Annex E - Personnel Qualifications Experience

(Note: All sheets form part of the proposal)

Submit multiple copies of Annex F, one for each Operator proposed in this Proposal

*** Submit a copy (ies) for any proposed operator(s) of subcontractor(s) ***			
Respondent Name:			
Operator's Information			
Employee/Operator's Full Name	Title	Total Years Excavator Operation Experience**	
** A minimum of two (2) years' total ex	perience required		
Operator's Training			
Training/certification(s) received for ex	cavator operation (attach all ı	elevant certifi	cations):
Type of Training/Certification			Year Completed
Operator's Experience with Similar	<u>Projects</u>		
Type of Excavation Work Performed Date		_	Ending Date
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