

Employee Qualification Statement

Area Class 4.05 – Bridge Inspection

Firm Name:

Employee Name and Current Position:

Professional Engineer, GA #:

Related Certifications (i.e. Confined Space Certification, Fracture Critical Inspection, Scour Inspection, Underwater Bridge Inspection):

Last Date of comprehensive training class based on the “Bridge Inspectors Training Manual”:

In brief, concise sentences and using the following format, please describe your work experiences that demonstrate your ability to perform work in Area Class 4.05. Experience descriptions must be written in first person and must state your personal Bridge Inspection experience(s). The combined descriptions must include at a minimum:

- *Years of experience in Safety Bridge Inspection*
- *Years of responsible experience in Safety Bridge Inspection*
- *Years of experience in Load Rating of bridges*
- *Project List: Please list and describe related projects below. Only list projects with direct bridge inspection experience.*

1) Project and Location:

GDOT PI # (if applicable):

Primary Role/Responsibility on Project:

Employee’s Responsibilities (*Detail bridge inspection work on project, documentation requirements, duration of inspection, etc.*):

List Project Reference (*Include contact information*):

2) Project and Location:

GDOT PI # (if applicable):

Primary Role/Responsibility on Project:

Employee's Responsibilities (*Detail bridge inspection work on project, documentation requirements, duration of inspection, etc.*):

List Project Reference (*Include contact information*):

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

i 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