

## WHATCOM COUNTY CONTRACT INFORMATION SHEET

Whatcom County Contract No. \_\_\_\_\_

Originating Department: _____	
Division/Program: (i.e. Dept. Division and Program) _____	
Contract or Grant Administrator: _____	
Contractor's / Agency Name: _____	
Is this a New Contract?    If not, is this an Amendment or Renewal to an Existing Contract?    Yes    No Yes    No    If Amendment or Renewal, (per WCC 3.08.100 (a)) Original Contract #: _____	
Does contract require Council Approval?    Yes    No    If No, include WCC: _____ Already approved? Council Approved Date: _____ (Exclusions see: Whatcom County Codes 3.06.010, 3.08.090 and 3.08.100)	
Is this a grant agreement? Yes    No    If yes, grantor agency contract number(s): _____ CFDA#: _____	
Is this contract grant funded? Yes    No    If yes, Whatcom County grant contract number(s): _____	
Is this contract the result of a RFP or Bid process?    Contract Yes    No    If yes, RFP and Bid number(s): _____ Cost Center: _____	
Is this agreement excluded from E-Verify?    No    Yes    If no, include Attachment D Contractor Declaration form.	
If YES, indicate exclusion(s) below: <input type="checkbox"/> Professional services agreement for certified/licensed professional.    Goods and services provided due to an emergency <input type="checkbox"/> Contract work is for less than \$100,000. <input type="checkbox"/> Contract for Commercial off the shelf items (COTS). <input type="checkbox"/> Contract work is for less than 120 days. <input type="checkbox"/> Work related subcontract less than \$25,000. <input type="checkbox"/> Interlocal Agreement (between Governments). <input type="checkbox"/> Public Works - Local Agency/Federally Funded FHWA.	
Contract Amount:(sum of original contract amount and any prior amendments): \$ _____ This Amendment Amount: \$ _____ Total Amended Amount: \$ _____	Council approval required for; all property leases, contracts or bid awards <b>exceeding \$40,000</b> , and professional service contract amendments that have an increase greater than \$10,000 or 10% of contract amount, whichever is greater, <b>except when:</b> 1. Exercising an option contained in a contract previously approved by the council. 2. Contract is for design, construction, r-o-w acquisition, prof. services, or other capital costs approved by council in a capital budget appropriation ordinance. 3. Bid or award is for supplies. 4. Equipment is included in Exhibit "B" of the Budget Ordinance. 5. Contract is for manufacturer's technical support and hardware maintenance of electronic systems and/or technical support and software maintenance from the developer of proprietary software currently used by Whatcom County.
Summary of Scope: _____	
Term of Contract: _____	Expiration Date: _____

Contract Routing:	1. Prepared by: _____	Date: _____
	2. Attorney signoff: _____	Date: _____
	3. AS Finance reviewed: _____	Date: _____
	4. IT reviewed (if IT related): _____	Date: _____
	5. Contractor signed: _____	Date: _____
	6. Submitted to Exec.: _____	Date: _____
	7. Council approved (if necessary): _____	Date: _____
	8. Executive signed: _____	Date: _____
	9. Original to Council: _____	Date: _____



**Washington State  
Department of Transportation**

<b>Supplemental Agreement Number</b> _____		Organization and Address	
Original Agreement Number		Phone:	
Project Number	Execution Date	Completion Date	
Project Title	New Maximum Amount Payable		
Description of Work			

The Local Agency of \_\_\_\_\_ desires to supplement the agreement entered in to with \_\_\_\_\_ and executed on \_\_\_\_\_ and identified as Agreement No. \_\_\_\_\_

All provisions in the basic agreement remain in effect except as expressly modified by this supplement. The changes to the agreement are described as follows:

**I**

Section 1, SCOPE OF WORK, is hereby changed to read:

**II**

Section IV, TIME FOR BEGINNING AND COMPLETION, is amended to change the number of calendar days for completion of the work to read: \_\_\_\_\_

**III**

Section V, PAYMENT, shall be amended as follows:

as set forth in the attached Exhibits, and by this reference made a part of this supplement. If you concur with this supplement and agree to the changes as stated above, please sign in the Appropriate spaces below and return to this office for final action.

By: \_\_\_\_\_ By: \_\_\_\_\_

\_\_\_\_\_  
Consultant Signature

\_\_\_\_\_  
Approving Authority Signature

Approved as to form:  
approved electronically CQ/JEL 11-15-22

\_\_\_\_\_  
**Christopher Quinn**  
Senior Deputy Prosecuting Attorney – Civil Division

\_\_\_\_\_  
Date

## ***Exhibit A*** ***Scope of Work***

---

The Consultant, KPFF, Inc., shall provide mechanical analysis and design services related to the Whatcom County Ferry Program on an on-call basis. The County shall issue task orders for specific assignments under this agreement. The task orders shall define the scope of the task, the nature of the products and deliverables, and the allowable expenses to be billed for that task in accordance with Exhibit D. Only those expenses specifically approved by the County in a task order shall be compensable under this agreement.

The County makes no express or implied guarantees as the minimum amount of expenditures that shall be requested and approved under this agreement.

**KPFF Consulting Engineers**

Consultant Fee Summary

ANTE (11-15-2022)

**Whatcom County On-Call Mechanical Engineering Services**

<b>Overhead (OH) Cost</b>	144.97%
<b>Fixed Fee (FF)</b>	30.00%

<b>Classification</b>	<b>Direct Hourly Rate</b>	<b>OH</b>	<b>FF</b>	<b>Hourly ANTE Rate</b>
Principal	\$ 79.04	114.58	23.71	\$ 217.34
Project Manager	\$ 76.66	111.14	23.00	\$ 210.80
Technical Specialist	\$ 78.18	113.34	23.45	\$ 214.97
Senior Engineer II	\$ 74.54	108.07	22.36	\$ 204.97
Senior Engineer I	\$ 70.67	102.45	21.20	\$ 194.32
Project Engineer II	\$ 52.12	75.56	15.64	\$ 143.31
Project Engineer I	\$ 44.57	64.61	13.37	\$ 122.55
Design Engineer II	\$ 49.13	71.22	14.74	\$ 135.09
Design Engineer I	\$ 41.05	59.51	12.32	\$ 112.88
Intern	\$ 26.50	38.42	7.95	\$ 72.87
Senior Project Coordinator	\$ 45.25	65.60	13.58	\$ 124.42
Project Coordinator	\$ 40.08	58.10	12.02	\$ 110.21
CAD Drafter II	\$ 61.16	88.66	18.35	\$ 168.17
CAD Drafter I	\$ 49.62	71.93	14.89	\$ 136.44
Administration	\$ 31.50	45.67	9.45	\$ 86.62
Title 12	\$ -	0.00	0.00	\$ -
Title 13	\$ -	0.00	0.00	\$ -
Title 14	\$ -	0.00	0.00	\$ -
Title 15	\$ -	0.00	0.00	\$ -
Title 16	\$ -	0.00	0.00	\$ -
Title 17	\$ -	0.00	0.00	\$ -
Title 18	\$ -	0.00	0.00	\$ -
Title 19	\$ -	0.00	0.00	\$ -
Title 20	\$ -	0.00	0.00	\$ -



**Washington State  
Department of Transportation**

**Development Division**  
Contract Services Office  
PO Box 47408  
Olympia, WA 98504-7408  
7345 Linderson Way SW  
Tumwater, WA 98501-6504

TTY: 1-800-833-6388  
[www.wsdot.wa.gov](http://www.wsdot.wa.gov)

October 27, 2022

KPFF, Inc.  
1601 Fifth Avenue, Ste 1600  
Seattle, WA 98101-3665

Subject: Acceptance FYE 2022 ICR – Cognizant Review

Dear Marci Monroe-Jones:

We have accepted your firms FYE 2022 Indirect Cost Rate (ICR) based on the “Cognizant Review” from the Washington State Department of Transportation Audit Office as follows:

- Home Rate: 144.97%
- Home Facilities Capital Cost of Money (FCCM): 0.19%
  
- Field Rate: 109.91%
- Field Facilities Capital Cost of Money (FCCM): 0.04%

This rate will be applicable for WSDOT Agreements and Local Agency Contracts in Washington only. This rate may be subject to additional review if considered necessary by WSDOT. Your ICR must be updated on an annual basis.

Costs billed to agreements/contracts will still be subject to audit of actual costs, based on the terms and conditions of the respective agreement/contract.

Any other entity contracting with your firm is responsible for determining the acceptability of the ICR.

If you have any questions, feel free to contact our office at **(360) 705-7019** or via email [consultanrates@wsdot.wa.gov](mailto:consultanrates@wsdot.wa.gov).

Regards;

*Schatzie Harvey*

Schatzie Harvey (Oct 27, 2022 11:26 PDT)  
SCHATZIE HARVEY, CPA

Contract Services Manager

SH:ah