

Attachment A

SURVEYING FIRM'S STATEMENT OF QUALIFICATION

1. _____

(Name of Firm)

2. _____

(Address)

(Zip)

3. Name of professional organizations for which firm has memberships.

a. National _____

b. State _____

c. Local _____

4. Education and experience of the top principals in the organization:

a. First principal in the organization: _____

Training

Institution

Time Attended

Degree

Experience: If experience has been gained in other surveying offices, give names of offices and length of services.

b. Second principal in the organization: _____

Training	Institution	Time Attended	Degree
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Experience: If experience has been gained in other surveying offices, give names of offices and length of services.

5. How long has your firm been engaged in the surveying profession? _____ year(s)

6. List the number of personnel in your present organization:

- a. Registered Land Surveyors _____
- b. CAD Technicians _____
- c. CAD Stations _____
- d. Crew Chiefs _____
- e. Instrument Operators _____
- f. Rod Men _____
- g. Clerical help _____
- h. Total number in organization _____

*add a supplementary sheet if necessary

7. What are the limits of your Error and Omissions Insurance? _____

What is the deductible? _____

8. Names of persons proposed for assignment:

Name:	Training:	Expertise:	Years of Experience
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SUBMITTED BY (Name): _____

TITLE: _____

SIGNATURE: _____

COMPANY NAME (PRINT): _____

ADDRESS: _____

CITY/STATE: _____ ZIP _____

TELEPHONE: () _____ FAX: () _____

EMAIL ADDRESS: _____

PROJECT EXPERIENCE:

Project Name: _____

Project Location: _____ Dates: _____

Person(s) in firm involved in project: _____

Client Organization Name: _____

Address: _____

Contact Person's Name: _____

Title: _____

Phone No: _____

Project Description: _____

Services provided (circle those that apply):

- | | |
|--------------------------------|---------------------|
| Property Boundary Survey | Plat Preparation |
| Topographic Survey | Topographic Map |
| Utility Survey | Tree Survey |
| Drafting of Construction Plans | Construction Layout |
| As-built survey | Record Drawings |

Other (describe) _____

*Note: Please reproduce this form as necessary or use other similar format.