

roadway in the area surrounding the existing culverts, removal of the existing culverts, and relocation of existing sanitary sewer facilities in close proximity to the existing culverts. The project also includes realignment of the existing streambed and stabilization of the streambed with concrete block channel lining material. The finished project will consist of the new concrete arch bridge, a cleared and stabilized stream channel approximately two-hundred feet on both the upstream and downstream side of the new bridge, relocated sanitary sewer facilities, and a new roadway with guardrail and sign improvements.

5. License Compliance per provided Scope of Work

Licensing Requirements Per Escambia County Building Inspections:

- No License Required
- Building Contractor, State Certified
- Building Contractor, State Registered
- Building Contractor
- Building Contractor, Escambia Co. Only
- Demolition Contractor
- Electrical, State Certified
- Electrical, State Registered
- Electrical, Escambia County Contract Only
- General Contractor, State Certified
- General Contractor, State Registered
- General Contractor
- Lawn Sprinkler & Irrigation
- Marine Contractor
- Mechanical Contractor, State Certified
- Mechanical Contractor, State Registered
- Mechanical Contractor
- Mechanical, Escambia County Contract Only
- Roofing, Unlimited, State Registered
- Roofing, Unlimited, State Certified
- Roofing, Limited
- Roofing, Unlimited
- Sign Electrical Contractor, State Registered
- Sign Electrical Contractor, State Certified
- Steam Gen. Boiler/And Piping
- Tower/Antenna
- Underground Utility/Excavation State Registered
- Underground Utility/Excavation State Certified
- Other _____
- Other _____
- Other _____
- Other _____

I have provided the requested information, to include "Permitting Questionnaire" (Escambia County Purchasing Form F0072) to Escambia County Building Inspections and have reviewed with them the necessary permitting and licensing requirements.

A/E Firm or Client Department Name: _____

Address: _____

Architect's/Engineer's or Department's Contact Name _____

Telephone: _____

Fax: _____

Email: _____

Signature: _____