



ATTACHMENT A

State Corporation Commission Form

Failure to complete and return this attachment
may result in your bid being REJECTED or deemed NON-RESPONSIVE.

Solicitation #: _____

Virginia State Corporation Commission (SCC) registration information.

The bidder: _____

☐ is a corporation or other business entity with the following SCC identification number: _____

-OR-

☐ is not a corporation, limited liability company, limited partnership, registered limited liability partnership, or business trust **-OR-**

☐ is an out-of-state business entity that does not regularly and continuously maintain as part of its ordinary and customary business any employees, agents, offices, facilities, or inventories in Virginia (not counting any employees or agents in Virginia who merely solicit orders that require acceptance outside Virginia before they become contracts, and not counting any incidental presence of the bidder in Virginia that is needed in order to assemble, maintain, and repair goods in accordance with the contracts by which such goods were sold and shipped into Virginia from bidder's out-of-state location) **-OR-**

☐ is an out-of-state business entity that is including with this bid an opinion of legal counsel which accurately and completely discloses the undersigned bidder's current contacts with Virginia and describes why those contacts do not constitute the transaction of business in Virginia within the meaning of § 13.1-757 or other similar provisions in Titles 13.1 or 50 of the Code of Virginia.

****NOTE**** >> Check the following box if you have not completed any of the foregoing options but currently have pending before the SCC an application for authority to transact business in the Commonwealth of Virginia and wish to be considered for a waiver to allow you to submit the SCC identification number after the due date for bids (the Commonwealth reserves the right to determine in its sole discretion whether to allow such waiver): ☐

ATTACHMENT B**Small Business Subcontracting Plan****IFB #** _____

It is the goal of the Commonwealth that over 42% of its purchases be made from small businesses. All potential bidders are required to include this document with their bid response in order to be considered responsive.

Small Business: "Small business (including micro)" means a business which holds a certification as such by the Virginia Department of Small Business and Supplier Diversity (DSBSD) on the due date for bids. This shall also include DSBSD-certified women- owned and minority-owned businesses and businesses with DSBSD service disabled veteran owned status when they also hold a DSBSD certification as a small business on the bid due date. Currently, DSBSD offers small business certification and micro business designation to firms that qualify.

Certification applications are available through DSBSD online at www.SBSD.virginia.gov (Customer Service).

Bidder Name: _____**Preparer Name:** _____ **Date:** _____**Who will be doing the work:** ☐ **I plan to use subcontractors** ☐ **I plan to complete all work****Instructions**

- A. If you are certified by the DSBSD as a micro/small business, complete only Section A of this form.
- B. If you are **not** a DSBSD-certified small business, complete Section B of this form. For the bid to be considered and the bidder to be declared responsive, the bidder shall identify the portions of the contract that will be subcontracted to DSBSD-certified small business for the initial contract period in relation to the bidder's total price for the initial contract period in Section B.

Section A

If your firm is certified by the DSBSD provide your certification number and the date of certification.

Certification number: _____ Certification Date: _____

Section B

If the "I plan to use subcontractors box is checked," populate the requested information below, per subcontractor to show your firm's plans for utilization of DSBSD-certified small businesses in the performance of this contract for the initial contract period in relation to the bidder's total price for the initial contract period. Certified small businesses include but are not limited to DSBSD-certified women-owned and minority-owned businesses and businesses with DSBSD service disabled veteran-owned status that have also received the DSBSD small business certification. Include plans to utilize small businesses as part of joint ventures, partnerships, subcontractors, suppliers, etc. It is important to note that these proposed participation will be incorporated into the subsequent contract and will be a requirement of the contract. Failure to obtain the proposed participation percentages may result in breach of the contract.

B. Plans for Utilization of DSBSD-Certified Small Businesses for this Procurement**Subcontract #1**

Company Name: _____ SBSD Cert #: _____
Contact Name: _____ SBSD Certification: _____
Contact Phone: _____ Contact Email: _____
Value % (Initial Term): _____ Contact Address: _____
Description of Work: _____

Subcontract #2

Company Name: _____ SBSD Cert #: _____
Contact Name: _____ SBSD Certification: _____
Contact Phone: _____ Contact Email: _____
Value % (Initial Term): _____ Contact Address: _____
Description of Work: _____

Subcontract #3

Company Name: _____ SBSD Cert #: _____
Contact Name: _____ SBSD Certification: _____
Contact Phone: _____ Contact Email: _____
Value % (Initial Term): _____ Contact Address: _____
Description of Work: _____

Subcontract #4

Company Name: _____ SBSD Cert #: _____
Contact Name: _____ SBSD Certification: _____
Contact Phone: _____ Contact Email: _____
Value % (Initial Term): _____ Contact Address: _____
Description of Work: _____

Subcontract #5

Company Name: _____ SBSD Cert #: _____
Contact Name: _____ SBSD Certification: _____
Contact Phone: _____ Contact Email: _____
Value % (Initial Term): _____ Contact Address: _____
Description of Work: _____



Administrative Services Division/Procurement

ATTACHMENT C

IFB #: _____

VENDOR QUALIFICATION / EQUIPMENT
INVENTORY CERTIFICATION

All bidders responding to this IFB are required to complete equipment information for each piece of equipment as specified in #4.

Failure to fully complete this attachment may render the bid non-responsive.

VDOT is unable to review an inventory list or other documentation other than those specified below in #4 in order to confirm that the offered equipment meets the required specifications.

1. Name of Business: _____
2. Name of Owner or Chief Executive Officer: _____ Telephone Number: _____
3. How many years has the firm been in the business of performing the services called for in this IFB? _____
4. All required equipment is listed in the table below and will require verification prior to issuance of a Notice of Intent to Award.

- **OWNED Equipment:**

- In the first column, place an "O" beside each piece of owned equipment.
- Complete the **YEAR/MAKE/MODEL/CAPACITY/ID#/VIN**; place N/A next to equipment for which a column does not apply.
- **Verification will be in-person:** Prior to the Notice of Intent to Award, VDOT will evaluate the owned equipment as specified in the IFB.

- **RENTED/LEASED Equipment:**

- In the first column place an "R" beside each piece of equipment that will be rented/leased
- **Verification will be by rental agreement:** Prior to the Notice of Intent to Award, the bidder shall provide a signed letter from the applicable rental entity on company letterhead stating the type of equipment with detailed equipment description(s) and quantity(ies) as well as the availability for the duration of the contract period, for any equipment intended for use to perform services of this IFB. This letter shall be provided to the Contract Officer within 2 business days of request, or the bidder will be deemed non-responsive.

- **SUBCONTRACTED Equipment:**

- In the first column place an "S" beside each piece of equipment that will be subcontracted.
- **Verification will be by Subcontractor Approval Request Form Attachment D:** Prior to the Notice of Intent to Award, the bidder shall complete a separate Subcontractor Approval Request Form for each company they intend to subcontract equipment from, providing detailed equipment description(s) and quantity(ies) under "Type of Equipment Proposed Subcontractor Will Provide." This form shall be provided to the Contract Officer within 2 business days of request or the bidder will be deemed non-responsive.

- **FUTURE PURCHASE Equipment:**

- In the first column place a "P" beside each piece of equipment that is to be purchased.
- **Verification will be by proof of purchase:** Prior to Notice of Intent to Award, the bidder shall provide proof of purchase with detailed equipment description(s) and quantity(ies), as well as a confirmed delivery date for any equipment intended for use to perform services of this IFB. This proof of purchase shall be provided to the Contract Officer within 2 business days of request or the bidder will be deemed non-responsive. All purchased equipment must be available by date of award.

“O” “R” “S” “P”	DESCRIPTION	YEAR	MAKE	MODEL	CAPACITY	ID #/VIN
	Lot 1 – Zone C					
	Line 1 - Pick-up truck, incident response/asset mitigation (1 of 2)					
	Line 1 - Pick-up truck, incident response/asset mitigation (1 of 2)					
	Line 2 – Queue Management Vehicle (1 of 2)					
	Line 2 – Queue Management Vehicle (1 of 2)					
	Line 3 – Quick Response Truck					
	Lot 2 – Zone D					
	Line 1 - Pick-up truck, incident response/asset mitigation (1 of 2)					
	Line 1 - Pick-up truck, incident response/asset mitigation (1 of 2)					
	Line 2 – Queue Management Vehicle (1 of 2)					
	Line 2 – Queue Management Vehicle (1 of 2)					
	Line 3 – Quick Response Truck					
	Lot 3 – Zone E					
	Line 1 - Pick-up truck, incident response/asset mitigation (1 of 2)					
	Line 1 - Pick-up truck, incident response/asset mitigation (1 of 2)					
	Line 2 – Queue Management Vehicle (1 of 2)					
	Line 2 – Queue Management Vehicle (1 of 2)					
	Line 3 – Quick Response Truck					

5. Is any of the equipment listed above currently committed on any other contract (VDOT / non VDOT) contracts? Yes
No

If yes, identify which equipment (year, make, model, ID/VIN), where the equipment is committed, contract number(s), name the party to the contract and location.



ATTACHMENT D

Solicitation #: _____

SUBCONTRACTOR APPROVAL REQUEST

No portion of the work (including equipment) shall be subcontracted to another firm or individual **without prior written consent** of Virginia Department of Transportation (herein referred to as VDOT). In the event that the contractor desires to subcontract some part of the work specified herein, the contractor shall furnish VDOT with the names, qualifications, and experience of their proposed subcontractors for agency approval. The primary contractor shall, however, remain fully liable and responsible for the work performed by its subcontractor(s) and shall assure compliance with all requirements of the contract.

List proposed subcontractor(s), including name, address, contact person, and type of work to be performed under this contract below.

**FIRM INDIVIDUAL'S
NAME & ADDRESS**

**CONTACT PERSON AND
PHONE NUMBER**

**TYPE OF WORK TO BE
PERFORMED**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

TYPE OF EQUIPMENT PROPOSED SUBCONTRACTOR WILL PROVIDE

QUALIFICATIONS / EXPERIENCE LEVEL OF PROPOSED SUBCONTRACTOR

Please indicate which above proposed subcontractors are certified (with DSBSD) as Small, Women Owned or Minority Businesses.

Certification Number(s): _____

FOR VDOT USE ONLY:

The proposed subcontractor(s) listed above is/are approved and accepted under the terms and conditions of the contract requirements herein.

Signature of Authorized VDOT Representative

Date

Telephone Number



ATTACHMENT E

NORMAL AND EMERGENCY CONTACTS

Solicitation # _____

Send Contracts To: Bidder's Name/Title		Primary Phone Number	
Bidder's Mailing Address		E-mail Address	

Contact Person's Name	
Cellular Telephone Number	
Telephone Number - Normal Work Hours	
Telephone Number - After Work Hours	
Fax Number	
E-mail Address	

Contact Person's Name	
Cellular Telephone Number	
Telephone Number - Normal Work Hours	
Telephone Number - After Work Hours	
Fax Number	
E-mail Address	

Contact Person's Name	
Cellular Telephone Number	
Telephone Number - Normal Work Hours	
Telephone Number - After Work Hours	
Fax Number	
E-mail Address	



ATTACHMENT F

Solicitation # _____

REFERENCES

Bidders should provide a list of at least 3 references where similar goods and/or services have been provided. Each reference shall include the name of the organization, the complete mailing address, the name of the contact person, the email, and the telephone/fax number.

FIRM'S NAME AND ADDRESS	CONTACT PERSON	EMAIL ADDRESS	TELEPHONE / FAX #

**ATTACHMENT G
PREVAILING WAGE RATE DETERMINATION**



COMMONWEALTH of VIRGINIA
DEPARTMENT OF LABOR AND INDUSTRY

James S. Frederick
COMMISSIONER

Brookfield Place
6606 West Broad Street, Suite 500
Richmond, Virginia 23230
PHONE (804) 371-2327
FAX (804) 371-6524

Virginia Department of Labor and Industry Wage Determination Decision

Project Name	Interstate Traffic Control & Incident Response Service
State Project Code	161015
DOLI Project Number	VDOT-26-0048 UPDATE
County or Independent City	Multiple Localities
Publication Date	6/8/2026
Construction Type	Highway

BLAND COUNTY

Wage Determinations	Wage	Fringe
Carpenter (Includes Form Work)	\$16.52	
Cement Mason/Concrete Finisher	\$19.35	
Ironworker, Reinforcing	\$20.80	
Laborer: Asphalt, Includes Raker, Shoveler, Spreader and Distributor	\$15.90	
Laborer: Common or General	\$14.45	
Laborer: Pipelayer	\$16.75	
Operator: Asphalt Spreader and Distributor	\$15.95	
Operator: Backhoe/Excavator/Trackhoe	\$20.53	
Operator: Broom/Sweeper	\$12.77	\$0.23
Operator: Bulldozer	\$19.36	
Operator: Crane	\$26.68	
Operator: Grader/Blade, Includes Finishing	\$26.13	
Operator: Loader	\$19.36	

Wage Determinations	Wage	Fringe
Operator: Mechanic	\$18.57	
Operator: Milling Machine	\$21.13	
Operator: Pavement Planer	\$17.28	
Operator: Pavement Planer Groundsmen	\$14.81	\$0.29
Operator: Paver (Asphalt, Aggregate, and Concrete)	\$16.80	
Operator: Roller	\$15.85	
Operator: Roller (Finishing)	\$15.17	
Operator: Tractor (Utility)	\$12.77	\$0.23
Pavement Marking Operator	\$19.44	
Pavement Marking Truck Driver	\$19.00	
Traffic Control: Flagger	\$12.77	
Truck Driver: Heavy 7CY & Under	\$16.69	
Truck Driver: Heavy Over 7CY	\$16.69	
Truck Driver: Single & Multi Axle	\$16.17	

SMYTH COUNTY

Wage Determinations	Wage	Fringe
Carpenter (Includes Form Work)	\$16.52	
Cement Mason/Concrete Finisher	\$19.35	
Ironworker, Reinforcing	\$20.80	
Laborer: Asphalt, Includes Raker, Shoveler, Spreader and Distributor	\$15.90	
Laborer: Common or General	\$13.79	
Laborer: Pipelayer	\$16.75	
Operator: Asphalt Spreader and Distributor	\$15.95	
Operator: Backhoe/Excavator/Trackhoe	\$20.53	
Operator: Broom/Sweeper	\$12.77	\$0.23
Operator: Bulldozer	\$19.36	
Operator: Crane	\$26.68	
Operator: Grader/Blade, Includes Finishing	\$26.13	
Operator: Loader	\$19.36	
Operator: Mechanic	\$18.57	
Operator: Milling Machine	\$21.13	
Operator: Pavement Planer	\$17.28	
Operator: Pavement Planer Groundsmen	\$14.81	\$0.29
Operator: Paver (Asphalt, Aggregate, and Concrete)	\$16.80	
Operator: Roller	\$15.85	
Operator: Roller (Finishing)	\$15.17	
Operator: Tractor (Utility)	\$12.77	\$0.23
Pavement Marking Operator	\$19.80	
Pavement Marking Truck Driver	\$19.00	

Wage Determinations	Wage	Fringe
Traffic Control: Flagger	\$12.77	
Truck Driver: 1/Single Axle Truck	\$15.80	
Truck Driver: Heavy 7CY & Under	\$16.69	
Truck Driver: Heavy Over 7CY	\$16.69	
Truck Driver: Multi Axle	\$16.41	

WYTHE COUNTY

Wage Determinations	Wage	Fringe
Carpenter, Includes Form Work	\$16.52	
Cement Mason/Concrete Finisher	\$19.35	
Ironworker, Reinforcing	\$20.80	
Laborer: Asphalt, Includes Raker, Shoveler, Spreader and Distributor	\$15.90	
Laborer: Common or General	\$14.46	
Laborer: Pipelayer	\$16.75	
Operator: Asphalt Spreader and Distributor	\$15.95	
Operator: Backhoe/Excavator/Trackhoe	\$20.53	
Operator: Broom/Sweeper	\$12.77	\$0.23
Operator: Bulldozer	\$19.36	
Operator: Crane	\$26.68	
Operator: Grader/Blade, Includes Finishing	\$26.13	
Operator: Loader	\$19.36	
Operator: Mechanic	\$18.57	
Operator: Milling Machine	\$21.13	
Operator: Pavement Planer	\$17.28	
Operator: Pavement Planer Groundsmen	\$14.81	\$0.29
Operator: Paver (Asphalt, Aggregate, and Concrete)	\$16.80	
Operator: Roller	\$15.85	
Operator: Roller (Finishing)	\$15.17	
Operator: Tractor (Utility)	\$12.77	\$0.23
Pavement Marking Operator	\$19.80	
Pavement Marking Truck Driver	\$19.00	
Traffic Control: Flagger	\$12.77	
Truck Driver: 1/Single Axle Truck	\$15.80	
Truck Driver: Heavy 7CY & Under	\$16.69	
Truck Driver: Heavy Over 7CY	\$16.69	
Truck Driver: Multi Axle	\$15.89	

Additional Notes

All rates are determined by DOLI and any appeals of specific classifications may be made through the Wage Determination Appeal form available at <https://www.doli.virginia.gov/wp-content/uploads/2022/05/Appeal-for-Clarification-of-Wage-Determination.pdf>

Any additional classifications may be requested through the Additional Wage Classification form available at <https://www.doli.virginia.gov/wp-content/uploads/2022/10/Request-for-Additional-Wage-Classification-10-2022.pdf>

Understand your duties as a contractor under Virginia law by referencing our Contractor Responsibilities information sheet available at <https://doli.virginia.gov/prevaling-wage-law/#CR>

Your employees have specific rights, which can be found on our List of Employee Rights information sheet available at <https://doli.virginia.gov/prevaling-wage-law/#ERB>

Any further questions should be directed to PrevailingWage@doli.virginia.gov