ATTACHMENT C
Oregon Department of Transportation
Contractor Special Prequalification Submittal
Cathodic Protection Projects

Form 5
QCE # 5 – Locate & Eliminate Near Surface Metal

Include Separate Forms for Each Additional Qualifying Project

1 _____
Prime or proposed Subcontractor performing **QCE 5** work

2 Has Prime or Subcontractor above completed a project requiring locating and eliminating near surface metals?

(Must be "Yes" to qualify) ☐ Yes ☐ No

3 Total surface area of locating and eliminating near surface metals for project referenced below:_____
(Submit up to 3 projects as needed to qualify at least 20,000 square feet)

4 *_____ _____ _____ _____
Project Name Project Location *(Bldg/River/harbor/Rte#)* City State

5 _____ _____ _____
Contract Number Award Date *(Month/Year)* Date above Project was Accepted by Owner *(Must be after Jan. 1, 2008)*

6 _____ _____
Owner for Above Project Owner Contact Name

7 _____ _____
Owner Contact Title Owner Contact Telephone

8 _____ _____
Owner Contact Address Owner Contact E-Mail

_____ _____ _____
Signature (Prime or Subcontractor) Date Title

For each qualifying project, attach a copy of:

- *Plan view and elevation sheet*
- *Award letter,*
- *Contract signature sheet*
- *Contract cover sheet*
- *and other documentation that verifies the Prime Contractor performed the work, if needed.*

If the Prime Contractor signature sheet does not contain project identification, include a contract cover sheet that includes the contract name and number.