

Employee Qualification Statement

Area Class 9.03 Field Inspection for Erosion Control

Two Georgia Certified Professionals Required

Firm Name:

Employee Name and Position:

Georgia Soil & Water Conservation Commission Registration Type number and expiration:

GDOT Worksite Erosion Control Supervisor Certification number and expiration date:

Years of experience in Erosion Control Inspections:

Describe project experience (may be experience with previous firm) of two or more multi-stage linear projects. In brief, concise sentences and using the following format, describe your work experiences that demonstrates your ability to perform field inspections of the installation of erosion and sedimentation control devices. List only projects on which you have directly performed Area Class 9.03 work. Experience descriptions must be written in first person and must state your personal experience(s).

1) Project and location:

GDOT PI # (if applicable):

Project Description (*typical section, length, etc.*):

Employee's ESPCP inspection role on project:

List Project Reference:

2) Project and location:

GDOT PI # (if applicable):

Project Description (*typical section, length, etc.*):

Employee's ESPCP inspection role on project:

List Project Reference:

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