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| **WEST VIRGINIA DEPARTMENT OF ENVIRONMENTAL PROTECTION****OSR CONSULTANT QUALIFICATION QUESTIONNAIRE** **Attachment “B”**   |
| PROJECT NAME | DATE (DAY, MONTH, YER) | FEIN NUMBER |
| 1.FIRM NAME | 2.HOME OFFICE BUSINESS ADDRESS | 3.FORMER FIRM NAME |
| 4.HOME OFFICE TELEPHONE | 5.ESTABLISHED (YEAR) | 6.TYPE OWNERSHIPINDIVIDUAL CORPORATIONPARTNERSHIP JOINT-VENTURE | 6A.WV REGISTERED DBE(Disadvantaged Business Enterprise) YES NO |
| 7. PRIMARY OSR DESIGN OFFICE: ADDRESS/TELEPHONE /PERSON IN CHARGE/ NO. OSR DESIGN PERSONNEL EACH OFFICE |
| 8. PRINCIPAL OFFICERS OR MEMBER OF FIRM | 8A. NAME, TITLE, & TELEPHONE – OTHER PRINCIPALS |
| 9. PERSONNEL BY DISCIPLINE\_\_ ADMINISTRATIVE \_\_ECOLOGISTS \_\_LANDSCAPE ARCHITTECTS \_\_ STRUCTURAL ENGINEERS\_\_ ARCHITECHS \_\_ ECONOMISTS \_\_ MECHANICAL ENGINEERS \_\_ **SURVEYORS**\_\_ **BIOLOGISTS** \_\_ ELECTRICAL ENGINEERS \_\_ **MINING ENGINEERS**  \_\_ TRAFFIC ENGINEERS\_\_ **CADD OPERATORS** \_\_ ENVIRONMENTALISTS \_\_ PHOTOGRAMMETRISTS \_\_ OTHER\_\_ CHEMICAL ENGINEERS \_\_ ESTIMATORS \_\_ PLANNERS: URBAN REGIONAL\_\_ **CIVIL ENGINEERS** \_\_ **GEOLOGISTS** \_\_ SANITARY ENGINEERS \_\_ CONSTRUCTION INSPECTORS \_\_ HISTORIANS \_\_ SOILS ENGINEERS\_\_ DESIGNERS \_\_ HYDROLOGISTS \_\_ SPECIFICATION \_\_\_\_ TOTAL PERSONNEL\_\_ DRAFTSMEN WRITERS TOTAL NUMBER OF WV REGISTERDD PROFESSIONAL ENGINEERS IN PRIMARY OFFICE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\*RPEs other than Civil and Mining must provide supporting documentation that qualifies them to supervise and perform this type of work. |
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| 10. HAS THIS JOINT-VENTURE WORKED TOGETHER BEFORE? YES NO |
| 11. OUTSIDE KEY CONSULTANTS/SUBCONSULTANTS ANTICIPATED TO BE USED. Attach OSR “Consultant Qualification Questionnaire “ |
| NAME AND ADDRESS: | SPECIALTY: | WORKED WITH BEFORE\_\_\_\_\_\_\_ YES\_\_\_\_\_\_\_ NO |
| NAME AND ADDRESS: | SPECIALTY: | WORKED WITH BEFORE\_\_\_\_\_\_\_ YES\_\_\_\_\_\_\_ NO |
| NAME AND ADDRESS: | SPECIALTY: | WORKED WITH BEFORE\_\_\_\_\_\_\_ YES\_\_\_\_\_\_\_ NO |
| NAME AND ADDRESS: | SPECIALTY: | WORKED WITH BEFORE\_\_\_\_\_\_\_ YES\_\_\_\_\_\_\_ NO |
| NAME AND ADDRESS: | SPECIALTY: | WORKED WITH BEFORE\_\_\_\_\_\_\_ YES\_\_\_\_\_\_\_ NO |
| NAME AND ADDRESS: | SPECIALTY: | WORKED WITH BEFORE\_\_\_\_\_\_\_ YES\_\_\_\_\_\_\_ NO |
| NAME AND ADDRESS: | SPECIALTY: | WORKED WITH BEFORE\_\_\_\_\_\_\_ YES\_\_\_\_\_\_\_ NO |
| 12. A. Is your firm experienced in Acid Mine Drainage water treatment and remediation? YES Description and number of projects: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NO |
|  B. Is your firm experienced in soil analysis and coal refuse analyses? YES Description and number of projects: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NO |
|  C. Is your firm experienced in hydrology and hydraulics for handling mine water discharges on mining sites? YES Description and number of projects: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NO |
|  D. Does your firm produce its own aerial photography for development of contour mapping and have your own surveying crew? YES Description and number of projects: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NO |
|  E. Is your firm experienced in design of highwall elimination, grading and material handling plans for land reclamation? YES Description and Number of Projects: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NO |
| 13. PERSONAL HISTORY STATEMENT OF PRINCIPALS AND ASSOCIATES RESPONSIBLE FOR OSR PROJECT DESIGN (Furnish complete date but keep to essentials) |
| NAME & TITLE (Last, First, MI) | YEARS OF EXPERIENCE |
| YEARS OF OSR DESIGN EXPERIENCE | YEARS OF OSR RELATED DESIGN EXPERIENCE  |
| Brief explanation of responsibilities |
| EDUCATION (Degree, year, specialization) |
| MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS | REGISTRATION (Type, year, state) |
| 13. PERSONAL HISTORY STATEMENT OF PRINCIPALS AND ASSOCIATES RESPONSIBLE FOR OSR PROJECT DESIGN (Furnish complete date but keep to essentials) |
| NAME & TITLE (Last, First, MI) | YEARS OF EXPERIENCE |
| YEARS OF OSR DESIGN EXPERIENCE | YEARS OF OSR RELATED DESIGN EXPERIENCE  |
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| Brief explanation of responsibilities |
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| NAME & TITLE (Last, First, MI) | YEARS OF EXPERIENCE |
| YEARS OF OSR DESIGN EXPERIENCE | YEARS OF OSR RELATED DESIGN EXPERIENCE  |
| Brief explanation of responsibilities |
| EDUCATION (Degree, year, specialization) |
| MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS | REGISTRATION (Type, year, state) |
| 14. PROVIDE A LIST OF SOFTWARE AND EQUIPMENT AVAILABLE IN THE PRIMARY OFFICE WHICH WILL BE USED TO COMPLETE OSR DESIGN SERVICES |
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| 15. CURRENT ACTIVITIES ON WHICH YOUR FIRM IS THE DESIGNATED ENGINEER OF RECORD |
| PROJECT NAME, TYPE & LOCATION | NAME & ADDRESS OF OWNER | NATURE OF YOUR FIRM’S RESPONSIBILITY | ESTIMATED CONSTRUCTION COST | PERCENT COMPLETE |
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| TOTAL NUMBER OF PROJECTS: | TOTAL ESTIMATED CONSTRUCTION COSTS: $ |
| 16. CURRENT ACTIVITIES ON WHICH YOUR FIRM IS SERVING AS A SUBCONSULTANT TO OTHERS |
| PROJECT NAME, TYPE & LOCATION | NATURE OF FIRMS RESPONSIBILITY | NAME & ADDRESS OF OWNER | ESTIMATED COMPLETION DATE | ESTIMATED CONSTRUCTION COST |
| ENTIRE PROJECT | YOUR FIRMS RESPONSIBILITY |
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| 17. COMPLETED WORK WITH IN LAST 5 YEARS ON WHICH YOUR FIRM WAS THE DESIGNATED ENGINEER OF RECORD |
| PROJECT NAME, TYPE & LOCATION | NAME & ADDRESS OF OWNER | ESIMATED CONSTRUCTION COST | YEAR | CONSTRUCTED (YES OR NO) |
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| 18. COMPLETED WORK WITHIN LAST 5 YEARS ON WHICH YOUR FIRM HAS BEEN A SUB-CONSULTANT TO OTHER FIRMS (INDICATE PHASE OF WORK WHICH YOUR FIRM WAS RESPONSIBLE) |
| PROJECT NAME, TYPE & LOCATION | NAME & ADDRESS OF OWNER | ESTIMATED CONSTRUCTION COST OF YOUR FIRM’S PORTION | YEAR | CONSTRUCTED( YES OR NO) | FIRM ASSOCIATED WITH |
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| 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 Office of Special Reclamation. |
| 20. The foregoing is a statement of factsSignature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |