



**Washington State  
Department of Transportation**  
**Paula J. Hammond, P.E.**  
Secretary of Transportation

**Southwest Region**  
11018 Northeast 51st Circle  
P.O. Box 1709  
Vancouver, WA 98668-1709  
360-905-2000 / Fax 360-905-2222  
TTY: 1-800-833-6388  
[www.wsdot.wa.gov](http://www.wsdot.wa.gov)

March 31, 2011

American Construction Co., Inc.  
1501 Taylor Way  
Tacoma, WA 98421-4100

Contract 8078, I-5, Columbia River Bridge  
Temporary Pile Test Program  
WA 0.3 to OR MP 308.0  
State Project  
Serial Letter No. 26

RE: Physical Completion

Gentlemen:

In accordance with section 1-08.5 of the Standard Specifications, this project is considered physically completed as of March 30, 2011.

The contract required the work to be physically completed within 15 working days, with no working days added by change order for a total of 15 authorized working days. There were 9.5 working days charged to substantial completion and a total of 15 working days charged to the contract. Even though physical completion was attained after the working days expired, direct engineering charges are minimal and will not be charged.

This notification does not constitute completion or acceptance of the project by the Secretary of Transportation.


Enclosed is a Contractors Construction Process Evaluation form. Please complete the form in accordance with the instructions provided, and mail the original directly to:

Chief Construction Engineer  
Construction Office  
Department of Transportation  
P.O. Box 47354  
Olympia, WA 98504-7354

American Construction Co., Inc.  
March 31, 2011  
Page 2

If there are any questions, please contact this office at (360) 816-2208.

Sincerely,

A handwritten signature in black ink, appearing to read "Frank Green". The signature is fluid and cursive, with a large initial "F" and "G".

Frank Green, P.E.  
CRC Structures Engineering Manager

KAD:rj  
Enclosure

cc: HQ Program Management, 47323  
HQ Accounting, 47420  
Regional Transaid, S-15  
Planning & Programming Service Center Roadway Data Office, 47380  
State Construction Office, 47354  
CRC Document Control  
M. Degenhart  
N. Peppers

Contract Number	Contract Title	
Type of Work		Contract Amount
Contractor	Project Engineer	Region

<b>A. Plans and Specifications</b>	Poor (1)	Marginal (2)	Satisfactory (3)	Good (4)	Excellent (5)
1. Accuracy.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Completeness.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Clarity.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Organization.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Match with Field Conditions.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Comments and Examples					
7. Suggestions for Improving the Plans and Specifications					
8. Suggestions for Improving Methods of Measurement and Payment					

<b>B. Management and Administration</b>	Poor (1)	Marginal (2)	Satisfactory (3)	Good (4)	Excellent (5)
1. Coordination and Cooperation.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Anticipation of Problems.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Timely Decision-Making.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Availability of Project Engineer.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Willingness to Resolve Difficult Issues.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Accuracy of Progress Payments.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Timeliness of Progress Payments.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Comments and Examples					
9. Suggestions for Improvement					

<b>C. Inspection and Surveying</b>	Poor (1)	Marginal (2)	Satisfactory (3)	Good (4)	Excellent (5)
1. Effectiveness of On-Site Supervision.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Knowledge and Training of Inspectors.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Objectivity and Fairness of Inspectors.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Timeliness of Inspection and Surveying.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Accuracy and Sufficiency of Surveying.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Timeliness of Sampling and Test Results.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Accuracy of Sampling and Testing.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Attitude Toward Public Safety and Traffic Control.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Comments					



**D. Approvals** (Please check whether approvals of the following were a problem on this project)

- 1. Change Orders.....  Yes  No
- 2. Shop Drawings.....  Yes  No
- 3. Falsework, Formwork, and Shoring Drawings.....  Yes  No
- 4. Material Sources.....  Yes  No
- 5. Preliminary Material Samples.....  Yes  No
- 6. Mix Designs.....  Yes  No
- 7. Progress Scheduling.....  Yes  No
- 8. Traffic Control Plans.....  Yes  No

9. Description of Problems Indicated Above

10. Suggestions for Modifying Approval Processes

**E. Constructibility** (Please check whether approvals of the following were a problem on this project)

- 1. Time Restrictions.....  Yes  No
- 2. Weather Limitations.....  Yes  No
- 3. Traffic Restrictions.....  Yes  No
- 4. Size or Length of Project.....  Yes  No
- 5. Order or Staging of Work.....  Yes  No
- 6. Availability and Accessibility of Staging Areas.....  Yes  No
- 7. Utility and Other Third Party Involvement.....  Yes  No

8. Description of Problems Indicated Above

9. Modifications that the State could have made prior to contract that would have resulted in significant cost savings

Contractor's Representative

Date

Distribution: Original-State Construction Engineer, Copy-Region Construction Engineer

## Instructions for Use

1. The Project Engineer will send this evaluation form to the contractor with the project completion letter. A statement in the completion letter will ask that the Contractor complete the form and return the original and canary copy to the Chief Construction Engineer.
2. The Contractor shall complete the ratings by placing an X in the applicable box (Excellent, Good, Satisfactory, Marginal, Poor) for the various elements.
3. The Contractor shall mail or e-mail the original of the completed form to:

CHIEF CONSTRUCTION ENGINEER  
CONSTRUCTION OFFICE  
DEPARTMENT OF TRANSPORTATION  
PO BOX 47354  
OLYMPIA WA 98504-7354

[DOTCONSTRUCTION@WSDOT.WA.GOV](mailto:DOTCONSTRUCTION@WSDOT.WA.GOV)