

Oregon Department of Transportation

FORM E-1

PROJECT DESCRIPTION

Name of Proposer: _____

Respond for each Principal Participant, the Designer, and the Project Quality Manager.

Name of Entity: _____
Project Role: _____ Principal Participant: ____ Designer: _____ Project Quality Manager: _____
Years of Experience: Roads/Streets: _____ Bridges/Structures: _____ Utility Relocations: _____
Project Name, Location, Description, and Nature of Work for which Entity was responsible: _____ _____ _____ _____ _____
Describe Site Conditions: _____ _____ _____ _____ _____
(Use additional sheets as necessary to describe project and site conditions)
List any awards, citations, and/or commendations received for the project: _____ _____ _____
Name of Client (Owner/Agency, Contractor, etc.): _____ Address: _____ _____ Contact Name: _____ Telephone: _____ Owner's Project or Contract No.: _____ Fax No: _____ Contract Value (US\$): _____ Final Value (US\$): _____ Percent of Total Work Performed by Entity: _____ Commencement Date: _____ Planned Completion Date: _____ Actual Completion Date: _____ Amount of Claims: _____ Any Litigation? Yes ____ No ____