WEST VIRGINIA DIVISION OF HIGHWAYS
CONSULTANT CONFIDENTIAL QUALIFICATION QUESTIONNAIRE

EXPERIENCE DATA	DATE (DAY, MONTH, YEAR)	FEIN
1. FIRM NAME	2. HOME OFFICE BUSINESS ADDRESS	3. FORMER FIRM NAME

4. HOME OFFICE TELEPHONE	5. ESTABLISHED (YEAR)	6. TYPE OWNERSHIP Individual Corporation Partnership Joint-Venture	6a. WV REGISTERED DBE YES NO

7. PRESENT OFFICES: ADDRESS/ TELEPHONE/ PERSON IN CHARGE/ NO. PERSONNEL EACH OFFICE

8. NAMES OF PRINCIPAL OFFICIALS OR MEMBERS OF FIRM	8a. NAME, TITLE, & TELEPHONE NUMBER - OTHER PRINCIPALS

9. PERSONNEL BY DISCIPLINE

— ADMINISTRATIVE
— ARCHITECTS
— CADD OPERATORS
— CHEMICAL ENGINEERS
— CIVIL ENGINEERS
— CONSTRUCTION INSPECTORS
— DESIGNERS, HIGHWAY
— DRAFTSMEN
— ECOLOGISTS
— ECONOMISTS
— ELECTRICAL ENGINEERS
— ENVIRONMENTALISTS
— ESTIMATORS
— GEOLOGISTS
— HISTORIANS
— HYDROLOGISTS
— LANDSCAPE ARCHITECTS
— MECHANICAL ENGINEERS
— MINING ENGINEERS
— PHOTOGRAMMETRISTS
— PLANNERS: URBAN/REGIONAL
— SANITARY ENGINEERS
— SOILS ENGINEERS
— SPECIFICATION WRITERS
— STRUCTURAL ENGINEERS
— SURVEYORS
— TRAFFIC ENGINEERS
— TRANSPORTATION ENGINEERS
— OTHER

— TOTAL PERSONNELL

10. IF SUBMITTAL IS BY JOINT-VENTURE, LIST PARTICIPATING FIRMS & OUTLINE SPECIFIC AREAS OF RESPONSIBILITY (INCLUDING ADMINISTRATIVE, TECHNICAL & FINANCIAL) FOR EACH FIRM. (Each participating Firm Must Complete a "Consultant Confidential Qualification Questionnaire" If a copy is Not On File With The Division).

10a. HAS THIS JOINT-VENTURE WORKED TOGETHER BEFORE? ☐ YES ☐ NO

11. OUTSIDE KEY CONSULTANTS/ASSOCIATES ANTICIPATED TO BE USED. Attach "Consultant Confidential Qualification Questionnaire" for each if copy is not on with the Division.

NAME AND ADDRESS	SPECIALITY	WORKED WITH BEFORE
		— YES — NO

12. A. Are you experienced in Traffic Engineering?

YES Describe:

_____

NO

B. Are you experience in Soil Analysis?

YES Describe:

_____

NO

C. Do you produce your own Aerial Photography and Develop Contour Mapping?

YES Describe:

_____

NO

D. Do you perform your own bridge and/or structural design?

YES Describe:

_____

NO

13. Indicate in order of precedence using "1", "2", "3", etc., the types of work your firm is particularly qualified to perform by virtue of experience and training of members and associates. (Note: Work specialties not sufficiently identified by general categories are to be listed separately below.)

( ) AERIAL PHOTOGRAPHY
( ) ACOUSTICS-NOISE ABATEMENT
( ) ARCHEOLOGICAL-CULTURAL RESOURCE
( ) BRIDGES-STRUCTURAL
( ) COMMERCIAL BUILDINGS
( ) CONSTRUCTION MANAGEMENT
( ) DAM-IRRIGATION
( ) ELECTRICAL FACILITIES
( ) ENVIRONMENTAL-EIS/EIA
( ) FLOOD CONTROL-WATER RESOURCES
( ) GEOTECHNICAL
( ) HIGHWAYS-STREETS
( ) HOUSING
( ) HVAC
( ) LABORATORIES
( ) LIGHTING-EXTERIOR
( ) MANUALS
( ) MASTER PLNG.-SITE DEVELOPMENT
( ) PHOTOGRAMMETRY
( ) POWER-HEATING PLANTS
( ) PUBLIC BUILDINGS
( ) RAILROAD-RAPID TRANSIT
( ) RECREATION FACILITIES
( ) SURVEYING
( ) UTILITIES
( ) VALUE ANALYSIS
( ) WATER-SEWAGE

14. PERSONAL HISTORY STATEMENT OF PRINCIPALS AND ASSOCIATES (Furnish complete data but keep to essentials)

NAME (Last, First, Middle Initial)	YEARS OF EXPERIENCE		
	AS PRINCIPAL IN THIS FIRM	AS PRINCIPAL IN OTHER FIRMS	OTHER THAN PRINCIPAL

EDUCATION (Degree, Year, Specialization)

MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS	REGISTRATION (Type, Year, State)

14. PERSONAL HISTORY STATEMENT OF PRINCIPALS AND ASSOCIATES (Furnish complete data but keep to essentials)

NAME (Last, First, Middle Initial)	YEARS OF EXPERIENCE		
	AS PRINCIPAL IN THIS FIRM	AS PRINCIPAL IN OTHER FIRMS	OTHER THAN PRINCIPAL

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EDUCATION (Degree, Year, Specialization)

MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS	REGISTRATION (Type, Year, State)

15. PRESENT ACTIVITIES ON WHICH YOU ARE THE DESIGNATED ENGINEER OF RECORD

PROJECT NAME, TYPE AND LOCATION	NAME AND ADDRESS OF OWNER	ESTIMATED CONSTRUCTION COST	PERCENT COMPLETE
TOTAL NUMBER OF PROJECTS:		TOTAL ESTIMATED CONSTRUCTION COSTS: $	

16. PRESENT ACTIVITIES ON WHICH YOU ARE ASSOCIATED WITH OTHERS

PROJECT NAME, TYPE AND LOCATION	NATURE OF FIRMS RESPONSIBILITY	NAME AND ADDRESS OF OWNER	ESTIMATED COMPLETION DATE	ESTIMATED CONSTRUCTION COST	
				ENTIRE PROJECT	YOUR FIRMS RESPONSIBILITY

17. COMPLETED WORK WITHIN LAST 10 YEARS ON WHICH YOU WERE THE DESIGNATED ENGINEER OF RECORD

PROJECT NAME, TYPE AND LOCATION	NAME AND ADDRESS OF OWNER	ESTIMATED CONSTRUCTION COST	YEAR	CONSTRUCTED (YES OR NO)

18. COMPLETED WORK WITHIN LAST 10 YEARS ON WHICH YOU WERE ASSOCIATED WITH OTHER FIRMS (INDICATE PHASE OF WORK FOR WHICH YOUR FIRM WAS RESPONSIBLE)

PROJECT NAME, TYPE AND LOCATION	NAME AND ADDRESS OF OWNER	ESTIMATED CONSTRUCTION COST OF YOUR FIRM'S PORTION	YEAR	CONSTRUCTED (YES OR NO)	FIRM ASSOCIATED WITH

19. Use this space to provide any additional information or description of resources supporting your firm's qualifications to perform work for the West Virginia Division of Highways.

20. The foregoing is a statement of facts.

Signature:_____ Title:_____ Date:_____

Printed Name:

NOTE: THIS DOCUMENT WILL BECOME VOID AFTER DECEMBER 31 IN CALENDAR YEAR OF DATE HEREON.