

ORIGINAL



STATEMENT OF QUALIFICATIONS WITH COST PROPOSAL

RFQ/P #43-025 Technical Response
Wauka Mountain Compactor Site
Design and Renovation

Proposer Name:

Hussey, Gay, Bell & DeYoung, Inc.,
Consulting Engineers

Contact Person:

Christine E. Sims, RLA, Project Manager
A: 3100 Breckinridge Boulevard, Building 300
Duluth, Georgia 30096-4986
T: 770.923.1600; M: 404.218.1302
E: csims@husseygaybell.com

Date of Submittal:

May 16, 2023
2:00pm

HUSSEY GAY BELL
— Established 1958 —



Cover Letter and Executive Summary

May 16, 2023

Mr. Mike Hawkins, Issuing Officer
Purchasing Division
Hall County Government Center
2875 Browns Bridge Road
Gainesville, GA 30504

RE: Request for Qualifications with Cost Proposal
RFQ/P #43-025 Wauka Mountain Compactor Site Design and Renovation

Dear Mr. Hawkins and Members of the Selection Committee:

We welcome this opportunity to respond to your request for qualifications with cost proposal for the Wauka Mountain Compactor Site Design and Renovation. Hussey, Gay, Bell & DeYoung, Inc., Consulting Engineers has a long history of providing quality services for Hall County and is especially qualified to assist the county with the necessary services of site design and renovation outlined in the request for qualifications.

Hussey Gay Bell has completed hundreds of projects that utilized the specialties required for the County's site design and renovation project. To honor the County's request, we have detailed projects of significant importance to the County in Section E including, but not limited to, the Sardis Compactor Site in Hall County and the two Convenience Recycling Centers in Union County. Our footprints are evident over public and private projects of every type. While we grow, adding new and more services and disciplines, we continue to provide individual attention to our clients. We understand that Owners have many choices when choosing a professional design firm to represent their flag, and we do not forget the importance of trust and loyalty. We want you to be a repeat Client and we do everything in our power to make that happen.

Hussey Gay Bell has offices located strategically throughout three states. We are headquartered in Savannah and serve south Georgia with that office and one in Statesboro. North Georgia is served with offices in Atlanta and Blue Ridge. Our South Carolina offices include Greenville, Charleston and Columbia while Tennessee is served by our Nashville office. With these eight offices, we have a deep bench of over 150 staff, versed in a variety of skills from which to draw, if needed.

The Duluth office will serve Hall County for this venture which is comprised of nearly 30 professionals with civil engineering and site design, planning and transportation design, architecture and surveying experience.

The Principal-in-Charge of this project will be Christie Sims, RLA. Christie is Vice President of the Atlanta office for Hussey Gay Bell and has led many of the site design projects that we have performed for Hall County, formerly as Hayes | James and now as Hussey Gay Bell. Christie lives in Hall County, is very familiar with the area and its challenges, and has visited the site. The physical and mailing address for her office is 3100 Breckinridge Blvd., Building 300, Duluth, GA 30096. The telephone number is 770.923.1600 and Christie's mobile phone number is 404.218.1302.

Mr. Hawkins
May 16, 2023
Page 2 of 24

Additionally, we have read the RFQ/P carefully, including Addendum No. 1 dated May 8, 2023. We have also reviewed Exhibit K: Sample Contract Template, and take no exceptions to the document.

Thank you again for the opportunity to continue to serve Hall County.

Sincerely,

HUSSEY, GAY, BELL & DEYOUNG, INC., CONSULTING ENGINEERS

A handwritten signature in blue ink that reads "Christine Sims". The signature is written in a cursive, flowing style.

Christine E. Sims, RLA
Vice President, Atlanta

CES/sms

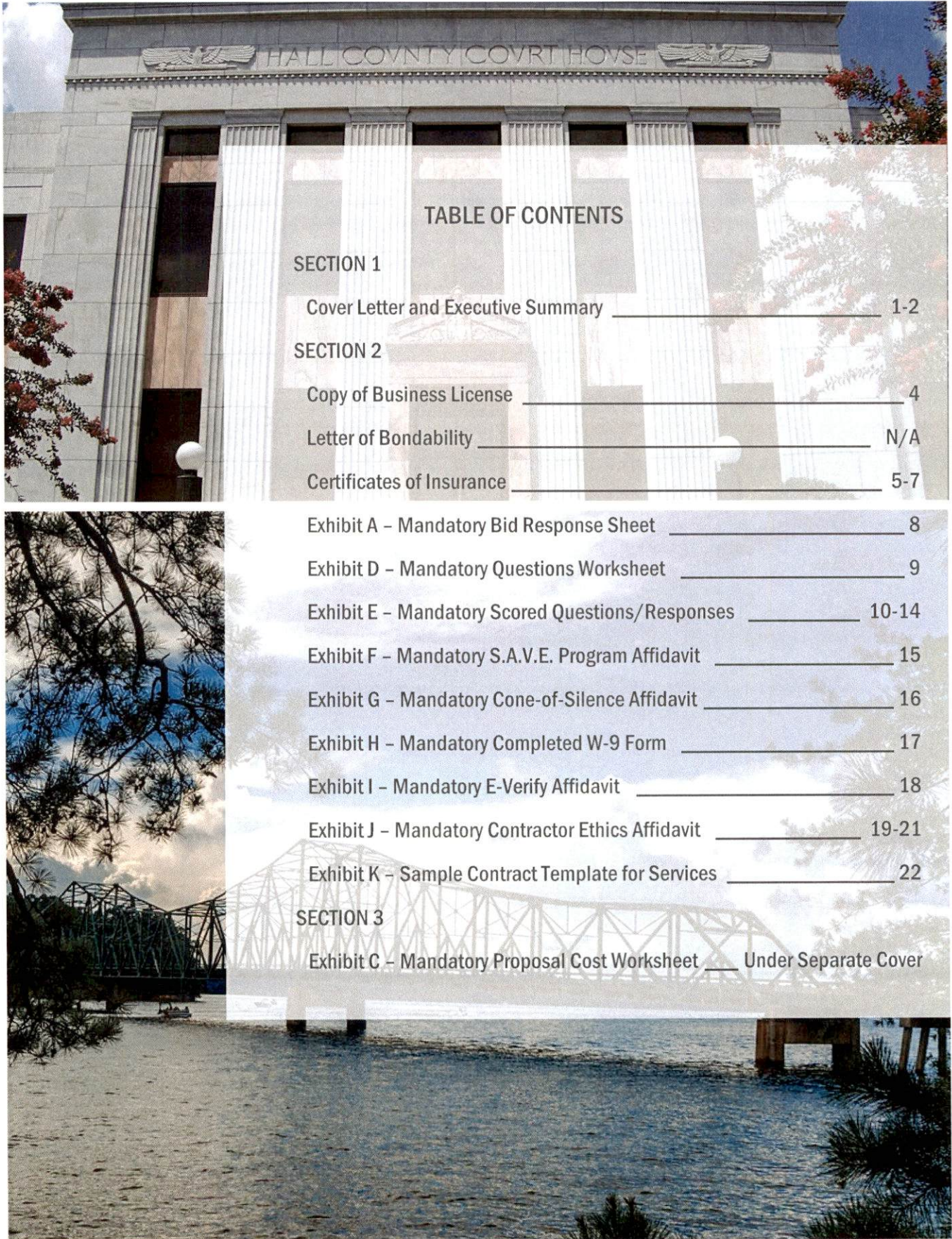


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SECTION 3

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Copies of Business Licenses

State professional licenses to provide engineering and surveying services



STATE OF GEORGIA
BRAD RAFFENSPERGER, Secretary of State
State Board of Registration for Professional Engineers and
Land Surveyors
LICENSE NO. PEF000339
Hussey Gay Bell & DeYoung Inc.
329 Commercial Dr
Savannah GA 31406
Engineer Firm
EXP DATE - 06/30/2024 Status: Active
Issue Date: 07/13/1989



STATE OF GEORGIA
BRAD RAFFENSPERGER, Secretary of State
State Board of Registration for Professional Engineers and
Land Surveyors
LICENSE NO. LSF000300
Hussey, Gay, Bell & Deyoung, Inc.
P.O. Box 14247
Savannah GA 31416-1247
Land Surveyor Firm
EXP DATE - 06/30/2024 Status: Active
Issue Date: 01/30/1991

CERTIFICATES OF INSURANCE

Certificates of Professional Liability Insurance and Errors and Omissions Insurance



HUSSGAY-01

ABOUTLE

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/13/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Palmer & Cay LLC 40 Calhoun Street Suite 475 Charleston, SC 29401	CONTACT NAME: Alicia Bootle
	PHONE (A/C, No, Ext): (843) 577-9387
	FAX (A/C, No):
	E-MAIL ADDRESS: alicia.bootle@palmerandcay.com
	INSURER(S) AFFORDING COVERAGE
	NAIC # 20443
INSURED Hussey, Gay, Bell & DeYoung, Inc. 329 Commercial Drive, Suite 200 Savannah, GA 31406	INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/>						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N / A						PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Professional Liab			AEH591950154	6/14/2022	6/14/2023	Limit - Per Claim 5,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Per Claim - \$5,000,000
 Aggregate - \$5,000,000
 IFB #055-43 Wauka Mountain Compactor Site Design and Renovation

CERTIFICATE HOLDER Hall County Georgia POST OFFICE DRAWER 1435 Gainesville, GA 30503	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
---	---

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CERTIFICATES OF INSURANCE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/14/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Chatham Insurance Partners PO Box 5370 Savannah GA 31414	CONTACT NAME: Elizabeth S. Hamrick	
	PHONE (A/C, No, Ext): 912-232-2500	FAX (A/C, No): 912-232-2510
E-MAIL ADDRESS: elizabeth@chathaminsurance.com		
INSURED Hussey Gay Bell & DeYoung, Inc. Consulting Engineers Attn: Tony Uhrich 329 Commercial Drive, #200 Savannah GA 31406	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Hartford Underwriters Ins Co	
	INSURER B: Hartford Accident & Indemnity	
	INSURER C: Hartford Fire Insurance Company	
	INSURER D:	
	INSURER E:	
INSURER F:		

COVERAGES **CERTIFICATE NUMBER: 1302197192** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y Y	20SBAAF8GLV	4/1/2023	4/1/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/POP AGG \$ 2,000,000 \$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	Y Y	20UECEF2242	4/1/2023	4/1/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000 <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE	Y Y	20SBAAF8GLV	4/1/2023	4/1/2024	EACH OCCURRENCE \$ 8,000,000 AGGREGATE \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y N/A	20 WEC AF4WK2	4/1/2023	4/1/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	Equipment Floater		20 MS EF 1311	4/1/2023	4/1/2024	Scheduled Equipment \$359,288 Newly Acquired Equip. \$100,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 See attached pages for coverage notes and forms.

 See Attached...

CERTIFICATE HOLDER Hall County Board of Commissioners P O Drawer 1435 Gainesville GA 30503	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE

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AGENCY CUSTOMER ID: HUSSE-1

LOC #: _____



ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY Chatham Insurance Partners		NAMED INSURED Hussey Gay Bell & DeYoung, Inc. Consulting Engineers Attn: Tony Uhrich 329 Commercial Drive, #200 Savannah GA 31406	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE**

NAMED INSURED SCHEDULE:
 HUSSEY GAY BELL & DEYOUNG, INC CONSULTING ENGINEERS
 HUSSEY GAY BELL & DEYOUNG INTERNATIONAL, INC.
 HUSSEY GAY BELL & DEYOUNG ENVIRONMENTAL, INC.
 HUSSEY GAY BELL & DEYOUNG CONSULTING ENGINEERS OF SC, INC.
 HUSSEY GAY BELL-NASHVILLE, LLC
 HAYES, JAMES & ASSOCIATES, INC.

ADDITIONAL INSURED AUTOMATIC STATUS AND OTHER REQUIREMENTS: (SEE ATTACHED FORMS):

General Liability and Auto policies include:
 -Automatic Additional Insured as required by contract
 -Blanket Waiver of Subrogation
 -Primary and Non Contributory
 -Per Project Aggregate as required by contract

Worker's Compensation policy includes:
 -Blanket Waiver of Subrogation

South Carolina and Tennessee are rated States on the Worker's Compensation policy

Umbrella policy follows form of the underlying General Liability and Auto policies

CANCELLATION:

a. The Named Insured first shown in the Supplemental Policy Declarations may cancel this Supplemental Policy by mailing or delivering to us or to any of our authorized agents advance written notice of cancellation.
 b. We may cancel this Supplemental Policy by mailing or delivering to the Named Insured first shown in the Supplemental Policy Declarations at the address shown in the Supplemental Policy Declarations, written notice of cancellation at least:
 (1) 10 days before the effective date of cancellation if such Named Insured fails to pay the premium or any installment when due; or
 (2) 30 days before the effective date of cancellation if we cancel for any other reason

OTHER COVERAGES INCLUDED IN THE HARTFORD PACKAGE POLICY:

Data Breach Coverage:
 Limit Response Expenses: \$1,000,000
 Limit Defense & Liability: \$ 500,000
 Deductible: \$ 10,000

Equipment Floater:
 Owned/Scheduled Equipment: \$359,298
 Leased/Rented Equipment: \$100,000
 Newly Acquired Equipment: \$100,000
 Deductible: \$ 2,500

Employee Dishonesty: \$100,000

Re: IFB #055-43 Wauka Mountain Compactor Site Design and Renovation





Hall County Government
FINANCIAL SERVICES

EXHIBIT A

MANDATORY BID RESPONSE FORM

Bidders must complete and return this form with their bid

POST OFFICE DRAWER 1435
GAINESVILLE, GA 30503

By submitting a proposal, the respondent certifies that they have fully read and understand the proposal's Scope of Work and fully understands the requirements needed to complete the project. The services offered and the cost factor must be valid for at least one-hundred and twenty (120) days from date of signature.

t: 770.535.8270 | f: 770.531.6711

DIRECTOR
Wesley Geddings

Date of Bid Submittal: 05/16/23 Bid No: # 43-025

Bid Name: Wauka Mountain Compactor Site Design and Renovation

Affirmation: Bidder affirms the following by affixing a wet signature in blue ink below:

"I, the undersigned, agree to abide by all terms and conditions of this solicitation and certify that I am authorized to sign this bid proposal".

Bidder Signature: Christine Sims Date: 5-16-23

Print Name: Christine E. Sims

Title: Vice President, Atlanta

Print Name: Christine E. Sims

Phone Number: 770-923-1600

Email Address: csims@husseygaybell.com

Physical Address: 3100 Breckinridge Boulevard, Building 300

Physical Address 2: Duluth, GA 30096

Acknowledge receipt of all issued addenda (if any) by listing their numbers and date of issuance below: Addendum 1, dated May 8, 2023

Bids not signed may be declared as "Non-Responsive" and will not be evaluated.

If you desire to submit a "No Bid" then please indicate by checking one or both of the reasons listed below and explain.

- Bidder does not offer this service
- Unable to meet specifications
- Remove my company from the bidder's list



EXHIBIT D

MANDATORY QUESTIONS

Bidder's company name: Hussey, Gay, Bell & DeYoung, Inc., Consulting Engineers

All questions must be answered. All questions are Yes/No answers only

No.	Question	Yes/No
1	Have you completed and attached a completed EXHIBIT A - MANDATORY BID RESPONSE WORKSHEET?	Yes
2	Do you agree to the EXHIBIT B - BID SUBMITTAL TERMS AND CONDITIONS?	Yes
3	Have you completed and attached EXHIBIT C -MANDATORY COST PROPOSAL WORKSHEET separately in a physical or digitally sealed envelope?	Yes
4	You are required to have your proposal also on a USB flash drive if you turn in a physical response. Have you provided your bid response on a USB Flash Drive? Is responding digitally then just answer yes.	Yes
5	Have you completed and attached the EXHIBIT F -S.A.V.E. AFFIDAVIT?	Yes
6	Have you completed and attached the EXHIBIT G -CONE-OF-SILENCE AFFIDAVIT?	Yes
7	Have you completed and attached the EXHIBIT H -W-9 FORM?	Yes
8	Have you completed and attached the EXHIBIT - I E-VERIFY AFFIDAVIT?	Yes
9	Have you completed and attached the EXHIBIT J - MANDATORY ETHICS AFFIDAVIT?	Yes
10	Have you read and signed * EXHIBIT K - SAMPLE CONTRACT TEMPLATE FOR SERVICES?	Yes*
11	This Bid requires that bidders to attach a copy of their current Business License. Have you attached this document?	Yes
12	Bid Bonds are not required, but a letter of P&P Bondability is required. Have you attached this letter?	No*
13	Have you provided your Certificate of Insurance?	Yes
14	Do you affirm that neither your firm, nor its principals, are barred from work in the State of Georgia?	Yes
15	Do you affirm that neither your firm, nor its principals, are currently in litigation with Hall County, Georgia?	Yes

*According to Addendum No. 1, this is not a requirement for the Design Team.

EXHIBIT E

MANDATORY SCORED QUESTIONS/RESPONSES TECHNICAL RESPONSE WORKSHEET

Bidder's company name: Hussey, Gay, Bell & DeYoung, Inc., Consulting Engineers

All ten (10) questions below **MUST** be answered. Each question is weighted and scored for completeness and detail. The maximum possible amount of points is eight-hundred (800) total. The County's Evaluation Committee will review and assign percentage scores to each question depending on the answers provided. The maximum amount of points is eight-hundred (800) for this Technical Response Worksheet, and 200 maximum points for the Mandatory Proposal Cost Schedule, tendering a total of 1,000 possible maximum points. The Contractor(s) with the highest point values will be considered the apparent contract award winner(s) and may be invited to interview with the County's Evaluation Committee for further discussions, and may be asked to enter into further negotiations. Use additional pages and attach if needed.

No.	Question	Answer
1	Does your company have at least three (3) sequential years of experience in consulting services as detailed in the RFQ/P document?	PLEASE SEE ATTACHED SHEETS.
2	Describe in narrative form at least three (3) projects within the past five (5) years, in similar size and scope that you have completed with project names, entity name, references names and contact details.	PLEASE SEE ATTACHED SHEETS.
3	Will any of the proposed services be subcontracted out to a third-party? If so, denote the work, the percentage of total, and list each of the legal entity's company names of the third-party(s).	PLEASE SEE ATTACHED SHEETS.
4	Describe the expertise of your work force. Supervisors, specialists, laborers. Are they full time employees, temporary workers?	PLEASE SEE ATTACHED SHEETS.
5	Safety for all parties is paramount. What are your company's safety policies and procedures?	PLEASE SEE ATTACHED SHEETS.

EXHIBIT E

No.	Question	Answer
6	Accountability and documentation of records are critical for assessing completed work and level of quality. Will your company be capable of providing to the County your daily work schedule and daily check list for completed work daily?	PLEASE SEE ATTACHED SHEETS.
7	Explain your training process for each assigned position. Explain how all assigned staff is instructed to resolve possible complaints and/ or issues that may be brought directly to their attention during the course of their duties.	PLEASE SEE ATTACHED SHEETS.
8	Will there be a crew leader per each crew and will there be a full time supervisor overseeing all assigned duties and providing daily summaries of completed and proposed work for the following day?	PLEASE SEE ATTACHED SHEETS.
9	Describe how your company verifies that staff adequately performs work for delivery of the service(s) described under this RFQ/P. Also, include who within your company inspects, approves and verifies delivery of service(s) and how corrective actions with staff are implemented	PLEASE SEE ATTACHED SHEETS.
10	Per documentation of this solicitation you must keep a sufficient work force to perform the requirements of this contract. Describe how you will continue to maintain this work force. What is your companies succession planning when an employee quits or calls out?	PLEASE SEE ATTACHED SHEETS.



May 16, 2023

RE: RFQ/P #43-025
Wauka Mountain Compactor Site Design and Renovation
Exhibit E - Worksheet Responses

1. *Does your company have at least three (3) sequential years of experience in consulting services as detailed in the RFQ/P document?*
 - A. Hussey Gay Bell has been in continuous operation for more than 65 years providing consulting services to local governmental clients. The firm offers a fully integrated range of engineering disciplines including civil, water/wastewater, transportation, natural gas, environmental and structural in addition to architecture, interiors, landscape architecture and surveying.
2. *Describe in narrative form at least three (3) projects within the past five (5) years, in similar size and scope that you have completed with project names, entity name, references names and contact details.*
 - A. Hussey Gay Bell has completed hundreds of projects that utilized the specialties required for the County's site design and renovation project. To honor the County's request, we have provide a matrix immediately following these responses with requested information demonstrating our experience related to the County's project.
3. *Will any of the proposed services be subcontracted out to a third-party? If so, denote subcontracted work, the percentage of the total, and list each of the legal entity's company names of the third-party(s).*
 - A. Hussey Gay Bell does not intend to use any third-party subconsultants.
4. *Describe the expertise of your workforce. Supervisors, specialists, laborers. Are they full-time employees, temporary workers?*
 - A. Hussey Gay Bell employs more than 150 full-time professionals in eight office locations throughout the region. Some administrative positions are classified as part-time, but no one is classified as a temporary worker. Hussey Gay Bell's Atlanta office is fully staffed with key disciplines that will be responsible for delivery of the County's projects including project management, civil/structural/environmental engineering, architecture, surveying and construction phase services.
5. *Safety for all parties is paramount. What are your company's safety policies and procedures?*
 - A. Hussey Gay Bell has an excellent safety record. This includes field and office personnel. Our survey field crews are accustomed to having periodic safety meetings and discuss possible hazards on each job site as they are encountered. Hussey Gay Bell maintains a written safety manual that each team member is provided at their time of hiring. The General Safety Plan dictates the firm's policy to provide a work environment that is inherently safe – free from conditions that are unsanitary, hazardous, or dangerous to the health and safety of our personnel. A copy of the full manual can be provided to the County, if desired.
6. *Accountability and documentation of records are critical for assessing completed work and level of quality. Will your company be capable of providing to the County your daily work schedule and daily check list for completed work daily?*
 - A. Hussey Gay Bell can provide to the County, any schedules to be followed throughout the project. While professional engineers/designers typically do not document each daily task, we can certainly prepare a checklist chart for client review as needed.



EXHIBIT E

May 16, 2023

Page 2 of 2

7. *Explain your training process for each assigned position. Explain how all assigned staff is instructed to resolve possible complaints and/or issues that may be brought directly to their attention during the course of their duties.*
 - A. Our professionals typically have college degrees in engineering, planning, surveying, architecture, or transportation. Those that do not, have some form of advanced training in their field and are provided continuing education opportunities throughout their employment. We engage all staff in specialty training each month by bringing in vendors to educate staff on new techniques and products. Much of our staff is engaged in some form of leadership training and put into situations where they observe how to act professionally in their relationships with others. There is a clear structure of leadership within each team from Principal-in-Charge to Project Manager to design team staff. The Project Manager is in constant communication with the design team staff and if in the unlikely event, communication and/or technical issues arise, the Project Manager will communicate directly with the County's staff and take appropriate action to mitigate the issue to ensure successful project completion.

8. *Will there be a crew leader per each crew and will there be a full time supervisor overseeing all assigned duties and providing daily summaries of completed and proposed work for the following day?*
 - A. We work in teams during our site design projects. There is a Project Manager that oversees the work being done and periodically, independent quality control/assurance individuals review the plans as well to ensure a high-quality deliverable. All assigned duties are delegated by the Project Manager and are typically assigned during Monday morning team meetings. At times, project schedules can change, often due to unforeseen issues or when time-sensitive requests from clients are received. We are equipped to pivot quickly to assist where needed.

9. *Describe how your company verifies that staff adequately performs work for the delivery of service(s) described under this RFQ/P. Also, include who within your company inspects, approves, and verifies delivery of service(s) and how corrective actions with staff are implemented.*
 - A. We have a team system where the Project Manager ensures that all staff are performing their assigned duties and not moving ahead with unauthorized tasks. A separate registered individual oversees Quality Assurance/Quality Control to ensure that sound engineering, surveying and planning procedures are followed and the project can be safely and efficiently built by the contractor. During the construction phase of the project, we have qualified personnel that are skilled at inspections for plan adherence, erosion control, planting plans, etc. Site construction reports are filled out and distributed to appropriate personnel and filed for future reference.

10. *Per documentation of this solicitation you must keep a sufficient workforce to perform the requirements of this contract. Describe how you will continue to maintain this workforce. What is your company's succession planning when an employee quits or calls out?*
 - A. Hussey Gay Bell has adequate staff to perform all of the items necessary for this solicitation for proposals. Our workforce enjoys competitive wages, benefits, professional development opportunities and community engagement. Hussey Gay Bell creates a culture in our office of teamwork and camaraderie. Feedback from our employees indicates a sense of family and inclusiveness. If we were to lose a team member due to sickness or resignation, we would have a large group of similar employees to fill in the gap. With 8 offices, we have a deep bench of more than 150 staff, versed in a variety of skills from which to draw, if needed.

MATRIX OF SIMILAR PROJECTS

PROJECT/LOCATION	DESCRIPTION OF PROJECT	DATE OF COM- PLETION	DESIGN COST	CONTACT INFORMATION
Sardis Compactor Site, Hall County, GA	Redesign of existing compactor site with state-of-the-art compactor technology.	2018	\$17,000	Mr. Jason Skarda, Project Manager, Engineering Department, Hall County 2875 Browns Bridge Road, Gainesville, GA 30504 T: 770.531.6800, E: jskarda@hallcounty.org
Landfill Project, Union County, GA	Worked with County and EPD to revise and update the convenience center at the closed landfill off Deep South Farm Road. Included survey and civil design of a new topping floor facility, bag drop-off and recycling center	2016- 2017	\$150,000	Mr. Lamar Paris, Sole Commissioner, Union County Government, 65 Courthouse Street, Suite 1, Blairsville, GA 30512 T: 706.439.6000, E: ucmanager@uniongov.com
Convenience Center, Union County, GA	Worked with County to provide surveying and civil plans on a convenience center off Highway 515 for a bag drop-off and recycling center.	2016	\$120,000	Mr. Lamar Paris, Sole Commissioner, Union County Government, 65 Courthouse Street, Suite 1, Blairsville, GA 30512 T: 706.439.6000, E: ucmanager@uniongov.com
Via Sat Antenna Test Site, City of Duluth, GA	Site, grading/drainage, storm water detention, utility coordination, erosion control plans for 5-acre site of antenna test pad, gravel drives and parking. Multiple driveway options provided. Storm water detention pond, permitting assistance, initial erosion inspections.	2021	\$83,000	Mr. David McGoldrick, Director of Industrial Studio Nelson Worldwide, 5200 Avalon Boulevard, Alpharetta, GA 30009 T: 770.209.9393, E: dmcgoldrick@nelsonww.com
County Maintenance Facility Expansion, Forsyth County, GA	Master Plans for this 20-acre combined parcel containing Maintenance Departments of Fleet Department, Water and Sewer Department and the Roads and Bridges Department.	2017- 2022	\$149,000	Mr. James Weldon, Capital Projects Manager, Forsyth County Dept. of Public Facilities, 514 West Maple Street, Suite 540, Cumming, GA 30040 T: 770.781.2101, E: jweldon@forsythco.com



Hall County Government
FINANCIAL SERVICES

S.A.V.E Program PRIME CONTRACTOR Affidavit
Under O.C.G.A. § 13-10-91(b) (1)

Systematic Alien Verification for Entitlements (SAVE) Program
Office of U.S. Citizenship and Immigration Service (USCIS).

POST OFFICE DRAWER 1435
GAINESVILLE, GA 30503
t: 770.535.8270 | f: 770.531.6711
DIRECTOR
Wesley Geddings

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is contracting with Hall County, Georgia, has registered and is participating in a federal work authorization program* (an electronic verification of work authorization program operated by the U.S. Department of Homeland Security or any equivalent federal work authorization program operated by the U.S. Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform And Control Act of 1986 (IRCA), in accordance with the deadlines established in the referenced statute.

Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work-authorization user identification (E-Verify) number and date of authorization are as follows:

*The applicable federal work authorization program as of the effective date of the statute is the E-Verify Program of the Systematic Alien Verification for Entitlements (SAVE) Program Office of U.S. Citizenship and Immigration Service (USCIS). To register for the E-Verify Program visit www.uscis.gov. The County will not accept bids without a valid E-Verify Number.

Hussey, Gay, Bell & DeYoung, Inc.,
Consulting Engineers
Name of Prime Contractor

398475
Contractor's/Vendor's E-Verify #

3100 Breckinridge Blvd., Bldg. 300
Street Address

Duluth, GA 30096
City / State

Christine Sims
Signature of Authorized Officer or Agent

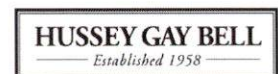
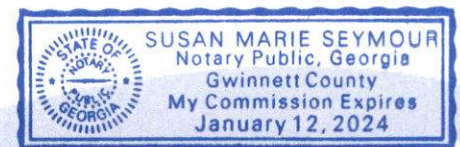
March 8, 2011
Date of Authorization

Christine E. Sims, Vice President, Atlanta
Printed Name/Title of Authorized Officer

Wauka Mountain Compactor
Site Design and Renovation
Name of Project

Subscribed and sworn before me on this the
15th Day of May, 2023

Susan Marie Seymour
Notary Public
My Commission Expires 01/12/2024





Hall County Government
FINANCIAL SERVICES

EXHIBIT G

Mandatory Cone-of-Silence Affidavit

In order to ensure fair consideration for all Bidders responding to this Request for Qualifications and Cost Proposals, the County requires that all potential bidders, firms, companies, agents, or other entities refrain from discussions privately or publicly regarding the Solicitation during the Solicitation process. This includes all staff, employees, subcontractors, as well as paid or unpaid personnel acting on the firm's behalf shall not contact nor participate in any type of contact with County employees, department heads or elected officials, up to and including the County Administrator and Board of Commissioners.

Therefore, the County issues this "Cone of Silence" that shall be in effect from the date the solicitation is publicly advertised, until the time an award decision has been approved by the Board of Commissioners and fully executed by all parties. Contact should only be between the bidding firms and the Issuing Officer/Buyer listed in the Solicitation documents.

Any such contact may be considered as collusion and may result in the bidder being disqualified from participation and consideration for award. All contact must be coordinated through the Issuing Officer, for the procurement of these products and/or services.

Please reference the Solicitation number on all correspondence to the County. Any oral communications shall be considered unofficial and non-binding.

Only written responses to written communication shall be considered official and binding upon the County. The County reserves the right, at its sole discretion, to determine appropriate and adequate responses to the written comments, questions, and requests for clarification.

Bidder Attestment:

I understand and shall fully comply with the above requirements.

Signed: Christine Sims

Typed Name: Christine E. Sims

Job Title: Vice President, Atlanta

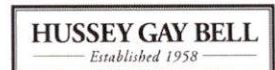
Company: Hussey, Gay, Bell & DeYoung, Inc., Consulting Engineers

Date: _____

POST OFFICE DRAWER 1435
GAINESVILLE, GA 30503

t: 770.535.8270 | f: 770.531.6711

DIRECTOR
Wesley Geddings



Form **W-9**
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Hussey Gay Bell & DeYoung, Inc. Consulting Engineers		
	2 Business name/disregarded entity name, if different from above		
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) <u>N/A</u> Exemption from FATCA reporting code (if any) <u>N/A</u> <small>(Applies to accounts maintained outside the U.S.)</small>
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ▶ _____		
	5 Address (number, street, and apt. or suite no.) See instructions. 329 Commercial Drive, Suite 200		Requester's name and address (optional)
	6 City, state, and ZIP code Savannah, GA 31406		
	7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
or									
Employer identification number									
5	8	-	0	8	7	3	1	5	1

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶ <i>Stephen Mark Bell</i>	Date ▶ <i>4/17/2023</i>
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

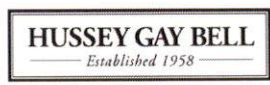
Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.





Hall County Government
FINANCIAL SERVICES

EXHIBIT I
MANDATORY E-VERIFY AFFIDAVIT

The undersigned contractor ("Contractor") executes this Affidavit to comply with O.C.G.A § 13-10-91 related to any contract to which Contractor is a party that is subject to O.C.G.A. § 13-10-91 and hereby verifies its compliance with O.C.G.A. § 13-10-91, attesting as follows:

POST OFFICE DRAWER 1435
GAINESVILLE, GA 30503

t 770.535.8270 | f. 770.531.6711

DIRECTOR
Wesley Geddings

- a) The Contractor has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program;
b) The Contractor will continue to use the federal work authorization program throughout the contract period, including any renewal or extension thereof;
c) The Contractor will notify the public employer in the event the Contractor ceases to utilize the federal work authorization program during the contract period, including renewals or extensions thereof;
d) The Contractor understands that ceasing to utilize the federal work authorization program constitutes a material breach of Contract;
e) The Contractor will contract for the performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the Contractor with the information required by O.C.G.A. § 13-10-91(a), (b), and (c);
f) The Contractor acknowledges and agrees that this Affidavit shall be incorporated into any contract(s) subject to the provisions of O.C.G.A. § 13-10-91 for the project listed below to which Contractor is a party after the date hereof without further action or consent by Contractor; and
g) Contractor acknowledges its responsibility to submit copies of any affidavits, drivers' licenses, and identification cards required pursuant to O.C.G.A. § 13-10-91 to the public employer within five business days of receipt.

398475 Federal Work Authorization User Identification Number
March 8, 2011 Date of Authorization
Wauka Mountain Compactor Name of Project
Hussey, Gay, Bell & DeYoung, Inc., Consulting Engineers Name of Contractor
Hall County, Georgia Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on May 15, 2023 in Duluth (city), GA (state).

Signature of Authorized Officer or Agent
Christine E. Sims, Vice President, Atlanta
Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE 15th DAY OF May, 2023.
Susan Marie Seymour
NOTARY PUBLIC



My Commission Expires: 01/12/2024 [Locus Sigilli]





Hall County Government

FINANCIAL SERVICES

EXHIBIT J MANDATORY ETHICS AFFIDAVIT

Contractors, consultants, and vendors of any service or commodity to Hall County, Georgia must read and affirm to adhere to the following ethics requirements for compliance with the Official Code 3.10.070 of Hall County.

POST OFFICE DRAWER 1435
GAINESVILLE, GA 30503

t. 770.535.8270 | f. 770.531.6711

DIRECTOR
Wesley Geddings

3.10.070. - Ethics.

- A. It is the policy of Hall County to seek the best overall value when procuring goods and services. Toward this end, the county finds and declares that its objectives will best be achieved through an open, competitive process with a broad range of responsible vendors wishing to furnish products and services to the county. Hall County will establish and conduct a procurement program that maximizes service benefit to the community and awards contracts to vendors who offer the best quality and value.
- B. Hall County declares that county employees and officials, along with those wishing to do business with the county, have the shared responsibility for avoiding biased, anticompetitive, or unethical practices.
- C. Hall County employees, officials, and their family members are prohibited from seeking, requesting, or receiving any material payment, gift, job offer, security, promise of future benefit, or any other tangible or intangible thing of value when such receipt has the potential to influence a procurement decision or to gain undue advantage in a procurement competition.
- D. Prospective vendors must compete for county business within the parameters of the solicitation process and are prohibited from seeking to obtain inside information, attempting to skew the writing of specifications, or influencing a procurement decision through any means outside the process established for the particular solicitation. This principle applies to any contractor, subcontractor, representative, employee, or agent that may be associated with a procurement transaction.
- E. Bidders and proposers shall disclose on competitive bid responses any individual(s), firm(s), and/or county official(s) who do business with the county if there is an appearance of a conflict of interest.

- F. Ethical business practices are important, both, during a solicitation, and after the decision to grant an award. The county seeks to establish relationships with business partners whose ongoing ethical standards of business conduct are congruent with those outlined here. The purchasing manager, subject to the approval of the director of financial services, is charged with establishing methods for ongoing monitoring for non-compliance with these principles. The prohibition against the offering of or the acceptance of kickbacks, gratuities, payments or any other instrument of value extends beyond and outside any specific procurement or solicitation.
- G. A vendor's contract compliance history with Hall County and other contractual parties is a valid element in the decision to award, or not, a contract.
- H. Hall County stipulates that the furtherance of its strategic goals for job creation, stability and growth in the tax base, business retention, and other fiscal and economic development objectives may be considered during the procurement process. The purchasing manager, subject to the approval of the director of financial services, is authorized to establish procurement initiatives consistent with the county's strategic economic development objectives. These procurement practices shall be applied consistently and equitably and shall have a direct relationship to the county's goals.
- I. Hall County employees, officials, and their family members are generally prohibited from participation in any procurement decision or any gain of undue advantage in a procurement competition as a result of contemporaneous employment with a potential or actual business partner.
- J. It is unethical for any county employee to purchase commodities or services from a county contract for personal use.
- K. With the exception of solicitations for the sale of real property, individuals, firms and businesses seeking an award of a Hall County contract may not initiate or continue any verbal or written communications regarding a solicitation with any county officer, elected official, employee or other county representative other than the purchasing associate named in the solicitation, or the county's financial advisor, between the date of the issuance of the solicitation and the date of the final contract award by the board of commissioners. The purchasing manager will review violations. If determined that such communication has compromised the competitive process, the offer submitted by the individual, firm or business may be disqualified from consideration for award. Solicitations for the sale of real property may

allow for verbal or written communications with the appropriate Hall County representative.

- L. All county commissioners, officials, and employees shall adhere to the standards outlined in the Hall County Code of Ethics.
- M. **(AMENDED)** The purchasing division of the financial services department shall determine and implement methods of educating all prospective contractors, bidders, proposers, and vendors on the requirements and provisions of Code Section 3.10.070, including, but not limited to, requiring each prospective contractor, bidder, proposer, and vendor that expresses an intent to do business with the County to sign an affidavit attesting that they have read this Chapter and have more specifically also read Code Section 3.10.070." (Res. of 11-14-19(1), § 1(Exh. A))

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on May, 15th, 2023 in Duluth (city),

GA (state) 30096 (Zip Code)

Christine E. Sims
Signature of Authorized Officer or Agent

Christine E. Sims, Vice President, Atlanta
Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

On This the 15th Day of May, 2023.

Susan Marie Seymour
NOTARY PUBLIC

My Commission Expires: 01/12/2024

[Locus Sigilli]

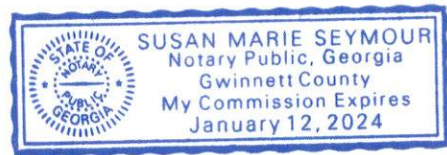


EXHIBIT K

We take no exception to the Sample Contract Template presented in the RFQ/P #43-025.



OFFICE LOCATIONS

329 Commercial Drive, Suite 200
Savannah, GA 31406
912.354.4626

3100 Breckinridge Boulevard, Bldg. 300
Duluth, GA 30096
770.923.1600

3830 East First Street, Suite 1
Blue Ridge, GA 30513
706.632.4981

1100 Brampton Avenue, Suite L-1
Statesboro, GA 30458
912.354.4626

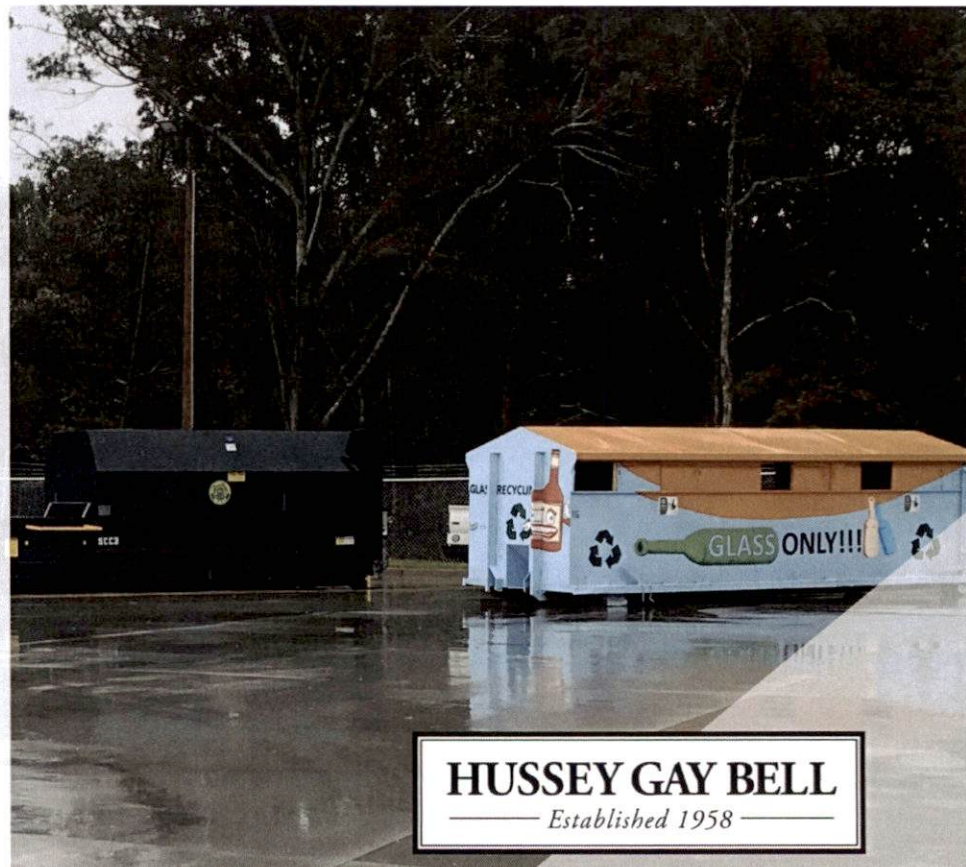
1010 Gervais Street, Floor 3
Columbia, SC 29201
803.799.0444

474 Wando Park Boulevard, Suite 201
Mt. Pleasant, SC 29464
843.849.7500

531 S. Main Street, Suite 201
Greenville, SC 29601
803.799.0444

4117 Hillsboro Pike, Suite 206
Nashville, TN 37215
615.460.7515

www.husseygaybell.com



HUSSEY GAY BELL
— Established 1958 —