DELAWARE DEPARTMENT OF TRANSPORTATION INFORMATION FOR CONSULTANT REGISTER

Nam	e of F	Firm:Phone No.:
Addı	ress:_	Fax No.:
Inter	net H	Iome Page Address:
Inter	net E	-Mail Address:
CHE	ECK A	AREA OF
REG	SISTR	RATION AREAS OF EXPERTISE
		PROFESSIONAL SERVICES AS DEFINED CERTIFICATES OR
		BY CHAPTER 69, TITLE 29 REGISTRATIONS NEEDEL
	1	Highway Design
	2	Structure Design
	3	Local Road and Street Design
	4	Construction Services
	5	Traffic Engineering
	6	Soil Engrg. And Geologic Studies
	7	Transit Design
	8	Aviation Design

Architecture B
Landscape Architecture D

(NO PROFESSIONAL CERTIFICATES

OR REGISTRATIONS REQUIRED)

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18 19 OTHER SPECIALIZED

Environmental Studies

Highway Planning
Transit Planning

Aviation Planning

Rail Planning

CONSULTANT SERVICES

Materials Inspection and Testing

Management Studies (Technical and Organizational)

Public Involvement (Marketing, Advertising, and Public Relations)

For Professional Services as defined by Delaware Code, the firm must have obtained the following certificates or registration as applicable (<u>submit current copies of applicable</u> <u>certificates and/or registrations for the areas shown below</u>).

I. <u>Pro</u>	ofessional Servi	ice's Certifications/Registrations:		
	A. <u>Profession</u>	ral Engineering: Firm's Certificate of Authorization No.		
	B. Architectur	Individual's Name and Delaware Registration Number		
	C. Land Surv	eying: Individual's Name and Delaware Registration Number		
	D. <u>Landscape</u>	Architecture: Individual's Name and Delaware Registration Number		
NOTE	E: <u>Registration</u>	as for A., B., C. and D. MUST be full-time employees of the consulting		
II.	FIRM'S ADI DelDOT.	ORESS - Please use the address that your firm wants on record with		
III.	<u>FIRM'S CONTACT PERSON</u> - Please list below the name and phone that you would like to have as your firm's contact person with Delaware DOT:			
	Name:			
	Phone No.:	E-Mail Address:		
	NOTE:	Any subsequent changes in contact personnel or addresses shall be presented in writing to Delaware DOT's Consultant Control Coordinator.		
IV.	AUTHORIZI	ED CONSULTANT SIGNATURE(s):		
v.	FIRM'S FED	DERAL I.D. NO.:		