



CITY ROAD & RIGHT-OF-WAY PERMIT (“CRRP”) CONTRACTOR QUALIFICATION STATEMENT

This document is intended to provide information on the capacity, skill, and experience of the Contractor and must be completed in its entirety. Incomplete forms will be returned.

The City may contact your references to determine if you are sufficiently fit and skilled to perform the scope of work you have identified and may require you to update this Contractor Qualification Statement as necessary.

Contractor Company Name: _____

Principal: _____

Authorized Signatories (list all names) ⁽¹⁾: _____

WorkSafeBC Account Number: _____

Site Superintendent: _____

Site Safety Officer: _____

Business Address: _____

Phone: _____

Email: _____

1. Training, Certifications, Qualifications or Experience: (✓ all that applies. Certificates to be provided upon request)

	Yes	No	Number of Years of Experience
Excavation – underground utilities			
Excavation – shoring, sloping and benching			
Traffic control training			
Asbestos Cement pipe cutting and handling			
Silica and Lead exposure control			
Confined space			
Minimum level of First Aid (Occupational Health and Safety Regulations)			
Have you received any WorkSafeBC inspection or stop work orders in the last three (3) years?			
Have you received any WorkSafeBC warning letters or penalties in the last three (3) years?			
Have you assigned a Supervisor that has responsibilities that comply with Section 117 of the Workers’ Compensation Act?			
Do you have a qualified coordinator assigned to look after Health & Safety matters and for the purpose of ensuring the coordination of health and safety activities for each project?			

"Qualified" means being knowledgeable of the work, the hazards involved and the means to control the hazards, by reason of education, training, experience or a combination thereof.

2. Scope of Work that your company normally performs with its own forces: (✓ all that applies)

- Sanitary service connection
- Storm service connection
- Inspection chambers
- Ditch infill
- Driveways

Others: _____

3. Recent Completed Permits: (Must have been completed within the last two years)

Address: _____

Scope of Work: _____

Site Superintendent: _____

Name and Phone Number of Reference: _____

Address: _____

Scope of Work: _____

Site Superintendent: _____

Name and Phone Number of Reference: _____

Address: _____

Scope of Work: _____

Site Superintendent: _____

Name and Phone Number of Reference: _____

Contractor Authorized Signatory ⁽¹⁾

Print Name

Signature

Date

⁽¹⁾ It is the responsibility of the Contractor to email the City of Surrey at engineering@surrey.ca to add/remove their Authorized Signatories.

Personal information is collected for the purpose of verifying contractor qualifications. The City of Surrey is collecting this information under s.26 (c) of the *Freedom of Information and Protection of Privacy Act*. For questions regarding the collection of personal information, please contact the Records and Privacy Manager, 13450 - 104 Avenue, Surrey, British Columbia, V3T 1V8, privacy@surrey.ca.