

LAND SURVEYORS SUPPLEMENT

1. Name of Applicant: Yes No
2. Is the Applicant or any staff member a licensed land surveyor? ___ ___
3. Does the Applicant you keep duplicate copies of survey documents (including field notes, plans, maps and governmental approvals of projects) at a different location? ___ ___
4. Is the Applicant engaged in:
- a. construction, fabrication or erection? ___ ___
 - b. the manufacture, sale or distribution of any product, process or patented production process? ___ ___
 - c. real estate development ___ ___
5. Does the Applicant employ any On-Staff Licensed Engineers, Drafters and Survey Analysts? If "yes", please advise details. ___ ___
6. Are all completed and plotted surveys reviewed by a survey analyst and a field crew chief? ___ ___
7. Types of work:
- | | |
|--|--|
| a. Boundary/property survey ___% | d. Construction stakeouts ___% |
| b. Hydrographic surveys ___% | e. Photogrammetric surveys ___% |
| c. Plans/specifications for state highways, natural drainage systems, utilities, buildings or other structures - (please attach details) ___% | f. Subways ___% |
| | g. Aerial Photography ___% |
| | TOTAL 100% |
- h. Subdivision work- (do not include boundary or topographic surveys). Does the subdivision work include the preparation of plans/specifications for:
- | | |
|---|---|
| I. Grading and site work ___% | IV. Roads & streets ___% |
| II. Curbs, gutters & natural drainage ___% | V. Utilities ___% |
| III. Other (please describe) ___% | TOTAL 100% |
8. Please describe the procedures the Applicant takes to ensure that all locations of any underground power lines are identified PRIOR to the undertaking of any digging work.
9. Do you provide services with respect to:
- | | | | | | |
|-------------------------------------|------------|-----------|------------|------------|-----------|
| | <u>Yes</u> | <u>No</u> | | <u>Yes</u> | <u>No</u> |
| a. Bridges | ___ | ___ | d. Dams | ___ | ___ |
| b. Surveys of subsurface conditions | ___ | ___ | e. Tunnels | ___ | ___ |
| c. Site assessments | ___ | ___ | f. Other | ___ | ___ |

If any of the previous questions are answered "yes", please attach full details.

NOTICE

I understand that the information submitted herein becomes a part of my professional liability application and is subject to the same warranty and conditions. Must be signed and dated by an Owner, Partner or Principal as duly authorized on behalf of the Applicant.

nature of Owner, Partner or Principal Title Date Sig