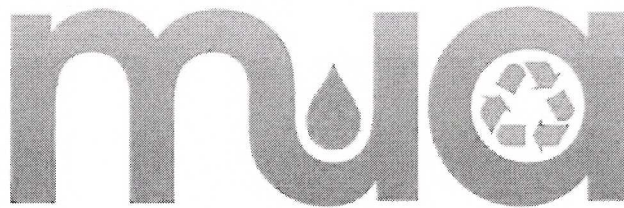


**CONTRACT DOCUMENTS AND TECHNICAL SPECIFICATIONS FOR:
MOUNT ARLINGTON PUMP REPLACEMENT**

**FILE NO.: SCE-R08125.Y26
MCMUA Contract No: 2026-W03**

M O R R I S C O U N T Y



M U N I C I P A L U T I L I T I E S A U T H O R I T Y

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

JUNE 2026

VNL, INC.

BIDDER:

ADDRESS:

TELEPHONE:

408 US 22 WEST

WHITEHOUSE STATION NJ 08889

908-906-5292/908-721-7981

**06/10/2026**
MICHAEL K. MCALOON, P.E. **DATE**
NJPE LICENSE #24GE05346500

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	VNL
X	Consent of Surety	VNL
X	Statement of Ownership Disclosure	VNL
X	Subcontractor Utilization Form	VNL
X	Acknowledgement of receipt of any notice(s) or revision(s) or addenda to an advertisement, specifications or bid document(s)	VNL
X	Non-Collusion Affidavit	VNL
X	Price Proposal Table	VNL
X	Price Proposal Signature Form	VNL

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

MORRIS COUNTY MUA

Administrative Documents

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

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

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

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: VNL, INC.

Representative's Name: VICENTE LACAP

Representative's Signature:



Date: 7/2/2026

Phone: 908-906-5292/908-721-7981

MORRIS COUNTY MUA

Acknowledgement of Receipt of Addenda

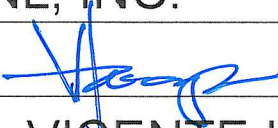
Pursuant to the NJSA 40A:11-23.1a, the undersigned Bidder hereby acknowledges receipt of the following notices, revisions or addenda to the Bid Advertisement, Bid Specifications or Bid Documents. By indicating date of receipt, Bidder acknowledges the submitted Bid takes into account the provisions of 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

☒ No Addenda Issued Initials VNL

ACKNOWLEDGEMENT OF BIDDER

Name of Bidder: VNL, INC.

Bidder's Signature: 

Printed Name & Title: VICENTE LACAP, PRESIDENT

Date: 7/2/2026

MORRIS COUNTY MUA

Price Proposal Table

Project Scope:

The Mt. Arlington Pump Replacement project includes the selective demolition, furnish, install, and test two (2) replacement, Aurora horizontal split case pumps within the MCMUA Mt. Arlington Booster Station. The project includes furnishing and installing all necessary materials and equipment, coordination with the MCMUA and all necessary work to complete the project.

The Contract will allow 120 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 #2026-W03: Mount Arlington Pump Replacement

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	\$ 9,000.00	NINE THOUSAND DOLLARS AND ZERO CENTS	\$ 9,000.00
2	Replacement of Two (2) Aurora Horizontal Split Case Pumps, Complete in Place	LS	1	\$ 335,000.00		\$ 335,000.00
5	Unforeseen Conditions Allowance					\$ 25,000.00
TOTAL BASE BID PRICE: \$ 369,000.00						
COMPANY NAME: VNL, 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.

MORRIS COUNTY MUA

Price Proposal Table

- 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: VNL, 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 #2026-W03: MOUNT ARLINGTON PUMP REPLACEMENT

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: VNL, INC.

Representative's Name (print): VICENTE LACAP

Representative's Signature: 

Title: PRESIDENT

Complete Address: 408 US 22 WEST
WHITEHOUSE STATION NJ 08889

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:

**8 YEARS UNDER PRESENT NAME, 8 MONTHS
IN PRESENT ADDRESS**

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

**PREVIOUS ADDRESS: 107 MAIN ST., WHITEHOUSE STATION
NJ 08889**

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: _____

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:

ELECTRICAL

Contractor: VNL, INC.

Status as of
(date):

5/30/2026



Owner/Obligee	Project Description	Contract Amount		Billings to Date		Paid to date		Accounts Receivable		Change Order		Total Contract to Date		Retainage		To Complete Amount	% Completed	Anticipated Completion	
		(A)	5/30/2026	5/30/2026	5/30/2026	5/30/2026	5/30/2026	5/30/2026	5/30/2026	(B)	(B)	(A+B)	(A+B)	2% to date	2% to date			Date	Date
borough of Madison	Well B Facility Improvements	\$ 914,000.00	\$ 822,680.60	\$ 822,680.60	\$ 822,680.60	\$ 822,680.60	\$ 822,680.60	\$ -	\$ -	\$ 49,170.00	\$ 49,170.00	\$ 963,170.00	\$ 963,170.00	\$ 16,453.61	\$ 16,453.61	\$ 140,489.40	99%	11/2025	11/2025
		\$ 460,000.00	\$ 311,673.59	\$ 311,673.59	\$ 311,673.59	\$ 311,673.59	\$ 311,673.59	\$ -	\$ -	\$ -	\$ -	\$ 460,000.00	\$ 460,000.00	\$ 6,360.69	\$ 6,360.69	\$ 148,326.41	99%	6/2026	6/2026
Township of Morris	Butterworth Sewage Treatment Plant Sludge Pump Upgrades	\$ 870,000.00	\$ 815,462.90	\$ 815,462.90	\$ 815,462.90	\$ 815,462.90	\$ 815,462.90	\$ -	\$ -	\$ -	\$ -	\$ 870,000.00	\$ 870,000.00	\$ 16,642.10	\$ 16,642.10	\$ 54,537.10	99%	12/2025	12/2025
		\$ 560,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 560,000.00	\$ 560,000.00	\$ -	\$ -	\$ 560,000.00	1%	08/2026	08/2026
Stony Brook Regional Sewerage Authority	Sludge Thickener No. 2 Improvements Project	\$ 622,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 622,000.00	\$ 622,000.00	\$ -	\$ -	\$ 622,000.00	3%	7/2026	7/2026
		\$ 3,331,740.00	\$ 296,900.80	\$ 296,900.80	\$ 296,900.80	\$ 296,900.80	\$ 296,900.80	\$ -	\$ -	\$ -	\$ -	\$ 3,331,740.00	\$ 3,331,740.00	\$ 6,059.20	\$ 6,059.20	\$ 3,034,839.20	4%	11/2026	11/2026
Township of Moorestown	WWTP Headworks Upgrade	\$ 801,050.00	\$ 164,444.00	\$ 164,444.00	\$ 164,444.00	\$ 164,444.00	\$ 164,444.00	\$ -	\$ -	\$ -	\$ -	\$ 801,050.00	\$ 801,050.00	\$ 3,356.00	\$ 3,356.00	\$ 636,606.00	60%	06/2026	06/2026
		\$ 3,892,000.00	\$ 198,388.26	\$ 198,388.26	\$ 198,388.26	\$ 198,388.26	\$ 198,388.26	\$ -	\$ -	\$ -	\$ -	\$ 3,892,000.00	\$ 3,892,000.00	\$ 4,048.74	\$ 4,048.74	\$ 3,693,611.74	8%	6/2027	6/2027

MORRIS COUNTY MUA

Experience & Qualifications Questionnaire

Please provide at least 3 references below:

Name: _____ Phone: _____

Address: **SEE ATTACHED PROJECT EXPERIENCES**

Equipment/Service Provided: _____

Contract Amount: _____

Name: _____ Phone: _____

Address: _____

Equipment/Service Provided: _____

Contract Amount: _____

Name: _____ Phone: _____

Address: _____

Equipment/Service Provided: _____

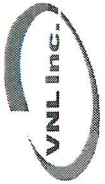
Contract Amount: _____

Name: _____ Phone: _____

Address: _____

Equipment/Service Provided: _____

Contract Amount: _____



VNL, INC.
408 US 22 West., Whitehouse Station NJ 08889
Tel: 908-721-7981
Fax: 908-345-5171
PROJECT EXPERIENCES

Project Name	Owner	Address	Contract Amount	Date Completed	Engineering Firm	Address	Contact Name	Telephone No.
WTP Scada Integration	Township of North Brunswick	782 Canal Rd., Somerset NJ	\$ 607,070.24	10/2020	T & M Associates	1455 Broad Street, Suite 250, Bloomfield, NJ 07003	Stephen Bonk	973-614-0005
South Station Water Improvements	Township of Hawthorne	12 May St., Hawthorne NJ	\$ 171,000.00	6/2019	Boswell Engineering	330 Phillips Ave., South Hackensack NJ	Scott Goodman	201-641-0770
BRIELLE WATER SYSTEM IMPROVEMENTS	Borough of Brielle	611 Union Lane Brielle NJ 08730	\$ 604,150.27	4/2020	H2M Associates Inc.	4810 Belmar Boulevard, Suite 201, Wall Township, NJ 07753	Stephanie DeColis	732-414-2661
Riverside Oxbridge WWTP Consolidation Project	Township of Montgomery	2261 Rt. 206 Bellemead NJ 08502	\$ 364,505.95	12/2019	Municipal Engineer	2261 Rt. 206 Bellemead NJ 08502	Gail Smith	908-352-0611
Outfall Access Structure	South Monmouth Regional Sewerage Authority	1235 18th St., Belmar NJ 07719	\$ 135,000.00	1/2019	Municipal Engineer	1235 18th Ave, Wall Township NJ	Natalie Chesko	732 681-0611
Butterworth III/ Mt. Freedom Pump Station	Township of Randolph	202 Millbrook Ave., Randolph NJ 07869	\$ 45,000.00	2/2019	Municipal Engineer	202 Millbrook Ave., Randolph NJ 07869	Ralph Carhia	973-398-7069
Caustic Tank Relocation Project	Township of Bernards	11 Collyer Lane Basking Ridge NJ 07920	\$ 170,524.48	10/2018	Suburban Consulting Engineers	96 US Highway 206 Suite 101, Flanders, NJ	Jack Fowler	973-398-1176
GAC Improvement Project	Brick Township Municipal Authorities	1551 NJ-88 Brick NJ 08724	\$ 403,887.29	5/2020	Tomar Construction LLC	18 Connerty Ct., East Brunswick NJ	Rai Daniel	732-458-7000
Mt. Arlington Pump Station Improvements	Morris County MUA	214A Center Grove Rd Randolph NJ	\$ 65,866.00	02/2021	Suburban Consulting Engineers	96 US Highway 206 Suite 101, Flanders, NJ	Michael McAloon	973-398-1776
Molly Ann Pump Station Valve Rep	Borough of Noth Haledom	103 Overlook Ave., North Haledon NJ 07508	\$ 55,199.00	6/2021	Boswell Engineering	330 Phillips Ave., South Hackensack NJ	Scott Goodman	201-641-0770
South St & Adams St Drainage Improvements	Township of Newark	920 Broad St., Newark NJ 07102	\$ 339,950.23	10/2021	Michael Baker International	One Gateway Center Newark NJ 07102	Mark De Santis	973-776-8600
Sanitary Sewer PS Valve Replacement	Township of Bridgewater	100 Commons Way, Bridgewater NJ 08807	\$ 49,350.00	4/2022	Township Engineer	100 Commons Way, Bridgewater NJ 08807	William Burr	908-725-6300
Stony Brook Regional Sewerage Authority	Pennington WWTP Upgrade	363 Pennington Rocky Hill Rd., Pennington NJ	\$ 1,758,507.76	03/2022	Authority Engineer	290 River Rd Princeton NJ	Courtney Bixby	609-924-8881
West Main St Sanitary Pump Station Improvements	Township of High Bridge	97 West Main St., High Bridge NJ 08829	\$ 141,900.00	06/2022	Colliers Engineering	53 Frontage Rd, Hampton NJ	Patrick Brennan	877-627-3772
Meadowview Sewage Treatment Plant Improvements	Township of Secaucus	1203 Paterson Plank Rd, Secaucus NJ 07094	\$ 323,037.76	06/2022	Suburban Consulting Engineers	96 US Highway 206 Suite 101, Flanders, NJ	Michael McAloon	973-398-1776
Allamuchy Water Storage Tank Replacement Project	Township of Allamuchy	292 Alphano Rd., Hackensack NJ 07838	\$ 142,462.13	06/2022	Colliers Engineering	53 Frontage Rd, Hampton NJ	Paul Stebarnz	877-627-3772
Middlebrook Sanitary Sewer Pumping Station	Township of Bridgewater	100 Commons Way Bridgewater NJ 08807	\$ 310,056.82	12/2022	Colliers Engineering	53 Frontage Rd, Hampton NJ	William Burr	908-725-6300



VNL, INC.
408 US 22 West., Whitehouse Station NJ 08889
Tel: 908-721-7981
Fax: 908-345-5171
PROJECT EXPERIENCES

Project Name	Owner	Address	Final Contract Amount	Date Completed	Engineering Firm	Address	Contact Name	Telephone No.
High Bridge Hills Golf Club Sewer Improvements	Borough of High Bridge	97 West Main St., High Bridge NJ 08829	\$ 119,741.00	03/2023	Colliers Engineering	53 Frontage Rd, Hampton NJ	William Burr	908-725-6300
Altitude Valve & Vault Installation at Ridge Road Ground Storage Tank	Borough of Roseland	140 Eagle Rock Ave., Roseland NJ 07068	\$ 357,820.00	11/2022	Remington & Verrick	2059 Springdale Road, Cherry Hill NJ 08003	Kristin Kramer	856-795-9595
Replacing Concrete Slab - Winfield Sanitary Sewer Pump Station	Township of Princeton	400 Witherspoon Street, Princeton NJ 08540	\$ 31,500.00	02/2023	Kleinfelder	150 College Rd W, Princeton NJ 08540	Felipe Contreras	609-924-8821
Klondike Booster Station Upgrade	Township of Parsippany-Troy Hills	1001 Parsippany Blvd., Parsippany NJ 07054	\$ 277,874.64	10/2022	Mott Macdonald	111 Wood Ave South, Iselin NJ 08830	Scott Pendergrass	973-912-2510
WSA Well #6 & ESA Well #11 Overboard	Township of Manchester	1 Colonial Dr., Manchester NJ 08759	\$ 194,358.00	5/2023	Alaimo Group	200 High St., Mount Holly NJ 08060	Nelson Landon	609-287-8310
Meadowland Pump Station Slide Gate Replacement Project	City of Newark - Dept. of Water and Sewer Utilities	920 Broad St., Newark NJ 07102	\$ 513,169.29	5/2023	Professional Consulting Inc.	1719 Route 10 Parsippany	Benjamin De Mario	973-683-0044
Madison-Chatham Joint Meeting Facility Improvements 2018	Madison-Chatham Township	214 N. Passaic Ave., Chatham NJ 07928	\$ 3,420,155.62	12/2022	Kleinfelder	150 College Rd W, Princeton NJ 08540	Felipe Contreras	609-924-8821
Exxon Well Facility Rehabilitation Project	Borough of Florham Park	111 Ridgedale Ave., Florham Park NJ 07932	\$ 1,497,897.00	9/2023	Mott Macdonald	111 Wood Ave South, Iselin NJ 08830	Rebbie Ann Reyes	973-912-3469
Slavton Drive Pump Station Improvements	Township of Millburn	375 Millburn Ave., Millburn NJ 07041	\$ 503,130.25	01/2023	Mott Macdonald	111 Wood Ave South, Iselin NJ 08830	John Ruschke	908-238-5000
Water Treatment Plant Chemical Feed Modification	Borough of Manasquan	201 East Main St., Manasquan NJ 08736	\$ 129,588.63	6/2023	Mott Macdonald	3 Paragon Way Freehold NJ 07728	Matthew Voelkel	732-333-3258
Rt 518 Pump Station Upgrade	Township of Franklin	475 Denott Lane Somerset NJ 08873	\$ 240,280.00	06/2024	Township Engineer	40 Churchill Ave., Somerset NJ	Maureen Sturgeon	732-249-7800
Sewage and Flowmeter Installation	Bridgewater Raritan Regional School District	836 Newmans Lane Martinsville NJ 08836	\$ 405,060.96	07/2024	Professional Consulting Inc.	1719 NJ 10 Parsippany NJ	Sarim Jallil	973-583-0044
WORPS Disinfection System Conversion Project	East Orange Water Commission	99 South Grove St., East Orange NJ 07018	\$ 581,257.88	3/2024	CME Associates	3141 Bordertown Ave., Parlin NJ 08859	John Popivchak	732-727-9000
Iroquois Pumping Station Improvements	Borough of Oakland	One Municipal Plaza Oakland NJ 07436	\$ 582,500.00	10/2023	Boswell Engineering	330 Phillips Ave., South Hackensack NJ 07606	Ken Post	201-641-0770
Well 4 High Service Redundant Pump Addition	Township of Parsippany-Troy Hills	1001 Parsippany Blvd., Parsippany NJ 07054	\$ 313,929.55	07/2024	H2M Associates Inc	119 Cherry Hill Rd., Parsippany NJ 07054	Max Gregory	862-207-5900
Ridgewood Water Pump House Floodproofing	Village of Ridgewood	131 North Maple Ave., Ridgewood NJ 07450	\$ 215,940.00	5/2024	RSC Architects	3 University Plaza Dr, Hackensack NJ 07601	Rick Parrish	201-941-3040



VNL, INC.
408 US 22 West, Whitehouse Station NJ 08889
Tel: 908-721-7981
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PROJECT EXPERIENCES

South River Water Treatment Plant Chemical Modifications Project	Borough of South River	48 Washington St., South River NJ 08882	\$ 509,000.00	11/2024	Kleinfelder	150 College Rd W, Princeton NJ 08540	Jordan Nappi	609-924-8821
Booster Station And Well Facility Upgrades	Township of Parsippany-Troy Hills	1001 Parsippany Blvd., Parsippany NJ 07054	\$ 1,515,000.00	11/2025	Mott Macdonald	111 Wood Ave South, Iselin NJ 08830	Scott Pendergrass	973-912-2510
North Hunterdon High School Pump Station Replacement	Clinton Township Sewerage Authority	79 Beaver Ave., Clinton NJ 08809	\$ 1,751,000.00	11/2024	Natural System Utilities	170 Township Line Rd., Hillsborough NJ	Prantik Chakraborty	203-491-9879
Morris Lake Water Treatment Plant Chemical Room Rehabilitation	Township of Newton	39 Trinity St., Newton NJ 07860	\$ 998,000.00	03/2025	Professional Consulting, Inc.	1719 Route 10, Suite 225 Parsippany NJ	Sarim Jalil	973-686-0044
Replacement of Two Potable Water Storage Tanks	New Jersey Water Supply Authority	1851 Highway 31 Clinton NJ 08809	\$ 208,000.00		NUWSA	1851 Highway 31 Clinton NJ 08809	Tim Thiessen	908-683-6121
Meter Station No. 6 Rehabilitation	Stony Brook Regional Sewerage Authority	290 River Rd., Princeton NJ 08540	\$ 185,000.00	5/2026	SBRSA Engineer	290 River Rd., Princeton NJ 08540	Christopher Doelling	609-924-8881
Water Storage Tank Replacement	Township of Allamuchy	292 Alphano Rd., Great Meadows NJ 07838	\$ 710,500.00	12/2025	H2M Architects	4810 Belmar Blvd Wall Township NJ 07753	Lilly McVeeney	732-414-2861

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 Employer 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 AWARDED 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

FORMAA-101
Revised 10/03

STATE OF NEW JERSEY
DIVISION OF CONTRACT COMPLIANCE
EQUAL EMPLOYMENT OPPORTUNITY IN PUBLIC CONTRACTS
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		5. NAME AND ADDRESS OF PUBLIC AGENCY AWARDED CONTRACT CONTRACT NUMBER DATE OF AWARD DOLLAR AMOUNT OF AWARD							
3. NAME AND ADDRESS OF PRIME CONTRACTOR (Name)											
(Street Address)											
(City)		(State)		(Zip Code)		6. NAME AND ADDRESS OF PROJECT COUNTY				7. PROJECT NUMBER	
4. IS THIS COMPANY MINORITY OWNED [] OR WOMAN OWNED []						8. IS THIS PROJECT COVERED BY A PROJECT LABOR AGREEMENT (PLA)? ☐ YES ☐ NO					
9. TRADE OR CRAFT		PROJECTED TOTAL 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. BRICKLAYER OR MASON											
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. OTHER											
20. OTHER											

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. 17:27-7.2; 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:

(1) 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;

MORRIS COUNTY MUA

Mandatory Equal Employment Opportunity Language

(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 contractor 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

MORRIS COUNTY MUA

Mandatory Equal Employment Opportunity Language

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.

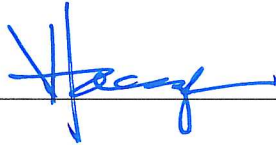
5. The Contractor shall comply with the requirements set forth at N.J.A.C. 17:27-1.1 et seq.

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: **VNL, INC.**

Representative's Name (print): **VICENTE LACAP**

Representative's Signature:



Date: **7/2/2026**

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 thereto, 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): **VNL, INC.**

Representative's Name (Print): **VICENTE LACAP**

Representative's Title: **PRESIDENT**

Representative's Signature:

Phone: **908-906-5292/908-721-7981**

Date: **7/2/2026**

MORRIS COUNTY MUA

New Jersey Anti-Discrimination

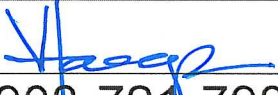
Pursuant to N.J.S.A. 10:2-1:

- 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): VNL, INC.

Representative's Name (Print): VICENTE LACAP

Representative's Title: PRESIDENT

Representative's Signature: 

Phone: 908-906-5292/908-721-7981 Date: 7/2/2026

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: VNL, INC.

Organization Address: 408 US 22 WEST WHITEHOUSE STATION NJ 08889

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
VICENTE LACAP	180 BEACON HILL RD., CALIFON NJ 07830

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):	VICENTE LACAP	Title:	PRESIDENT
Signature:		Date:	7/2/2026

MORRIS COUNTY MUA

Corporate Acknowledgement

STATE OF **NEW JERSEY**
COUNTY OF **HUNTERDON**

) SS:

On this **2ND** day of **JULY** in the year 20**26**, before me personally came

and appeared

VICENTE LACAP

to me known, who, being by me duly sworn, did depose and say, that he resides at

180 BEACON HILL RD., CALIFON NJ 07830

That he is the

PRESIDENT

(principle executive officer or duly authorized representative)

of

VNL, 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)

Notary Public

Hunterdon County, State

PATRICIA RUIZ VILLAYERDE
Notary Public, State of New Jersey
Comm. # 50233980
My Commission Expires 6/6/2030

MORRIS COUNTY MUA

Acknowledgement of Contractor, if a Partnership or LLP

STATE OF _____)
) SS:
COUNTY OF _____)

On this _____ day of _____ in the year 20____, before me personally
came

and _____ appeared

to me known, who, being by me duly sworn, did depose and say, that he is the:

_____ of the
(general partner or duly authorized representative)

firm of: _____

described in and which executed the foregoing instrument by and with the consent of all partners
and he acknowledged to me that he executed the same as and for the act and deed of said firm.

(Seal)

Notary Public

_____ County, State

MORRIS COUNTY MUA

Acknowledgement of Contractor, if an Individual

STATE OF

)

) SS:

COUNTY OF

)

On this _____ day of _____ in the year 20____, before me personally
came and appeared

to me known, who, being by me duly sworn, did depose and say, that he is the person described in
and who executed the foregoing instrument and acknowledged to me that he executed the same.

(Seal)

Notary Public

County, State

MORRIS COUNTY MUA

Acknowledgement of Contractor, if a Limited Liability Company

STATE OF _____)
) SS:
COUNTY OF _____)

On this _____ day of _____ in the year 20____, before me personally came

and _____ appeared

to me known, who, being by me duly sworn, did depose and say, that he is the:

_____ of the
(Managing Member of LLC or duly authorized representative)

firm of: _____

described in and which executed the foregoing instrument by and with the consent of all partners and he acknowledged to me that he executed the same as and for the act and deed of said firm.

(Seal)

Notary Public

_____ County, State

MORRIS COUNTY MUA

Certified Copy of Resolution of Board of Directors

VNL, INC.

(Name of Corporation)

RESOLVED that **VICENTE LACAP**, **PRESIDENT**
(Person Authorized to Sign) (Title)

of **VNL, INC.** be authorized to sign and submit the Bid of this
(Name of Corporation)

Corporation for the following project:

BID#2026-W03 MOUNT ARLINGTON PUMP REPLACEMENT

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

BY LAWS

_____ at a meeting of its Board of Directors
held on the **16TH** day of **FEBRUARY**, 20 **17**.

By **ANN LACAP**
Title **SECRETARY**

(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.



STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE

Taxpayer Name: VNL, INC.
Trade Name:
Address: 408 US-22 WEST
WHITEHOUSE STATION, NJ 08889
Certificate Number: 2128020
Effective Date: April 12, 2017
Date of Issuance: November 12, 2025

For Office Use Only:
20251112103840182

[Return](#)

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 952 TRENTON, NJ 08646-0952
TAXPAYER NAME:	TRADE NAME:	
TAX REGISTRATION TEST ACCOUNT	CLIENT REGISTRATION:	
TAXPAYER IDENTIFICATION#:	SEQUENCE NUMBER:	
970-097-382/500	0107300	
ADDRESS:	ISSUANCE DATE:	
847 ROEBLING AVE TRENTON NJ 08611	07/14/04	
EFFECTIVE DATE:		
07/01/04		
FORM BR-100 (07-01)		

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

J.P. Tully
Acting Director



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:
200-4101-4112823533

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 VICENTE LACAP

of the firm of VNL, 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: _____



Subscribed and sworn to before me this 2ND day of JULY, 2026

Print Name of Affiant: VICENTE LACAP

Notary Public of _____



My commission expires _____



MORRIS COUNTY MUA

Affidavit of Non-Debarred Status

AFFIDAVIT OF NON-DEBARRED STATUS

STATE OF NEW JERSEY)

COUNTY OF HUNTERDON) SS:

I, VICENTE LACAP of the City/Town of

CALIFON, in the County of MORRIS

and the State of NEW JERSEY, of full age, being duly sworn according to law on my

oath depose and say that:

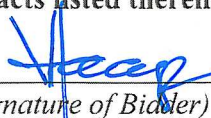
I am VICENTE LACAP, a PRESIDENT
(Name) (Title, Position, etc.)

of VNL, INC., the Bidder
(Name of Firm, Company or Corporation)

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.


(Signature of Bidder)

VICENTE LACAP, PRESIDENT

(Printed or Typed Name & Title of Bidder)

408 US 22 WEST WHITEHOUSE STATION NJ 08889

(Address of Bidder)

(Seal if Corporation)

MORRIS COUNTY MUA

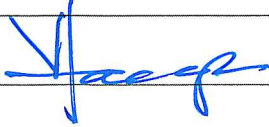
Non-Debarment Certification – Federal Level

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	VNL, INC.
Physical Address of Individual or Organization	408 US 22 WEST WHITEHOUSE STATION NJ 08889
Unique Entity ID (if applicable)	
CAGE/NCAGE Code (if applicable)	
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):	VICENTE LACAP	Title:	PRESIDENT
Signature:		Date:	7/2/2026

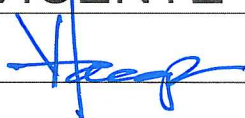
MORRIS COUNTY MUA

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	VNL, INC.
Physical Address	408 US 22 WEST WHITEHOUSE STATION NJ 08889
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	VICENTE LACAP
Physical Address	180 BEACON HILL RD., CALIFON NJ 07830
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):	VICENTE LACAP	Title:	PRESIDENT
Signature:		Date:	7/2/2026

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):	VICENTE LACAP	Title:	PRESIDENT
Signature:		Date:	7/2/2026

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: MOUNT ARLINGTON PUMP REPLACEMENT
Bidder's Name and Address: Name VNL, INC. Address 408 US 22 WEST City WHITEHOUSE STATION State NJ Zip Code 08889	

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:

	PRESIDENT	7/2/2026
(Signature)	(Title)	(Date)

MORRIS COUNTY MUA

Subcontractor Utilization Plan Form

SUBCONTRACTOR UTILIZATION PLAN (REFERENCED IN BID STANDARD TERMS AND CONDITIONS)		Solicitation No.: BID# 2026-W03
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: MOUNT ARLINGTON PUMP REPLACEMENT
Bidder's Name and Address: VNL, INC. 408 US 22 WEST WHITEHOUSE STATION NJ 08889		Bidder's Telephone No.: 908-906-5292/908-721-7981
		Bidder's Contact Person: VICENTE LACAP
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
D&M ELECTRICAL LLC 3 BORREGO DR. WOODLAND PARK NJ 07424 LICENSE: 34EI01797800	ELECTRICAL	\$6,000.00

Certificate Number
704404

Registration Date: 03/02/2026
Expiration Date: 03/01/2028



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:

Responsible Representative(s):
Zoranco Bozinov, Owner

A handwritten signature in black ink, appearing to read "Michael B. Marich".

Michael B. Marich, Acting Commissioner
Department of Labor and Workforce Development

2020
D&M Electrical, LLC

NON TRANSFERABLE

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

CA-20

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

D&M ELECTRICAL LLC
ZORANCO BOZINOV
3 Borrego Drive
Woodland Park NJ 07424

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

03/15/2024 TO 03/31/2027
VALID

34EB01797800
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

Carri Zais
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
D&M ELECTRICAL LLC
Electrical Business Permit

03/15/2024 TO 03/31/2027
VALID

SIGNATURE
Carri Zais
ACTING DIRECTOR
34EB01797800
License/Registration/Certificate #

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

PLEASE DETACH HERE

D&M ELECTRICAL LLC

EXPIRATION DATE 2027

YOUR LICENSE/REGISTRATION/CERTIFICATE NUMBER IS 34EB 01797800 . PLEASE USE IT IN ALL
CORRESPONDENCE TO THE DIVISION OF CONSUMER AFFAIRS. USE THIS SECTION TO REPORT ADDRESS
CHANGES. YOU ARE REQUIRED TO REPORT ANY ADDRESS CHANGES IMMEDIATELY TO THE ADDRESS NOTED
BELOW.

Board of Examiners of Electrical Contractors
P.O. Box 45006
Newark, NJ 07101

PRINT YOUR NEW ADDRESS OF RECORD BELOW

YOUR ADDRESS OF RECORD IS THE ADDRESS THAT WILL PRINT ON
YOUR LICENSE/REGISTRATION/CERTIFICATE AND IT MAY BE MADE
AVAILABLE TO THE PUBLIC.

HOME ☐

BUSINESS ☐

PRINT YOUR NEW MAILING ADDRESS BELOW

YOUR MAILING ADDRESS IS THE ADDRESS THAT WILL BE USED BY
THE DIVISION OF CONSUMER AFFAIRS TO SEND YOU ALL
CORRESPONDENCE

HOME ☐

BUSINESS ☐

TELEPHONE
INCLUDE AREA CODE

TELEPHONE
INCLUDE AREA CODE

CA-20

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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

Zoranco Bozinov
3 Borrego Drive
Woodland Park NJ 07424

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

03/13/2024 TO 03/31/2027
VALID

34EI01797800
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

Carri Bain
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
Zoranco Bozinov
Electrical Contractor

03/13/2024 TO 03/31/2027
VALID

SIGNATURE
Carri Bain
ACTING DIRECTOR
34EI01797800
License/Registration/Certificate #

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

PLEASE DETACH HERE

Zoranco Bozinov

EXPIRATION DATE 2027

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BELOW

Board of Examiners of Electrical Contractors
P.O. Box 45006
Newark, NJ 07101

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AVAILABLE TO THE PUBLIC.

HOME ☐
BUSINESS ☐

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THE DIVISION OF CONSUMER AFFAIRS TO SEND YOU ALL
CORRESPONDENCE.

HOME ☐
BUSINESS ☐

TELEPHONE
INCLUDE AREA CODE

TELEPHONE
INCLUDE AREA CODE

10/05/15

Taxpayer Identification# 472-115-351/000

Dear Business Representative:

Congratulations! You are now registered with the New Jersey Division of Revenue.

Use the Taxpayer Identification Number listed above on all correspondence with the Divisions of Revenue and Taxation, as well as with the Department of Labor (if the business is subject to unemployment withholdings). Your tax returns and payments will be filed under this number, and you will be able to access information about your account by referencing it.

Additionally, please note that State law requires all contractors and subcontractors with Public agencies to provide proof of their registration with the Division of Revenue. The law also amended Section 92 of the Casino Control Act, which deals with the casino service industry.

We have attached a Proof of Registration Certificate for your use. To comply with the law, if you are currently under contract or entering into a contract with a State agency, you must provide a copy of the certificate to the contracting agency.

If you have any questions or require more information, feel free to call our Registration Hotline at (609)292-9292.

I wish you continued success in your business endeavors.

Sincerely,



James J. Fruscione
Director
New Jersey Division of Revenue

STATE OF NEW JERSEY
BUSINESS REGISTRATION CERTIFICATE

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

TAXPAYER NAME:

D&M ELECTRICAL, LLC

TRADE NAME:

ADDRESS:

3 BORREGO DRIVE
WOODLAND PARK NJ 07424

SEQUENCE NUMBER:

1917201

EFFECTIVE DATE:

12/02/14

ISSUANCE DATE:

10/05/15



Director
New Jersey Division of Revenue

FORM-BRC

004-001 0205846V

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



State of New Jersey

DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE & ENTERPRISE SERVICES
P.O. BOX 026

TRENTON, NJ 08625-026
PHONE: 609-292-2146 FAX: 609-984-6679

PHIL MURPHY
Governor

TAHESHA WAY, ESQ.
Lt. Governor

ELIZABETH MAHER MUOIO
State Treasurer

5-YEAR RECERTIFICATION

APPROVED

under the

Small Business Set-Aside Act

This certificate acknowledges D&M ELECTRICAL, LLC DBA:Sole Member as a Category Approved Small Business Enterprise (SBE) that has met the criteria established by N.J.A.C. 17:13.

In order for this certification to remain in effect **throughout the 5 year certification period**, the business **must submit annual verification statements** attesting that there has been no change in ownership, control, or any other factor of the business affecting eligibility for certification as a small business. The verification statements must be submitted **not more than 60 days** prior to the anniversary of the certification approval.

If the business fails to submit the annual verification statement by the anniversary date, or a renewal by its expiration date, the certification will lapse and the business will be removed from the system (SAVI) that lists small business entities. If the business seeks to be certified again, it will have to reapply by submitting a new application.



Peter Lowicki
Deputy Director

Issued: 2/7/2024

Certification Number: A0449-30

*Expiration: 2/7/2029

*As noted above, in order to maintain its certification status, the business must submit verification statements for each of the five years.

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)

PRESIDENT

(Title)

7/2/2026

(Date)

MORRIS COUNTY MUA

Form of Bid Bond

KNOW ALL MEN BY THESE PRESENTS, that we, VNL, Inc.

408 US-22 West, Whitehouse Station, NJ 08889, Hereinafter called the Principal, as Principal, and the _____

Frankenmuth Insurance Company of One Mutual Avenue, Frankenmuth, MI 48787 a corporation duly organized

under the laws of the State of Michigan, hereinafter called the Surety, as Surety are held and

firmly bound unto Morris County Municipal Utilities Authority
370 Richard Mine Road, Wharton, NJ 07885 hereinafter called the Obligee, in the

sum of Ten percent (10%) of amount bid not to exceed \$20,000.00 Dollars, (\$XXXXXXXXXX) 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 _____

Mount Arlington Pump Replacement - Contract No. 2026-W03

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 2nd day of July, 2026. In the presence of:

VNL, Inc.

(Principal)

VICENTE LACAP

(SEAL)

(Witness)

AND LACAP, SECRETARY

(Title)

PRESIDENT

Frankenmuth Insurance Company

(SEAL)

(Surety)

Gemma Doster

(SEAL)

(Title) Gemma Doster, Attorney-in-Fact

(Witness)

Serena Maggio, Witness

MORRIS COUNTY MUA

Performance Bond & Payment

BOND NUMBER _____

KNOW ALL MEN/WOMEN BY THESE PRESENTS,

That we, the undersigned, _____

_____ as Principal, and _____, a

corporation of the State of _____ and

authorized to do business in the State of New Jersey, as Surety, are hereby held and firmly bound unto

_____ as Obligee, in the penal sum of _____

dollars \$ _____ (equal to the

annual value of the Contract as set forth in the Notice to Proceed) for the payment of which, well and truly to be made, we hereby jointly and severally bind ourselves, our heirs, executors, administrators, successors, and assigns.

THE CONDITION OF THIS OBLIGATION IS SUCH, that whereas the above named

Principal did on the _____ day of _____, 20____, enter a contract with _____, which contract is made part of this bond the same as though set forth herein:

MORRIS COUNTY MUA

Performance Bond & Payment

NOW, if the said principal shall well and faithfully do and perform the things agreed by the said principal to be done and performed according to the terms of said contract, and shall pay all lawful claims of beneficiaries as defined by N.J.S. 2A:44-143 for labor performed or materials provisions, provender or other supplies or teams, fuels, oils, implements or machinery furnished, used or consumed in the carrying forward, performing or completing of said contract, we agreeing and assenting that this undertaking shall be for the benefit of any beneficiary as defined in N.J.S. 2A:44-143 having a just claim, as well as for the obligee herein; then this obligation shall be void; otherwise the same shall remain in full force and effect; it being expressly understood and agreed that the liability of the Surety for any and all claims hereunder shall in no event exceed the penal amount of this obligation as herein stated.

The said Surety hereby stipulates and agrees that no modifications, omissions of additions in or to the terms of the said contract or in or to the plans or specifications therefore shall in anyway effect the obligation of said Surety on its bond.

Recovery of any claimant under the bond shall be subject to the conditions and provisions of this article to the same extent as if such conditions and provisions were fully incorporated in the form set forth above.

This bond is given in compliance of the requirements of the statutes of the State of New Jersey in respect to bonds of contractors on public works. Revised statutes of the State of New Jersey, N.J.S.A. 2A:44-143 to 2A: 44-147, both inclusive and liability hereunder is limited as in said statutes provided.

Signed, sealed and dated this _____

day of _____, 20_____.

_____ (SEAL)

(Surety)

_____ (SEAL)

(Attorney-in-fact)

MORRIS COUNTY MUA

Consent of Surety

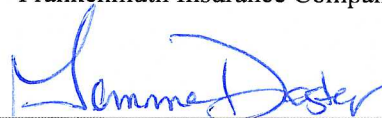
In consideration of the premises and of One Dollar (\$1.00), lawful money of the United States, to it in hand paid by the Contractor, the receipt whereof is hereby acknowledged, the undersigned surety consents and agrees that if the Contract, for which the preceding estimate and Bid is made, be awarded 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 2nd day of July, 2026

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

Frankenmuth Insurance Company

By



Surety Company Gemma Doster, Attorney-in-Fact
Attorney-in-Fact

Attest:


Serena Maggio, Witness

MORRIS COUNTY MUA

Surety Acknowledgement

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

On this 2nd day of July in the year 2026 before me personally came
Gemma Doster to me known, who being by me duly sworn, did depose

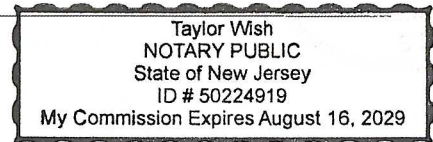
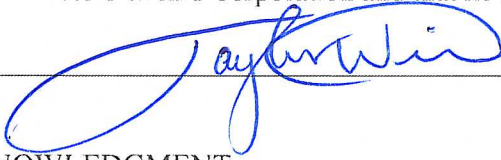
and say, that he resides in Sea Girt,

that he is the Attorney-in-Fact of Frankenmuth Insurance Company,

the Corporation described in and which executed the foregoing instrument; that he knows the seal of said Corporation; that the seal affixed to said instrument is such Corporate seal; that it was so affixed

by order of the Board of Directors of said Corporation and that he signed his name thereto in like order.

(Seal)



CONTRACTOR ACKNOWLEDGMENT

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

On this 2ND day of JULY in the year 2026, before me personally
came VICENTE LACAP to me known, who being by me duly

sworn, did depose and say, that he resides in CALIFON; that he is the

PRESIDENT of VNL, INC., the

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

(Seal)

MORRIS COUNTY MUA

Surety Disclosure Statement and Certificate

Frankenmuth Insurance Company surety(ies) on the attached bond, hereby certifies(y) 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 (where applicable) and surplus, as determined in accordance with the applicable laws of this State, of the surety(ies) participating in the issuance of the attached bond is (are) in the following amount(s) as of the calendar year ended December 31, 2025 (most recent calendar year for which capital and surplus amounts are available), which amounts have been certified as indicated by certified public accountants (indicating separately for each surety that surety's capital and surplus amounts, together with the name and address of the firm of certified public accounts that shall have certified those amounts):

Frankenmuth Insurance Company

Capital/Surplus totals: \$838,309,930

BDO USA, LLP, 2600 West Big Beaver, Suite 600, Troy, MI 48084-0178

(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. sec. 9305, the underwriting limitation established therein and the date as of which that limitation was effective is as follows (indicating for each such surety that surety's underwriting limitation and the effective date thereof):

Frankenmuth Insurance Company

Underwriting Limitation: \$83,831,000

Effective Date: 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

MORRIS COUNTY MUA

Surety Disclosure Statement and Certificate

(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):

N/A

(4) The amount of the bond to which this statement and certification is attached is \$ Ten percent (10%) of amount bid not to exceed \$20,000.00

(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) (1) 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:

N/A

; and

(b) Each surety that is party to any such contract of reinsurance certifies that each reinsure listed under item (5) (a) satisfies the credit for reinsurance requirement established under P.L.1993, c.243 (c.17:513-1 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.

MORRIS COUNTY MUA

Surety Disclosure Statement and Certificate

CERTIFICATE

(to be completed by an authorized certifying agent
for each surety on the bond)

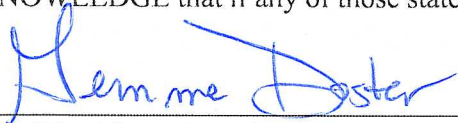
I Gemma Doster, as Attorney-in-Fact for
(Name of Agent) (Title of Agent)

Frankenmuth Insurance Company a corporation/mutual insurance company/other (indicating
(Name of Surety)

type of business organization) (circle one) domiciled in Michigan, DO
(State of Domicile)

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 VOID.


(Signature of Certifying Agent)

Gemma Doster
(Printed Name of Certifying Agent)

Attorney-in-Fact
(Title of Certifying Agent)

Frankenmuth Insurance Company and Subsidiaries
Consolidated Statutory Basis Statements of Admitted Assets,
Liabilities, and Surplus
(dollars in thousands)

<i>December 31,</i>	2025	2024
Admitted Assets		
Cash and Investments		
Bonds, at amortized cost	\$ 1,513,241	\$ 1,357,633
Preferred stocks, at estimated fair value or amortized cost	1,160	1,125
Common stocks, at estimated fair value	256,585	208,527
Investment in unconsolidated subsidiaries, at equity in net assets on a statutory basis	11,753	15,891
Real estate, at cost, less accumulated depreciation of \$28,084 and \$26,759 in 2025 and 2024, respectively	36,170	36,147
Cash, cash equivalents, and short-term investments	51,183	52,274
Other invested assets, at estimated fair value	166,887	144,113
Receivable from securities	-	525
Total Cash and Investments	2,036,979	1,816,235
Premiums Receivable, Net	428,841	374,344
Reinsurance Recoverable on Paid Losses and Loss Adjustment Expenses	13,415	11,270
Federal Income Tax Recoverable	1,783	2,023
Net Deferred Income Tax Asset	27,267	34,087
Data Processing Equipment, Net	1,535	1,333
Accrued Investment Income Receivable	12,807	10,944
Other Assets	551	1,698
Receivable from Subsidiaries	358	171
Total Admitted Assets	\$ 2,523,536	\$ 2,252,105
Liabilities and Surplus		
Liabilities		
Loss and loss adjustment expense reserves	\$ 855,765	\$ 745,327
Reinsurance payable on paid losses and loss adjustment expenses	851	170
Unearned premiums	609,429	549,292
Commissions and contingent commissions payable	69,266	51,444
Ceded reinsurance premiums payable	1,973	962
Payable to subsidiaries	-	1
Payable for securities	125	69
Advance premiums	7,821	8,238
Accounts payable and accrued expenses	63,549	56,141
Dividends payable to policyholders	2,536	2,151
Total Liabilities	1,611,315	1,413,795
Surplus		
General voluntary reserve	250	250
Common capital stock	100,000	100,000
Paid-in surplus	2,301	2,301
Unassigned surplus	809,670	735,759
Total Surplus	912,221	838,310
Total Liabilities and Surplus	\$ 2,523,536	\$ 2,252,105

See accompanying notes to consolidated statutory basis financial statements.

FRANKENMUTH INSURANCE COMPANY

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, that Frankenmuth Insurance Company (the "Company"), a corporation duly organized and existing under the laws of the State of Michigan, having its principal office at 1 Mutual Avenue, Frankenmuth, Michigan 48787, does hereby nominate, constitute and appoint:

Kristin Bevacqua, Kenneth A. Gelok, Thomas S. Caruso, Dawn M. Jones, Gemma Doster

Their true and lawful attorney(s)-in-fact, each in their separate capacity if more than one is named above, to make, execute, seal, acknowledge and deliver any and all bonds, contracts and undertakings of suretyship, with the exception of Financial Guaranty Insurance, provided, however, that the penal sum of any one such instrument shall not exceed the sum of:

Fifty Million and 00/100 Dollars (\$50,000,000)

This Power of Attorney is granted pursuant to the following Resolution duly adopted at a meeting of the Board of Directors of Frankenmuth Insurance Company:

"RESOLVED, that the President, Senior Vice President or Vice President and each of them under their respective designations, hereby is authorized to execute powers of attorney, and such authority can be executed by use of facsimile signature, which may be attested or acknowledged by any officer of the Company, qualifying the attorney(s) named in the given power of attorney, to execute on behalf of, and acknowledge as the act and deed of Frankenmuth Insurance Company on all bonds, contracts and undertakings of suretyship, and to affix the corporate seal thereto."

IN WITNESS WHEREOF, the Company has caused these presents to be signed and attested by its appropriate officers and its corporate seal hereunto affixed this 17 day of November, 2023.



STATE OF MICHIGAN)
COUNTY OF SAGINAW) ss:

Frankenmuth Insurance Company

By Andrew H. Knudsen
Andrew H. Knudsen
President, Chief Operating Officer and Secretary

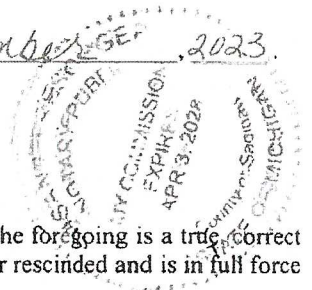
Sworn to before me, a Notary Public in the State of Michigan, by Andrew H. Knudsen, to me personally known to be the individual and officer described in, and who executed the preceding instrument, deposed and said the Corporate Seal and his signature as Officer were affixed and subscribed to said instrument by the authority of the Company.

IN TESTIMONY WHEREOF, I have set my hand, and affixed my Official Seal this 17 day of November, 2023.

Susan L. Fresorger

(Seal)

Susan L. Fresorger, Notary Public
Saginaw County, State of Michigan
My Commission Expires: April 3, 2028

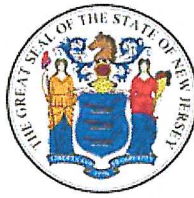


I, the undersigned, Chief Executive Officer of Frankenmuth Insurance Company, do hereby certify that the foregoing is a true, correct and complete copy of the original Power of Attorney; that said Power of Attorney has not been revoked or rescinded and is in full force and effect as of this date.

IN WITNESS WHEREOF, I have set my hand and affixed the Seal of the Company, this 2nd day of July, 2026.

Frederick A. Edmond, Jr.
Frederick A. Edmond, Jr.
Chief Executive Officer

ALL CORRESPONDENCE RELATED TO BOND VALIDATION AND/OR A CLAIM SHOULD BE DIRECTED TO VP SURETY, 701 U.S. ROUTE ONE, SUITE 1, YARMOUTH, ME 04096



State of New Jersey
Department of Banking and Insurance

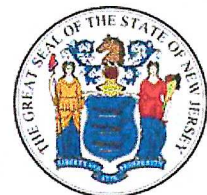
CERTIFICATE OF AUTHORITY

Date: **May 02, 2026**

NAIC Company Code: **13986**

THIS IS TO CERTIFY THAT THE **FRANKENMUTH INSURANCE COMPANY**, HAVING COMPLIED WITH THE LAWS OF THE STATE OF NEW JERSEY, AND ANY SUPPLEMENTS OR AMENDMENTS THERETO WITH RESPECT TO THE TRANSACTION OF THE BUSINESS OF INSURANCE, IS LICENSED TO TRANSACT IN THIS STATE UNTIL THE 1st DAY OF MAY, 2027, THE LINES OF INSURANCE SPECIFICALLY DESIGNATED BELOW:

- 01 - Fire and Allied Lines
- 11 - Other Liability
- 12 - Boiler and Machinery
- 13 - Fidelity and Surety
- 15 - Burglary and Theft
- 16 - Glass
- 17 - Sprinkler Leakage and Water Damage
- 18 - Livestock
- 19 - Smoke or Smudge
- 20 - Physical Loss to Buildings
- 22 - Mechanical Breakdown/Power Failure
- 03 - Growing Crops
- 04 - Ocean Marine
- 05 - Inland Marine
- 06 - Workers Compensation and Employers Liability
- 07 - Automobile Liability Bodily Injury
- 08 - Automobile Liability Property Damage
- 09 - Automobile Physical Damage



SUSAN OCHS
ACTING COMMISSIONER
BANKING AND INSURANCE

COMPANY NAME: FRANKENMUTH INSURANCE COMPANY NAIC COMPANY CODE: 13986

STATUTORY HOME ADDRESS:
ONE MUTUAL AVENUE
FRANKENMUTH, MI 48787-0001

SPECIAL CONDITIONS:

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

^a 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.

VNL, INC.

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) ^a

☐ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check another 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) ^a

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.

408 US 22 WEST

Requester's name and address (optional)

6 City, state, and ZIP code

WHITEHOUSE STATION NJ 08889

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									
3	5		2	5	8	6	4	9	5

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^a

Date^a 7/2/2026

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

MORRIS COUNTY MUA

W-9

taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

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

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

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

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. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. 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).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

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

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, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

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 his or her 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 his or her 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 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include 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 under 4 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.

Also see *Special rules for partnerships*, earlier.

What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States 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 no longer are 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.

a. 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: 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 1040/1040A/1040EZ you filed with your application.

b. Sole proprietor or single-member LLC. Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. Partnership, LLC that is not a single-member LLC, C corporation, or S corporation. 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.

d. 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. You may enter any business, trade, or DBA name on line 2.

e. Disregarded entity. For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity 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, "Business name/disregarded entity name." 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, you may enter it on line 2.

Line 3

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

IF the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation
• Individual	Individual/sole proprietor or single-member LLC
• Sole proprietorship, or	
• Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	
• LLC treated as a partnership for U.S. federal tax purposes,	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
• LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or	
• LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.	
• Partnership	Partnership
• Trust/estate	Trust/estate

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 in 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 possession, 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 possession
- 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
- 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 Income, 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) written or printed 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 possession, 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, write 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 individual taxpayer identification number (ITIN). Enter it in the social security number box. 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). Do not enter the disregarded entity's EIN. 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 1-800-772-1213. 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/Businesses and clicking on Employer Identification Number (EIN) under Starting a Business. 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 SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "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, generally you will 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.

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) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ¹ The actual owner ¹
6. Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor ⁴
For this type of account:	Give name and EIN of:
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

For this type of account:	Give name and EIN of:
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 under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (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 and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. 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.) Also see *Special rules for partnerships*, earlier.

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

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 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 credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 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 1-877-777-4778 or TTY/TDD 1-800-829-4059.

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 1-800-366-4484. 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.

Visit 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 possessions for use in administering their laws. The information also may 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, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. 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) State of New Jersey - Department of Labor
Work for a project described as:) Workforce Development Division of Wage &
Motor Control Center) Hour Compliance

VICENTE LACAP

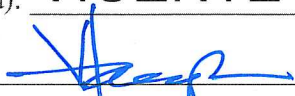
_____, of full age and under oath, duly provides the following sworn statement:

1. I am the owner and/or highest-ranking official or officer of a company or firm named VNL, 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 716056
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: 7/2/2026

Name (Printed): VICENTE LACAP

Signature: 

Title: PRESIDENT

Certificate Number
716056

Registration Date: 06/27/2025
Expiration Date: 06/26/2027



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:

Responsible Representative(s):
Vicente Lacap, President

A handwritten signature in cursive script, appearing to read "Rob Angelo".

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

VNL, INC.
2025

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

NON TRANSFERABLE

Certification 63845

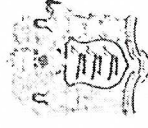
CERTIFICATE OF EMPLOYEE INFORMATION REPORT

INITIAL

This is to certify that the contractor listed below has submitted an Employee Information Report pursuant to N.J.A.C. 17:27-1.1 et. seq. and the State Treasurer has approved said report. This approval will remain in effect for the period of **15-NOV-2020** to **15-NOV-2027**

VNL INCORPORATED
408 US 22 WEST
WHT HOUSE STAT

NJ 08889



A handwritten signature in black ink, appearing to read "Elizabeth Maher Muoio".

ELIZABETH MAHER MUOIO
State Treasurer



State of New Jersey

MIKIE SHERRILL
Governor

DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE & ENTERPRISE SERVICES

P.O. BOX 026

TRENTON, NJ 08625-026

PHONE: 609-292-2146 FAX: 609-984-6679

DR. DALE G. CALDWELL
Lt. Governor

AARON BINDER
State Treasurer

5-YEAR RECERTIFICATION

APPROVED

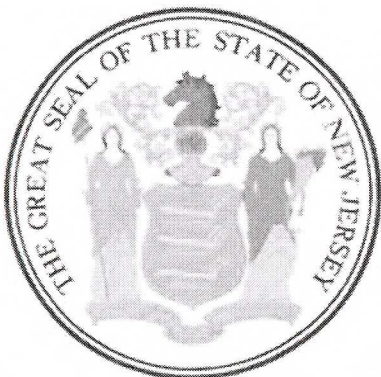
under the

Minority and Women Business Certification Program

This certificate acknowledges VNL, INC. as a Certified Minority Business Enterprise (MBE) that has met the criteria established by N.J.A.C. 17:46.

In order for this certification to remain in effect **throughout the 5 year certification period**, the business **must submit annual verification statements** attesting that there has been no change in ownership, control, or any other factor of the business affecting eligibility for certification as a minority or women-owned business. The verification statements must be submitted **not more than 60 days** prior to the anniversary of the certification approval.

If the business fails to submit the annual verification statement by the anniversary date, or a renewal by its expiration date, the certification will lapse and the business will be removed from the system (SAVI) that lists certified minority and women-owned businesses. If the business seeks to be certified again, it will have to reapply by submitting a new application.



Peter Lowicki
Director

Issued: 8/15/2026

*Expiration: 8/15/2031

Certification Number: A0711-77

*As noted above, in order to maintain its certification status, the business must submit verification statements for each of the five years



State of New Jersey

DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE & ENTERPRISE SERVICES
P.O. BOX 026

PHIL MURPHY
Governor

TAHESHA WAY, ESQ.
Lt. Governor

TRENTON, NJ 08625-026
PHONE: 609-292-2146 FAX: 609-984-6679

ELIZABETH MAHER MUOIO
State Treasurer

5-YEAR RECERTIFICATION

APPROVED

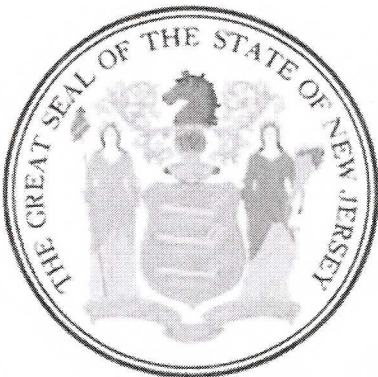
under the

Small Business Set-Aside Act

This certificate acknowledges VNL, INC. DBA:General Contractor as a Category 5 Approved Small Business Enterprise (SBE) that has met the criteria established by N.J.A.C. 17:13.

In order for this certification to remain in effect **throughout the 5 year certification period**, the business **must submit annual verification statements** attesting that there has been no change in ownership, control, or any other factor of the business affecting eligibility for certification as a small business. The verification statements must be submitted **not more than 60 days** prior to the anniversary of the certification approval.

If the business fails to submit the annual verification statement by the anniversary date, or a renewal by its expiration date, the certification will lapse and the business will be removed from the system (SAVI) that lists small business entities. If the business seeks to be certified again, it will have to reapply by submitting a new application.



Peter Lowicki
Deputy Director

Issued: 1/23/2023

Certification Number: A0315-18

*Expiration: 1/23/2028

*As noted above, in order to maintain its certification status, the business must submit verification statements for each of the five years.

VNL, INC.
408 US-22 WEST
WHITEHOUSE, NJ 08889



State of New Jersey

DEPARTMENT OF THE TREASURY
DIVISION OF PROPERTY MANAGEMENT AND CONSTRUCTION
33 WEST STATE STREET - P.O. BOX 034
TRENTON, NEW JERSEY 08625-0034



NOTICE OF CLASSIFICATION

In accordance with N.J.S.A. 18A:18A-27 et seq (Department of Education) and N.J.S.A. 52:35-1 (Department of the Treasury) and any rules and regulations issued pursuant hereto, you are hereby notified of your classification to do State work for the Department (s) as previously noted.

Aggregate Amount	Trade(s) & License(s)	Effective Date	Expiration Date
\$15,000,000	C009 -GENERAL CONSTRUCTION/ALTER.& ADDITIONS C062 -PUMPING STATIONS C055 -SEWAGE AND WATER TREATMENT PLANTS C058 -UNDERGROUND WATER & UTILITIES	10/16/2025 10/16/2025 10/16/2025 04/21/2026	10/15/2027

- Licenses associated with certain trades are on file with the Division of Property Management & Construction (DPMC).
- Current license information must be verified prior to bid award.
- A copy of the DPMC 701 Form (Total Amount of Uncompleted Projects) may be accessed from the DPMC website at <https://www.nj.gov/treasury/dpmc/Assets/Files/DPMC701.pdf>.

ANY ATTEMPT BY A CONTRACTOR TO ALTER OR MISREPRESENT ANY INFORMATION CONTAINED IN THIS FORM MAY RESULT IN PROSECUTION AND/OR DEBARMENT, SUSPENSION OR DISQUALIFICATION. INFORMATION ON AGGREGATE AMOUNTS CAN BE VERIFIED ON THE DPMC WEB SITE.