

Employee Qualification Statement

Area Class 2.03 – Mass Transit Vehicle and Propulsion System

One Georgia Professional Engineer required

Firm Name:

Employee Name:

Related Certifications:

(For example: PE.)

In brief, concise sentences and using the following format, please describe your work experiences that demonstrate your ability to perform work in Area Class 2.03. Experience descriptions must be written in first person and must state your personal Mass RAPID Transit Vehicle and Propulsion System experience(s). The combined experience descriptions must at a minimum include:

- *Years of experience as a Mass Transit Vehicle and Propulsion System professional*
- *Role as it relates to Mass Transit Vehicle and Propulsion System*
 - *Representing OWNER in preparation of the Specifications for the Mass Transit Vehicle*
 - *Representing OWNER during the acquisition, final design, fabrication and testing of the Mass Transit Vehicle*
 - *Actual Design of the Mass Transit Vehicle Frame Structure and Body*
 - *Actual Design of the Mass Transit Vehicle Propulsion System and Traction Power*
 - *Actual Design of the Mass Transit Vehicle Electrification*
 - *Actual Design of the Mass Transit Vehicle Train Control and Communications*
 - *Actual Design of the Mass Transit Vehicle Interior Design*
- *Number of Mass Transit Vehicle and Propulsion Systems Projects conducted*
- *Type of Mass Transit Vehicles and Propulsion Systems Projects*
 - *Light Rail Transit Vehicles*
 - *Heavy Rail Rapid Transit Vehicles*
 - *Commuter Heavy Rail Transit Vehicles*
 - *Hi-Speed Heavy Rail Transit Vehicles*
- *Continuing education/training in any of the integrated parts of Mass Transit Vehicles and Propulsion Systems*

Please list and describe 2 most recent related projects below. Only list projects in which the Mass Transit Vehicle and Propulsion Systems work was directly performed by the employee. Experience with the role on Mass Transit Vehicle and Propulsion Systems must be demonstrated.

Project List:

1) Project Name, Location and Description:

Years:	Design	Acquisition	Completion/In Service
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Primary Role/Responsibility on Project:

Number and Type of Mass Transit Vehicles Acquired:

List References (Include contact information):

2) Project Name, Location and Description:

Years of :	Design	Acquisition	Completion/In Service
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Primary Role/Responsibility on Project:

Number and Type of Mass Transit Vehicles Acquired:

List References (Include contact information):

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Under penalty of perjury, I certify that the above information that I have entered is true and accurate.

Signature of Employee

*Entering your name in the field above serves
as your signature on this document.*

Date

❶ If you encounter any difficulties with submitting this form, you may also send it directly via email. Simply save a copy of your completed form and attach it to an email to consultants_prequals@dot.ga.gov