



Stage 3 Solution Development, Part B

California Department of Technology, SIMM 19C.4 (Rev. 2.5, July/2021)

3.13 General Information

Agency or State Entity Name: [Department of Motor Vehicles](#)

If agency/entity not in list, enter here. Click or tap here to enter text.

Organization Code: [2740](#)

Proposal Name: [Digital eXperience Platform \(DXP\) \(VR Phase Update\)](#)

Department of Technology Project Number (0000-000): [2740-227](#)

3.14 Part B Submittal Information

Part B Contact Information

Contact First Name: [Amar](#)

Contact Last Name: [Hariharan](#)

Contact Email: Amar.Hariharan@dmv.ca.gov

Contact Phone Number: [\(916\) 490-0537](#)

Part B Submission Date: Click or tap to enter a date.

Part B Submission Type: [Updated Submission \(Post-Approval\)](#)

If "Withdraw" is specified, select reason: Choose an item.

If "Other," specify reason: Click or tap here to enter text.

Part B Sections Updated (For updated submissions only; list all that apply): Click or tap here to enter text.

Part B Summary of Changes (Provide a concise summary of changes made):

The updates consistent of the primary and ancillary contracts for the Vehicle Registration (VR) phase of the DXP project.

Part B Project Approval Executive Transmittal

[Executive Transmittal attached to the email submission.](#)

Condition(s) from Previous Stage(s)

Condition #: Click or tap here to enter text.

Condition Category: Choose an item.

If "Other," specify: Click or tap here to enter text.

Condition Sub-Category: Choose an item.

If "Other," specify: Click or tap here to enter text.

Condition Description: Click or tap here to enter text.

Assessment: Choose an item.

If "Other," specify: Click or tap here to enter text.

Agency/State Entity Response: Click or tap here to enter text.

Status: Choose an item.

If "Other" is specified: Click or tap here to enter text.

Department of General Services (DGS) Delegated Purchasing Authority

Is the solicitation over or under the agency/state entity's DGS Delegated Purchasing Authority? (Select "Over" or "Under". If no procurement is planned, select "No Procurement.") [Over](#)

3.15 Solicitation Package and Evaluation Readiness (Primary solicitation only)

1. Select "Complete" for all sections of the SIMM Section 195 Statewide Technology Procurement (STP) Solicitation Template that are completed and reviewed for quality assurance in Part 1 and Part 2 below; otherwise, select "Not Complete."

Part 1:

1. Introduction: [Complete](#)
2. Bidding Instructions: [Complete](#)
3. Administrative Requirements: [Complete](#)
4. Bid Requirements: [Complete](#)
5. Cost: [Complete](#)
6. Proposal/Bid Format and Submission Requirements: [Complete](#)
7. Evaluation: [Complete](#)
8. Informational Attachments: [Complete](#)

Part 2:

9. Appendix A, Statement of Work: [Complete](#)
10. STD 213, Standard Agreement: [Complete](#)
11. Bidder Qualifications Forms: [Complete](#)
12. Bidder Reference Forms: [Complete](#)
13. Staff Qualifications Forms: [Complete](#)
14. Staff Reference Forms: [Complete](#)
15. Cost Worksheets: [Complete](#)
16. Bidder's Library: [Complete](#)
17. Functional/Non-functional Requirements: [Complete](#)

2. Describe the breakdown of the total evaluation score to be awarded (point/score) and describe how the score will be allotted, below.

Scoring and Point Distribution

Evaluation Area: [Review of Bids for Administrative Compliance](#)

Maximum Possible Score: [Pass/Fail](#)

Evaluation Area: Evaluation of Bidder Experience and References

Maximum Possible Score: 500

Evaluation Area: Evaluation of Bidder Narratives

Maximum Possible Score: 800

Evaluation Area: Evaluation of Mandatory Solution Requirements

Maximum Possible Score: Pass/Fail

Evaluation Area: Evaluation of Key Staff Qualifications & Interviews

Maximum Possible Score: 1100

Evaluation Area: Evaluation of Further Narrative Requirements

Maximum Possible Score: 600

Evaluation Area: Demonstrations

Maximum Possible Score: 500

Evaluation Area: Cost Evaluations (Phases 1 & 2)

Maximum Possible Score: 1500

Evaluation Area: Application of Preference and Incentive Points

Maximum Possible Score: 500

Total Points Possible including incentives: 5500

Evaluation Readiness Checklist

3. Is the Bidder's Library complete and ready for vendor access? [Yes](#)
4. Does the agency/state entity anticipate that any confidential information will be posted in the Bidder's Library? [No](#)
5. Has the agency/state entity tested and validated the evaluation methodology, points, and/or approach? [Yes](#)
6. Has the agency/state entity completed development of the bidder and key staff qualifications and the bidder and key staff references? [Yes](#)

If "Yes," select the approach that will be used to validate the references submitted: [Verbal \(e.g., telephone with pre-defined script\)](#)

7. Are all key stakeholders (executive sponsors, business and IT project team, and procurement team) knowledgeable and committed to the evaluation methodology for the solicitation? [Yes](#)

8. Will the agency/state entity require the bidder to demonstrate any solution requirements? [No](#)

If "Yes," attach the demonstration script to your email submission.

9. Have changes been made to the solicitation package (e.g., solution requirements, cost worksheets, evaluation methodology, terms, SOW) as a result of the Statewide Technology Procurement (STP) Pre-Solicitation process? [No](#)

If "Yes," explain changes: Click or tap here to enter text.

3.16 Public Contract Code (PCC) 6611 Readiness

1. Has the agency/state entity received approval from Department of General Services (DGS) or the Department of Technology to utilize PCC 6611? [Yes](#)

[Per STP, a GSPD 13-003 does not need to be completed however, a negotiation plan will be submitted. The plan will be completed as we get closer to that time and once cost has been opened.](#)

If "Yes," attach a preliminary draft of the negotiation plan and the approved GSPD 13-003 form to your email submission.

3.17 Protest Processes

1. Select the protest process being utilized for the primary solicitation: [Not applicable](#)

If "Alternative Protest Process" is selected, attach file to the email submission.

If the protest process is "Not applicable" for the solicitation, explain:
[Conducted under Public Contract Code 6611.](#)

3.18 Project Management Planning

Are the following project management plans or project artifacts complete, approved by the designated agency/state entity authority, and available for Department of Technology review? Select "Yes," "No," or "Not applicable."

Project Management Plan: [Yes](#)

If "No", provide the status: Choose an item.

If "Not applicable," explain: Click or tap here to enter text.

Change Control Management Plan: [Yes](#)

If "No", provide the status: Choose an item.

If "Not applicable," explain: Click or tap here to enter text.

Configuration Management Plan: [Yes](#)

If "No", provide the status: Choose an item.

If "Not applicable," explain: Click or tap here to enter text.

Data Management Plan: [Yes](#)

If "No", provide the status: Choose an item.

If "Not applicable," explain: Click or tap here to enter text.

Maintenance and Operations Plan: [Yes](#)

If "No", provide the status: Choose an item.

If "Not applicable," explain: Click or tap here to enter text.

Procurement Management Plan: [Yes](#)

If "No", provide the status: Choose an item.

If "Not applicable," explain: Click or tap here to enter text.

Contract Management Plan: [Yes](#)

If "No", provide the status: Choose an item.

If "Not applicable," explain: Click or tap here to enter text.

Quality Management Plan: [Yes](#)

If "No", provide the status: Choose an item.

If "Not applicable," explain: Click or tap here to enter text.

Testing Management Plan:Yes

If "No", provide the status: Choose an item.

If "Not applicable," explain: Click or tap here to enter text.

Security Management Plan:Yes

If "No", provide the status: Choose an item.

If "Not applicable," explain: Click or tap here to enter text.

Business Continuity Management Plan (Including Technology Recovery Plan):Yes

If "No", provide the status: Choose an item.

If "Not applicable," explain: Click or tap here to enter text.

Risk Management Plan:Yes

If "No", provide the status: Choose an item.

If "Not applicable," explain: Click or tap here to enter text.

(Other – type plan name) Project Management Plan:Yes

If "No", provide the status: Choose an item.

If "Yes," describe: Click or tap here to enter text.

3.19 Staffing Allocation

Project Team Role:Other

If "Other," specify: Project Director

Quantity: 1

Level of Participation (%): 100%

Classification (State Resources Only):Career Executive Assignment (CEA)

If "Other," specify: Click or tap here to enter text.

Source:New

Tenure/Time Base:Permanent

Project Team Role:Other

If "Other," specify: Assistant Project Director

Quantity: 1

Level of Participation (%): 100%

Source:New

Tenure/Time Base:Permanent

Project Team Role:Enterprise Architect

If "Other," specify: Click or tap here to enter text.

Quantity: 6

Level of Participation (%): 100%

Classification (State Resources Only):IT Specialist III

If "Other," specify: Click or tap here to enter text.

Source:New

Tenure/Time Base:Permanent

Project Team Role:Data Architect

If "Other," specify: Click or tap here to enter text.

Quantity: 6

Level of Participation (%): 100%

Classification (State Resources Only):Other

If "Other," specify: (4) ITS II, (2) ITS I

Source:New

Tenure/Time Base:Permanent

Project Team Role:Project Manager

If "Other," specify

Quantity: 6

Level of Participation (%): 100%

Classification (State Resources Only):Other

If "Other," specify: (3) ITS II, (2) ITS I, (1) Information Technology Manager (ITM) I

Source:New

Tenure/Time Base:Permanent

Project Team Role:Other

If "Other," specify: Vendor Management

Quantity: 5

Level of Participation (%): 100%

Classification (State Resources Only):Other

If "Other," specify: (2) ITS II, (2) ITS I, (1) Information Technology Supervisors II

Source:New

Tenure/Time Base:Permanent

Project Team Role:Contract Manager

If "Other," specify: Click or tap here to enter text.

Quantity: 5

Level of Participation (%): 100%

Classification (State Resources Only):IT Specialist I

If "Other," specify: Click or tap here to enter text.

Source:New

Tenure/Time Base:Permanent

Project Team Role:Other

If "Other," specify: Contract Support

Quantity: 4

Level of Participation (%): 100%

Classification (State Resources Only):Other

If "Other," specify: (2) AGPA, (2) SSA

Source:[New](#)

Tenure/Time Base:[Permanent](#)

End of agency/state entity document.

When ready, submit Stage 3 Part B and all attachments in an email to
ProjectOversight@state.ca.gov.

Department of Technology Use Only

Original "New Submission" Date: [11/4/2021](#)

Form Received Date: [11/4/2021](#)

Form Accepted Date: [11/4/2021](#)

Form Status: [Completed](#)

Form Status Date: [12/1/2021](#)

Form Disposition: [Approved](#)

If "Other," specify: Click or tap here to enter text.

Form Disposition Date: [12/1/2021](#)