Contract Set No.____

CONTRACT DOCUMENTS AND TECHNICAL SPECIFICATIONS FOR:

ALAMATONG WELL #4 AND WELL #5 ELECTRICAL AND WATER SYSTEM IMPROVEMENTS

FILE NO.: SCE-R08125.Y25
MCMUA Contract No: 2025-W04

MORRIS COUNTY

MUNICIPAL UTILITIES AUTHORITY

BOARD MEMBERS

Christopher Dour –Chair

Maria Farris– Vice Chair

James Barry – Laura Szwak – Dorothea Kominos

Dr. Arthur Nusbaum – Larry Ragonese - Frank Druetzler – Ron Smith

LARRY GINDOFF, EXECUTIVE DIRECTOR

DECEMBER 2025

BIDDER: Sovereign Consulting Inc.
ADDRESS: 111 North Gold Dr.
Robbinsville, NJ 08691
TELEPHONE: 609-259-8200

STATE OF NEW JERSEY
MICHAEL K. MCALOON
NO. 24GE05346500
PROFESSIONAL ENGINEER

MICHAEL K. MCALOON, PE. **12/10/2025**
NJPE LICENSE #24GE05346500 **DATE**

SUBURBAN CONSULTING ENGINEERS, INC.
96 U.S. Highway 206, Suite 101, Flanders, New Jersey 07836
973-398-1776; Fax 973-398-2121

MORRIS COUNTY MUA

Administrative Documents

A. Failure to submit the following documents at the time of bid opening is a MANDATORY cause for rejection of the bid in accordance with N.J.S.A. 40A:11-23.2.

Owner's Checkmarks		Bidder's Initials
X	Bid Guarantee	TC
X	Consent of Surety	R
X	Statement of Ownership Disclosure	R
X	Subcontractor Utilization Form	R
X	Acknowledgement of receipt of any notice(s) or revision(s) or addenda to an advertisement, specifications or bid document(s)	R
X	Non-Collusion Affidavit	R
X	Price Proposal Table	R
X	Price Proposal Signature Form	R

B. Failure to submit the following documents at the time of bid opening may be cause for rejection of the bid.

Owner's Checkmarks		Bidder's Initials
X	Experience & Qualifications Questionnaire	TC
	Disclosure of Investment Activities in Iran	
X	Mandatory EEO Language	R
X	AA-201 Form – Initial Project Workforce Report - Construction	R
X	NJ Anti-Discrimination Requirements Form	R
X	Pay to Play Advisory Notice	R
X	Americans with Disability Act of 1990	R
X	Affidavit of Non-Debarred Status	R
X	Surety Acknowledgement	R
X	Surety Disclosure Statement & Certification	TC
	Bidder's Agreement to Provide Equipment and Vehicles	

MORRIS COUNTY MUA

Administrative Documents

Owner's Checkmarks		Bidder's Initials
	Equipment and Vehicle Certification Form	
	Third Party Equipment and Vehicle Owner's Agreement to Provide Bidder with Equipment and Vehicles	
X	Corporate Acknowledgement	
X	Acknowledgement of Contractor, if Bidder is a Partnership	
X	Acknowledgement of Contractor, if Bidder is an Individual	
X	Acknowledgement of Contractor, LLC	
X	Certified Copy of Resolution of Board of Directors, if Bidder is a Corporation	
X	W-9	

C. The following documents are to be submitted prior to contract award.

Owner's Checkmarks		Bidder's Initials
X	New Jersey Business Registration Certificate	
X	Performance Bond & Payment	
X	Certificate of Insurance	
X	Public Works Contractor Registration	
X	Non-Debarment Certification – Federal Level	
X	Lowest Bidder Prevailing Wage Certification	

D. To be submitted prior to start of construction.

Required Prior to Start of Construction (Owners checkmarks)	
X	Project Work Schedule (Time Line)
X	Pre-Construction Photographs or Video
X	Shop Drawings, Material Certifications

E. To be submitted at completion and acceptance of project

Required at Completion and Acceptance of Project (Owners checkmarks)	

MORRIS COUNTY MUA

Administrative Documents

X	Maintenance Bond (100% Of Final Contract Price)
X	Final Release and Indemnity Agreement
X	Project Guarantees/Warranties (If Applicable)
X	Instruction and O & M Manuals (If Applicable)

F. The undersigned hereby acknowledges and has submitted the above required documents.

Business Name: Sovereign Consulting Inc.

Representative's Name: Ravi Gupta, President / CEO

Representative's Signature:

Date: 1/30/2026 **Phone:** 609-259-8200

MORRIS COUNTY MUA

Acknowledgement of Receipt of Addenda

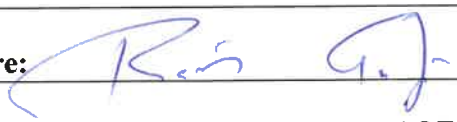
Pursuant to the NJSA 40A:11-23.1a, the undersigned Bidder hereby acknowledges receipt of the following notices, revisions or addenda to the Bid Advertisement, Bid Specifications or Bid Documents. By indicating date of receipt, Bidder acknowledges the submitted Bid takes into account the provisions of the notice, revision or addendum. Note that the local unit's record of proper notice to Bidders, per NJSA 40A:11-23(c), shall take precedence and Bidder's failure to acknowledge receipt of addenda shall result in rejection of Bid.

Title of Addendum/Revision	**Received Via (email, fax, etc.)**	**Date Received**
Addendum No. 1	Email	1/21/2026

☐ **No Addenda Issued Initials** _____

ACKNOWLEDGEMENT OF BIDDER

Name of Bidder: Sovereign Consulting Inc.

Bidder's Signature: 

Printed Name & Title: Ravi Gupta, President / CEO

Date: 1/30/2026

MORRIS COUNTY MUA

Price Proposal Table

Project Scope:

The Alamatong Well #4 and Well #5 Electrical and Water System Improvement project includes various electrical, mechanical, HVAC, SCADA and site improvements to the existing Alamatong Well #4 and Well #5 stations and Flanders Valley Well #2.
Improvements include the following: selective demolition, furnish and install existing motor control centers, appropriate surge protection, step-down transformers, 120/208V panelboards, and install new 100hp variable frequency drives; replace existing interior and exterior lighting; coordinate with MCMUA's SCADA vendor on the upgrade of existing SCADA panels; furnish and install all necessary piping to connect new pump control valve, painting of all process piping; furnish and install new electrical unit heaters, exhaust fans, and louver actuators; existing driveway replacement for Well #5, construction of a permanent foundation for the existing Well 5 Generator, Well #5 Generator modification and installation on permanent foundation, perimeter fencing removal and replacement, and new swing access gates; and replacement of the existing acoustical panel ceilings.

The project includes the installation of a new 300hp variable frequency drive and furnish and install motor replacement of the existing Flanders Valley Well #2.

Proposed VFDs will be provided through the MCMUA's SCADA Vendor, but shall be installed by the Contractor. Contractor shall furnish all necessary materials and labor to complete this work. It is understood this project will require shutdown of these well facilities. Any necessary shutdowns must be coordinated with the MCMUA a minimum of 72-hours prior and shall be limited to as short as practical.

The Contract will allow **365** calendar days for completion of the work from the notice to proceed. In accordance with the above understandings and agreements, Bidder will complete the Work for the following sums:

PROPOSAL TO:
Morris County Municipal Utilities Authority

BID #2025-W04: ALAMATONG WELL #4 AND WELL #5 ELECTRICAL AND WATER SYSTEM IMPROVEMENTS

ITEM #	DESCRIPTION	UNIT MEAS.	QUANT.	UNIT PRICE (In Figures)	UNIT PRICE (In Figures)	TOTAL PRICE (In Figures)
BASE BID						
1	Mobilization * The lump sum unit price is not to exceed requirements of Section 017113	LS	1	$ 50,000.00	Fifty Thousand Dollars and Zero Cent ($50,000.00)	$ 50,000.00
2	Flanders Valley Well #2 Facility Improvements, Complete in Place	LS	1	$ 45,000.00	Forty Five Thousand Dollars and Zero Cent ($45,000.00)	$ 45,000.00

MORRIS COUNTY MUA

Price Proposal Table

ITEM #	DESCRIPTION	UNIT MEAS.	QUANT.	UNIT PRICE (In Figures)	UNIT PRICE (In Figures)	TOTAL PRICE (In Figures)
3	Alamatong Well #4 Facility Improvements, Complete in Place	LS	1	$ 370,000.00	Three Hundred and Seventy Thousand Dollars and Zero Cents ($370,000.00)	$ 370,000.00
4	Alamatong Well #5 Facility Improvements, Complete in Place	LS	1	$ 370,000.00	Three Hundred and Seventy Thousand Dollars and Zero Cents ($370,000.00)	$ 370,000.00
5	Well #5 Generator Modifications, Complete in Place	LS	1	$ 40,000.00	Forty Thousand Dollars and Zero Cent ($40,000.00)	$ 40,000.00
6	Well #5 Driveway Improvements	SY	400	$ 125.00	One Hundred and Twenty Five Dollars and Zero Cent ($125.00)	$ 50,000.00
7	Instrumentation and Controls Allowance (If and Where Directed)					$ 200,000.00
8	Unforeseen Conditions Allowance					$ 100,000.00

TOTAL BASE BID PRICE: $ One Million Two Hundred and Twenty Five Thousnd Dollars and Zero Cents ($1,225,000.00) **(In Figures)**

COMPANY NAME: Sovereign Consulting Inc.

- Unit Prices shall be written in words and figures. Ditto marks are not considered writing or printing and shall not be used. If the amount shown in words and its equivalent in figures do not agree, a determination of intent will be made based on the following.
  - If the Extended total is the correct product of Unit Price in figures and quantity, then Unit Price in figures shall prevail.
  - If the Extended total is the correct product of Unit Price in words and quantity, then the Unit Price in words shall prevail.
  - If the Extended total is the incorrect calculation using either Unit Price in words or Unit price in figures, then the Unit Price in words shall prevail and the Extended total shall be adjusted accordingly.
  - In the case of the correction of the apparent low bid, the bidder will be contacted and given the option to either accept the correction or withdraw their bid.
- The Total Contract Price shall be the correct sum of the correctly extended unit price multiplied by the quantity provided.
- The lump sum price bid for Mobilization is not to exceed requirements outlined in Section 017113, Mobilization. In case of exceedance, the maximum amount for mobilization, for the submitted bid range, will govern and the Total Contract Price will be adjusted accordingly.
- If awarded a contract, the Bidder agrees to comply with NJSA 10:5-31 et seq. and NJAC 17:27.
- It is the intention of the Owner to award the complete project to the lowest responsible bidder inclusive of Base Bid items.
- Bids must provide pricing for all base bid items. Bids that do not provide pricing for base bid will be rejected.

MORRIS COUNTY MUA

Price Proposal Signature Form

From: Sovereign Consulting Inc.

Vendor: The undersigned has reviewed the proposal submitted in response to the bid issued by the MCMUA in connection with the need for the following:

BID #2025-W04: ALAMATONG WELL #4 AND WELL #5 ELECTRICAL AND WATER SYSTEM IMPROVEMENTS

We affirm that the contents of the proposal (which proposal is incorporated herein by reference) is accurate, factual and complete to the best of our knowledge and belief, and that the proposal is submitted in good faith upon express understanding that any false statements may result in the disqualification of our proposal.

The undersigned hereby agrees to furnish all labor, materials, supplies, supervision, equipment and other means as necessary to perform all the work and furnish all the materials in accordance with the Specifications at the proposed prices within the time constraints of Specifications:

Business Name: Sovereign Consulting Inc.

Representative's Name (print): Ravi Gupta

Representative's Signature:

Title: President / CEO

Complete Address: 111 North Gold Dr. Robbinsville, NJ 08691

Affix Seal if Corporation:

MORRIS COUNTY MUA

Experience & Qualifications Questionnaire

This questionnaire must be filled out and submitted as a part of the Bid. Failure to complete this form or to provide any of the requested information will be grounds for the rejection of the bid. If additional space is required, the respondent shall add additional sheets, which identify the question being answered.

Number of years in business under present name & address:
27 years

If less than 5 years, list previous names and address:

Within the last 5 years has the business or any officer/partner failed to complete a contract awarded to them: _NO_____. If yes, provide the details in on a separate page.

Have any liens and lawsuits been filed against the company in the past 5 years: ____NO_____

If yes, please provide details:

List similar services you are now providing for which you have signed contract, but not yet started work:
SEE ATTACHED

List all major subcontractors to be used to complete the service and the area of their responsibility:

MORRIS COUNTY MUA

Experience & Qualifications Questionnaire

Please provide at least 3 references below:

SEE ATTACHED

Name: _____ **Phone:** _____

Address: _____

Equipment/Service Provided: _____

Contract Amount: _____

Name: _____ **Phone:** _____

Address: _____

Equipment/Service Provided: _____

Contract Amount: _____

Name: _____ **Phone:** _____

Address: _____

Equipment/Service Provided: _____

Contract Amount: _____

Name: _____ **Phone:** _____

Address: _____

Equipment/Service Provided: _____

Contract Amount: _____

SOVEREIGN CONSULTING INC.
SCIENCE. SERVICE. SOLUTIONS.

SOVEREIGN CONSULTING COMPLETED WORK

(1) Owner	(2) Contract number and Project description	(3) Contract Amount (rounded to nearest $50,000)	(4) Contract Completion Date
Sean Phillips Remediation Manager 500 Dallas Street, Houston, TX 77002 Email: Sean.Phillips@motiva.com Office: 1.713.308.0464 Mobile: 1.713.865.6485	XXX, Performed Construction and Installation of groundwater treatment system a below-grade parking garage (3-stories) and an 7-story office building in Washington D.C.	$1,500,000	2020
Maritza L. Montegross, U.S. Navy, 757-714-6652, maritza.l.montegross.civ@us.navy.mil	N40085-16-D-2290; Upgrades at Waste Water Treatment Plant to US Navy at the Naval Weapons Industrial Reserve Plant in Bedford, MA.	$1,600,000	9/20/2021
Darrell Moore, US Army Corps of Engineers, 978-318-8152, darrell.a.moore@usace.army.mil	W912WJ-10-D-0003, TO 0006; Rehabilitation and Upgrades at Water Treatment Plant at the US Army Corps Cold Regions Research and Engineering Laboratory (CRREL) in Hanover, NH.	$1,500,000	4/1/2014
Penny Reddy, US Army Corps of Engineers, New England District, 978-318-8160, penelope.reddy@usace.army.mil	W56ZTN16R0002; Sovereign, under a Joint Venture with Renova Environmental Services, Inc., installed and operated a temporary wellhead water treatment system to remove PFAS compounds from Well 8 at the Grove Pond Wellfield in Ayer, MA.	$997,340	11/1/2021
Philip A. Tully, P.E., Sayreville Seaport Associates, (732) 952-5237	Sovereign performed excavation of the radiologically contaminated soil, mixing of the dredge material with the TENORM contaminated soil, and replacing it on-site.	$2,750,000	Ongoing
LR Metal Treating Company, Tom Meyers	GETS O&M & LTM for Metal Platinf Treatment Facility	$2,214,000	2/1/2020
Penny Reddy, US Army Corps of Engineers, New England District, 978-318-8160, penelope.reddy@usace.army.mil	Former Fort Devens Army Installation BRAC Legacy Site - Arsenic Treatment Plant	$4,003,484	6/1/2020
Raritan Township Municipal Utilities Authority (908) 782-7453	Flemington Wet Weather Facility Equalization Tank Rehabilitation and Facility Flow Metering Improvements	$568,306.18	7/31/2024

The State of New Jersey DPMC (609) 292-4330 Michael Cifrodelli	Sewer Ejector Pump Replacement	$845,136.60	7/31/2024
Township of Verona- Linn Drive Facility PFAS & Arsenic Treatment Project - 880 Bloomfield Ave. Verona, NJ 07044 - Contact: Jacobs Eng. Frank Biank 732.396.2240	Contract No. 2023-07 - installing two 6-foot diameter AquoUS Vets anion ion exchange resin pressure vessels for PFAS treatment and an additional two 7 foot diameter granular ferric hydroxide pressure vessels to address the arsenic.	$1,711,000	Sept-2025
Mt. Arlington Booster Pump Station Improvements - Morris County Municipal Utilities Authority - Howard Blvd. Ledgewood, NJ - Contact: Suburban- Mike McAloon (732) 282-1776	Contract No. 2023-W02 - Furnish and install all necessary piping to connect new booster pump, replace existing pump control and surge relief valves, painting of all process piping; furnish and install new electrical unit heaters, exhaust fans, and louver actuators; existing driveway replacement, station by-pass hydrants, new sliding access gate; furnish and install new CMU wall.	$1,105,000	Aug-2025
Mount Holly Municipal Utilities Authority Pump Station #214 Upgrades - Contact ERI. Jennifer Harris 856.840.4497	Contract No. 29903 Installation of sanitary submersible pumps into an existing wet well. Electrical improvements, site improvements and restoration.	$889,000	Apr-2025
Franklin Township Sewerage Authority - Somserset Street Pumping Station Rehabilitation - Contact CDM Smith: Howard Matteson 732.590.4693	Contract No. 5399-99415 Installation of sanitary submersible pumps into an existing wet well. Electrical improvements, site improvements and restoration.	$464,750	May-2025
Township of Morris - Stiles Street and Gregory Avenue Pump Station Meter Chambers Rehabilitation - Contact Mott MacDonald - David Klemm 973.912.2577	Contract No. 75 Replacement of flow metering equipment, electrical equipment/conduit and wire rehab. Installation of one pre-fabricated meter chamber and installation of sanitary sewer and doghouse manhole.	$277,000.00	Sept-2025

SOVEREIGN CONSULTING INC.
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SOVEREIGN CONSULTING CURRENT WORK

(1) Owner & Location	(2) Contract number and Project description	(3) Contract Amount	(4) Est. Date of Completion	(5) Contract Percentage Completion
Shorrock Street Well 22 - General Construction - Lakewood Township Municipal Utilities Authority - 1 Shorrock St. Lakewood, NJ 08701	Contract No. 220607 - Construction of concrete foundations, interior water supply piping, electrical and mechanical work, site improvements, and raw water main and utility extensions. Contact : ARH - Jake Falls (609) 561 – 0482	$568,306	Dec-2025	99%
Borough of Palmyra Berkley Avenue Pump Station Improvements Project	Contract No. 44020-01 Demolition and removal of existing pump station building over existing wet well. Cleaning and coating of existing wet well, install of new submersible pumps, piping and valve vaults. Site improvements for drainage and landscaping.	$1,989,000	Dec-2025	83%
East Ridgewood & West End PFAS Treatment Facilities	Contract No.0251001-003- Construction of 2 speperate PFAS Facilities in the Village of Ridgewood. Project consists of installation of 8' and 6' PFAS Vessels. Additionally there is apprx. 6000 LF of distribution piping.	$7,773,000	Mar-2026	80%
Ridgewood Water - Wortendyke PFAS Treatment Facility	treatment facility containing 4 12-foot diameter (Model 12-40) granular activated carbon (GAC) vessels, installation of new vertical turbine pumps replacing old vertical turbine pumps in existing VOC treatment	$6,315,750.00	May-2026	55%
Franklin Township Sewerage Authority - Commerce Drive Pump Station Improvements	Contract No. PFS00325.02 Construction of new building on existing pump station site to house elctrical equipment and en emergency generator, construction of a canopy over existing wet well. Construction of new	$1.520.000.00	Dec-2025	17%
Berkeley Heights Township - Micro C and Magnesium Hydroxide Chemical Feed Systems	8,800 gallon Magnesium Hydroxide Storage Tank, mechanical mixer, and associate piping and appurtenances, FRP ladder, fill line, fill station, suction line, level and control panels, 8x8 FRP Building and associated appurtenances, Magnesium Hydroxide	$986,500.00	Dec-2025	88%

North Shore Water Association - Township of Byram - Proposed Water System Upgrades	Contract No. SCE-R13340.021 Construction of a new treatment facility near Well No. 2, demolition of the existing treatment facility, and decommissioning of Well No. 1 upon successful startup of the new facility. The scope of work consists of all structural, mechanical, electrical, and related utility appurtenances, for the installation of the new well treatment facility. The treatment facility comprises all well process piping appurtenances (including the ion exchange system, and Submersible Well Pump), yard piping, site improvements, electrical improvements (including generator), and related appurtenances.	$629,000.00	Nov-2025	85%
Township of Neptune Sewerage Authority - Headworks Improvements Train 1, 2 and Train 3	Contract No. 1335M006	$850,000.00	Nov-2025	44%
Township of Springfield - Joanne Way Stormwater Pump Station Rehabilitation Project	Contract No. SP 2024-02 rehabilitation of exisitng pump station , replacing pumps and motors with vertical axial flow impeller lineshaft pumps and motors along with pump controls. New sump pump and controls, electrical service, light fixtures and switchgear to existing generator.	$870,000.00	Dec-2025	99%
Township of Morris - Stiles Street and Gregory Avenue Pump Station Meter Chambers Rehabilitation	Contract No. 75 Replacement of flow metering equipment, electrical equipment/conduit and wire rehab. Installation of one pre-fabricated meter chamber and installation of sanitary sewer and doghouse manhole.	$277,000.00	Dec-2025	90%
Township of Verona - Claridge Drive Booster Pumping Station	Contract # 2024-20 The work to be performed under this contract includes the installation of a new booster pumping station on Claridge Drive, in the Township of Verona.	$1,425,550.00	Dec- 2025	22%
Veolia Water New Jersey, Inc. - Allendale New Street WTP Upgrades	Contract # 16667	$5,779,975.00	Dec-2026	6%
Aqua New Jersey, Inc. - The Hardyston Summit Lake PFAS Removal Treatment	File No. SCE-R12032.021- construction of a new pre-pre engineered metal building, Harmsco Cartridge Filters, AdEdge Ion Exchange PFAS Removal System, new 10,000-gallon water storage tank, triplex booster pumps, relocation of existing chemical feed equipment. demolition and removal of the existing facility.	$1,308,000.00	Dec-2025	13%

MORRIS COUNTY MUA

Instructions for Completing the Initial Project Workforce Report AA201

INSTRUCTIONS FOR COMPLETING THE INITIAL PROJECT
WORKFORCE REPORT - CONSTRUCTION (AA201)

DO NOT COMPLETE THIS FORM FOR GOODS AND/OR SERVICE CONTRACTS

1. Enter the Federal Identification Number assigned to the contractor by the Internal Revenue Service, or if a Federal Emp1oyer Identification Number has been applied for but not yet issued, or if your business is such that you have not or will not receive a Federal Identification Number, enter the social security number assigned to the single owner or one partner, in the case of a partnership.

2. Note: The Division of CC/EEO will assign a contractor ID number to your company. This number will be your permanently assigned contractor ID number that must be on all correspondence and reports submitted to this office.

3. Enter the prime contractor's name, address and zip code number.

4. Check box if Company is Minority Owned or Woman Owned

5. Enter the complete name and address of the Public Agency awarding the contract. Include the contract number, date of award and dollar amount of the contract.

6. Enter the name and address of the project, including the county in which the project is located.

7. gg

8. Check "Yes" or "No" to indicate whether a Project Labor Agreement (PLA) was established with the labor organization(s) for this project.

9. Under the Projected Total Number of Employees in each trade or craft and at each level of classification, enter the total composite workforce of the prime contractor and all subcontractors projected to work on the project. Under Projected Employees enter total minority and female employees of the prime contractor and all subcontractors projected to work on the project. Minority employees include Black, Hispanic, American Indian and Asian, (J=Journeyworker, AP=Apprentice). Include projected phase-in and completion dates.

10. Print or type the name of the company official or authorized Equal Employment Opportunity (EEO) official include signature and title, phone number and date the report is submitted.

This report must be submitted to the Public Agency that awards the contract and the Division of Contract Compliance and Equal Employment Opportunity in Public Contracts no later than three (3) days after the contractor signs the contract.

THE CONTRACTOR IS TO RETAIN THE FOURTH AND FINAL COPY
MARKED "CONTRACTOR", SUBMIT THE THIRD COPY MARKED
"PUBLIC AGENCY" TO THE PUBLIC AGENCY AWARDING THE
CONTRACT AND FORWARD THE REMAINING TWO (2) COPIES TO:
NEW JERSEY DEPARTMENT OF THE TREASURY
DIVISION OF CONTRACT COMPLIANCE & EQUAL EMPLOYMENT OPPORTUNITY IN
PUBLIC CONTRACTS
P.O.BOX209
TRENTON, NJ 08625-0209
(609) 292-9550

MORRIS COUNTY MUA

Instructions for Completing the Initial Project Workforce Report AA201

STATE OF NEW JERSEY

DIVISION OF CONTRACT COMPLIANCE

EQUAL EMPLOYMENT OPPORTUNITY IN PUBLIC CONTRACTS

FORMAA-101
Revised 10/03

INITIAL PROJECT WORKFORCE REPORT CONSTRUCTION

Official Use Only
Assignment
Code

READ INSTRUCTIONS ON THE BACK CAREFULLY BEFORE THE COMPLETION AND DISTRIBUTION OF THIS FORM.
PLEASE TYPE OR PRINT IN BLACK OR BLUE INK.

1. FID NUMBER

2. CONTRACTOR ID NUMBER

3. NAME AND ADDRESS OF PRIME CONTRACTOR

(Name)

(Street Address)

(City) (State) (Zip Code)

4. IS THIS COMPANY MINORITY OWNED [ ] OR WOMAN OWNED [ ]

5. NAME AND ADDRESS OF PUBLIC AGENCY AWARDING CONTRACT

CONTRACT NUMBER DATE OF AWARD DOLLAR AMOUNT OF AWARD

6. NAME AND ADDRESS OF PROJECT

COUNTY

7. PROJECT NUMBER

8. IS THIS PROJECT COVERED BY A PROJE4 LABOR AGREEMENT (PLA)? ☐ YES ☐ NC

9. TRADE OR CRAFT	PROJECTED TOT \L EMPLOYEES				PROJECTED MINORITY EMPLOYEES				PROJECTED PHASE-IN DATE	PROJECTED COMPLETION DATE
	MALE		FEMALE		MALE		FEMALE			
	J	AP	J	AP	J	AP	J	AP		
1. ASBESTOS WORKER										
2. BRICKLAYERORMASON										
3. CARPENTER										
4. ELECTRICIAN										
5. GLAZIER										
6. HVAC MECHANIC										
7. IRONWORKER										
8. OPERATING ENGINEER										
9. PAINTER										
10.PLUMBER										
11.ROOFER										
12. SHEET METAL WORKER										
13. SPRINKLER FITTER										
14. STEAMFITTER										
15. SURVEYOR										
16. TILER										
17. TRUCK DRIVER										
18.LABORER										
19.0THER										
20.0THER										

I hereby certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements are willfully false, I am subject to punishment.

(Signature)

10. (Please Print Your Name) (Title)

(Area Code) (Telephone Number) (Ext.) (Date)

MORRIS COUNTY MUA

Mandatory Equal Employment Opportunity Language

EXHIBIT B

N.J.S.A. 10:5-31 et seq. (P.L.1975, c.127)

N.J.A.C. 17:27-1.1 et seq.

CONSTRUCTION CONTRACTS

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will ensure that equal employment opportunity is afforded to such applicant's in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such equal employment opportunity shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union or workers' representative of the contractor's commitments under this act and shall post copies of the notice in conspicuous places available to employees and applicants for employment. The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer, pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

When hiring or scheduling workers in each construction trade, the contractor or subcontractor agrees to make good faith efforts to employ minority and women workers in each construction trade consistent with the targeted employment goal prescribed by N.J.A.C. l7:27-7.2; provided, however, that the Dept. of LWD, Construction EEO Monitoring Program, may, in its discretion, exempt a contractor or subcontractor from compliance with the good faith procedures prescribed by the following provisions, A, B, and C, as long as the Dept. of LWD, Construction EEO Monitoring Program is satisfied that the contractor or subcontractor is employing workers provided by a union which provides evidence, in accordance with standards prescribed by the

MORRIS COUNTY MUA

Mandatory Equal Employment Opportunity Language

Dept. of LWD, Construction EEO Monitoring Program, that its percentage of active "card carrying" members who are minority and women workers is equal to or greater than the targeted employment goal established in accordance with N.J.A.C. 17:27-7.2. The contractor or subcontractor agrees that a good faith effort shall include compliance with the following procedures:

(A) If the contractor or subcontractor has a referral agreement or arrangement with a union for a construction trade, the contractor or subcontractor shall, within three business days of the contract award, seek assurances from the union that it will cooperate with the contractor or subcontractor as it fulfills its affirmative action obligations under this contract and in accordance with the rules promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et. seq., as supplemented and amended from time to time and the Americans with Disabilities Act. If the contractor or subcontractor is unable to obtain said assurances from the construction trade union at least five business days prior to the commencement of construction work, the contractor or subcontractor agrees to afford equal employment opportunities minority and women workers directly, consistent with this chapter. If the contractor's or subcontractor's prior experience with a construction trade union, regardless of whether the union has provided said assurances, indicates a significant possibility that the trade union will not refer sufficient minority and women workers consistent with affording equal employment opportunities as specified in this chapter, the contractor or subcontractor agrees to be prepared to provide such opportunities to minority and women workers directly, consistent with this chapter, by complying with the hiring or scheduling procedures prescribed under (B) below; and the contractor or subcontractor further agrees to take said action immediately if it determines that the union is not referring minority and women workers consistent with the equal employment opportunity goals set forth in this chapter.

(B) If good faith efforts to meet targeted employment goals have not or cannot be met for each construction trade by adhering to the procedures of (A) above, or if the contractor does not have a referral agreement or arrangement with a union for a construction trade, the contractor or subcontractor agrees to take the following actions:

(I) To notify the public agency compliance officer, the Dept. of LWD, Construction EEO Monitoring Program, and minority and women referral organizations listed by the Division pursuant to N.J.A.C. 17:27-5.3, of its workforce needs, and request referral of minority and women workers;

(2) To notify any minority and women workers who have been listed with it as awaiting available vacancies;

(3) Prior to commencement of work, to request that the local construction trade union refer minority and women workers to fill job openings, provided the contractor or subcontractor has a referral agreement or arrangement with a union for the construction trade;

(4) To leave standing requests for additional referral to minority and women workers with the local construction trade union, provided the contractor or subcontractor has a referral agreement or arrangement with a union for the construction trade, the State Training and Employment Service and other approved referral sources in the area;

(5) If it is necessary to lay off some of the workers in a given trade on the construction site, layoffs shall be conducted in compliance with the equal employment opportunity and nondiscrimination standards set forth in this regulation, as well as with applicable Federal and State court decisions;

(6) To adhere to the following procedure when minority and women workers apply or are referred to the contractor or subcontractor:

The contactor or subcontractor shall interview the referred minority or women worker.

If said individuals have never previously received any document or certification signifying a level of qualification lower than that required in order to perform the work of the construction trade, the contractor or subcontractor shall in good faith determine the qualifications of such individuals. The contractor or subcontractor shall hire or schedule those individuals who satisfy appropriate qualification standards in conformity with the equal employment opportunity and non-discrimination principles set forth in this chapter. However, a contractor or subcontractor shall determine that the individual at least possesses the requisite skills, and experience recognized by a union, apprentice program or a referral agency, provided the referral agency is acceptable to the Dept. of LWD, Construction EEO Monitoring Program. If necessary, the contractor or subcontractor shall hire or schedule minority and women workers who qualify as trainees pursuant to these rules. All of the requirements, however, are limited by the provisions of (C) below.

The name of any interested women or minority individual shall be maintained on a waiting list, and shall be considered for employment as described in (i) above, whenever vacancies occur. At the request of the Dept. of LWD, Construction EEO Monitoring Program, the contractor or subcontractor shall provide evidence of its good faith efforts to employ women and minorities from the list to fill vacancies.

If, for any reason, said contractor or subcontractor determines that a minority individual or a woman is not qualified or if the individual qualifies as an advanced trainee or apprentice, the contractor or subcontractor shall inform the individual in writing of the reasons for the determination, maintain a copy of the determination in its files, and send a copy to the public agency compliance officer and to the Dept. of LWD, Construction EEO Monitoring Program.
(7) To keep a complete and accurate record of all requests made for the referral of worker's in any trade covered by the contract, on forms made available by the Dept. of LWD, Construction EEO Monitoring Program and submitted promptly to the Dept. of LWD, Construction EEO Monitoring Program upon request.

(C) The contractor or subcontractor agrees that nothing contained in (B) above shall preclude the contractor or subcontractor from complying with the union hiring hall or apprenticeship policies in any applicable collective bargaining agreement or union hiring hall arrangement, and, where required by custom or agreement, it shall send journeymen and trainees to the union for referral, or to the apprenticeship program for admission, pursuant to such agreement or arrangement. However, where the practices of a union or apprenticeship program will result in the exclusion of minorities and women or the failure to refer minorities and women consistent with the targeted county employment goal, the contractor or subcontractor shall consider for employment persons referred pursuant to (B) above without regard to such agreement or

arrangement; provided further, however, that the contractor or subcontractor shall not be required to employ women and minority advanced trainees and trainees in numbers which result in the employment of advanced trainees and trainees as a percentage of the total workforce for the construction trade, which percentage significantly exceeds the apprentice to journey worker ratio specified in the applicable collective bargaining agreement, or in the absence of a collective bargaining agreement, exceeds the ratio established by practice in the area for said construction trade. Also, the contractor or subcontractor agrees that, in implementing the procedures of (B) above, it shall, where applicable, employ minority and women workers residing within the geographical jurisdiction of the union.

After notification of award, but prior to signing a construction contract, the contractor shall submit to the public agency compliance officer and the Dept. of LWD, Construction EEO Monitoring Program an initial project workforce report (Form AA-201) electronically provided to the public agency by the Dept. of LWD, Construction EEO Monitoring Program, through its website, for distribution to and completion by the contractor, in accordance with N.J.A.C. 17:27-7. The contractor also agrees to submit a copy of the Monthly Project Workforce Report once a month thereafter for the duration of this contract to the Dept. of LWD, Construction EEO Monitoring Program, and to the public agency compliance officer.

The contractor agrees to cooperate with the public agency in the payment of budgeted funds, as is necessary, for on-the-job and/or off-the job programs for outreach and training of minorities and women.

(D) The contractor and its subcontractors shall furnish such reports or other documents to the Dept. of LWD, Construction EEO Monitoring Program as may be requested by the Dept. of LWD, Construction EEO Monitoring Program from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Dept. of LWD, Construction EEO Monitoring Program for conducting a compliance investigation pursuant to N.J.A.C. 17:27-1.1 et seq.

MORRIS COUNTY MUA

Mandatory Equal Employment Opportunity Language

Additional Mandatory Construction Contract Language

For State Agencies, Independent Authorities, Colleges and

Universities Only

Executive Order 51 (Corzine, August 28, 2009) and P.L.2009, c.335 include a provision which require all state agencies, independent authorities and colleges and universities to include additional mandatory equal employment and affirmative action language in its construction contracts.

It is important to note that this language is in addition to and does not replace the mandatory contract language and good faith efforts requirements for construction contracts required by N.J.A.C. 17:27-3.6, 3.7 and 3.8, also known as Exhibit B. The additional mandatory equal employment and affirmative action language is as follows:

It is the policy of the [Reporting Agency] that its contracts should create a workforce that reflects the diversity of the State of New Jersey. Therefore, contractors engaged by the [Reporting Agency] to perform under a construction contract shall put forth a good faith effort to engage in recruitment and employment practices that further the goal of fostering equal opportunities to minorities and women.

The contractor must demonstrate to the [Reporting Agency's] satisfaction that a good faith effort was made to ensure that minorities and women have been afforded equal opportunity to gain employment under the [Reporting Agency's] contract with the contractor. Payment may be withheld from a contractor's contract for failure to comply with these provisions.

Evidence of a "good faith effort" includes, but is not limited to:

1. The Contractor shall recruit prospective employees through the State Job bank website, managed by the Department of Labor and Workforce Development, available online at http://NJ.gov/JobCentralNJ;

2. The Contractor shall keep specific records of its efforts, including records of all individuals interviewed and hired, including the specific numbers of minorities and women;

3. The Contractor shall actively solicit and shall provide the [Reporting Agency] with proof of solicitations for employment, including but not limited to advertisements in general circulation media, professional service publications and electronic media; and

MORRIS COUNTY MUA

Mandatory Equal Employment Opportunity Language

4. The Contractor shall provide evidence of efforts described at 2 above to the [Reporting Agency] no less frequently than once every 12 months.

5. The Contractor shall comply with the requirements set forth at N.J.A.C. 17:27-1.1 et seq.

To ensure successful implementation of the Executive Order and Law, state agencies, independent authorities and colleges and universities must forward an Initial Project Workforce Report (AA-201) for any projects funded with ARRA money to the Dept. of LWD, Construction EEO Monitoring Program immediately upon notification of award but prior to execution of the contract

Business Name: Sovereign Consulting Inc.

Representative's Name (print): Ravi Gupta, President / CEO

Representative's Signature:

Date: 1/30/2026

MORRIS COUNTY MUA

Americans with Disabilities Act of 1990

The CONTRACTOR and the OWNER do hereby agree that the provisions of Title 11 of the Americans With Disabilities Act of 1990 (the "ACT") (42 U.S.C. S12101 et seq.), which prohibits discrimination on the basis of disability by public entities in all services, programs, and activities provided or made available by public entities, and the rules and regulations promulgated pursuant thereunto, are made a part of this contract. In providing any act benefit, or service on behalf of the OWNER pursuant to this contract, the CONTRACTOR agrees that the performance shall be in strict compliance with the Act. In the event that the Contractor, its agents, servants, employees, or subcontractors violate or are alleged to have violated the Act during the performance of this contract, the CONTRACTOR shall defend the OWNER in any action or administrative proceeding commenced pursuant to this Act. The Contractor shall indemnify, protect, and save harmless the OWNER, its agents, servants, and employees from and against any and all suits, claims, losses, demands, or damages, of whatever kind or nature arising out of or claimed to arise out of the alleged violation. The CONTRACTOR shall, at its own expense, appear, defend, and pay any and all charges for legal services and any and all costs and other expenses arising from such action or administrative proceeding or incurred in connection therewith. In any and all complaints brought pursuant to the OWNER grievance procedure, the CONTRACTOR agrees to abide by any decision of the OWNER which is rendered pursuant to said grievance procedure. If any action or administrative proceeding results in an award of damages against the OWNER or if the OWNER must any expense to cure a violation of the ADA which has been brought pursuant to its grievance procedure, the CONTRACTOR shall satisfy and discharge the same at its OWN expense.

The OWNER shall, as soon as practicable after a claim has been made against it, give written notice thereof to the CONTRACTOR along with frill and complete particulars of the claim. if any action or administrative proceedings is brought against the OWNER or any of its agents, servants, and employees, the OWNER shall expeditiously forward or have forwarded to the CONTRACTOR every demand, complaint, notice, summons, pleading, or other process received by the OWNER or its representatives.

It is expressly agreed and understood that any approval by the OWNER of the services provided by the CONTRACTOR pursuant to this contract will not relieve the CONTRACTOR of the obligation to comply with the Act and to defend, indemnify, protect, and save harmless the OWNER pursuant to this paragraph.

It is further agreed and understood that the OWNER assumes no obligation to indemnify or save harmless the CONTRACTOR, its agents, servants, employees and subcontractors for any claim which may arise out of their performance of this Agreement. Furthermore, the CONTRACTOR expressly understands and agrees that the provisions of this indemnification clause shall in no way limit the CONTRACTOR'S obligations assumed in this Agreement, nor shall they be construed to relieve the CONTRACTOR from any liability, nor preclude the OWNER from taking any other actions available to it under any other provisions of the Agreement or otherwise at law.

Furthermore, the contractor expressly understands and agrees that the provisions of this indemnification clause shall in no way limit the contractor's obligations assumed in this Agreement, nor shall they be construed to relieve the contractor from any liability, nor preclude the owner from taking any other actions available to it under any other provisions of the Agreement or otherwise at law.

Business Name (Print): Sovereign Consulting Inc.

Representative's Name (Print): Ravi Gupta

Representative's Title: President / CEO

Representative's Signature: 

Phone: 609-259-8200 **Date:** 1/30/2026

MORRIS COUNTY MUA

New Jersey Anti-Discrimination

Pursuant to N.J.S.A. 10:2-1:

a. In the hiring of persons for the performance of work under this contract or any subcontract hereunder, or for the procurement, manufacture, assembling or furnishing of any such materials, equipment, supplies or services to be acquired under this contract, no contractor, nor any person acting on behalf of such contractor or subcontractor, shall, by reason of race, creed, color, national origin, ancestry, marital status, gender identity or expression, affectional or sexual orientation or sex, discriminate against any person who is qualified and available to perform the work to which the employment relates;

b. No contractor, subcontractor, nor any person on his behalf shall, in any manner, discriminate against or intimidate any employee engaged in the performance of work under this contract or any subcontract hereunder, or engaged in the procurement, manufacture, assembling or furnishing of any such materials, equipment, supplies or services to be acquired under such contract, on account of race, creed, color, national origin, ancestry, marital status, gender identity or expression, affectional or sexual orientation or sex;

c. There may be deducted from the amount payable to the contractor by the contracting public agency, under this contract, a penalty of $ 50.00 for each person for each calendar day during which such person is discriminated against or intimidated in violation of the provisions of the contract; and

d. This contract may be canceled or terminated by the contracting public agency, and all money due or to become due hereunder may be forfeited, for any violation of this section of the contract occurring after notice to the contractor from the contracting public agency of any prior violation of this section of the contract.

Business Name (Print): Sovereign Consulting Inc.

Representative's Name (Print): Ravi Gupta

Representative's Title: President / CEO

Representative's Signature: 

Phone: 609-259-8200 **Date:** 1/30/2026

MORRIS COUNTY MUA

Statement of Ownership Disclosure

N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

This statement shall be completed, certified to, and included with all bid and proposal submissions. Failure to submit the required information with the bid is cause for automatic rejection of the bid or proposal.

Name of Organization: Sovereign Consulting Inc.

Organization Address: 111 North Gold Dr. Robbinsville, NJ 08691

Part I Check the box that represents the type of business organization:

☐ Sole Proprietorship (skip Parts II and III, execute certification in Part IV)

☐ Non-Profit Corporation (skip Parts II and III, execute certification in Part IV)

☒ For-Profit Corporation (any type) ☐ Limited Liability Company (LLC)

☐ Partnership ☐ Limited Partnership ☐ Limited Liability Partnership (LLP)

☐ Other (be specific): _____

Part II

☒ The list below contains the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be. (**COMPLETE THE LIST BELOW IN THIS SECTION**)

OR

☐ No one stockholder in the corporation owns 10 percent or more of its stock, of any class, or no individual partner in the partnership owns a 10 percent or greater interest therein, or no member in the limited liability company owns a 10 percent or greater interest therein, as the case may be. (**SKIP TO PART IV**)

(Please attach additional sheets if more space is needed):

Name of Individual or Business Entity	Address
Ravi Gupta	7 Lahaway Creek Ct. Clarksburg, NJ 08510

MORRIS COUNTY MUA

Statement of Ownership Disclosure

Part III DISCLOSURE OF 10% OR GREATER OWNERSHIP IN THE STOCKHOLDERS, PARTNERS OR LLC MEMBERS LISTED IN PART II

If a bidder has a direct or indirect parent entity which is publicly traded, and any person holds a 10 percent or greater beneficial interest in the publicly traded parent entity as of the last annual federal Security and Exchange Commission (SEC) or foreign equivalent filing, ownership disclosure can be met by providing links to the website(s) containing the last annual filing(s) with the federal Securities and Exchange Commission (or foreign equivalent) that contain the name and address of each person holding a 10% or greater beneficial interest in the publicly traded parent entity, along with the relevant page numbers of the filing(s) that contain the information on each such person. **Attach additional sheets if more space is needed**.

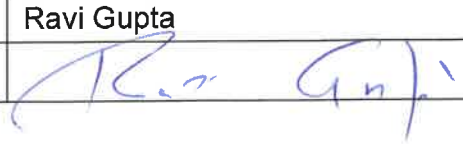
Website (URL) containing the last annual SEC (or foreign equivalent) filing	Page #'s

Please list the names and addresses of each stockholder, partner or member owning a 10 percent or greater interest in any corresponding corporation, partnership and/or limited liability company (LLC) listed in Part II other than for any publicly traded parent entities referenced above. **The disclosure shall be continued until names and addresses of every noncorporate stockholder, and individual partner, and member exceeding the 10 percent ownership criteria established pursuant to N.J.S.A. 52:25-24.2 has been listed. Attach additional sheets if more space is needed.**

Stockholder/Partner/Member and Corresponding Entity Listed in Part II	Address

Part IV Certification

I, being duly sworn upon my oath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I acknowledge: that I am authorized to execute this certification on behalf of the bidder/proposer; that the ***Morris County Municipal Utilities Authority*** is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the completion of any contracts with ***Morris County Municipal Utilities Authority*** to notify the ***Morris County Municipal Utilities Authority*** in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the, permitting the ***Morris County Municipal Utilities Authority*** to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print):	Ravi Gupta	Title:	President / CEO
Signature:		Date:	1/30/2026

MORRIS COUNTY MUA

Corporate Acknowledgement

STATE OF New Jersey)) SS:
COUNTY OF Mercer)

On this 30th day of January in the year 2026 , before me personally came

and appeared
Ravi Gupta

to me known, who, being by me duly sworn, did depose and say, that he resides at
7 Lahaway Creek Ct. Clarksburg, NJ 08510

;

That he is the
President / CEO
(principle executive officer or duly authorized representative)

of
Sovereign Consulting Inc.,

the Corporation described in and which executed the foregoing instrument; that he knows the seal of said Corporation; that one of the impressions affixed to said instrument in an impression of such seal, that it was so affixed by order of the Board of Directors of said Corporation, and he signed his name thereto by like order.

(Seal)

Colleen Murphy
Notary Public

Mercer, NJ County, State

COLLEEN MURPHY
Notary Public, State of New Jersey
Comm. # 50218515
My Commission Expires 2/6/2029

MORRIS COUNTY MUA

Certified Copy of Resolution of Board of Directors

Sovereign Consulting Inc.
(Name of Corporation)

RESOLVED that Ravi Gupta, President / CEO
(Person Authorized to Sign) (Title)

of Sovereign Consulting Inc. be authorized to sign and submit the Bid of this
(Name of Corporation)

Corporation for the following project:

BID#2024-W01 PLEASANT HILL ROAD 24-INCH PCCP RETIREMENT – PHASE I

The foregoing is a true and correct copy of the Resolution adopted by

Sovereign Consulting Inc. at a meeting of its Board of Directors

held on the 30th day of January, 20 26.

By _____

Title Ravi Gupta, President / CEO

(SEAL)

This form must be completed if the Bidder is a Corporation.

MORRIS COUNTY MUA

New Jersey Business Registration Certification

Pursuant to N.J.S.A. 52:32-44, the Morris County Municipal Utilities Authority is prohibited from entering into a contract with an entity unless the bidder/proposer/contractor, and each subcontractor that is required by law to be named in a bid/proposal/contract has a valid Business Registration Certificate on file with the Division of Revenue and Enterprise Services within the Department of the Treasury.

Prior to contract award or authorization, the contractor shall provide the Morris County Municipal Utilities Authority with its proof of business registration and that of any named subcontractor(s).

Subcontractors named in a bid or other proposal shall provide proof of business registration to the bidder, who in turn, shall provide it to the Morris County Municipal Utilities Authority prior to the time a contract, purchase order, or other contracting document is awarded or authorized.

During the course of contract performance:

(1) the contractor shall not enter into a contract with a subcontractor unless the subcontractor first provides the contractor with a valid proof of business registration.

(2) the contractor shall maintain and submit to the Morris County Municipal Utilities Authority a list of subcontractors and their addresses that may be updated from time to time.

(3) the contractor and any subcontractor providing goods or performing services under the contract, and each of their affiliates, shall collect and remit to the Director of the Division of Taxation in the Department of the Treasury, the use tax due pursuant to the Sales and Use Tax Act, (N.J.S.A. 54:32B-1 et seq.) on all sales of tangible personal property delivered into the State. Any questions in this regard can be directed to the Division of Taxation at (609)292-6400. Form NJ-REG can be filed online at http://www.state.nj.us/treasury/revenue/busregcert.shtml.

Before final payment is made under the contract, the contractor shall submit to the Morris County Municipal Utilities Authority a complete and accurate list of all subcontractors used and their addresses.

Pursuant to N.J.S.A. 54:49-4.1, a business organization that fails to provide a copy of a business registration as required, or that provides false business registration information, shall be liable for a penalty of $25 for each day of violation, not to exceed $50,000, for each proof of business registration not properly provided under a contract with a contracting agency.

MORRIS COUNTY MUA

State of New Jersey Business Registration Certificate

STATE OF NEW JERSEY
BUSINESS REGISTRATION CERTIFICATE
FOR STATE AGENCY AND CASINO SERVICE CONTRACTOR

DEPARTMENT OF TREASURY
DIVISION OF REVENUE
PO BOX 252
TRENTON, NJ

TAXPAYER NAME:
TAX REGISTRATION TEST ACCOUNT

TRADE NAME:
CLIENT REGISTRATION

TAXPAYER IDENTIFICATION#:
970-097-382/500

SEQUENCE NUMBER:
0107

ADDRESS:
847 ROEBLING AVE
TRENTON NJ 08611

ISSUANCE DATE:
07/14/04

EFFECTIVE DATE:
01/01/01

FORM BRC(08-01)

Acting Director

This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.

STATE OF NEW JERSEY
BUSINESS REGISTRATION CERTIFICATE

Taxpayer Name:	TAX REG TEST ACCOUNT
Trade Name:	
Address:	847 ROEBLING AVE TRENTON, NJ 08611
Certificate Number:	1093907
Date of Issuance:	October 14, 2004

For Office Use Only:

20041014112823533

STATE OF NEW JERSEY
BUSINESS REGISTRATION CERTIFICATE

Taxpayer Name:	SOVEREIGN CONSULTING INC.
Trade Name:	
Address:	111-A NORTH GOLD DRIVE ROBBINSVILLE, NJ 08691-1646
Certificate Number:	0727520
Effective Date:	September 17, 1999
Date of Issuance:	August 19, 2013

For Office Use Only:

20130819142341029

Certificate Number
646836

Registration Date: 10/18/2025
Expiration Date: 10/17/2026

State of New Jersey

Department of Labor and Workforce Development
Division of Wage and Hour Compliance

Public Works Contractor Registration Act

Pursuant to N.J.S.A. 34:11-56.48, et seq. of the Public Works Contractor Registration Act, this certificate of registration is issued for purposes of bidding on any contract for public work or for engaging in the performance of any public work to:

Sovereign Consulting Inc.

2025

Responsible Representative(s):

Ravi Gupta, President

Robert Asaro-Angelo, Commissioner
Department of Labor and Workforce Development

NON TRANSFERABLE

This certificate may not be transferred or assigned and may be revoked for cause by the Commissioner of Labor and Workforce Development.

Certificate Number
654581

Registration Date: 10/21/2024
Expiration Date: 10/20/2026

State of New Jersey

Department of Labor and Workforce Development
Division of Wage and Hour Compliance

Public Works Contractor Registration Act

Pursuant to N.J.S.A. 34:11-56.48, et seq. of the Public Works Contractor Registration Act, this certificate of registration is issued for purposes of bidding on any contract for public work or for engaging in the performance of any public work to:

Raymond Nebiker Electric LLC

2024

Responsible Representative(s):
Raymond Nebiker, CEO

Robert Asaro-Angelo, Commissioner
Department of Labor and Workforce Development

NON TRANSFERABLE

This certificate may not be transferred or assigned and may be revoked for cause by the Commissioner of Labor and Workforce Development.

STATE OF NEW JERSEY

BUSINESS REGISTRATION CERTIFICATE

DEPARTMENT OF TREASURY/
DIVISION OF REVENUE
PO BOX 252
TRENTON, N J 08646-0252

TAXPAYER NAME:

RAYMOND NEBIKER ELECTRIC LLC

TRADE NAME:

ADDRESS:

74 WOODLAND RD
RINGWOOD NJ 07456

SEQUENCE NUMBER:

1277832

EFFECTIVE DATE:

10/01/06

ISSUANCE DATE:

11/03/06

James J. Fruscione

Acting Director
New Jersey Division of Revenue

FORM BRC(08-01)

This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.

BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Board of Examiners of Electrical Contractors

HAS LICENSED

RAYMOND J NEBIKER ELECTRICAL LLC
RAYMOND J NEBIKER
74 Woodland Road
Ringwood NJ 07456

FOR PRACTICE IN NEW JERSEY AS A(N): Electrical Business Permit

01/22/2024 TO 03/31/2027
VALID

34EB00979400
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

Cari Bais
ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Board of Examiners of Electrical Contractors
HAS LICENSED
RAYMOND J NEBIKER ELECTRICAL LLC
Electrical Business Permit
01/22/2024 TO 03/31/2027
VALID
34EB00979400
License/Registration/Certificate #
SIGNATURE
Cari Bais
ACTING DIRECTOR

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/
CERTIFICATE ID CARD IS LOST
PLEASE NOTIFY:
Board of Examiners of Electrical C
P.O. Box 45006
Newark, NJ 07101

PLEASE DETACH HERE

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER WITH A MULTI-COLORED BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Board of Examiners of Electrical Contractors

HAS LICENSED

RAYMOND J. NEBIKER
74WOODLAND RD
RINGWOOD NJ 07456

FOR PRACTICE IN NEW JERSEY AS A(N): Electrical Contractor

01/22/2024 TO 03/31/2027
VALID

34EI00979400
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

Cari Bais
ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Board of Examiners of Electrical Contractors
HAS LICENSED
RAYMOND J. NEBIKER
Electrical Contractor
01/22/2024 TO 03/31/2027
VALID
34EI00979400
License/Registration/Certificate #
SIGNATURE
Cari Bais
ACTING DIRECTOR

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/
CERTIFICATE ID CARD IS LOST
PLEASE NOTIFY:
Board of Examiners of Electrical C
P.O. Box 45006
Newark, NJ 07101

PLEASE DETACH HERE

STATE OF NEW JERSEY

BUSINESS REGISTRATION CERTIFICATE

DEPARTMENT OF TREASURY/
DIVISION OF REVENUE
PO BOX 252
TRENTON, N J 08646-0252

TAXPAYER NAME:

A.C. SCHULTES, INC.

TRADE NAME:

TAXPAYER IDENTIFICATION#:

222-569-102/000

SEQUENCE NUMBER:

0072546

ADDRESS:

664 SOUTH EVERGREEN AVE
WOODBURY HEIGHTS NJ 08097

ISSUANCE DATE:

08/13/04

EFFECTIVE DATE:

10/30/84

Acting Director

FORM-BRC(08-01)

This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.

Certificate Number
48148

Registration Date: 03/25/2025
Expiration Date: 03/24/2027

State of New Jersey

Department of Labor and Workforce Development

Division of Wage and Hour Compliance

Public Works Contractor Registration Act

Pursuant to N.J.S.A. 34:11-56.48, et seq. of the Public Works Contractor Registration Act, this certificate of registration is issued for purposes of bidding on any contract for public work or for engaging in the performance of any public work to:

2025

A.C. Schultes, Inc.

Responsible Representative(s):
August Schultes, President
James Schultes, Vice-President
Richard Schultes, Secretary
Timothy Schultes, Secretary

Responsible Representative(s):
Michael Schultes, Vice-President
Jeffrey Schultes, Secretary
Gregory Schultes, Secretary
Peter Schultes, Secretary

Robert Asaro-Angelo, Commissioner
Department of Labor and Workforce Development

NON TRANSFERABLE

This certificate may not be transferred or assigned and may be revoked for cause by the Commissioner of Labor and Workforce Development.

MORRIS COUNTY MUA

Pay to Play Advisory

PAY TO PLAY ADVISORY
Disclosure Requirement
P.L. 2005, Chapter 271, Section 3 Reporting
(N.J.S.A. 19:44A – 20.27)

Any business entity that has received $50,000 or more in contracts from government entities in a calendar year will be required to file an annual disclosure report with ELEC.

The report will include certain contributions and contract information for the current calendar year.

At a minimum, a list of all business entities that file an annual disclosure report will be listed on ELEC's website at www.elec.state.nj.us.

If you have any questions please contact ELEC at:
1-888-313-ELEC (toll free in NJ) or
609-292-8700

An analyst from ELEC's Special Programs Section will assist you.

Initials _____

MORRIS COUNTY MUA

Non-Collusion Affidavit

STATE OF NEW JERSEY
MORRIS COUNTY MUNICIPAL UTILITIES AUTHORITY ss:

I certify that I am Ravi Gupta

of the firm of Sovereign Consulting Inc.

the Respondent making this Proposal for the bid or proposal for the above named project, that I executed the said proposal with full authority to do so; that said bidder has not, directly or indirectly entered into any agreement, participated in any collusion or otherwise taken any action in restraint of free, competitive bidding in connection with the above named project; and that all statements contained in said proposal and this affidavit are true, correct, and made with full knowledge that the Morris County Municipal Utilities Authority relies upon the truth of the statements contained in said Proposals and in the statements contained in this affidavit in awarding the contract for the said project.

I further warrant that no person or selling agency has been employed or retained to solicit or secure such contract upon an agreement or understanding for a commission, percentage, brokerage, or contingent fee, except bona fide employees or bona fide established commercial or selling agencies.

Signature of Representative: R. Gupta
Ravi Gupta, President / CEO

Subscribed and sworn to before me this 30th day of January, 20 26

Print Name of Affiant: Colleen Murphy

Colleen Murphy

Notary Public of New Jersey

My commission expires 2/6/2029

COLLEEN MURPHY
Notary Public, State of New Jersey
Comm. # 50218515
My Commission Expires 2/6/2029

MORRIS COUNTY MUA

Affidavit of Non-Debarred Status

AFFIDAVIT OF NON-DEBARRED STATUS

STATE OF NEW JERSEY)
) SS:
COUNTY OF Merer)

I, Ravi Gupta of the City/Town of Clarksburg, in the County of Monmouth and the State of New Jersey, of full age, being duly sworn according to law on my oath depose and say that:

I am Ravi Gupta (*Name*), a President / CEO (*Title, Position, etc.*)

of Sovereign Consulting Inc. (*Name of Firm, Company or Corporation*), the Bidder making the Bid for the Morris County Municipal Utilities Authority and that I executed the said Bid with full authority so to do; that said Bidder at the time of making this Bid is not included on the State of New Jersey, State Treasurer's List of Debarred, Suspended and Disqualified Bidders; and all statements contained in said Bid and in this affidavit are true and correct and made with the full knowledge that the Morris County Municipal Utilities Authority relies upon the truth of the statements contained in said Bid and in the Statements contained in this affidavit in awarding Contract for said project.

The undersigned further warrants that should the name of the firm, company or corporation making this Bid appear on the State Treasurer's List of Debarred, Suspended and Disqualified Bidders at anytime prior to, and during the life of the Contract, including the Guarantee Period, that the Morris County Municipal Utilities Authority shall be immediately so notified by the signatory to this Eligibility Affidavit.

The undersigned understands that the firm, company or corporation making the Bid as a CONTRACTOR is subject to debarment, suspension and/or disqualification in contracting with the State of New Jersey and the Department of Environmental Protection if the CONTRACTOR, pursuant to NJAC 7:1-5.2, commits any of the acts listed therein, and as determined according to applicable law and regulation.

(Seal if Corporation)

(Signature of Bidder)

Ravi Gupta, President / CEO

(Printed or Typed Name & Title of Bidder)

111 North Gold Dr. Robbinsville, NJ 08691

(Address of Bidder)

MORRIS COUNTY MUA

Non-Debarment Certification – Federal Level

N.J.S.A. 52:32-44.1 (P.L. 2019, c.406)

This certification shall be completed, certified to, and submitted to the contracting unit prior to contract award, except for emergency contracts where submission is required prior to payment.

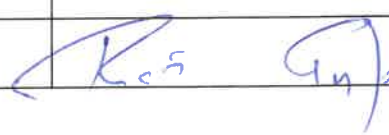
PART I: VENDOR INFORMATION	
Individual or Organization Name	Sovereign Consulting Inc.
Physical Address of Individual or Organization	111 North Gold Dr. Robbinsville, NJ 08691
Unique Entity ID (if applicable)	22-3626647
CAGE/NCAGE Code (if applicable)	1UFP4
Check the box that represents the type of business organization:	

☐Sole Proprietorship (skip Parts III and IV) ☐Non-Profit Corporation (skip Parts III and IV)

☒For-Profit Corporation (any type) ☐Limited Liability Company (LLC) ☐Partnership

☐Limited Partnership ☐Limited Liability Partnership (LLP)

☐Other (be specific): _____

PART II – CERTIFICATION OF NON-DEBARMENT: Individual or Organization			
I hereby certify that the **individual or organization listed above in Part I** is not debarred by the federal government from contracting with a federal agency. I further acknowledge: that I am authorized to execute this certification on behalf of the above-named organization; that ***The Morris County Municipal Utilities Authority (the "Authority")*** is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the date of contract award by to notify the ***Authority*** in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the **Authority**, permitting the ***Authority*** to declare any contract(s) resulting from this certification void and unenforceable.			
Full Name (Print):	Ravi Gupta	Title:	President / CEO
Signature:		Date:	1/30/2026

MORRIS COUNTY MUA

Non-Debarment Certification – Federal Level

PART III – CERTIFICATION OF NON-DEBARMENT: Individual or Entity Owning Greater than 50 Percent of Organization	
Section A (Check the Box that applies)	
☒	Below is the name and address of the stockholder in the corporation who owns more than 50 percent of its voting stock, or of the partner in the partnership who owns more than 50 percent interest therein, or of the member of the limited liability company owning more than 50 percent interest therein, as the case may be.
Name of Individual or Organization	Ravi Gupta
Physical Address	7 Lahaway Creek Ct. Clarksburg, NJ 08510
OR	
☐	No one stockholder in the corporation owns more than 50 percent of its voting stock, or no partner in the partnership owns more than 50 percent interest therein, or no member in the limited liability company owns more than 50 percent interest therein, as the case may be.
Section B (Skip if no Business entity is listed in Section A above)	
☐	Below is the name and address of the stockholder in the corporation who owns more than 50 percent of the voting stock of the organization's parent entity, or of the partner in the partnership who owns more than 50 percent interest in the organization's parent entity, or of the member of the limited liability company owning more than 50 percent interest in organization's parent entity, as the case may be.
Stockholder/Partner/Member Owning Greater Than 50 Percent of Parent Entity	
Physical Address	
OR	

MORRIS COUNTY MUA

Non-Debarment Certification – Federal Level

☐	No one stockholder in the parent entity corporation owns more than 50 percent of its voting stock, no partner in the parent entity partnership owns more than 50 percent interest therein, or no member in the parent entity limited liability company owns more than 50 percent interest therein, as the case may be.

Section C – Part III Certification

I hereby certify that no individual or organization that is debarred by the federal government from contracting with a federal agency owns greater than 50 percent of the **Organization listed above in Part I** or, if applicable, owns greater than 50 percent of a parent entity of **<name of organization>**. I further acknowledge: that I am authorized to execute this certification on behalf of the above-named organization; that ***The Morris County Municipal Utilities Authority (the "Authority")*** is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the date of contract award from the ***Authority*** to notify the ***Authority*** in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the **Authority**, permitting the ***Authority*** to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print):	Ravi Gupta	Title:	President / CEO
Signature:		Date:	1/30/2026

Part IV – CERTIFICATION OF NON-DEBARMENT: Contractor – Controlled Entities

Section A

☐	Below is the name and address of the corporation(s) in which the **Organization listed in Part I** owns more than 50 percent of voting stock, or of the partnership(s) in which the **Organization listed in Part I** owns more than 50 percent interest therein, or of the limited liability company or companies in which the **Organization listed above in Part I** owns more than 50 percent interest therein, as the case may be.

Name of Business Entity	Physical Address

MORRIS COUNTY MUA

Non-Debarment Certification – Federal Level

Add additional sheets if necessary	
OR	
☐	The **Organization listed above in Part I** does not own greater than 50 percent of the voting stock in any corporation and does not own greater than 50 percent interest in any partnership or any limited liability company.

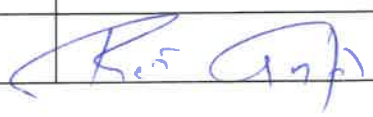
Section B (skip if no business entities are listed in Section A of Part IV)	
☐	Below are the names and addresses of any entities in which an entity listed in Part III A owns greater than 50 percent of the voting stock (corporation) or owns greater than 50 percent interest (partnership or limited liability company).
Name of Business Entity Controlled by Entity Listed in Section A of Part IV	**Physical Address**
Add additional Sheets if necessary	
OR	
☐	No entity listed in Part III A owns greater than 50 percent of the voting stock in any corporation or owns greater than 50 percent interest in any partnership or limited liability company.

Section C – Part IV Certification

I hereby certify that the **Organization listed above in Part I** does not own greater than 50 percent of any entity that that is debarred by the federal government from contracting with a federal agency and, if applicable, does not own greater than 50 percent of any entity that in turns owns greater than 50 percent of any entity debarred by the federal government from contracting with a federal agency. I further acknowledge: that I am authorized to execute this certification on behalf of the above-named organization; that ***The Morris County Municipal Utilities Authority (the "Authority")*** is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the date of contract award by the ***Authority*** to notify the ***Authority*** in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s)

MORRIS COUNTY MUA

Non-Debarment Certification – Federal Level

with the ***Authority***, permitting the ***Authority*** to declare any contract(s) resulting from this certification void and unenforceable.			
Full Name (Print):	Ravi Gupta	Title:	President / CEO
Signature:		Date:	1/30/2026

MORRIS COUNTY MUA

Subcontractor Utilization Plan Form

NOTICE OF INTENT TO SUBCONTRACT FORM

THIS ***NOTICE OF INTENT TO SUBCONTRACT*** FORM MUST BE COMPLETED AND INCLUDED AS PART OF EACH BIDDER'S PROPOSAL. FAILURE TO SUBMIT THIS FORM WILL BE CAUSE FOR REJECTION OF THE BID AS NON-RESPONSIVE.

Solicitation Number:	Solicitation Title:
SCE-R08125.Y25	Alamatong Well #4 and Well #5 Electrical and Water System Improvements

Bidder's Name and Address:

Name: Sovereign Consulting Inc.

Address: 111 North Gold Dr.

City: Robbinsville State: NJ Zip Code: 08691

INSTRUCTIONS: PLEASE CHECK ONE OF THE BELOW LISTED BOXES:

☒ **If awarded this contract, I will engage subcontractors to provide certain goods and/or services.**

ALL BIDDERS THAT INTEND TO ENGAGE SUBCONTRACTORS MUST ALSO SUBMIT A COMPLETED AND CERTIFIED ***SUBCONTRACTOR UTILIZATION PLAN*** WITH THEIR BID PROPOSALS.

☐ **If awarded this contract, I do not intend to engage subcontractors to provide any goods and/or services.**

ALL BIDDERS THAT DO NOT INTEND TO ENGAGE SUBCONTRACTORS MUST ATTEST TO THE FOLLOWING CERTIFICATION:

I hereby certify that if the award is granted to my firm and if I determine at any time during the contract to engage subcontractors to provide certain goods and/or services, pursuant to Section 3.11 of the Standard Terms and Conditions, I will submit the ***Subcontractor Utilization Plan (Plan)*** for approval to the Division of Purchase and Property in advance of any such engagement of subcontractors. Additionally, I certify that in engaging subcontractors, I will make a good faith effort to achieve the subcontracting set-aside goals established for this contract, and I will attach to the ***Plan*** documentation of such efforts in accordance with NJAC 17:13-4 and the ***Notice to All Bidders.***

PRINCIPAL OF FIRM:

(Signature)	Ravi Gupta, President / CEO (Title)	1/30/2026 (Dat

MORRIS COUNTY MUA

Subcontractor Utilization Plan Form

SUBCONTRACTOR UTILIZATION PLAN (REFERENCED IN BID STANDARD TERMS AND CONDITIONS)	**Solicitation No.:** SCE-R08125.Y25
NOTE: If utilizing subcontractors, failure to submit the properly completed form will be sufficient cause for rejection of the bid as non-responsive.	**Solicitation Title:** Alamatong Well #4 and Well #5 Electrical and Water System Improvements
Bidder's Name and Address: Sovereign Consulting Inc. 111 North Gold Dr. Robbinsville, NJ 08691	**Bidder's Telephone No.:** 609-259-8200 **Bidder's Contact Person:** Ravi Gupta

INSTRUCTIONS: List all businesses to be used as subcontractors. This form may be duplicated for extended lists.

SUBCONTRACTOR'S NAME ADDRESS, ZIP CODE TELEPHONE NUMBER AND VENDOR ID NUMBER	TYPE(S) OF GOODS OR SERVICES TO BE PROVIDED	ESTIMATED VALUE OF SUBCONTRACTS
Raymond Nebiker Electric LLC 74 Woodland Rd. 845-420-4766 Ringwood, NJ 07456	Electrical 34EB00979400	$500,000.00
A.C. Schultes, Inc. (856) 845-5656 664 S. Evergreen Ave. Woodbury Heights, NJ 08097	Well Driller	$45,000.00

MORRIS COUNTY MUA

Subcontractor Utilization Plan Form

I hereby certify that this Subcontractor Utilization Plan (Plan) is being submitted in good faith. I certify that each subcontractor has been notified that it has been listed on this Plan and that each subcontractor has consented, in writing, to its name being submitted for this contract. Additionally, I certify that I shall notify each subcontractor listed on the Plan, in writing, if the award is granted to my firm, and I shall make all documentation available to Morris County Municipal Utilities Authority upon request.

I further certify that all information contained in this Plan is true and correct and I acknowledge that the Authority will rely on the truth of the information in awarding the contract.

PRINCIPAL OF FIRM:

(Signature)	Ravi Gupta, President / CEO (Title)	1/30/2026 (Date)

MORRIS COUNTY MUA

Form of Bid Bond

KNOW ALL MEN BY THESE PRESENTS, that we, Sovereign Consulting, Inc. _____, Hereinafter called the Principal, as Principal, and the Nationwide Mutual Insurance Company of Des Moines, IA a corporation duly organized under the laws of the State of Ohio, hereinafter called the Surety, as Surety are held and firmly bound unto Morris County Municipal Utilities Authority hereinafter called the Obligee, in the sum of Ten Percent of Amount Bid Not To Exceed Twenty Thousand and NO/100 Dollars, ($10% NTE $20,000.00) for the payment of which sum, well and truly to be made, the said Principal and the said Surety, bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, The Principal has submitted a bid for Alamatong Well #4 and Well #5 Electrical and Water System Improvements

NOW, THEREFORE, if the Obligee shall accept the Bid of the Principal and the Principal shall enter into a Contract with the Obligee in accordance with the terms of such bid and give bond or bonds as may be specified in the Bid Documents with good and sufficient surety for the faithful performance of such Contract and the prompt payment of labor and material furnished in the prosecution thereof, then this obligation shall be null and void, otherwise to remain in full force and effect.

SIGNED AND SEALED this 27th day of January, 20 26. In the presence of:

Sovereign Consulting, Inc. (SEAL)
(Principal)

(Witness) Colleen Murphy

By: _____
(Title) Ravi Gupta, President/CEO

Nationwide Mutual Insurance Company (SEAL)
(Surety)

(Witness) Leslie Pasquini

By: _____ (SEAL)
(Title) Kathleen M. Rowe, Attorney-in-fact

MORRIS COUNTY MUA

Consent of Surety

In consideration of the premises and of One Dollar ($1.00), lawful money of the United States, to it in hand paid by the Contractor, the receipt whereof is hereby acknowledged, the undersigned surety consents and agrees that if the Contract, for which the preceding estimate and Bid is made, be awarded to the person or persons submitting the same as contracted, it will become bound as surety and guarantor for its faithful performance, and shall provide a one year performance bond in the amount equal to 100% of the contract amount, prior to the execution of the contract. The Contractor shall also execute thereafter a bond as party of the third part thereto when required to do so by Owner.

In witness whereof, said surety has caused these present to be signed and attested by a duly authorized officer and its corporate seal to be hereto affixed this 27th day of January, 2026

(A corporate acknowledgment and statement of authority to be hereto attached by the surety company)

Nationwide Mutual Insurance Company

By _____
Surety Company Kathleen M. Rowe
Attorney-in-Fact

Attest:

_____
Leslie Pasquini

CONSENT OF SURETY

IT IS HEREBY UNDERSTOOD AND AGREED THAT Nationwide Mutual Insurance Company organized and existing under the laws of the State of OH and licensed to do business in the State of NJ certifies and agrees, that if contract for :

Morris County Municipal Utilities Authority

for Alamatong Well #4 and Well #5 Electrical and Water System Improvements

is awarded to: Sovereign Consulting, Inc.

the undersigned Corporation will execute the bond or bonds as required by the contract documents and will become Surety in the full amount set forth in the contract documents for the faithful performance of all obligations of the Contractor.

Signed and sealed this 27th day of January, 2026

Nationwide Mutual Insurance Company

By: _____

Kathleen M. Rowe Attorney-in Fact

Power of Attorney

KNOW ALL MEN BY THESE PRESENTS THAT:

Nationwide Mutual Insurance Company, an Ohio corporation

hereinafter referred to severally as the "Company" and collectively as "the Companies" does hereby make, constitute and appoint:
GARY B KOHAN; KATHLEEN M ROWE

each in their individual capacity, its true and lawful attorney-in-fact, with full power and authority to sign, seal, and execute on its behalf on the date thereof any and all: (i)bonds and undertakings; (ii) Proposal Bonds; (ii) Letters of Surety; (iv) Consent of Surety; and (v) other obligatory instruments of similar nature, in penalties not exceeding the sum of

UNLIMITED

and to bind the Company thereby, as fully and to the same extent as if such instruments were signed by the duly authorized officers of the Company; and all acts of said Attorney pursuant to the authority given are hereby ratified and confirmed.

This power of attorney is made and executed pursuant to and by authority of the following resolution duly adopted by the board of directors of the Company:

"RESOLVED, that the president, or any vice president be, and each hereby is, authorized and empowered to appoint attorneys-in-fact of the Company, and to authorize them to execute and deliver on behalf of the Company any and all bonds, forms, applications, memorandums, undertakings, recognizances, transfers, contracts of indemnity, policies, contracts guaranteeing the fidelity of persons holding positions of public or private trust, and other writings obligatory in nature that the business of the Company may require; and to modify or revoke, with or without cause, any such appointment or authority; provided, however, that the authority granted hereby shall in no way limit the authority of other duly authorized agents to sign and countersign any of said documents on behalf of the Company."

"RESOLVED FURTHER, that such attorneys-in-fact shall have full power and authority to execute and deliver any and all such documents and to bind the Company subject to the terms and limitations of the power of attorney issued to them, and to affix the seal of the Company thereto; provided, however, that said seal shall not be necessary for the validity of any such documents."

This power of attorney is signed and sealed under and by the following bylaws duly adopted by the board of directors of the Company.

Execution of Instruments. Any vice president, any assistant secretary or any assistant treasurer shall have the power and authority to sign or attest all approved documents, instruments, contracts, or other papers in connection with the operation of the business of the company in addition to the chairman of the board, the chief executive officer, president, treasurer or secretary; provided, however, the signature of any of them may be printed, engraved, or stamped on any approved document, contract, instrument, or other papers of the Company.

IN WITNESS WHEREOF, the Company has caused this instrument to be sealed and duly attested by the signature of its officer the 23rd day of October, 2025.

Antonio C. Albanese, **Vice President** of Nationwide Mutual Insurance Company

ACKNOWLEDGMENT

STATE OF OHIO COUNTY OF FRANKLIN: ss
On this 23rd day of October, 2025, before me came the above-named officer for the Company aforesaid, to me personally known to be the officer described in and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn, deposes and says, that he is the officer of the Company aforesaid, that the seal affixed hereto is the corporate seal of said Company, and the said corporate seal and his signature were duly affixed and subscribed to said instrument by the authority and direction of said Company.

Karen L. Karn
Notary Public, State of Ohio
No. 2018-RE-719796
Commission Expires July 7, 2028

Notary Public
My Commission Expires
July 7, 2028

CERTIFICATE

I, Lezlie F. Chimienti, Assistant Secretary of the Company, do hereby certify that the foregoing is a full, true and correct copy of the original power of attorney issued by the Company; that the resolution included therein is a true and correct transcript from the minutes of the meetings of the boards of directors and the same has not been revoked or amended in any manner; that said Antonio C. Albanese was on the date of the execution of the foregoing power of attorney the duly elected officer of the Company, and the corporate seal and his signature as officer were duly affixed and subscribed to the said instrument by the authority of said board of directors; and the foregoing power of attorney is still in full force and effect.

IN WITNESS WHEREOF, I have hereunto subscribed my name as Assistant Secretary, and affixed the corporate seal of said Company this 27th day of January, 2026.

Assistant Secretary

BDJ 1(10-25)00

NATIONWIDE MUTUAL INSURANCE COMPANY AND SUBSIDIARIES AND AFFILIATES

Consolidated Statutory Statements of Admitted Assets, Liabilities and Surplus

(in millions)	December 31, 2024	2023
Admitted assets		
Invested assets		
Bonds	$ 20,744	$ 20,643
Stocks	11,138	9,812
Mortgage loans, net of allowance	1,771	1,816
Owner occupied real estate, at cost (less accumulated depreciation of $350 and $394 as of December 31, 2024 and 2023, respectively)	263	282
Cash, cash equivalents and short-term investments	134	510
Other invested assets	6,889	7,085
Total invested assets	$ 40,939	$ 40,148
Premiums in course of collection	4,069	4,501
Corporate-owned life insurance	1,655	1,600
Deferred federal income tax asset	1,690	1,926
Other assets	1,639	1,652
Total admitted assets	$ 49,992	$ 49,827
Liabilities and surplus		
Liabilities		
Losses and loss expense reserves	$ 16,890	$ 17,821
Unearned premiums	7,792	8,488
Accrued expenses and taxes, other than federal income taxes	657	725
Agents' security compensation plan reserve	637	723
Other liabilities	3,084	3,099
Total liabilities	$ 29,060	$ 30,856
Surplus		
Surplus notes, net of unamortized issue discount of $7 and $8 as of December 31, 2024 and 2023, respectively	$ 3,147	$ 3,546
Unassigned surplus	17,785	15,425
Total surplus	$ 20,932	$ 18,971
Total liabilities and surplus	$ 49,992	$ 49,827

See accompanying notes to the consolidated statutory financial statements.

Certification

I, Jamie Train, VP, Controller, do hereby certify that the foregoing is a true and correct statement of the statutory balance sheet of said Corporation as of December 31, 2024 and 2023 to the best of my knowledge and belief.

Jamie Train

Jamie Train

STATE OF OHIO
COUNTY OF FRANKLIN

Sworn to (or affirmed) and subscribed before me this 5th day of MAR, 2025, by JAMIE TRAIN

Notary Public's Signature

RYAN LAMB
Notary Name

Personally Known X OR
Type of Identification Produced

Ryan James Lamb
Notary Public, State of Ohio
Commission #: 2024-RE-883431
My Commission Expires 10-30-29

Nationwide Mutual Insurance Company

Home Office: Columbus, Ohio
Surety Administrative Office:
1100 Locust Street
Department 2006
Des Moines, IA 50391-2006
1-866-387-0457 • Fax (515) 508-4101

SURETY DISCLOSURE STATEMENT AND CERTIFICATION

Nationwide Mutual Insurance Company, surety on the attached bond, hereby certifies the following:

(1) The surety meets the applicable capital and surplus requirements of R.S.17:17-6 or R.S.17:17-7 as of the surety's most current annual filing with the New Jersey Department of Insurance.

(2) The capital and surplus, as determined in accordance with the applicable laws of this State, of the surety participating in the issuance of the attached bond is in the following amount as of December 31, 2024, which amounts have been certified as indicated by certified public accountants KPMG, and will be included in the Annual Statement to be filed with the New Jersey Departmen Insurance, 20 West State Street CN-325, Trenton, New Jersey 08625-0325

Capital (common Stock): $0 **Surplus: $17,784,388,343**

(3) (a) With respect to each surety participating in the issuance of the attached bond that has received from the United States Secretary of the Treasury a certificate of authority pursuant to 31 U.S.C. § 9305, the underwriting limitation established therein and the date as of which that limitation was effective is as follows:

Nationwide Mutual Insurance Company **$2,016,706,000** **August 1, 2025**

(b) With respect to each surety participating in the issuance of the attached bond that has not received such a certificate of authority from the United States Secretary of the Treasury, the underwriting limitation of that surety as established pursuant to R.S.17:18-9 as of (date on which such limitation was so established) is as follows (indicating for each such surety that surety's underwriting limitation and the date on which that limitation was established):

Not Applicable

(4) The amount of the bond to which this statement and certification is attached is The Amount Bid

(5) If, by virtue of one or more contracts of reinsurance, the amount of the bond indicated under item (4) above exceeds the total underwriting limitation of all sureties on the bond as set forth in items (3)(a) or (3)(b) above, or both, then for each such contract of reinsurance:

(a) The name and address of each such reinsurer under that contract and the amount of that reinsurer's participation in the contract is as follows:

Reinsure	Address	Amount
Not Applicable		

(b) Each surety that is party to any such contract of reinsurance certifies that each reinsurer listed under item (5)(a) satisfies the credit for reinsurance requirement established under P.L.1993, c. 243 (C.17:51B-1 et seq.) and any applicable regulations in effect as of the date on which the bond to which this statement and certification is attached shall have been filed with the appropriate public agency.

CERTIFICATE

I, Kathleen M. Rowe, as **Attorney-in-Fact** of Nationwide Mutual Insurance Company, a mutual insurance company domiciled in Ohio, DO HEREBY CERTIFY that, to the best of my knowledge, the foregoing statements made by me are true, and ACKNOWLEDGE that, if any of those statements are false, this bond is VOIDABLE.

Kathleen M Rowe
(Signature of certifying agent/officer)

Kathleen M. Rowe
(Printed name of certifying agent/officer)

Attorney-in-Fact
(Title of certifying agent)

Dated: January 27, 2026
(month, day, year)

SURETY ACKNOWLEDGMENT

STATE OF New Jersey

COUNTY OF Burlington

On this 27th **day of** JANUARY **2026**

before me personally came Kathleen M. Rowe

to me known, who, being by me duly sworn, did depose and say that she resides in:

Cinnaminson, New Jersey

that she is the Attorney-in-Fact for NATIONWIDE MUTUAL INSURANCE COMPANY

the corporation described in and which executed the foregoing instrument; that she knows the seal of said corporation; that one of the seals affixed to said instrument is such seal; that it was so affixed by said corporation, and that she signed her name thereto by like order.

Notary Public
Gary B. Kohan

GARY B KOHAN
Notary Public, State of New Jersey
Comm. # 2003632
My Commission Expires 9/20/2030

MORRIS COUNTY MUA

W-9

Form **W-9**
(Rev. November 2017)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

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

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.

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.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ 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.

☐ Other (see instructions) ▸

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

Requester's name and address (optional)

6 City, state, and ZIP code

7 List account number(s) here (optional)

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

__ – _____

Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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** ▸ | **Date** ▸

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

Form **W-9**
(Rev. March 2024)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

Give form to the requester. Do not send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See *Specific Instructions* on page 3.

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)

Sovereign Consulting Inc.

2 Business name/disregarded entity name, if different from above.

3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor ☐ C corporation ☑ S corporation ☐ Partnership ☐ Trust/estate

☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . .

Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.

☐ Other (see instructions)

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any)

Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)

(Applies to accounts maintained outside the United States.)

3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions . . . . . ☐

5 Address (number, street, and apt. or suite no.). See instructions.

111A North Gold Drive

Requester's name and address (optional)

6 City, state, and ZIP code

Robbinsville, NJ 08691

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. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

			–			–				

or

Employer identification number

2	2	–	3	6	2	6	6	4	7

Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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** Michelle Galh | **Date** 01/02/2025

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*.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

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-NEC (nonemployee compensation).
- 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), and 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.

Caution: If you don't return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued);
2. Certify that you are not subject to backup withholding; or
3. Claim exemption from backup withholding if you are a U.S. exempt payee; and
4. Certify to your non-foreign status for purposes of withholding under chapter 3 or 4 of the Code (if applicable); and
5. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting is correct. See *What Is FATCA Reporting*, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding. Payments made to foreign persons, including certain distributions, allocations of income, or transfers of sales proceeds, may be subject to withholding under chapter 3 or chapter 4 of the Code (sections 1441–1474). Under those rules, if a Form W-9 or other certification of non-foreign status has not been received, a withholding agent, transferee, or partnership (payor) generally applies presumption rules that may require the payor to withhold applicable tax from the recipient, owner, transferor, or partner (payee). See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities.

The following persons must provide Form W-9 to the payor for purposes of establishing its non-foreign status.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the disregarded entity.
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the grantor trust.
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust and not the beneficiaries of the trust.

See Pub. 515 for more information on providing a Form W-9 or a certification of non-foreign status to avoid withholding.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person (under Regulations section 1.1441-1(b)(2)(iv) or other applicable section for chapter 3 or 4 purposes), do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515). If you are a qualified foreign pension fund under Regulations section 1.897(l)-1(d), or a partnership that is wholly owned by qualified foreign pension funds, that is treated as a non-foreign person for purposes of section 1445 withholding, do not use Form W-9. Instead, use Form W-8EXP (or other certification of non-foreign status).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a saving clause. Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if their stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first Protocol) and is relying on this exception to claim an exemption from tax on their scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include, but are not limited to, interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third-party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester;
2. You do not certify your TIN when required (see the instructions for Part II for details);
3. The IRS tells the requester that you furnished an incorrect TIN;
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only); or
5. You do not certify to the requester that you are not subject to backup withholding, as described in item 4 under *"By signing the filled-out form"* above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

See also *Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding*, earlier.

What Is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all U.S. account holders that are specified U.S. persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you are no longer tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of $50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a $500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

- **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note for ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040 you filed with your application.

- **Sole proprietor.** Enter your individual name as shown on your Form 1040 on line 1. Enter your business, trade, or "doing business as" (DBA) name on line 2.

- **Partnership, C corporation, S corporation, or LLC, other than a disregarded entity.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

- **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. Enter any business, trade, or DBA name on line 2.

- **Disregarded entity.** In general, a business entity that has a single owner, including an LLC, and is not a corporation, is disregarded as an entity separate from its owner (a disregarded entity). See Regulations section 301.7701-2(c)(2). A disregarded entity should check the appropriate box for the tax classification of its owner. Enter the owner's name on line 1. The name of the owner entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2. If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, enter it on line 2.

Line 3a

Check the appropriate box on line 3a for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3a.

IF the entity/individual on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation.
• Individual or • Sole proprietorship	Individual/sole proprietor.
• LLC classified as a partnership for U.S. federal tax purposes or • LLC that has filed Form 8832 or 2553 electing to be taxed as a corporation	Limited liability company and enter the appropriate tax classification: P = Partnership, C = C corporation, or S = S corporation.
• Partnership	Partnership.
• Trust/estate	Trust/estate.

Line 3b

Check this box if you are a partnership (including an LLC classified as a partnership for U.S. federal tax purposes), trust, or estate that has any foreign partners, owners, or beneficiaries, and you are providing this form to a partnership, trust, or estate, in which you have an ownership interest. You must check the box on line 3b if you receive a Form W-8 (or documentary evidence) from any partner, owner, or beneficiary establishing foreign status or if you receive a Form W-9 from any partner, owner, or beneficiary that has checked the box on line 3b.

Note: A partnership that provides a Form W-9 and checks box 3b may be required to complete Schedules K-2 and K-3 (Form 1065). For more information, see the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

If you are required to complete line 3b but fail to do so, you may not receive the information necessary to file a correct information return with the IRS or furnish a correct payee statement to your partners or beneficiaries. See, for example, sections 6698, 6722, and 6724 for penalties that may apply.

Line 4 Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.

- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.

- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third-party network transactions.

- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space on line 4.

1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2).

2—The United States or any of its agencies or instrumentalities.

3—A state, the District of Columbia, a U.S. commonwealth or territory, or any of their political subdivisions or instrumentalities.

4—A foreign government or any of its political subdivisions, agencies, or instrumentalities.

5—A corporation.

6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or territory.

7—A futures commission merchant registered with the Commodity Futures Trading Commission.

8—A real estate investment trust.

9—An entity registered at all times during the tax year under the Investment Company Act of 1940.

10—A common trust fund operated by a bank under section 584(a).

11—A financial institution as defined under section 581.

12—A middleman known in the investment community as a nominee or custodian.

13—A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
• Interest and dividend payments	All exempt payees except for 7.
• Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
• Barter exchange transactions and patronage dividends	Exempt payees 1 through 4.
• Payments over $600 required to be reported and direct sales over $5,000[1]	Generally, exempt payees 1 through 5.[2]
• Payments made in settlement of payment card or third-party network transactions	Exempt payees 1 through 4.

[1] See Form 1099-MISC, Miscellaneous Information, and its instructions.

[2] However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) entered on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37).

B—The United States or any of its agencies or instrumentalities.

C—A state, the District of Columbia, a U.S. commonwealth or territory, or any of their political subdivisions or instrumentalities.

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i).

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i).

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state.

G—A real estate investment trust.

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940.

I—A common trust fund as defined in section 584(a).

J—A bank as defined in section 581.

K—A broker.

L—A trust exempt from tax under section 664 or described in section 4947(a)(1).

M—A tax-exempt trust under a section 403(b) plan or section 457(g) plan.

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, enter "NEW" at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have, and are not eligible to get, an SSN, your TIN is your IRS ITIN. Enter it in the entry space for the Social security number. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at *www.SSA.gov*. You may also get this form by calling 800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at *www.irs.gov/EIN*. Go to *www.irs.gov/Forms* to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to *www.irs.gov/OrderForms* to place an order and have Form W-7 and/or Form SS-4 mailed to you within 15 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and enter "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, you will generally have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon. See also *Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding*, earlier, for when you may instead be subject to withholding under chapter 3 or 4 of the Code.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third-party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account[1]
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor[2]
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee[1]
b. So-called trust account that is not a legal or valid trust under state law	The actual owner[1]
6. Sole proprietorship or disregarded entity owned by an individual	The owner[3]
7. Grantor trust filing under Optional Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))**	The grantor*
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity[4]
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing Form 1041 or under the Optional Filing Method 2, requiring Form 1099 (see Regulations section 1.671-4(b)(2)(i)(B))**	The trust

[1] List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

[2] Circle the minor's name and furnish the minor's SSN.

[3] You must show your individual name on line 1, and enter your business or DBA name, if any, on line 2. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

[4] List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)

*__Note:__ The grantor must also provide a Form W-9 to the trustee of the trust.

** For more information on optional filing methods for grantor trusts, see the Instructions for Form 1041.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information, such as your name, SSN, or other identifying information, without your permission to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax return preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity, or a questionable credit report, contact the IRS Identity Theft Hotline at 800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 877-777-4778 or TTY/TDD 800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to *phishing@irs.gov*. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 800-366-4484. You can forward suspicious emails to the Federal Trade Commission at *spam@uce.gov* or report them at *www.ftc.gov/complaint*. You can contact the FTC at *www.ftc.gov/idtheft* or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see *www.IdentityTheft.gov* and Pub. 5027.

Go to *www.irs.gov/IdentityTheft* to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their laws. The information may also be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payors must generally withhold a percentage of taxable interest, dividends, and certain other payments to a payee who does not give a TIN to the payor. Certain penalties may also apply for providing false or fraudulent information.

MORRIS COUNTY MUA

Lowest Bidder Prevailing Wage Certification

In the matter of an award of a contract for public Work for a project described as: Motor Control Center	)))	State of New Jersey - Department of Labor Workforce Development Division of Wage & Hour Compliance

Ravi Gupta, of full age and under oath, duly provides the following sworn statement:

1. I am the owner and/or highest-ranking official or officer of a company or firm named Sovereign Consulting Inc., which holds a currently valid public works contractor registration pursuant to the New Jersey Public Works Contractor Registration Act, N.J.S.A. 34:11-56.48 et seq., certificate number 646836
2. I submitted a bid for a contract award in the above identified project and the public body has informed me that I am the lowest bidder by 10 percent or more as compared to the next lowest bid submitted.
3. The amount of my bid does include paying the prevailing wage rate to all workers who perform work on the project at rates of pay, including both base wage and fringe benefits, set forth in applicable Wage Determinations,
    a. For appropriate locality
    b. For the appropriate work classification (e.g. carpenter, electrician, mason, plumber)
    c. For the appropriate job title (e.g. Apprentice, Journeyman, Forman), published by the New Jersey Department of Labor and Workforce Development (NJDOL) pursuant to the New Jersey Prevailing Wage Act (NJPWA) N.J.S.A. 34:11-56.25 et seq., and corresponding NJDOL rules, N.J.A.C. 12:60.

I certify under penalty of perjury that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are false, I am subject to punishment. See N.J.S.A. 2C:28-1 et seq., specifically, N.J.S.A. 2C28-3, within the New Jersey Code of Criminal Justice.

Date: 1/30/2026

Name (Printed): Ravi Gupta

Signature: Ravi Gupta

Title: President / CEO