

# Employee Qualification Statement

## Area Class 2.07 – Mass Transit Electrical and Mechanical System

One Georgia Professional Engineer required

Firm Name:

Employee Name:

Related GA Certifications:

(For example: PE.)

Description of Current Position with the Firm:

*In brief, concise sentences and using the following format, please describe your work experiences that demonstrate your ability to perform work in Area Class 2.07. Experience descriptions must be written in first person and must state your personal Mass RAPID Transit Electrical and Mechanical Systems experience(s) in traction power supply and distribution, traction power substations, auxiliary electrical systems, uninterrupted power supply (UPS) systems, mechanical utilities, heating, ventilation, and air conditioning systems, tunnel drainage and ventilation systems, light / heavy rail vehicle maintenance equipment, elevators, and escalators. The combined experience descriptions must at a minimum include:*

- *Years of experience as a Mass Transit Electrical and Mechanical Systems professional*
- *Role as it relates to Mass Transit Electrical and Mechanical Systems*
  - *Actual Design of the Mass Transit Electrical and Mechanical Systems*
- *Type of Mass Transit Electrical and Mechanical Systems Projects*
  - *Light Rail Transit Electrical and Mechanical Systems*
  - *Heavy Rail Rapid Transit Electrical and Mechanical Systems*
  - *Commuter Heavy Rail Transit Electrical and Mechanical Systems*
  - *Hi-Speed Heavy Rail Transit Electrical and Mechanical Systems*

*Continuing education/training in any of the integrated parts of Mass Transit Electrical and Mechanical Systems*

*Please list and describe 2 most recent related projects below. Only list projects in which the Mass Transit Electrical and Mechanical Systems work was directly performed by the employee. Experience with the role on Mass Transit Electrical and Mechanical Systems must be demonstrated. Additional sheets may be used if necessary (all sheets must be signed and dated by Employee), but additional sheets are not encouraged.*

Project List:

1) Project Name:

Years:	Design	Bid	Completion
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Primary Role/Responsibility on Project:

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Project Description:

List References (Include contact information):

2) Project Name:

Years:	Design	Bid	Completion
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Primary Role/Responsibility on Project:

Project Description:

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

❗ 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](mailto:consultants_prequals@dot.ga.gov)