defined in Title 49 Part 26.11 of the Code of Federal Regulations, complete the required information below regardless of whether your firm is a DBE or non-DBE:

Age of Firm: _____

Annual Gross Receipts (select one):

☐ Less than \$1 Million ☐ \$5 Million – \$10 Million ☐ \$15 Million – \$17.4 Million
☐ \$1 Million – \$ 5 Million ☐ \$10 Million – \$15 Million ☐ \$17.4 Million +

A COPY OF THE FIRMS DBE CERTIFICATION MUST BE PROVIDED TO QUALIFY AS A DBE.

For vendors located within the Southern California region, certification must be from one of the agencies listed below.

If you believe you qualify as a DBE but are not certified, you may want to contact one of the following agencies to initiate the certification process:

DEPT. OF TRANSPORTATION (CALTRANS)
DBE Certification Unit
 Phone: (866) 810-6346 Fax: (916) 324-1862
<http://www.dot.ca.gov/>

ORANGE COUNTY TRANSPORTATION AUTHORITY (OCTA)
Small Business Programs
 Phone: (714) 560-5620 Fax: (714) 560-5792
www.octa.net

CITY OF LOS ANGELES
Office of Contract Compliance
 Phone: (213) 847-6480 Fax: (213) 847-5566
<http://www.lacity.org/bca/>

LOS ANGELES COUNTY
METROPOLITAN TRANSPORTATION AUTHORITY (METRO)
Small Business Diversity and Labor Compliance
 Phone: (213) 922-2600 Fax: (213) 922-7660
www.metro.net

CITY OF SAN DIEGO
Equal Opportunity Contracting
 Phone: (619) 533-4492 Fax: (619) 533-4474
www.sandiego.gov

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY
Small Business Development
 Phone: (619) 400-2569 Fax: (619) 400-2566
www.san.org

SECTION 4. COMMODITY CODE

Check all boxes of the commodity codes that apply to your company's particular areas of expertise.

General Goods & Services

✓	NIGP	DESCRIPTION	✓	NIGP	DESCRIPTION	✓	NIGP	DESCRIPTION
☐	60001	Painters	☐	60204	Telecommunications	☐	60720	Paper, Fine
☐	60007	Electrical	☐	60233	Appliances	☐	60730	Trophies & Awards
☐	60008	Plumbing	☐	60400	Audio Visual Equipment	☐	60863	Temporary Staffing
☐	60009	Small General Contractors	☐	60401	Audio Visual Supplies	☐	60875	Registrations (Training/Seminars)
☐	60016	Security Systems	☐	60402	Video Equipment	☐	61000	Office Supplies
☐	60017	H V A C Contractors	☐	60545	Moving & Storage	☐	90640	Graphic Design Services
☐	60030	Sound Systems & Electronics	☐	60637	Lease – Equipment	☐	90640.1	Image Setting
☐	60102	Postage & Courier Services	☐	60637.1	Lease – Building	☐	90640.2	Premium/Promotional Items
☐	60102.1	Postage Machines	☐	60638	Maintenance Agreement	☐	96600	Printing & Related Services
☐	60104	Memberships(Professional)	☐	60640	Copiers/Mimeo/Dupl.	☐	96115	Catering & Concessions
☐	60105	Subscriptions (Periodicals)	☐	60670	Furniture – Office	☐	96115.1	Coffee & Tea Services
☐	60200	Computer Hardware	☐	60700	Typewriters & Supplies	☐	96115.2	Bottled Water
☐	60201	Computer Software	☐	60701	Office Machines	☐	96618	Copying/Reproduction Services
☐	60202	Computer Supplies	☐	60702	Office Machine Supplies	☐	91528	Mailing Services & Electronic Info.
☐	60203	Computer Services	☐	60710	Stationary Supplies	☐		
☐	Other							

Professional/Consulting Services

✓	NIGP	DESCRIPTION	✓	NIGP	DESCRIPTION	✓	NIGP	DESCRIPTION
☐	60012	Architects, Engineer	☐	91840	Employee Benefits Consulting	☐	91892.1	Growth Visioning Planning
☐	90868	Project Management	☐	91843	Environmental Consulting	☐	91893	Security/Safety Consulting
☐	91804	Accounting/Auditing/Budgeting	☐	91846	Feasibility Studies	☐	91894	Traffic Consulting
☐	91804.1	Organizational, Financial, & Performance Audits/Project Management Services	☐	91849	Finance/Economic Consulting	☐	91895	Telecommunications Consulting
☐	91806	Administrative Consulting	☐	91858	Government Consulting	☐	91896	Transportation Planning Consulting
☐	91806.1	Administrative Services	☐	91858.1	Government Relations	☐	91896.1	Highway Corridor Analysis
☐	91812	Modeling-Analytical Studies & Surveys	☐	91858.2	Institutional Analysis	☐	91896.2	Rail Planning & Analysis
☐	91812.1	Survey and Data Collection	☐	91863	Housing Consulting	☐	91896.3	Transit & Non-motorized Planning & Analysis
☐	91812.2	Travel Demand Model Improvement	☐	91865	Human Relations Consulting	☐	91896.4	Transportation Management & Coordination
☐	91812.3	Geographic Information System	☐	91866	Human Resources Consulting	☐	91896.5	Truck Lane Analysis/Goods Movement
☐	91812.4	Software Support for Studies & Surveys	☐	91866.1	Executive Search	☐	91896.6	Transportation Financing
☐	91812.5	Regional Data Systems	☐	91866.2	Insurance Broker Services	☐	91896.7	Transportation & Economic Development
☐	91817	Aviation Consulting	☐	91874	Legal Consulting	☐	91896.8	Transportation Investment Analysis
☐	91826	Communications: Public Relations Consulting	☐	91874.1	Legislative Services	☐	91896.9	Transportation Modeling Support
☐	91828	Computer Hardware Consulting	☐	91874.2	Alternative Dispute Resolution	☐	91897	Gas, Water, Electric Consulting
☐	91828.1	Computer Service Center	☐	91875	Management Consulting	☐	91897.1	Air Quality Planning & Modeling
☐	91829	Computer Software Consulting	☐	91875.1	Organization & Staff Development	☐	91897.2	Water Supply Analysis
☐	91829.1	Information Systems	☐	91876	Marketing Consulting	☐	96175	Translation Services
☐	91829.2	Unix Systems Support	☐	91876.1	Social Economic Impact Analysis	☐	91892	Urban Planning Consulting
☐	91829.3	Macintosh Computer Technical Support	☐	91876.2	Social Justice/Equity Analysis			
☐	91837	Economy Analysis Consulting	☐	91879	Minority & Small Business Consulting			
☐	91838	Education & Training Consulting	☐	91883	Organizational Development Consulting			
☐	Other		☐	91885	Personnel/Employment Consulting			

SECTION 5. FORM SUBMISSION

Include this form in your proposal

