



STATE OF DELAWARE
DEPARTMENT OF TRANSPORTATION
800 BAY ROAD
P.O. BOX 778
DOVER, DELAWARE 19903

SHAILEN P. BHATT
SECRETARY

September 26, 2011

Mr. Michael P. Woods
Cardno TBE
1100 Athens Avenue, Suite A
Richmond, VA 23227

Dear Mr. Woods:

Congratulations! On behalf of the Delaware Department of Transportation, I would like to thank you for your firm's participation as a candidate in the competition for providing consulting services for **Agreements # 1592-1594 – Subsurface Utility Location and Design Services.**

Your firm will be given the opportunity to negotiate a contract with us for the above referenced Agreement. To begin the process, the following items are needed:

Certificate of General Liability Insurance evidencing regular Liability, Property Damage, Worker's Compensation, and Automobile insurance coverage from an insurance company authorized to do business in the State of Delaware. The minimum amounts of coverage for property damage and personal injury shall be \$1,000,000 combined single limit. The Department is to be named as a certificate holder (not an additional insured).

Certificate of Errors and Omissions Insurance from an insurance company authorized to do business in the State of Delaware in the amount of \$1,000,000. The Department is to be named as a certificate holder.

A current certified payroll for the individuals that may be assigned to work on this Agreement. This must be certified by an officer of your company, and returned both electronically and by hard copy. The hard copy must contain an original signature; the electronic copy should show the signature as well.

Copy of your firm's Delaware Business License.

Submit a list of any potential Direct Costs- Please forward a list of any non-payroll direct expenses you anticipate may be invoiced during this Agreement.

Consultant Billing Rate Initial Request- Please complete this form for any employees that may work on this agreement. This must be returned electronically (in Excel format) as a spreadsheet.

Confirmation of the attached cost limitations document.

Copy of your firm's Certificate of Authorization.

Submit Subconsultant Agreements- Please forward original, signed agreements you have with subconsultants listed as participants on this agreement in your submitted Expression of Interest. We suggest structuring the agreements to allow for multiple tasks

Submit a Scope of Services- Please forward a detailed listing of any services that you may provide as part of this Agreement. This document will become attached to the Agreement as 'Appendix B'.

Submit a Fee Schedule for the tasks that may be assigned as part of this Agreement. This must be returned both electronically and by hard copy. The hard copy must contain an original signature. These services will be listed as 'Appendix C' of the Agreement.

Please send these items to the attention of Susan Robinson, Contract Administration, as directed; via email at susanh.robinson@state.de.us, or mail to the address listed above. We look forward to successfully completing the negotiations phase in the very near future.

The staff at Delaware DOT is looking forward to working with your firm on this contract.

Sincerely,

~Signature on File~

Wendy B. Henry
Consultant Control Coordinator
DeIDOT Contract Administration
(302) 760-2531



STATE OF DELAWARE
DEPARTMENT OF TRANSPORTATION
800 BAY ROAD
P.O. BOX 778
DOVER, DELAWARE 19903

SHAILEN P. BHATT
SECRETARY

September 26, 2011

Mr. Mark A. Warden
So-Deep, Inc.
8397 Euclid Avenue
Manassas Park, VA 20111

Dear Mr. Warden:

Congratulations! On behalf of the Delaware Department of Transportation, I would like to thank you for your firm's participation as a candidate in the competition for providing consulting services for **Agreements # 1592-1594 – Subsurface Utility Location and Design Services.**

Your firm will be given the opportunity to negotiate a contract with us for the above referenced Agreement. To begin the process, the following items are needed:

Certificate of General Liability Insurance evidencing regular Liability, Property Damage, Worker's Compensation, and Automobile insurance coverage from an insurance company authorized to do business in the State of Delaware. The minimum amounts of coverage for property damage and personal injury shall be \$1,000,000 combined single limit. The Department is to be named as a certificate holder (not an additional insured).

Certificate of Errors and Omissions Insurance from an insurance company authorized to do business in the State of Delaware in the amount of \$1,000,000. The Department is to be named as a certificate holder.

A current certified payroll for the individuals that may be assigned to work on this Agreement. This must be certified by an officer of your company, and returned both electronically and by hard copy. The hard copy must contain an original signature; the electronic copy should show the signature as well.

Copy of your firm's Delaware Business License.

Submit a list of any potential Direct Costs- Please forward a list of any non-payroll direct expenses you anticipate may be invoiced during this Agreement.

Consultant Billing Rate Initial Request- Please complete this form for any employees that may work on this agreement. This must be returned electronically (in Excel format) as a spreadsheet.

Confirmation of the attached cost limitations document.

Copy of your firm's Certificate of Authorization.

Submit Subconsultant Agreements- Please forward original, signed agreements you have with subconsultants listed as participants on this agreement in your submitted Expression of Interest. We suggest structuring the agreements to allow for multiple tasks

Submit a Scope of Services- Please forward a detailed listing of any services that you may provide as part of this Agreement. This document will become attached to the Agreement as 'Appendix B'.

Submit a Fee Schedule for the tasks that may be assigned as part of this Agreement. This must be returned both electronically and by hard copy. The hard copy must contain an original signature. These services will be listed as 'Appendix C' of the Agreement.

Please send these items to the attention of Susan Robinson, Contract Administration, as directed; via email at susanh.robinson@state.de.us, or mail to the address listed above. We look forward to successfully completing the negotiations phase in the very near future.

The staff at Delaware DOT is looking forward to working with your firm on this contract.

Sincerely,

~Signature on File~

Wendy B. Henry
Consultant Control Coordinator
DelDOT Contract Administration
(302) 760-2531



STATE OF DELAWARE
DEPARTMENT OF TRANSPORTATION
800 BAY ROAD
P.O. BOX 778
DOVER, DELAWARE 19903

SHAILEN P. BHATT
SECRETARY

September 26, 2011

Mr. William S. Richardson
Underground Services, Inc., dba SoftDig
24 Hagerty Boulevard, Suite 11
West Chester, PA 19382

Dear Mr. Richardson:

Congratulations! On behalf of the Delaware Department of Transportation, I would like to thank you for your firm's participation as a candidate in the competition for providing consulting services for **Agreements # 1592-1594 – Subsurface Utility Location and Design Services.**

Your firm will be given the opportunity to negotiate a contract with us for the above referenced Agreement. To begin the process, the following items are needed:

Certificate of General Liability Insurance evidencing regular Liability, Property Damage, Worker's Compensation, and Automobile insurance coverage from an insurance company authorized to do business in the State of Delaware. The minimum amounts of coverage for property damage and personal injury shall be \$1,000,000 combined single limit. The Department is to be named as a certificate holder (not an additional insured).

Certificate of Errors and Omissions Insurance from an insurance company authorized to do business in the State of Delaware in the amount of \$1,000,000. The Department is to be named as a certificate holder.

A current certified payroll for the individuals that may be assigned to work on this Agreement. This must be certified by an officer of your company, and returned both electronically and by hard copy. The hard copy must contain an original signature; the electronic copy should show the signature as well.

Copy of your firm's Delaware Business License.

Submit a list of any potential Direct Costs- Please forward a list of any non-payroll direct expenses you anticipate may be invoiced during this Agreement.

Consultant Billing Rate Initial Request- Please complete this form for any employees that may work on this agreement. This must be returned electronically (in Excel format) as a spreadsheet.

Confirmation of the attached cost limitations document.

Copy of your firm's Certificate of Authorization.

Submit Subconsultant Agreements- Please forward original, signed agreements you have with subconsultants listed as participants on this agreement in your submitted Expression of Interest. We suggest structuring the agreements to allow for multiple tasks

Submit a Scope of Services- Please forward a detailed listing of any services that you may provide as part of this Agreement. This document will become attached to the Agreement as 'Appendix B'.

Submit a Fee Schedule for the tasks that may be assigned as part of this Agreement. This must be returned both electronically and by hard copy. The hard copy must contain an original signature. These services will be listed as 'Appendix C' of the Agreement.

Please send these items to the attention of Susan Robinson, Contract Administration, as directed; via email at susanh.robinson@state.de.us, or mail to the address listed above. We look forward to successfully completing the negotiations phase in the very near future.

The staff at Delaware DOT is looking forward to working with your firm on this contract.

Sincerely,

~Signature on File~

Wendy B. Henry
Consultant Control Coordinator
DeIDOT Contract Administration
(302) 760-2531