



# Request for Proposal

## Vehicle/Vessel Licensing Subagent Thurston County, Washington

Issue Date: August 8, 2022

Due Date: September 12, 2022

Submit complete application packet to:  
Thurston County Auditor's Office  
Building 1, MS: B1-1AU  
Attn: Jared Krause – Licensing and Recording Manager  
2000 Lakeridge Drive SW  
Olympia, WA 98502  
[SubagentRFP@co.thurston.wa.us](mailto:SubagentRFP@co.thurston.wa.us)

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## Request for Written Business Proposal

TO: Vehicle/Vessel Licensing Subagent Applicants

FROM: Jared Krause, Licensing and Recording Manager  
Thurston County Auditor's Office

The Thurston County Auditor, on behalf of Department of Licensing, is seeking applicants for the operation of a vehicle/vessel license subagency business in the incorporated city of Tenino. A map, indicating the area in which the subagency must be located, is enclosed with this application.

Your submitted proposal will be part of a competitive appointment process. It is important that you answer the questions as thoroughly as possible giving specific descriptive details. Proposals will be evaluated and successful applicants in the written business proposal process will be scheduled for a personal interview before a panel.

Thurston County will make a recommendation to the Director, State of Washington, Department of Licensing, who makes the subagency appointment.

Previous business, supervisory and/or management experience is required. Previous vehicle/vessel licensing experience is preferred, but not required.

Included is an outline of the subject areas to help you in your submission. Your proposal must address each specific area.

**It is important to understand that what we are asking for is a proposal only.** We do not expect, nor do we require signed leases, employment contracts or any obligation that is binding in any way.

Thurston County and the Department of Licensing provide Equal Opportunity when appointing subagents. We encourage all qualified persons to apply, including members of protected groups under applicable state and federal law.

## Application Process

Applicants must submit a complete **Written Business Proposal, DOL Vehicle/Vessel Licensing Subagent Application**, and signed **Consent for Background Check** form for consideration.

Applications may be submitted electronically to:

[SubagentRFP@co.thurston.wa.us](mailto:SubagentRFP@co.thurston.wa.us)

Or by USPS or hand-delivered to:

Thurston County Auditor's Office

Building 1, MS: B1-1AU

Attn: Jared Krause – Licensing and Recording Manager

2000 Lakeridge Drive SW

Olympia, WA 98502

Faxed proposals will not be accepted.

Hand-written signatures are required on the Subagent Application forms and Consent for Background Check.

**Applications must be received no later than 4:30 pm on Monday, September 12, 2022.**

## Purpose and Background of Subagents

### What is a Subagency?

Titling and licensing services are a government activity. Subagents, as privately operated businesses, are appointed by the State for the purpose of providing vehicle and vessel title and licensing services to the public, in addition to any other services allowable by law or by policy that may be appropriate. The use of subagents allows licensing services to be offered in more locations and in more convenient locations than just the County building.

The appointment itself is not a business per se and there are no owners in the usual sense. The appointment cannot be sold, traded or otherwise transferred to a different person or persons. If the appointee is an established business at the time of application, the owners of the business are the appointees and if the business changes ownership, the appointment is canceled and subject to procedures for appointment of a replacement subagency.

### What are the Levels of Authority?

The Legislature has created laws to govern the licensing and titling of vehicles and vessels. The Department of Licensing (DOL) has been charged by the Legislature with this responsibility. DOL has been authorized to appoint Agents (County Auditors) and subagents to assist them in the performance of these duties.

The Agent (County Auditor) reports directly to DOL. The number of subagents for a particular county is determined primarily by the number of transactions that occur in that county. Subagents are recommended by the Agent through a competitive proposal process. Department of Licensing shall make the appointment of the subagent.

The Agent is responsible for the training, monitoring, oversight and auditing of the subagents within their jurisdiction.

### What is the Nature of the Work?

Operating a vehicle/vessel licensing subagency is essentially and most importantly a public service. Members of the public seek a full range of vehicle/vessel licensing services. The subagency **must provide** full motor vehicle licensing services; examples include:

- Preparing and processing original ownership of vehicles/vessels and issuing duplicates for the same;
- Processing annual renewals of vehicle/vessel licenses and issuing duplicates for the same;
- Preparing and processing registration documents;
- Preparing permits, tonnage and specialized registrations (i.e., farm vehicles, snowmobiles);
- Calculating, collecting, depositing and reporting of associated fees;
- Receiving and controlling all accountable inventory associated with licensing;
- Providing all services related to disability parking transactions.

The successful applicant must enter into a signed agreement containing requirements of a subagent (example available upon request). The vehicle license subagent business must be in operation, at a minimum, during normal State business hours Monday through Friday and a **minimum** of 5 hours on Saturdays. Based on projected activity with the level of staffing sufficient to operate is approximately two full time persons.

Below is a history of the transaction counts for the existing subagency:

Year	Title transactions	Nontitle transactions
2020	2,951	11,532
2021	2,916	11,453

### What does the Subagent provide?

The owner of a subagency must provide the remaining aspects of the business, some of which must meet specific conditions set by DOL:

- An adequate, secure office space,
- Including sufficient and convenient public access and parking that meets ADA accessibility requirements;
- Adequate staff, in terms of numbers and training, to meet public demands for service,
- Staff must be tested and certified by the Agent before processing licensing and titling transactions on the statewide software system, which requires training, experience and successful completion of testing.
- Staffing levels must be sufficient to ensure that the public is served in a timely manner. Staffing levels should take into account breaks, lunches, sick and vacation time.
- Staff must attend continuing training sessions presented throughout the year.
- Basic business equipment, such as phones, calculators, workspace, and cash drawers;
- Insurance coverage with the name insured as Thurston County and State of Washington, Department of Licensing and must require the insurer to provide thirty-day written notice of any cancellation or alteration of the endorsement or policy.
- Insurance coverage equal to the replacement cost of the state property (including the loss of monies and/or securities) in the subagent's possession, including fire, casualty, vandalism, and malicious mischief, at a minimum
- Insurance against robbery inside and outside the premises. Policy must include the actual value of license tabs and license plate replacement costs as well as money; and
- A checking account at a local bank in the name of the Department of Licensing, Agency Account Subagency Name, Subagent. Signatures on the account include representatives of DOL, Agent and the subagent appointee. The bank must accept electronic withdrawals and deposits.

## What does DOL provide?

Unlike private operations, much of the operation of this service is provided by the State of Washington through DOL. Tangible and intangible items include:

- Written policies and procedures for conducting transactions;
- Equipment related to licensing transactions:
- Statewide software system
- Desk computers connected to statewide system;
- Printers;
- Forms;
- Specialized paper; and
- Accountable inventory, including plates, tabs, placards, and permits.

## What costs might a subagent incur?

For your information we have listed below some of the costs you may incur in doing business as a subagent.

- Goods & Services
- Accountant fees
- Advertising
- Agent fees
- Attorney fees
- Banking charges
- Bond
- Insurance
- Janitorial
- Membership dues
- Messenger or common carrier
- Office furniture and counters
- Office supplies
- Postage, shipping & receiving
- Publications, (Vehicle appraisal guides, zip code)
- Rent or lease
- Signage
- Taxes (local, State, Federal)
- Utilities
- Equipment
- Hand Truck
- Installation of communication lines for DOL equipment
- Safe or vault
- Security system
- Telephone & Answering machine
- Personnel
- Benefits
- Training (DOL & Non DOL)

#### Facilities:

- Provide easy access, including disabled access
- Provide adequate customer waiting area
- Provide adequate parking
- Provide adequate workspace for employees, workstations, and secured storage for 60-day supply of inventory
- Provide adequate security for money during working and non-working hours
- Restrict access in the work area to authorized personnel only
- Provide a secured area for automated equipment, restrict access to automated equipment to authorized personnel

#### Required Notices:

- Certificate of appointment
- Sign designating business as a vehicle / vessel license subagent
- Sign designating hours of operation
- Schedule of fees charged, include subagent fee

#### Services:

- Hours must be maintained as proposed and approved on the application
- Someone must be available to provide service during the posted hours
- Service must be provided to everyone for all types of transactions

#### Bank Account:

- Account must be in the name of the Department of Licensing, Agency Account, Subagency Name, Subagent
- The appointee from the agency, at least one person from the Auditors' Office, and the comptroller from the Department of Licensing must sign the bank signature card
- Only vehicle / vessel license fees (including subagent fees) may be deposited into this account
- Checks should be endorsed and made payable to the Department of Licensing
- Obtain a receipt from the bank for each day's deposit
- Maintain a checkbook indicating the transaction date, payee, amount of the check or ACH, the amount of the deposit, with an up-to-date running balance
- Maintain a zero or positive bank balance in the DOL bank account
- Reconcile the bank account each month

#### Bond / Insurance:

- You must obtain and provide proof of coverage for bond and insurance coverage as required by the Department of Licensing

#### Documents:

- All work must be remitted to the Department (DOL) the day following the acceptance of the application
- Retain your work copies in accordance with the DOL directives
- Copies for the Auditor's Office must be sent or delivered to the main office the next day



#### Inventory:

- Daily — enter beginning and ending accountable inventory items as requested by the system based on a physical count of such items
- Monthly — run monthly physical inventory report on the 15th of each month
- Reconcile physical inventory on hand with inventory report and account for all discrepancies (adjustments, de-assignments, and missing items)
- Send "Auditor's Copy" to the County Auditor's Office by the close of business on the 15th of the month

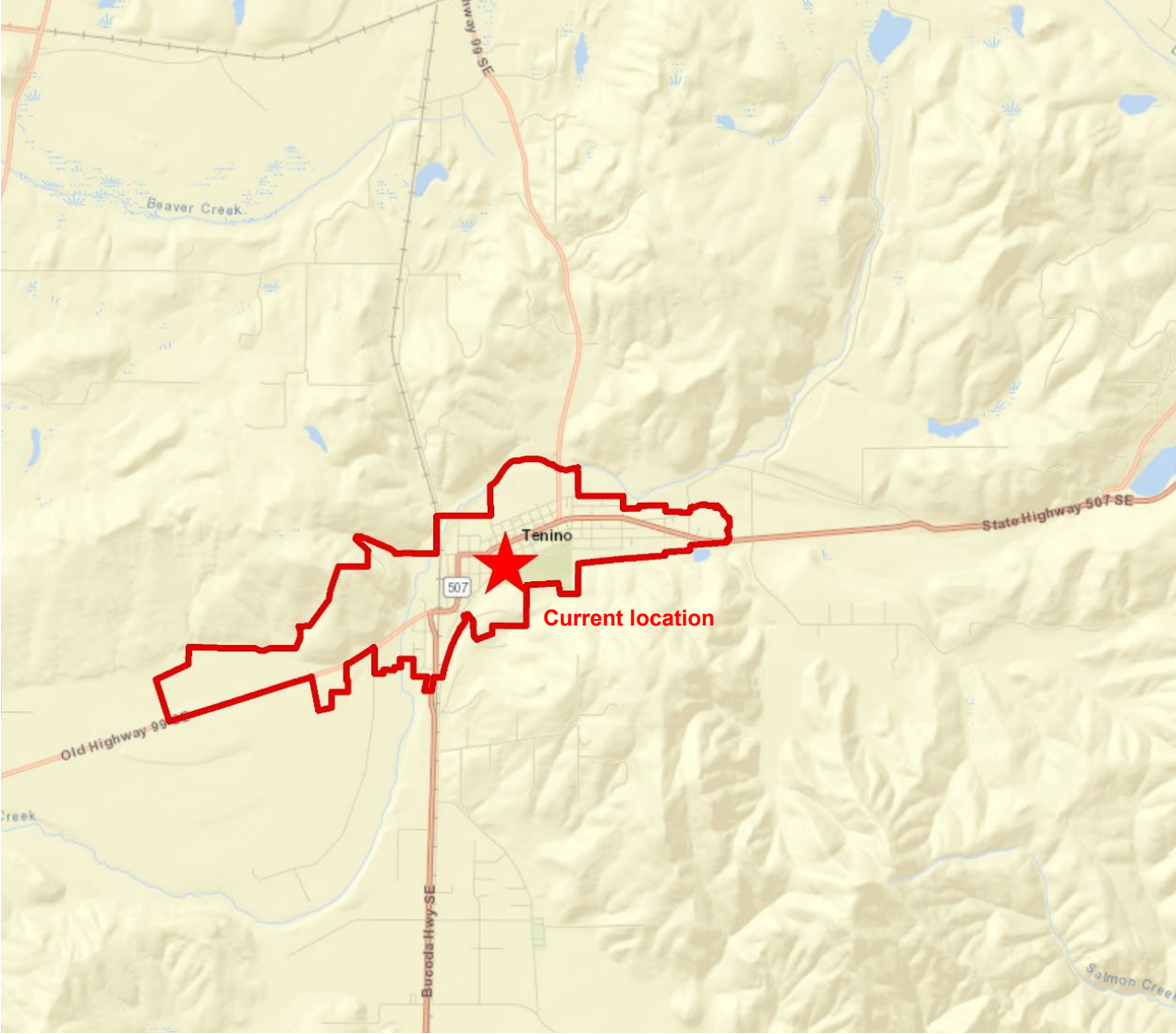
#### How is the subagent paid?

Subagents receive a fee per transaction completed. The fees retained by the subagent are \$15 for each title and \$8 for each tab renewal.

The state and county portions of the fees are transferred daily. The state and county perform an electronic withdrawal on a daily basis.

# Geographic Location

The location of the subagency must be within the confines as outlined on the map below. The service area includes **Tenino** and nearby portions of unincorporated Thurston County within the Tenino Urban Growth Area.



# Written Business Proposal

Please give specific, detailed descriptions. All statements must be verifiable. References may be contacted for further verification as deemed necessary.

## I. EXPERIENCE:

### A. Experience - Employment

1. Nature of work
  - a) description of job functions
2. Where, when, how long
3. References, recommendations

### B. Business Experience

1. Type of work or product
2. Where, when, how long
3. Business references
  - a) list 3 customer references
  - b) list 3 trade references
  - c) list business banking references
4. Ownership(s) of business(es)
5. Size of business(es)
6. Disposition of business(es)
7. Employee theft or embezzlement

### C. Management/Supervisory Experience

1. Supervisor or manager
  - a) how many people - staff
  - b) where, when, how long
2. Nature of work
3. References, recommendations

### D. Financial Experience

(list as many examples as necessary to illustrate experience)

1. Financial institution
  - a) Types of Accounts
  - b) Where, When, how long
  - c) General Ledger
  - d) Cash Drawer Audits
  - e) Software

## **II. STAFFING:**

### **A. How many**

### **B. Full time help - part time help**

### **C. Staff**

1. If you have the names of the people you intend to work for you, please provide their names and addresses

### **D. Staff Qualifications**

1. Experience
2. Description of job functions
3. Where, when, how long

## **III. BUSINESS SITE/FACILITIES**

### **A. Public Access**

1. ADA accessible

### **B. Location address (potentials)**

### **C. Office size (square footage)**

### **D. Office space**

1. Useable for public service (square footage)
2. Storage (square footage)
3. Office equipment (square footage)

### **E. Public Parking**

1. ADA accessible

### **F. Structure**

### **G. Security**

1. Internal
2. External

### **H. Placement of signs**

1. Inside
2. Outside

#### **IV. SERVICE:**

- A. Office by itself**
- B. Office runs in conjunction with other business**

#### **V. FINANCIAL ASPECTS / CAPITALIZATION**

- A. Lease, rental, ownership of building, premises**
- B. Equipment (types/kinds)**
- C. Advertising**
- D. Capital Outlay/Investment**

#### **VI. BONDING/INSURANCE**

- A. Has applicant ever been bonded and/or insured?**
- B. Has applicant ever been denied a bond?**
  - 1. If yes, describe circumstances surrounding the denial.
- C. Can applicant qualify for an \$70,000 bond?**
- D. Has applicant ever been denied insurance?**
  - 1. If yes, describe circumstances surrounding this denial.

#### **VII. COMMUNITY RELATIONSHIP / INVOLVEMENT**

- A. Resident of Community**
- B. Business(es) in Community**
- C. Community Involvement**

#### **VIII. RELATED INFORMATION**

- A. Please provide or explain in detail any other factors that may have relevancy in this selection process.**





## Vehicle/ Vessel Licensing Subagent Application

You can use this form to apply as a new subagent, change a subagent business name, subagent replacement, remove an appointee, or report an office move. Send completed form to **Vehicle and Vessel Operations, PO Box 9042, Olympia, WA 98507-9042.**

Application type:

- New subagent
- Change of subagent business name
- Replacement subagent
- Remove appointee(s)
- Office move

### Subagency information

TYPE or PRINT Subagency licensed business name (as filed with Master License Services)			
Name business will do business as (if different from above)			
Address			
City	State	ZIP code	County
Mailing address, if different (Address, City, State, ZIP code)			
(Area code) Telephone number	(Area code) Fax number	Email	
Proposed business open date (mm/dd/yyyy)	Days and hours of operation Days _____ Hours _____		
Business ownership structure (as provided through open competitive process)			
<input type="checkbox"/> Sole proprietor	<input type="checkbox"/> Association	<input type="checkbox"/> Partnership (define type) _____	
<input type="checkbox"/> Municipality	<input type="checkbox"/> Trust	<input type="checkbox"/> Corporation (define type) _____	
State where incorporated/formed _____		Year incorporated/formed _____	

**Subagent applicants/appointees** – List all names of applicants/ appointees for this business as provided through the open competitive process. Attach additional pages if needed.

<b>1</b> Name (Last, First, Middle)		Business title	
Address (Residence or mailing)		City	State ZIP code
(Area code) Home telephone number	(Area code) Cell phone number		
<b>2</b> Name (Last, First, Middle)		Business title	
Address (Residence or mailing)		City	State ZIP code
(Area code) Home telephone number	(Area code) Cell phone number		
<b>3</b> Name (Last, First, Middle)		Business title	
Address (Residence or mailing)		City	State ZIP code
(Area code) Home telephone number	(Area code) Cell phone number		
<b>4</b> Name (Last, First, Middle)		Business title	
Address (Residence or mailing)		City	State ZIP code
(Area code) Home telephone number	(Area code) Cell phone number		

**Subagent applicants/ appointees – continued**

Applicant/ Appointees signatures

<p><b>X</b> When you have completed this form, please print it out and sign here.</p> <p>Signature _____ Date _____</p> <p><b>X</b> _____</p> <p>Signature _____ Date _____</p>	<p><b>X</b> _____</p> <p>Signature _____ Date _____</p> <p><b>X</b> _____</p> <p>Signature _____ Date _____</p>
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Answer the following

Have any of the applicants/ appointees been convicted of a misdemeanor or felony within the past 7 years that might unfavorably affect their appointment as a subagent? .....  Yes  No

If yes, please explain:

**County Auditor/ Agent**

- I am confident the applicant(s)/ appointee(s) is able to and will perform all duties required of a vehicle/ vessel license subagency, and if appointed, will be fully trained and meet banking, bonding, and insurance requirements included in the standard contract and applicable Department of Licensing (DOL) Policies and Procedures.
- This office will educate, train, and qualify the applicant as provided in the standard agent contract and DOL Policies and Procedures.
- I have reviewed and verified the information provided in this application is accurate.

<p>_____</p> <p>Name of county</p>	<p><b>X</b> _____</p> <p>County Auditor/ Agent signature</p>
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Department use only
<p>Appointing authority approval/ disapproval</p> <p><input type="checkbox"/> Approve <input type="checkbox"/> Disapprove</p> <p>If disapproved, please explain: _____</p> <p>_____</p> <p>_____</p>
<p><b>X</b> _____</p> <p>Director signature <span style="margin-left: 150px;">Date</span></p>





## **AUTHORIZATION TO RELEASE INFORMATION**

<b>Name (Print):</b>	
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I hereby authorize Thurston County to conduct a background and reference check with all current and past employers and all schools or educational and technical institutions. I hereby waive any claims against Thurston County and its employees from any and all liability, damage, or loss which may result from it obtaining the background and reference information authorized herein.

I authorize my current or former employers, and all schools or educational and technical institutions which I have attended, to provide Thurston County representatives with any information (verbal or written) regarding my current or former employment, including performance, discipline, attendance, personnel files and/or other employment records, and scholastic records or ratings. I hereby release any such current or former employers or institutions, their agents or employees, from any and all liability resulting from the release of such information. My authorization and release from liability are knowing, intelligent and voluntary acts.

I understand that the information obtained or lack of sufficient information from these background and reference checks may affect my eligibility for contracting with Thurston County.

I hereby certify under the penalty of perjury in the State of Washington, that this application contains no willful misrepresentation and that the information given is true and complete to the best of my knowledge and belief. I am aware that should it become apparent that information was misrepresented or falsified, my application may be rejected, and my name be removed from consideration. Further I understand that my relationship with Thurston County may be terminated at any time should it be determined that there is a misrepresentation or falsification of information.

I understand that I may be required to provide verification of any qualification or representation made in my application documentation.

The release of information is good for 30 days past the date signed.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE