



CONFIDENTIAL REPORT

The following information and references
are being supplied to:

THE INVESTIGATIVE ENGINEERS ASSOCIATION
to help them determine the business qualifications of:

INDIVIDUAL(S)

OF

CORPORATION

PLEASE ATTACH COPIES OF THE FOLLOWING:

1. Copy of Business and Professional Engineering Licenses
2. Certificate of Insurance (Note: Agent may send directly)
3. Curriculum Vitae/Resumes of Firm Principal(s)

GENERAL INFORMATION:

Legal Firm Name and DBA (if app):

Contact 1. Title P.E. Email:

Contact 2. Title P.E. Email:

Contact 3. Title P.E. Email:

Contact 4. Title P.E. Email:

Physical Address

City: State: Zip:

Mailing Address:

City: State: Zip:

Business Phone: Mobile Phone: Fax:

Home Phone:

Website:

Do you have more than one location? Yes No

Number of Office Locations:

Please list other locations:

City, ST

City, ST

City, ST

City, ST

Average Annual Volume Year Business Began

Types of Engineering Services Rendered:

Associations, Memberships and Awards

BUSINESS OPERATIONAL INFORMATION:

Number of Professional Engineers Number of Mgmt. Personnel
Number of Draftsmen Number of Administrative Personnel

Do you have public relations staff/marketing personnel? Yes No

Would you be active in the day to day operation of the new business? Yes No

List all who would be active new IE business/and designation and/or Title:

| | | | |
|----|----------------------|-------------------------------------|-----------------------------|
| 1. | <input type="text"/> | Designation(s) <input type="text"/> | Email: <input type="text"/> |
| 2. | <input type="text"/> | Designation(s) <input type="text"/> | Email: <input type="text"/> |
| 3. | <input type="text"/> | Designation(s) <input type="text"/> | Email: <input type="text"/> |
| 4. | <input type="text"/> | Designation(s) <input type="text"/> | Email: <input type="text"/> |
| 5. | <input type="text"/> | Designation(s) <input type="text"/> | Email: <input type="text"/> |

Office Space Sq. Ft.:

Does your firm have its own laboratory? Yes No

What kind?

Is it certified? Yes No

Does your firm have special expertise, capabilities or equipment you would like to offer to the network and/or through the network. If so, please describe.

FIRM JOB HISTORY:

Please list the last five jobs your firm completed:

| | |
|----|----------------------|
| 1. | <input type="text"/> |
| 2. | <input type="text"/> |
| 3. | <input type="text"/> |
| 4. | <input type="text"/> |
| 5. | <input type="text"/> |

BUSINESS REFERENCES:

Company:

Contact and Title:

City, State Phone Number

Company:

Contact and Title:

City, State Phone Number

What is your most important reason for wanting to join the Investigative Engineers Association?

Please accept the enclosed information to assist you and your staff in determining my company's compatibility with your service and system requirements. The information contained herein is correct and accurate to the best of my knowledge. I-ENG-A hereby agrees to hold information confidential. You are authorized to call, at your option, any of the references listed herein or other public records concerning:

Firm Name:

Individual: Title:

Signature: Date:

I-ENG-A Signature Title:

Date:

Please print form and fax it to (954) 537-4942 and/or click submit to email the .xml data.