FORM E
OFFEROR TEAM INFORMATION
(for Public Release)

Offeror Name: Hampton Roads Capacity Constructors, an unincorporated joint venture

Entity (check one box for entity completing Form E, as applicable):
☑ Offeror ☐ Lead Contractor ☐ Lead Designer

Name of Entity Completing Form E: Hampton Roads Capacity Constructors

Year Established: NA State of Organization: NA

Federal Tax ID No. (if applicable): NA Telephone No.: NA

North American Industry Classification System Code (if applicable): NA

Type of Business Organization (check one):
☐ Corporation
☐ Partnership
☑ Joint Venture
☐ Limited Liability Company
☐ Other (describe)

A. Business Address: 100 Fluor Daniel Drive, Mail Code C105D, Greenville, SC 29607
   Contact Telephone Number: 864-281-5160

B. Complete a separate E and Form G for each entity (Offeror, Lead Contractor, or Lead Designer) on Offeror team and include it with the SOQ. In addition, identify the name of such entities in the space below.

   Name
   Fluor Enterprises, Inc. (Lead Contractor Member)
   The Lane Construction Corporation (Lead Contractor Member)
   Trawlor Bros., Inc. (Lead Contractor Member)
   Dragages Civil Works Virginia, LLC (Lead Contractor Member)
   AECOM Technical Services, Inc. (Lead Designer)

Under penalty of perjury, I certify that the foregoing is true and correct, and that I am an official representative of the firm duly authorized to executed and deliver this Form E:

By: ___________________________ Print Name: Terence M. Easton
Title: Authorized Representative Date: February 21, 2018

[Please make additional copies of this form as needed.]
FORM E
OFFEROR TEAM INFORMATION
(for Public Release)

Offeror Name: Hampton Roads Capacity Constructors, an unincorporated joint venture

Entity (check one box for entity completing Form E, as applicable):
☐ Offeror ☒ Lead Contractor ☐ Lead Designer

Name of Entity Completing Form E: Fluor Enterprises, Inc.

Year Established: 1971 State of Organization: California

Federal Tax ID No. (if applicable): 95-2758280 Telephone No.: 469-398-7000

North American Industry Classification System Code (if applicable): 541330

Type of Business Organization (check one):
☒ Corporation
☐ Partnership
☐ Joint Venture
☐ Limited Liability Company
☐ Other (describe)

A. Business Address: 6700 Las Colinas Blvd., Irving, TX 75039

Contact Telephone Number: 864-281-5160

B. Complete a separate E and Form G for each entity (Offeror, Lead Contractor, or Lead Designer) on Offeror team and include it with the SOQ. In addition, identify the name of such entities in the space below.

Name
Hampton Roads Capacity Constructors (Offeror)
Fluor Enterprises, Inc. (Lead Contractor Member)
The Lane Construction Corporation (Lead Contractor Member)
Traylor, Bros., Inc. (Lead Contractor Member)
Dragages Civil Works Virginia, LLC (Lead Contractor Member)
AECOM Technical Services, Inc. (Lead Designer)

Under penalty of perjury, I certify that the foregoing is true and correct, and that I am an official representative of the firm duly authorized to executed and deliver this Form E:

By: ___________________________ Print Name: Terence M. Easton

Title: Vice President, Sales Date: February 21, 2018

[Please make additional copies of this form as needed.]
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Offeror Name: Hampton Roads Capacity Constructors, an unincorporated joint venture

Entity (check one box for entity completing Form E, as applicable):

☐ Offeror ☑ Lead Contractor ☐ Lead Designer

Name of Entity Completing Form E: The Lane Construction Corporation

Year Established: 1902 State of Organization: Connecticut

Federal Tax ID No. (if applicable): 06-0421150 Telephone No.: 203-235-3351

North American Industry Classification System Code (if applicable): 237310

Type of Business Organization (check one):

☒ Corporation
☐ Partnership
☐ Joint Venture
☐ Limited Liability Company
☐ Other (describe)

A. Business Address: 90 Fieldstone Court, Cheshire CT 06410
Contact Telephone Number: 203-235-3351

B. Complete a separate E and Form G for each entity (Offeror, Lead Contractor, or Lead Designer) on Offeror team and include it with the SOQ. In addition, identify the name of such entities in the space below.

Name
Hampton Roads Capacity Constructors (Offeror)
Fluor Enterprises, Inc. (Lead Contractor Member)
The Lane Construction Corporation (Lead Contractor Member)
Traylor Bros., Inc. (Lead Contractor Member)
Dragages Civil Works Virginia, LLC (Lead Contractor Member)
AECOM Technical Services, Inc. (Lead Designer)

Under penalty of perjury, I certify that the foregoing is true and correct, and that I am an official representative of the firm duly authorized to execute and deliver this Form E:

By: [Signature] Print Name: Jeffrey P. Smith
Title: Senior District Manager Date: March 2, 2018

[Please make additional copies of this form as needed.]
FORM E
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(for Public Release)

Offeror Name: Hampton Roads Capacity Constructors, an unincorporated joint venture

Entity (check one box for entity completing Form E, as applicable):

☐ Offeror ☑ Lead Contractor ☐ Lead Designer

Name of Entity Completing Form E: Traylor Bros., Inc.

Year Established: 1946 State of Organization: Indiana

Federal Tax ID No. (if applicable): 35-0799154 Telephone No.: 703-683-8350

North American Industry Classification System Code (if applicable): 237310, 237990

Type of Business Organization (check one):

☑ Corporation
☐ Partnership
☐ Joint Venture
☐ Limited Liability Company
☐ Other (describe)

A. Business Address: 1420 King Street, Suite 600, Alexandria, VA 22314
   Contact Telephone Number: 703-683-8350

B. Complete a separate E and Form G for each entity (Offeror, Lead Contractor, or Lead Designer) on Offeror team and include it with the SOQ. In addition, identify the name of such entities in the space below.

Name
Hampton Roads Capacity Constructors (Offeror)
Fluor Enterprises, Inc. (Lead Contractor Member)
The Lane Construction Corporation (Lead Contractor Member)
Traylor Bros., Inc. (Lead Contractor Member)
Dragages Civil Works Virginia, LLC (Lead Contractor Member)
AECOM Technical Services, Inc. (Lead Designer)

Under penalty of perjury, I certify that the foregoing is true and correct, and that I am an official representative of the firm duly authorized to execute and deliver this Form E:

By: [Signature] Print Name: Christopher Hebert
Title: Vice President Date: March 2, 2018

[Please make additional copies of this form as needed.]

Virginia Department of Transportation
Request for Qualifications
1-64 Hampton Roads Bridge-Tunnel Expansion Project
FORM E
OFFEROR TEAM INFORMATION
(for Public Release)

Offeror Name: Hampton Roads Capacity Constructors, an unincorporated joint venture

Entity (check one box for entity completing Form E, as applicable):

☐ Offeror ☒ Lead Contractor ☐ Lead Designer

Name of Entity Completing Form E: DRAGAGES CIVIL WORKS VIRGINIA, LLC

Year Established: 2015 State of Organization: VA

Federal Tax ID No. (if applicable): 47-4403680 Telephone No.: 305-632-2243

North American Industry Classification System Code (if applicable): 237310, 237990

Type of Business Organization (check one):

☐ Corporation
☐ Partnership
☐ Joint Venture
☒ Limited Liability Company
☐ Other (describe)

A. Business Address: 101 WEST MAIN STREET, SUITE 500 NORFOLK VA 23510
Contact Telephone Number: 305-632-2243

B. Complete a separate E and Form G for each entity (Offeror, Lead Contractor, or Lead Designer) on Offeror team and include it with the SOQ. In addition, identify the name of such entities in the space below.

Hampton Roads Capacity Constructors (Offeror)
Fluor Enterprises, Inc. (Lead Contractor Member)
The Lane Construction Corporation (Lead Contractor Member)
Traylor Bros., Inc. (Lead Contractor Member)
Dragages Civil Works Virginia, LLC (Lead Contractor Member)
AECOM Technical Services, Inc. (Lead Designer)

Under penalty of perjury, I certify that the foregoing is true and correct, and that I am an official representative of the firm duly authorized to executed and deliver this Form E:

By: Giuseppe Folco
Title: President
Date: February 21, 2018

[Please make additional copies of this form as needed.]
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Offeror Name: Hampton Roads Capacity Constructors, an unincorporated joint venture

Entity (check one box for entity completing Form E, as applicable):

☐ Offeror ☐ Lead Contractor ☒ Lead Designer

Name of Entity Completing Form E: AECOM Technical Services, Inc.


Federal Tax ID No. (if applicable): 95-2661922 Telephone No.: (646) 379-0706

North American Industry Classification System Code (if applicable): NA

Type of Business Organization (check one):

☒ Corporation
☐ Partnership
☐ Joint Venture
☐ Limited Liability Company
☐ Other (describe)

A. Business Address: 440 Monticello Ave., Norfolk, VA 23510
   Contact Telephone Number: (646) 379-0706

B. Complete a separate E and Form G for each entity (Offeror, Lead Contractor, or Lead Designer) on Offeror team and include it with the SOQ. In addition, identify the name of such entities in the space below.

Name
Hampton Roads Capacity Constructors (Offeror)
Fluor Enterprises, Inc. (Lead Contractor Member)
The Lane Construction Corporation (Lead Contractor Member)
Traylor Bros. Inc. (Lead Contractor Member)
Dragages Civil Works Virginia, LLC (Lead Contractor Member)
AECOM Technical Services, Inc. (Lead Designer)

Under penalty of perjury, I certify that the foregoing is true and correct, and that I am an official representative of the firm duly authorized to execute and deliver this Form E:

By: Albert Bast, PE
Print Name: Albert Bast, PE
Title: Senior Vice President
Date: March 2, 2018

[Please make additional copies of this form as needed.]