1. Public Notice

   Documents:

   10-26-26 RULES NOTICE.PDF

2. Agenda

   Documents:

   10-26-26 RULES.PDF

3. Contracts

   Documents:

   A-57-26.PDF
   A-60-26.PDF
   A-67-26.PDF
   A-68-26.PDF
   A-69-26.PDF
   A-76-26.PDF

PUBLIC NOTICE

PLEASE TAKE NOTICE THAT

THE NASSAU COUNTY LEGISLATURE WILL HOLD A MEETING OF THE RULES COMMITTEE ON MONDAY, OCTOBER 26, 2026, AT 1:00 PM IN

THE PETER J. SCHMITT MEMORIAL LEGISLATIVE CHAMBER THEODORE ROOSEVELT EXECUTIVE AND LEGISLATIVE BUILDING 1550 FRANKLIN AVENUE, MINEOLA, NEW YORK 11501

The Nassau County Fire Marshal's Office orders a maximum occupancy of 251 people for the Peter J. Schmitt Memorial Legislative Chamber and an additional 71 people for the legislative antechamber. Attendees who will address the Legislature must submit a written slip to the Clerk's office staff. The Rules of the Legislature limit public comment to three minutes per person. At meetings of the full Legislature, members of the public may speak during the pre-calendar public comment period and during public hearings. At meetings of the Legislature's committees and prior to the call of the first committee, members of the public may speak on agenda items only. Individuals may scan the below QR code or email the Clerk of the Legislature at LegPublic-Comment@nassaucountyny.gov to have comment included in the record of the Legislative meeting. The Nassau County Legislature provides accessibility and reasonable accommodation to its public meetings for the attendance and participation of individuals with disabilities. Anyone in need of assistance should contact the Office of the Clerk of the Legislature at 516.571.4252, the Nassau County Office for the Physically Challenged at 516.227.7101 or TDD Telephone 516.227.8989. Every Legislative meeting is streamed live on http://www.nassaucountyny.gov/agencies/Legis/index.html.

MICHAEL C. PULITZER
Clerk of the Legislature
Nassau County, New York

DATED: OCTOBER 19, 2026
Mineola, NY

Scan the QR code to submit written public comment, which will be incorporated into the record of this meeting.

NASSAU COUNTY LEGISLATURE

16th TERM MEETING AGENDA

RULES COMMITTEE

OCTOBER 26TH, 2026 1:00 PM

Howard Kopel – Chairman
Thomas McKevitt – Vice Chairman
John Giuffré
James Kennedy
Delia DeRiggi-Whitton– Ranking
Arnold W. Drucker
Scott M. Davis

Michael C. Pulitzer, Clerk of the Legislature

Scan the QR code to submit written public comment,
which will be incorporated into the record of this meeting.

277-26	**IT**	**R**	**<u>RESOLUTION NO. - 2026 (CORRECTED)</u>** A RESOLUTION AUTHORIZING THE COUNTY EXECUTIVE TO EXECUTE AN INTERGOVERNMENTAL AGREEMENT BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF THE NASSAU COUNTY DEPARTMENT OF INFORMATION AND TECHNOLOGY AND VARIOUS AGENCIES (THE "COUNTY"), AND THE NEW YORK STATE OFFICE OF INFORMATION TECHNOLOGY SERVICES AND THE NEW YORK STATE DIVISION OF HOMELAND SECURITY AND EMERGENCY SERVICES (THE "STATE") TO PROVIDE ATTACK SURFACE MANAGEMENT SERVICES. 277-26 (IT)
296-26	**OMB**	**R**	**<u>RESOLUTION NO. – 2026</u>** A RESOLUTION TO AUTHORIZE A TRANSFER OF APPROPRIATIONS HERETOFORE MADE WITHIN THE BUDGET FOR THE YEAR 2026. 296-26 (OMB)
297-26	**OMB**	**R**	**<u>ORDINANCE NO. - 2026</u>** AN ORDINANCE SUPPLEMENTAL TO THE ANNUAL APPROPRIATION ORDINANCE IN CONNECTION WITH THE POLICE DEPARTMENT. 297-26 (OMB)
298-26	**OMB**	**R**	**<u>RESOLUTION NO. – 2026</u>** A RESOLUTION PROVIDING FOR THE ISSUANCE OF A WARRANT DIRECTING THE TREAURER OF THE COUNTY OF NASSAU TO PAY TO THE SUPERVISORS OF SEVERAL TOWNS AND TO THE TRESURERS OF THE SEVERAL VILLAGES AND CITIES WITHIN THE COUNTY OF NASSAU, THE SUMS AS APPORTIONED BY THE NASSAU COUNTY LEGISLATURE BASED ON A REPORT FILED BY THE COUNTY TREASURER AND THE COUNTY CLERK, SHOWING DEPOSITS FROM MORTGAGE TAXES FOR THE PERIOD OF ONE YEAR COMMENCING OCTOBER 1, 2025 THROUGH SEPTEMBER 30, 2026; PURSUANT TO THE COUNTY GOVERNMENT LAW OF NASSAU COUNTY AND THE NASSAU COUNTY ADMINISTRATIVE CODE. 298-26 (OMB)
300-26	**CE**	**R**	**<u>RESOLUTION NO. – 2026</u>** A RESOLUTION AUTHORIZING THE COUNTY EXECUTIVE TO EXECUTE AN INTER-MUNICIPAL AGREEMENT WITH THE BELLMORE FIRE DISTRICT IN RELATION TO A PROJECT TO PROVIDE FUNDING FOR THE PURCHASE OF GOODS AND SERVICES. 300-26 (CE)

301-26	**CE**	**R**	**<u>RESOLUTION NO. _ – 2026</u>** A RESOLUTION AUTHORIZING THE COUNTY EXECUTIVE TO EXECUTE AN INTER-MUNICIPAL AGREEMENT WITH BETHPAGE PUBLIC LIBRARY IN RELATION TO A PROJECT TO PROVIDE FUNDING FOR THE PURCHASE OF GOODS AND SERVICES. 301-26 (CE)
302-26	**CE**	**R**	**<u>RESOLUTION NO. _ – 2026</u>** A RESOLUTION AUTHORIZING THE COUNTY EXECUTIVE TO EXECUTE AN INTER-MUNICIPAL AGREEMENT WITH THE HEWLETT-WOODMERE PUBLIC LIBRARY IN RELATION TO A PROJECT TO PROVIDE FUNDING FOR THE PURCHASE OF GOODS AND SERVICES. 302-26 (CE)
A-57-26	**PR**	**R**	**<u>RULES RESOLUTION NO. _ – 2026</u>** A RESOLUTION AUTHORIZING THE COMMISSIONER OF SHARED SERVICES TO AWARD AND EXECUTE A PURCHASE ORDER BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF THE NASSAU COUNTY POLICE DEPARTMENT AND HELIWAGON, INC. A-57-26 (PR)
A-60-26	**PR**	**R**	**<u>RULES RESOLUTION NO. _ – 2026</u>** A RESOLUTION AUTHORIZING THE COMMISSIONER OF SHARED SERVICES TO AWARD AND EXECUTE A PURCHASE ORDER BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF THE NASSAU COUNTY DEPARTMENT OF INFORMATION TECHNOLOGY AND CUSTOM COMPUTER SPECIALISTS. A-60-26 (PR)
A-67-26	**PR**	**R**	**<u>RULES RESOLUTION NO. _ – 2026</u>** A RESOLUTION AUTHORIZING THE COMMISSIONER OF SHARED SERVICES TO AWARD AND EXECUTE A PURCHASE ORDER BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF THE NASSAU COUNTY POLICE DEPARTMENT AND WILLIAM E. MUNSON CO. A-67-26 (PR)
A-68-26	**PR**	**R**	**<u>RULES RESOLUTION NO. _ – 2026</u>** A RESOLUTION AUTHORIZING THE COMMISSIONER OF SHARED SERVICES TO AWARD AND EXECUTE A PURCHASE ORDER BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF THE NASSAU COUNTY DEPARTMENT OF INFORMATION TECHNOLOGY AND ASSETWORKS INC. A-68-26 (PR)

A-69-26	**PR**	**R**	**<u>RULES RESOLUTION NO. – 2026</u>** A RESOLUTION AUTHORIZING THE COMMISSIONER OF SHARED SERVICES TO AWARD AND EXECUTE A PURCHASE ORDER BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF THE NASSAU COUNTY DEPARTMENT OF PUBLIC WORKS AND ALL ISLAND EQUIPMENT CORPORATION. A-69-26 (PR)
A-76-26	**PR**	**R**	**<u>RULES RESOLUTION NO. – 2026</u>** A RESOLUTION AUTHORIZING THE COMMISSIONER OF SHARED SERVICES TO A WARD AND EXECUTE A PURCHASE ORDER BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF THE NASSAU COUNTY FIRE COMMISSION AND COPPER COLLAR GROUP LLC. A-76-26 (PR)
			<u>THE FOLLOWING ITEMS MAY BE UNTABLED</u>
E-81-26	**IT**	**R**	**<u>RULES RESOLUTION NO. – 2026</u>** A RESOLUTION AUTHORIZING THE COUNTY EXECUTIVE TO EXECUTE A PERSONAL SERVICES AGREEMENT BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF THE NASSAU COUNTY DEPARTMENT OF INFORMATION TECHNOLOGY AND WILLIAM W. PROFESSIONAL STAFFING LLC. E-81-26 (IT)
E-110-26	**PD**	**R**	**<u>RULES RESOLUTION NO. – 2026</u>** A RESOLUTION AUTHORIZING THE COUNTY EXECUTIVE TO EXECUTE A PERSONAL SERVICES AGREEMENT BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF THE NASSAU COUNTY POLICE DEPARTMENT AND C&R AUTOMOTIVE. E-110-26 (PD)

Nassau County
Office of Purchasing

Staff Summary A-57-2026

Subject: Purchase and repair Heliwagons for the Bell 429 helicopters. (RQPD26000190)	Date: August 18, 2026
Department: Department of Shared Services Office of Purchasing	Vendor Name: HELIWAGON, INC.
Department Head Name: Melissa Gallucci	Contract Number: A-57-2026
Department Head Signature: Melissa Gallucci	Contract Manager Name: Mark Clemens, Buyer

Internal Approvals			
Date & Init.	**Approval**	**Date & Init.**	**Approval**
9/28/2026	CPO	AP 10/13/26	Budget
9/28/2026	County Atty.		County Exec.
9/28/2026 SM	Insurance	MV 10/16/26	

Significant Adverse Information Identified? [Yes / X No] (If yes, attach memo.)

Narrative

Purpose: To authorize and award a purchase order for repair of the Heliwagons by Heliwagon, Inc. for the Nassau County Police Department owned, Bell aircraft.

Discussion: The Department of Shared Services, Office of Purchasing, has determined that this is a sole source procurement. Heliwagon, Inc. It is the original designer, and current support provider for the Nassau County Police Department.

Impact on Funding: The maximum amount authorized under this purchase order shall be One Hundred Forty-Nine Thousand Two Hundred Forty-Five dollars. ($149,245.00) from PDGRT8900FED BB208.

Recommendation: Department of Shared Services, Office of Purchasing, recommends awarding a purchase order to Heliwagon, Inc. as the sole source provider for this contract.

RECEIVED
NASSAU COUNTY
CLERK OF THE LEGISLATURE
2026 OCT 16 A 11:08

COUNTY OF NASSAU

INTER – DEPARTMENTAL MEMO

A-57-2026

TO: CLERK OF THE COUNTY LEGISLATURE

FROM: MELISSA GALLUCCI - COMMISSIONER OF SHARED SERVICES

DATE: August 18, 2026

SUBJECT: RESOLUTION– NASSAU COUNTY POLICE DEPARTMENT

THIS RESOLUTION IS RECOMMENDED BY THE COMMISSIONER OF SHARED SERVICES TO AUTHORIZE AN AWARD AND TO EXECUTE A PURCHASE ORDER IN THE AMOUNT OF ONE HUNDRED FORTY-NINE THOUSAND TWO HUNDRED FORTY-FIVE DOLLARS ($149,245.00) ON BEHALF OF THE NASSAU COUNTY POLICE DEPARTMENT TO HELIWAGON, INC., TO PURCHASE AND REPAIR THE HELIWAGONS FOR THE NASSAU COUNTY POLICE DEPARTMENT OWNED, BELL AIRCRAFT.

THE ABOVE-DESCRIBED DOCUMENT ATTACHED HERETO IS FORWARDED FOR YOUR REVIEW AND APPROVAL AND SUBSEQUENT TRANSMITTAL TO THE RULES COMMITTEE FOR INCLUSION IN ITS AGENDA.

Melissa Gallucci

MELISSA GALLUCCI
COMMISSIONER OF SHARED SERVICES

KS
ENCL: (1) STAFF SUMMARY
(2) MEMO
(3) RESOLUTION
(4) DISCLOSURE STATEMENT
(5) BID PROPOSAL
(6) RECOMMENDATION OF AWARD
(7) BID TABULATION
(8) CERTIFICATE OF LIABILITY INSURANCE

RULES RESOLUTION 2026

A RESOLUTION AUTHORIZING THE COMMISSIONER OF SHARED SERVICES TO AWARD AND EXECUTE A PURCHASE ORDER BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF NASSAU COUNTY POLICE DEPARTMENT AND HELIWAGON, INC.

WHEREAS, the NASSAU COUNTY DEPARTMENT OF SHARED SERVICES, OFFICE OF PURCHASING is representing to the Rules Committee, that the proposed award to is a sole source provider and meets all specifications for the product described in the said contract as determined by the Commissioner of Shared Services.

RESOLVED, that the Rules Committee of the Nassau County Legislature authorizes the Commissioner of Shared Services to award and execute the said Purchase Order with Heliwagon, Inc.

Business History Form

The contract shall be awarded to the responsible proposer who, at the discretion of the County, taking into consideration the reliability of the proposer and the capacity of the proposer to perform the services required by the County, offers the best value to the County and who will best promote the public interest.

In addition to the submission of proposals, each proposer shall complete and submit this questionnaire. The questionnaire shall be filled out by the owner of a sole proprietorship or by an authorized representative of the firm, corporation or partnership submitting the Proposal.

NOTE: All questions require a response, even if response is "none" or "not-applicable." No blanks.

(USE ADDITIONAL SHEETS IF NECESSARY TO FULLY ANSWER THE FOLLOWING QUESTIONS).

Date: 06/25/2026

1) Proposer's Legal Name: Heliwagon, Inc

2) Address of Place of Business: 10065 S Interstate 35

City: Robinson State/Province/Territory: TX Zip/Postal Code: 76706

Country: US

3) Mailing Address (if different): 1084 Seattle Slew St

City: Hewitt State/Province/Territory: TX Zip/Postal Code: 76643

Country: US

Phone: (208) 215-5648

Does the business own or rent its facilities? Rent If other, please provide details:

4) Dun and Bradstreet number: 114045593

5) Federal I.D. Number: 81-1287137

6) The proposer is a: Corporation (Describe)

7) Does this business share office space, staff, or equipment expenses with any other business?
YES [ ] NO [X] If yes, please provide details:

8) Does this business control one or more other businesses?
YES [ ] NO [X] If yes, please provide details:

9) Does this business have one or more affiliates, and/or is it a subsidiary of, or controlled by, any other business?
YES [ ] NO [X] If yes, please provide details:

10) Has the proposer ever had a bond or surety cancelled or forfeited, or a contract with Nassau County or any other government entity terminated?
YES [ ] NO [X] If yes, state the name of bonding agency, (if a bond), date, amount of bond and reason for such cancellation or forfeiture: or details regarding the termination (if a contract).

11) Has the proposer, during the past seven years, been declared bankrupt?
YES [ ] NO [X] If yes, state date, court jurisdiction, amount of liabilities and amount of assets

12) In the past five years, has this business and/or any of its owners and/or officers and/or any affiliated business, been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency? And/or, in the past 5 years, have any owner and/or officer of any affiliated business been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency, where such investigation was related to activities performed at, for, or on behalf of an affiliated business.
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

13) In the past 5 years, has this business and/or any of its owners and/or officers and/or any affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies? And/or, in the past 5 years, has any owner and/or officer of an affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies, for matters pertaining to that individual's position at or relationship to an affiliated business.
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

14) Has any current or former director, owner or officer or managerial employee of this business had, either before or during such person's employment, or since such employment if the charges pertained to events that allegedly occurred during the time of employment by the submitting business, and allegedly related to the conduct of that business:
a) Any felony charge pending?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

b) Any misdemeanor charge pending?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

c) In the past 10 years, you been convicted, after trial or by plea, of any felony and/or any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

d) In the past 5 years, been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

e) In the past 5 years, been found in violation of any administrative, statutory, or regulatory provisions?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

15) In the past (5) years, has this business or any of its owners or officers, or any other affiliated business had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

16) For the past (5) tax years, has this business failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide details for each such year. Provide a detailed response to all questions checked 'YES'. If you need more space, photocopy the appropriate page and attach it to the questionnaire.

17 Conflict of Interest:

a) Please disclose any conflicts of interest as outlined below. NOTE: If no conflicts exist, please expressly state "No conflict exists."

(i) Any material financial relationships that your firm or any firm employee has that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No conflict exists

(ii) Any family relationship that any employee of your firm has with any County public servant that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No conflict exists

(iii) Any other matter that your firm believes may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No conflict exists

b) Please describe any procedures your firm has, or would adopt, to assure the County that a conflict of interest would not exist for your firm in the future.

Will contact Nassau County immediately if a conflict arises

A. Include a resume or detailed description of the Proposer's professional qualifications, demonstrating extensive experience in your profession. Any prior similar experiences, and the results of these experiences, must be identified.

Have you previously uploaded the below information under in the Document Vault?
YES [ ] NO [X]

Is the proposer an individual?
YES [ ] NO [X] Should the proposer be other than an individual, the Proposal MUST include:

i) Date of formation;

04/01/2009

ii) Name, addresses, and position of all persons having a financial interest in the company, including shareholders, members, general or limited partner. If none, explain.

Brad Seibold, 1084 Seattle Slew St. Hewitt, Texas 76643 - President

iii) Name, address and position of all officers and directors of the company. If none, explain.

Brad Seibold, 1084 Seattle Slew St. Hewitt, Texas 76643 - President

iv) State of incorporation (if applicable);

AZ

v) The number of employees in the firm;

3

vi) Annual revenue of firm;

2000000

vii) Summary of relevant accomplishments

Been is Business for over 17 years.

viii) Copies of all state and local licenses and permits.

B. Indicate number of years in business.

17

C. Provide any other information which would be appropriate and helpful in determining the Proposer's capacity and reliability to perform these services.

We have already Provided 2 Heliwagons to the Aviation Unit
Police Department, County of Nassau, NY

D. Provide names and addresses for no fewer than three references for whom the Proposer has provided similar services or who are qualified to evaluate the Proposer's capability to perform this work.

Company	Texas DPS - Aircraft		
Contact Person	Marc Tomerlin		
Address	10335 Golf Course Road		
City	Austin	State/Province/Territory	TX
Country	US		
Telephone	(713) 416-8542		
Fax #			
E-Mail Address	marc.tomerlin@dps.texas.gov		

Company	Warbirds East		
Contact Person	Jordan Autery		
Address	P.O. Box 191238		
City	Mobile	State/Province/Territory	AL

Country	US
Telephone	(251) 508-7975
Fax #	
E-Mail Address	jordan.warbirdseast@yahoo.com

Company	Fly Hangar 13		
Contact Person	Heath Voss		
Address	12483 FM 1283		
City	Mico	State/Province/Territory	TX
Country	US		
Telephone	(210) 383-4554		
Fax #			
E-Mail Address	heath@flyhangar13.com		

I, Brad Seibold, hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Brad Seibold, hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Name of submitting business: Heliwagon, Inc.

Electronically signed and certified at the date and time indicated by:
Brad Seibold BRAD@HELIWAGON.COM

President
Title

08/25/2026
Date

Heliwagon, Inc.
10065 S Interstate 35
Robinson, Texas 76706
June 25, 2026

Professional Qualifications & Experience

My name is Brad Seibold, and I am a co-founder and President of Heliwagon, Inc. I have been an integral part of this company since its founding in 2009, giving me over 17 years of hands-on experience in the design, manufacturing, and sales of helicopter ground support equipment.

As the face of Heliwagon, I oversee all aspects of the business, including but not limited to: sales and business development, customer service, product knowledge and training, manufacturing operations, quality control, and new product design and innovation. This comprehensive involvement ensures that every Heliwagon product meets the highest standards of quality and functionality before it reaches the customer.

Throughout my tenure, I have worked directly with a wide range of clients across the public safety, government, medical, and private sectors. Our reach spans nearly every U.S. state, including Hawaii and Alaska, and we have proudly delivered equipment to customers in 17 countries worldwide. To date, Heliwagon has delivered over 500 units, a testament to the reliability, quality, and reputation we have built over the past 17 years.

Prior Similar Experience & Notable Clients:

Our experience serving government and public safety aviation operations is extensive and well-documented. Notable clients and deliveries include:

- **Texas Department of Public Safety (DPS) Aircraft Division** — ongoing supplier of Heliwagon ground support equipment
- **U.S. Department of Homeland Security, CBP Air and Marine Operations** — delivered nearly 30 Heliwagons to support federal law enforcement aviation operations
- **Flight for Life Texas** — providing ground support solutions for critical medical transport operations

- **Massachusetts State Police** — supplying equipment to support state law enforcement aviation
- **Hundreds of private and corporate helicopter owners** across the United States and internationally

These relationships reflect our ability to meet the rigorous standards required by federal and state government agencies, as well as the flexibility to serve the unique needs of private and corporate clients.

Industry Memberships & Affiliations:

- **Helicopter Association International (HAI)** — rotor.org
- **Airborne Public Safety Association (APSA)** — publicsafetyaviation.org

Active membership in these organizations keeps Heliwagon connected to the latest developments in aviation safety, industry standards, and the public safety aviation community we are proud to serve.

My direct involvement in every phase of operations — from the first customer conversation to final product delivery — combined with Heliwagon's proven 17-year track record serving federal agencies, state law enforcement, medical operators, and private clients worldwide, makes us exceptionally well-suited to meet the requirements outlined in this proposal.

Brad Seibold

President

COUNTY OF NASSAU

POLITICAL CAMPAIGN CONTRIBUTION DISCLOSURE FORM

1. Has the vendor or any corporate officers of the vendor provided campaign contributions pursuant to the New York State Election Law in (a) the period beginning April 1, 2016 and ending on the date of this disclosure, or (b), beginning April 1, 2018, the period beginning two years prior to the date of this disclosure and ending on the date of this disclosure, to the campaign committees of any of the following Nassau County elected officials or to the campaign committees of any candidates for any of the following Nassau County elected offices: the County Executive, the County Clerk, the Comptroller, the District Attorney, or any County Legislator?

YES [ ] NO [X] If yes, to what campaign committee?

Electronically signed and certified at the date and time indicated by:
Brad Seibold [BRAD@HELIWAGON.COM]

Dated: 06/26/2026 12:48:10 pm

Vendor: Heliwagon, Inc.

Title: President

Rev. 3-2016

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: Brad Seibold
   Date of birth: 08/04/1970
   Home address: 1084 Seattle Slew St
   City: Hewitt State/Province/Territory: TX Zip/Postal Code: 76643
   Country: US

   Business Address: 10065 S Interstate 35
   City: Robinson State/Province/Territory: TX Zip/Postal Code: 76706
   Country US
   Telephone: 208-215-5648

   Other present address(es):
   City: State/Province/Territory: Zip/Postal Code:
   Country: US
   Telephone:

   List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President	04/01/2009	Treasurer	
Chairman of Board		Shareholder	
Chief Exec. Officer		Secretary	
Chief Financial Officer		Partner	
Vice President			
(Other)			

3. Do you have an equity interest in the business submitting the questionnaire?
   YES [X] NO [ ] If Yes, provide details.
   I own 100 percent of Heliwagon

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?
   YES [ ] NO [X] If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?
YES [ ] NO [X] If Yes, provide details.

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?
YES [ ] NO [X] If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:
   a. Been debarred by any government agency from entering into contracts with that agency?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?
YES [ ] NO [X] If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.
   a. Is there any felony charge pending against you?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

b. Is there any misdemeanor charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

c. Is there any administrative charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

f. In the past 5 years, have you been found in violation of any administrative or statutory charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

11. In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

12. In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

13. For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

I, Brad Seibold , hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Brad Seibold , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Heliwagon Inc

Name of submitting business

Electronically signed and certified at the date and time indicated by:
Brad Seibold BRAD@HELIWAGON.COM

President

Title

08/13/2026 02:15:21 pm

Date

COUNTY OF NASSAU

CONSULTANT'S, CONTRACTOR'S AND VENDOR'S DISCLOSURE FORM

1. Name of the Entity: Heliwagon, Inc.

Address: 10065 S Interstate 35

City: Robinson State/Province/Territory: TX Zip/Postal Code: 76706

Country: US

2. Entity's Vendor Identification Number: 81-1287137

3. Type of Business: Ltd. Liability Co (specify)

4. List names and addresses of all principals; that is, all individuals serving on the Board of Directors or comparable body, all partners and limited partners, all corporate officers, all parties of Joint Ventures, and all members and officers of limited liability companies (attach additional sheets if necessary):

1 File(s) uploaded: Heliwagon Letterhead HW Owners 2.pdf

5. List names and addresses of all shareholders, members, or partners of the firm. If the shareholder is not an individual, list the individual shareholders/partners/members. If a Publicly held Corporation, include a copy of the 10K in lieu of completing this section.
If none, explain.

6. List all affiliated and related companies and their relationship to the firm entered on line 1. above (if none, enter "None"). Attach a separate disclosure form for each affiliated or subsidiary company that may take part in the performance of this contract. Such disclosure shall be updated to include affiliated or subsidiary companies not previously disclosed that participate in the performance of the contract.

None

7. List all lobbyists whose services were utilized at any stage in this matter (i.e., pre-bid, bid, post-bid, etc.). If none, enter "None." The term "lobbyist" means any and every person or organization retained, employed or designated by any client to influence - or promote a matter before - Nassau County, its agencies, boards, commissions, department heads, legislators or committees, including but not limited to the Open Space and Parks Advisory Committee and Planning Commission. Such matters include, but are not limited to, requests for proposals, development or improvement of real property subject to County regulation, procurements. The term "lobbyist" does not include any officer, director, trustee, employee, counsel or agent of the County of Nassau, or State of New York, when discharging his or her official duties.

Are there lobbyists involved in this matter?
YES [ ] NO [X]

(a) Name, title, business address and telephone number of lobbyist(s):

(b) Describe lobbying activity of each lobbyist. See below for a complete description of lobbying activities.

(c) List whether and where the person/organization is registered as a lobbyist (e.g., Nassau County, New York State):

8. VERIFICATION: This section must be signed by a principal of the consultant, contractor or Vendor authorized as a signatory of the firm for the purpose of executing Contracts.

The undersigned affirms and so swears that he/she has read and understood the foregoing statements and they are, to his/her knowledge, true and accurate.

Electronically signed and certified at the date and time indicated by:
Brad Seibold [BRAD@HELIWAGON.COM]

Dated: 08/13/2026 02:11:23 pm

Title: President

The term lobbying shall mean any attempt to influence: any determination made by the Nassau County Legislature, or any member thereof, with respect to the introduction, passage, defeat, or substance of any local legislation or resolution; any determination by the County Executive to support, oppose, approve or disapprove any local legislation or resolution, whether or not such legislation has been introduced in the County Legislature; any determination by an elected County official or an officer or employee of the County with respect to the procurement of goods, services or construction, including the preparation of contract specifications, including by not limited to the preparation of requests for proposals, or solicitation, award or administration of a contract or with respect to the solicitation, award or administration of a grant, loan, or agreement involving the disbursement of public monies; any determination made by the County Executive, County Legislature, or by the County of Nassau, its agencies, boards, commissions, department heads or committees, including but not limited to the Open Space and Parks Advisory Committee, the Planning Commission, with respect to the zoning, use, development or improvement of real property subject to County regulation, or any agencies, boards, commissions, department heads or committees with respect to requests for proposals, bidding, procurement or contracting for services for the County; any determination made by an elected county official or an officer or employee of the county with respect to the terms of the acquisition or disposition by the county of any interest in real property, with respect to a license or permit for the use of real property of or by the county, or with respect to a franchise, concession or revocable consent; the proposal, adoption, amendment or rejection by an agency of any rule having the force and effect of law; the decision to hold, timing or outcome of any rate making proceeding before an agency; the agenda or any determination of a board or commission; any determination regarding the calendaring or scope of any legislature oversight hearing; the issuance, repeal, modification or substance of a County Executive Order; or any determination made by an elected county official or an officer or employee of the county to support or oppose any state or federal legislation, rule or regulation, including any determination made to support or oppose that is contingent on any amendment of such legislation, rule or regulation, whether or not such legislation has been formally introduced and whether or not such rule or regulation has been formally proposed.

HELIWAGON

Heliwagon
10065 S. Interstate 35
Robinson, Texas 76706
June 26, 2026

<u>Owners of Heliwagon</u>

Brad Seibold
1084 Seattle Slew St.
Hewitt Texas 760706
United States.

REQUISITION

RQPD26000190 10/JUN/2026

VENDOR:
HELIWAGON. INC.
*NO HEAD QUATERS

TEL:( ) -
FAX:( ) -

REQUISITIONER:
PD POLICE DEPARTMENT
AIR BUREAU
101 GRUMMAN ROAD WEST
BETHPAGE NY 11714
PO KERSTIENS/CR24/FED-208
TEL:(516)573-4000
FAX:( ) -

ITEM	DESCRIPTION	QTY	U/M	UNIT COST	TOTAL
001	035-45	2.00	EA	64,720.0000	129,440.00
	HELICOPTER EQUIPMENT AND SUPPLIES				
	16 X 16 HELIWAGON WITH BLACK DIAMOND PLATE, 4 CORNER LIGHTS, LED WRAP LIGHTING, CASTER WHEELS. MFR: HELIWAGON				
002	035-45	1.00	EA	19,805.0000	19,805.00
	HELICOPTER EQUIPMENT AND SUPPLIES				
	REPAIR DAMAGED DECKING FOR 2 HELIWAGONS INCLUDES LINE-X HARDWARE SHIPPING AND INSTALLATION				

ESTIMATED TOTAL: 149,245.00

REQ DOC INQUIRY 2140

1. REQUEST PURCHASE OF 2 EA HELIWAGONS FOR DEPARTMENTAL BELL 429 HELICOPTERS AND REPAIR OF CURRENT HELIWAGONS. THIS IS AN UPGRADE WITH NEW TECHNOLOGY FROM CURRENT HELIWAGONS WITH LARGER PLATFORMS AND STRONGER MOTORS FOR MOVING BELL 429'S MORE EFFECIENTLY. ITEM 2 IS A REPAIR FOR CURRENT HELIWAGONS WITH NEW TECHNOLOGY DECKING WHICH OFFERS BETTER WEAR AND TRACTION. FUNDING HAVE BEEN APPROVED FOR ASSET FORFEITURE FUNDING AFI NUMBER 26-008
2. SAME AS ABOVE
3. NO ALTERNATIVES
4. THIS IS A MINIMUM REQUEST
5. NO REVENUE
6. NONE

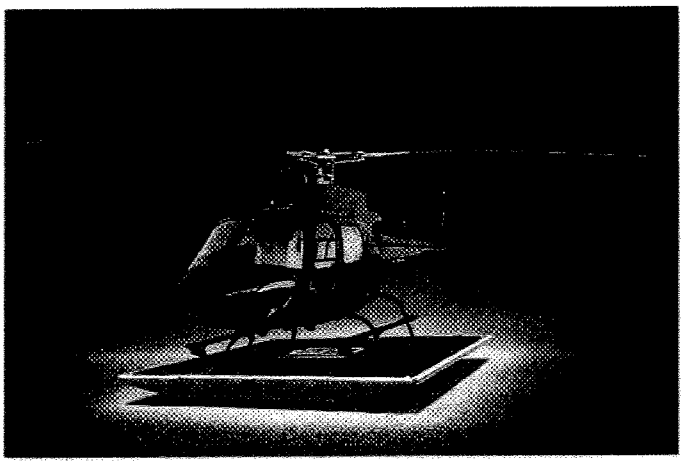
SOLE SOURCE
VENDOR CONTACT BRAD@HELIWAGON.COM

REQ DOC INQUIRY 2140

THIS REQUISITON IS FUNDED WITH ASSET FORFEITURE FUNDS. IF THE OTHER THAN RECOMMENDED VENDOR IS AWARDED THE BID, THE NEW VENDOR MUST BE REGISTERED IN THE SYSTEM FOR AWARD MANAGEMENT (SAM.GOV) THIS IS AS PER FEDERAL EQUITABLE SHARING GUIDELINES.

HELIWAGON
A HELI-GOOD MOVE

10065 S INTERSTATE 35
ROBINSON, TEXAS 76706
PHONE: (877) 435.4946
EMAIL: BRAD@HELIWAGON.COM



DATE: 4/29/2026
QUOTE FOR:
Nassua County Police Aviation
Nassua County, New York

Standard Options:
Sate of the art Remote Controlled System
-Wireless remote controlled from transmitter, with state-of-the-art, industrial grade, frequency hopping spread spectrum (FHSS)
-Wireless remote control is FCC approved, tamer proof, and engineered for safety and reliability in high risk environment
-Heliwagon comes with a full THREE year warranty
-9000 LBS Capacity
-Chocks not required! Industrial gear reducers and electric motor combination allow no movement during landing or takeoff
-Low profile deck frame.
-Massive 4000 pound chassis is the strongest and most stable mobile platform in the industry
-Zero turn radius provides easy maneuverability and safe, controlled movement in the hangar environment or around obstacles
-Extreme duty, domestic forged steel casters and drive wheels with shock absorbing, non-marring polyurethane surface
-Approx. 200 feet per minute maximum forward speed
-Onboard charger simply plugs into any 110 outlet

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
2	16X16 HELIWAGON W/ BLACK DIAMOND PLATE	$64,720.00	$129,440.00
	4 CORNER LIGHTS		
	LED WRAP LIGHTING		
	CASTER WHEELS		
	INCLUDES SHIPPING NASSUA, NEW YORK		
		SUBTOTAL	$129,440.00
		TOTAL USD	$129,440.00

THIS QUOTE IS VALID FOR 90 DAYS
PAYMENT TERMS: 50% DOWN AND 50% PRIOR TO SHIPPING
LEAD TIME: 2 to 3 WEEKS FROM DEPOSIT TO TIME OF DELIVERY

COMMENTS OR SPECIAL INSTRUCTIONS:

100% ELECTRIC HELIWAGON USA MADE

ACCEPTANCE OF PROPOSAL
THE PRICES, SPECIFICATIONS, AND CONDITIONS ARE SATISFACTORY AND HEREBY ACCEPTED.

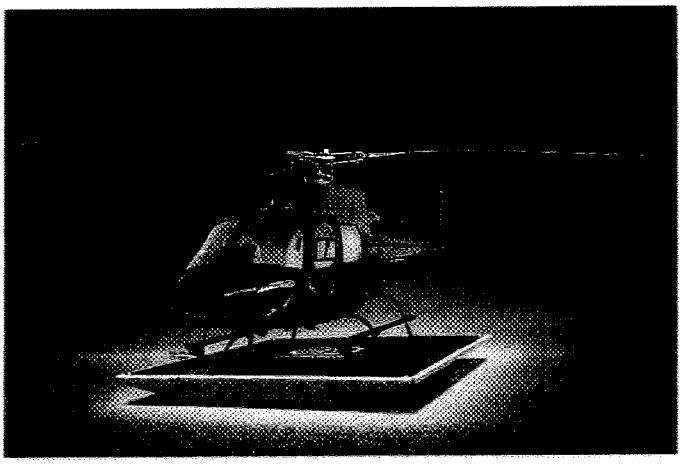
SIGNATURE **DATE**

THE ULTIMATE REMOTE CONTROLLED HELICOPTER LANDING DOLLY!

PLEASE CONTACT BRAD SEIBOLD: 208.215.5648 | EMAIL: BRAD@HELIWAGON.COM

HELIWAGON
A HELI-GOOD MOVE

10065 S INTERSTATE 35
ROBINSON, TEXAS 76706
PHONE: (877) 435.4946
EMAIL: BRAD@HELIWAGON.COM



DATE: 4/29/2026
QUOTE FOR:
Nassua County Police Aviation
Nassua County, New York

Repairing Line-X:

THE SCIENCE BEHIND LINE-X

LINE-X combines specialized equipment with extensive product developments to yield the right materials, products, and procedures to meet virtually any demand. After decades of research, LINE-X has created a comprehensive coatings portfolio that includes polyurethanes, polyureas, aliphatic, and hybrid coatings. Each coating differs at a molecular level resulting in distinct physical characteristics that are ideal for certain applications and industries. Tensile strength, elongation, hardness, and UV stability are all factors that influence pro

CORROSION PREVENTION & IMPACT PROTECTION

LINE-X coatings are designed to create an impenetrable barrier between valuable equipment and nature's harshest elements, such as high humidity, saltwater, or extreme temperature changes. Laboratory tests demonstrate excellent levels of abrasion and impact resistance under just about any severe-use condition. LINE-X outperformed other leading materials, including carbon and stainless steel. duct performance and durability.

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
1	REPAIR DAMAGED DECKING FOR 2 HELIWAGONS	$19,805.00	$19,805.00
	INCLUDES LINE-X, HARDWARE, SHIPPING & INSTALLATIONS		
		SUBTOTAL	$19,805.00
		TOTAL USD	$19,805.00

THIS QUOTE IS VALID FOR 90 DAYS
PAYMENT TERMS: 50% DOWN AND 50% PRIOR TO SHIPPING
LEAD TIME: 2 to 3 WEEKS FROM DEPOSIT TO TIME OF DELIVERY

COMMENTS OR SPECIAL INSTRUCTIONS:

100% ELECTRIC HELIWAGON USA MADE

ACCEPTANCE OF PROPOSAL
THE PRICES, SPECIFICATIONS, AND CONDITIONS ARE SATISFACTORY AND HEREBY ACCEPTED.

SIGNATURE **DATE**

THE ULTIMATE REMOTE CONTROLLED HELICOPTER LANDING DOLLY!

PLEASE CONTACT BRAD SEIBOLD: 208.215.5648 | EMAIL: BRAD@HELIWAGON.COM

HELIWAGON

A HELI-GOOD MOVE

10065 S Interstate 35 | Robinson, Texas 76706
Mailing: 1084 Seattle Slew St. | Hewitt, Texas 76643
O: (877) 435-4946 | C: 208-215-5648
brad@heliwagon.com | heliwagon.com

September 28, 2026

RE: Sole Source Justification — Heliwagon, Inc.

To Whom It May Concern:

This letter serves as a sole source justification confirming that the Heliwagon is a product manufactured and sold exclusively by Heliwagon, Inc. Heliwagon, Inc. is the sole creator, manufacturer, and seller of this product. We stand fully prepared to answer all questions regarding this product and to support any procurement or approval process as necessary.

The Heliwagon is unique for the following reasons:

- It is the only 100% electric, wireless remote-controlled landing dolly designed for skid-type helicopters.
- The Heliwagon features a proprietary electric locking wheel system that eliminates the need for traditional wheel chocks, providing a safer and more efficient ground handling solution.
- Heliwagon, Inc. is the only manufacturer in the world offering a 14×14, 14×16, and 16×16 remote-controlled helicopter landing dolly, providing operators with size options to match a wide range of rotary-wing aircraft.

Please feel free to contact me directly if you have any questions or require additional information regarding Heliwagon, Inc. or its products. We appreciate the opportunity to support your mission.

Sincerely,

Brad Seibold | President
Heliwagon, Inc.
1084 Seattle Slew St. | Hewitt, Texas 76643
O: (877) 435-4946 | C: 208-215-5648
brad@heliwagon.com | heliwagon.com

PRIVILEGE AND CONFIDENTIALITY NOTICE: The information contained within this letter may be subject to legal privilege and confidentiality. If you are not the intended recipient, please notify the sender immediately.

Nassau County

Police Department

BRUCE A. BLAKEMAN
NASSAU COUNTY EXECUTIVE

1490 Franklin Avenue
Mineola, New York 11501
(516) 573-8800

PATRICK J. RYDER
POLICE COMMISSIONER

Date: April 29, 2026

To: Nassau County Division of Purchasing

From: Lieutenant Joseph L. Grella, Serial No. 8280, Shield No. 390, Commanding Officer, Aviation Unit.

Subject: SOLE SOURCE JUSTICATION, RQPD26000190

The Nassau County Police Department requests sole source approval for the purchase of two (2) Heliwagon Helicopter Landing Dollies as well as the repair of the two (2) current Heliwagons in use.

Heliwagon is the sole manufacturer of this helicopter landing dolly which is 100% electric, self-propelled, wheel braking system that does not require chocks, and wirelessly controlled. These dollies serve a vital role to ensure departmental helicopters are readily available for emergency calls.

The NCPD Aviation Unit have been unable to identify a comparable substitute that offers the specifications and features required to perform this crucial task.

Thank you for your consideration.

Respectfully,

Joseph L Grella
Lieutenant / Commanding Officer

AIG AEROSPACE INSURANCE SERVICES, INC.

CERTIFICATE OF COMMERCIAL LIABILITY INSURANCE - TEXAS

This certificate is issued for informational purposes only. It certifies that the policies listed in this document have been issued to the Named Insured. It does not grant any rights to any party nor can it be used, in any way, to modify coverage provided by such policies. Alteration of this certificate does not change the terms, exclusions or conditions of such policies. Coverage is subject to the provisions of the policies, including any exclusions or conditions, regardless of the provisions of any other contract, such as between the certificate holder and the Named Insured. The limits shown below are the limits provided at the policy inception. Subsequent paid claims may reduce these limits.

Producer:	Named Insured: HELIWAGON, INC.
OPTISURE RISK PARTNERS 40 STARK ST MANCHESTER, NH 03101	C/O UHI 14605 NORTH AIRPORT ROAD #350 WACO, TX 85260

General Liability

Insurer Name:	NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA	
Policy Number:	AP 038257575-09	
Policy Effective Date:	June 30, 2026	Policy Expiration Date: June 30, 2027
Limits of Insurance	$ 10,000,000	Each Occurrence Limit
	$ 100,000	Damage To Premises Rented To You Limit (any one premises)
	$ 5,000	Medical Expense Limit (any one person)
	$ 5,000,000.	Personal & Advertising Injury Aggregate Limit
	$ NOT APPLICABLE	General Aggregate Limit
	$ 5,000,000.	Products/Completed Operations Aggregate Limit
		Hangarkeepers Limit
	$ NOT COVERED	Each Aircraft Limit
	$ NOT COVERED	Each Loss Limit
	$ NOT APPLICABLE	Hangarkeepers Deductible (each aircraft)
General Aggregate Limit applies per:	☐ Policy	☐ Project ☐ Location

Description of Operations/Locations/Endorsements/Special Provisions

Nassau County Police Department, County of Nassau, NY Aviation Unit is added as Additional Insured

Additional Insured Status YES

Cancellation

In the event of cancellation of any policy described above, the insurer will attempt to mail 30 days written notice to the certificate holder prior to the effective date of cancellation.

Certificate Holder: Nassau County Police Department, County of Nassau, NY Aviation Unit 101 Grumman Rd. West Bethpage, NY 11714	Certificate No. 3
Authorized Representative:	July 31, 2026 AH Date of Issue

CGL309-TX (02/12)

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Nassau County Shared Services,
Office of Purchasing

Staff Summary A-60-2026

Subject: FORTIANALYZER-3100G HARDWARE/SOFTWARE Solicitation#83834-08206-184 (RQIT26000130)	Date: September 3, 2026
Department: Department of Shared Services, Office of Purchasing	Vendor Name: Custom Computer Specialists, LLC.
Department Head Name: Melissa Gallucci	Contract Number: A-60-2026
Department Head Signature: Melissa Gallucci	Contract Manager Name: Deanna Prendergast

Internal Approvals			
Date & Init.	**Approval**	**Date & Init.**	**Approval**
9/24/2026	CPO	10/13/26	Budget
9/25/2026	County Atty.	10/16/26	County Exec.
9/25/26	Insurance		

Significant Adverse Information Identified? [Yes ___/No _X_] (If yes, attach memo.)

RECEIVED
NASSAU COUNTY
CLERK OF THE LEGISLATURE
2026 OCT 18 A 11:08

Narrative

Purpose: To authorize and award a purchase order for Fortianalyzer-3100G Hardware plus 1 year Forticare Premium and Fortianalyzer Enterprise Protection

Discussion: This solicitation was advertised in the New York Post and posted on the Nassau County Bid Solicitation Board. Minority Affairs was also notified of this solicitation.

Vendors Viewed the solicitation: 44

- 10 Woman Owned business
- 24 Minority (African/American)
- 34 Small Business
- 1 Service Disabled (Veteran) Owned
- 4 Veteran Owned Business
- 7 None of the Above

Vendors bid on this solicitation: 15

- 2 Woman Owned Business
- 8 Minority (African/American)
- 6 Small Business
- 1 Service Disabled (Veteran) Owned
- 0 Veteran Owned Business
- 2 None of the Above

The Identified lowest responsible bidder is Custom Computer Specialists, LLC. is not listed in any of the above categories.

Impact on Funding: The maximum amount authorized under this purchase order shall be One Hundred Fourteen Thousand Eight Hundred Seventy-Two Dollars and Twenty-Eight Cents ($114,872.28) from General Fund (ITGEN 1700, DE5A5)

Recommendation: Department of Shared Services, Office of Purchasing, recommends an award be given to Custom Computer Specialists, LLC. as the lowest responsible bidder meeting specifications.

COUNTY OF NASSAU

INTER – DEPARTMENTAL MEMO

TO: CLERK OF THE COUNTY LEGISLATURE **A-60-2026**

FROM: MELISSA GALLUCCI - COMMISSIONER OF SHARED SERVICES

DATE: SEPTEMBER 3, 2026

SUBJECT: RESOLUTION– VARIOUS NASSAU COUNTY AGENCIES.

THIS RESOLUTION IS RECOMMENDED BY THE COMMISSIONER OF SHARED SERVICES TO AUTHORIZE AN AWARD AND TO EXECUTE A PURCHASE ORDER IN THE AMOUNT OF ONE HUNDRED FOURTEEN THOUSAND EIGHT HUNDRED SEVENTY-TWO DOLLARS AND TWENTY-EIGHT CENTS ($114,872.28) ON BEHALF OF THE NASSAU COUNTY DEPARTMENT OF INFORMATION TECHNOLOGY TO CUSTOM COMPUTER SPECIALISTS, LLC. FOR FORTIANALYZER-3100G HARDWARE PLUS 1-YEAR FORTICARE PREMIUM AND FORTIANALYZER ENTERPRISE PROTECTION

THE ABOVE-DESCRIBED DOCUMENT ATTACHED HERETO IS FORWARDED FOR YOUR REVIEW AND APPROVAL AND SUBSEQUENT TRANSMITTAL TO THE RULES COMMITTEE FOR INCLUSION IN ITS AGENDA.

Melissa Gallucci

MELISSA GALLUCCI
COMMISSIONER OF SHARED SERVICES

KS
ENCL: (1) STAFF SUMMARY
(2) MEMO
(3) RESOLUTION
(4) DISCLOSURE STATEMENT
(5) BID PROPOSAL
(6) RECOMMENDATION OF AWARD
(7) BID TABULATION
(8) CERTIFICATE OF LIABILITY INSURANCE

RULES RESOLUTION 2026

A RESOLUTION AUTHORIZING THE COMMISSIONER OF SHARED SERVICES TO AWARD AND EXECUTE A PURCHASE ORDER BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF NASSAU COUNTY DEPARTMENT OF INFORMATION TECHNOLOGY AND CUSTOM COMPUTER SPECIALISTS, LLC.

WHEREAS, the NASSAU COUNTY DEPARTMENT OF SHARED SERVICES, OFFICE OF PURCHASING has received competitive bids under sealed bid solicitation #83834-08206-184 for Fortianalyzer-3100g Hardware plus 1-year Forticare Premium and Fortianalyzer Enterprise Protection for the Department of Information Technology as more particularly described in the bid document; and

WHEREAS, the Commissioner of Shared Services is representing to the Rules Committee that Custom Computer Specialists, Inc. submitted the lowest responsible bid and meets all specifications for the product and/or services described in the said bid document as determined by the Commissioner of Shared Services.

RESOLVED, that the Rules Committee of the Nassau County Legislature authorizes the Commissioner of Shared Services to award and execute the said Purchase order with Custom Computer Specialists, LLC.

COUNTY OF NASSAU

POLITICAL CAMPAIGN CONTRIBUTION DISCLOSURE FORM

1. Has the vendor or any corporate officers of the vendor provided campaign contributions pursuant to the New York State Election Law in (a) the period beginning April 1, 2016 and ending on the date of this disclosure, or (b), beginning April 1, 2018, the period beginning two years prior to the date of this disclosure and ending on the date of this disclosure, to the campaign committees of any of the following Nassau County elected officials or to the campaign committees of any candidates for any of the following Nassau County elected offices: the County Executive, the County Clerk, the Comptroller, the District Attorney, or any County Legislator?

YES [ ] NO [X] If yes, to what campaign committee?

Electronically signed and certified at the date and time indicated by:
Sharon Hofmann [SHOFMANN@CUSTOMONLINE.COM]

Dated: 07/30/2026 12:37:29 pm

Vendor: Custom Computer Specialists, Inc.

Title: BD/ISM

Business History Form

The contract shall be awarded to the responsible proposer who, at the discretion of the County, taking into consideration the reliability of the proposer and the capacity of the proposer to perform the services required by the County, offers the best value to the County and who will best promote the public interest.

In addition to the submission of proposals, each proposer shall complete and submit this questionnaire. The questionnaire shall be filled out by the owner of a sole proprietorship or by an authorized representative of the firm, corporation or partnership submitting the Proposal.

NOTE: All questions require a response, even if response is "none" or "not-applicable." No blanks.

(USE ADDITIONAL SHEETS IF NECESSARY TO FULLY ANSWER THE FOLLOWING QUESTIONS).

Date: 08/12/2026

1) Proposer's Legal Name: Custom Computer Specialists LLC

2) Address of Place of Business: 70 Suffolk Ct

City: Hauppauge State/Province/ Territory: NY Zip/Postal Code: 11788

Country: US

3) Mailing Address (if different):

City: State/Province/ Territory: Zip/Postal Code:

Country:

Phone:

Does the business own or rent its facilities? Rent If other, please provide details:

4) Dun and Bradstreet number: 097533350

5) Federal I.D. Number: 112497640

6) The proposer is a: Other (Describe) Limited Liability Company

7) Does this business share office space, staff, or equipment expenses with any other business?
YES [ ] NO [X] If yes, please provide details:

8) Does this business control one or more other businesses?
YES [X] NO [ ] If yes, please provide details:
ConexSys, LLC, a Rhode Island LLC specializing in interventional radiology software licensing and implementation

9) Does this business have one or more affiliates, and/or is it a subsidiary of, or controlled by, any other business?
YES [ ] NO [X] If yes, please provide details:

10) Has the proposer ever had a bond or surety cancelled or forfeited, or a contract with Nassau County or any other government entity terminated?
YES [ ] NO [X] If yes, state the name of bonding agency, (if a bond), date, amount of bond and reason for such cancellation or forfeiture: or details regarding the termination (if a contract).

11) Has the proposer, during the past seven years, been declared bankrupt?
YES [ ] NO [X] If yes, state date, court jurisdiction, amount of liabilities and amount of assets

12) In the past five years, has this business and/or any of its owners and/or officers and/or any affiliated business, been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency? And/or, in the past 5 years, have any owner and/or officer of any affiliated business been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency, where such investigation was related to activities performed at, for, or on behalf of an affiliated business.
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

13) In the past 5 years, has this business and/or any of its owners and/or officers and/or any affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies? And/or, in the past 5 years, has any owner and/or officer of an affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies, for matters pertaining to that individual's position at or relationship to an affiliated business.
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

14) Has any current or former director, owner or officer or managerial employee of this business had, either before or during such person's employment, or since such employment if the charges pertained to events that allegedly occurred during the time of employment by the submitting business, and allegedly related to the conduct of that business:
a) Any felony charge pending?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

b) Any misdemeanor charge pending?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

c) In the past 10 years, you been convicted, after trial or by plea, of any felony and/or any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

d) In the past 5 years, been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

e) In the past 5 years, been found in violation of any administrative, statutory, or regulatory provisions?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

15) In the past (5) years, has this business or any of its owners or officers, or any other affiliated business had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

16) For the past (5) tax years, has this business failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide details for each such year. Provide a detailed response to all questions checked 'YES'. If you need more space, photocopy the appropriate page and attach it to the questionnaire.

17 Conflict of Interest:

a) Please disclose any conflicts of interest as outlined below. NOTE: If no conflicts exist, please expressly state "No conflict exists."

(i) Any material financial relationships that your firm or any firm employee has that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No conflict exists.

(ii) Any family relationship that any employee of your firm has with any County public servant that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No conflict exists.

(iii) Any other matter that your firm believes may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No conflict exists.

b) Please describe any procedures your firm has, or would adopt, to assure the County that a conflict of interest would not exist for your firm in the future.

In the event a conflict should arise guidance would initially be sought from the County, and then take proper measures to correct the situation. Should we hire an employee with a family relationship with a County public servant that might be construed as a possible conflict of interest, we would prohibit that employee from being involved in any way with bidding, billing, payment or any other function with the County.

A. Include a resume or detailed description of the Proposer's professional qualifications, demonstrating extensive experience in your profession. Any prior similar experiences, and the results of these experiences, must be identified.

Have you previously uploaded the below information under in the Document Vault?
YES [ ] NO [X]

Is the proposer an individual?
YES [ ] NO [X] Should the proposer be other than an individual, the Proposal MUST include:

i) Date of formation;

01/31/2022

ii) Name, addresses, and position of all persons having a financial interest in the company, including shareholders, members, general or limited partner. If none, explain.

Wholly owned Custom Parent, Inc., attached principal questionnaire forms for all officers below.

iii) Name, address and position of all officers and directors of the company. If none, explain.

See Attached

1 File(s) uploaded: ccs officers 20260924.docx

iv) State of incorporation (if applicable);

DE

v) The number of employees in the firm;

400

vi) Annual revenue of firm;

100000000

vii) Summary of relevant accomplishments

Custom has served Nassau County as a valued vendor for Information Technology Onsite services and break-fix parts procurement for over 18 years. We believe that our long tenure can be attributed to uncompromising professionalism and ethics. We always push our team members to find ways to add value for the County by leveraging the unique insight and organization knowledge we've developed over time.

viii) Copies of all state and local licenses and permits.

B. Indicate number of years in business.

47.5

C. Provide any other information which would be appropriate and helpful in determining the Proposer's capacity and reliability to perform these services.

Have performed relevant services reliabily for Nassau County previously and currently.

D. Provide names and addresses for no fewer than three references for whom the Proposer has provided similar services or who are qualified to evaluate the Proposer's capability to perform this work.

Company	Town of Oyster Bay		
Contact Person	Rich Principe		
Address	74 Audrey Avenue		
City	Oyster Bay	State/Province/Territory	NY
Country	US		

Telephone	(516) 624-6451
Fax #	
E-Mail Address	rprincipe@oysterbay-ny.gov

Company	Town of Islip		
Contact Person	Angie Carpenter		
Address	655 Main Street		
City	Islip	State/Province/Territory	NY
Country	US		
Telephone	(631) 224-5500		
Fax #			
E-Mail Address	supervisorsoffice@islipny.gov		

Company	Western Suffolk BOCES		
Contact Person	Cosmo Murabito		
Address	31 Lee Avenue		
City	Wheatley Heights	State/Province/Territory	NY
Country	US		
Telephone	(631) 595-6835		
Fax #			
E-Mail Address	cmurabit@wsboces.org		

I, Kenneth Wygand , hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Kenneth Wygand , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Name of submitting business: Custom Computer Specialists LLC

Electronically signed and certified at the date and time indicated by:
Kenneth Wygand KWYGAND@CUSTOMONLINE.COM

Senior Director
Title

09/25/2026 04:35:18 pm
Date

Custom Computer Specialists, LLC Officers:

- Gregory Galdi (ggaldi@customonline.com)
- Jay Whitchurch (jwhitchurch@customonline.com)
- James Thwing (jthwing@customonline.com)

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: Gregory G. Galdi
   Date of birth: 06/01/1954
   Home address: 13 Lloydhaven Drive
   City: Lloyd Harbor State/Province/Territory: NY Zip/Postal Code: 11743
   Country: US

   Business Address: 70 Suffolk Court
   City: Hauppauge State/Province/Territory: NY Zip/Postal Code: 11778
   Country US
   Telephone: 631-630-1238

   Other present address(es):
   City: State/Province/Territory: Zip/Postal Code:
   Country:
   Telephone:

   List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President		Treasurer	
Chairman of Board	02/07/2022	Shareholder	
Chief Exec. Officer	04/02/1979	Secretary	
Chief Financial Officer		Partner	
Vice President			
(Other)			

3. Do you have an equity interest in the business submitting the questionnaire?
   YES [X] NO [ ] If Yes, provide details.
   Equity ownership through the holding company (25%)

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?
   YES [X] NO [ ] If Yes, provide details.
   Loan through the holding company ($7,500,000)

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?
YES [ ] NO [X] If Yes, provide details.

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?
YES [ ] NO [X] If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:
   a. Been debarred by any government agency from entering into contracts with that agency?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?
YES [ ] NO [X] If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.
   a. Is there any felony charge pending against you?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

b. Is there any misdemeanor charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

c. Is there any administrative charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

f. In the past 5 years, have you been found in violation of any administrative or statutory charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

11. In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

12. In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

13. For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

I, Gregory G Galdi , hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Gregory G Galdi , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Custom Computer Specialists, llc

Name of submitting business

Electronically signed and certified at the date and time indicated by:
Gregory G Galdi GGALDI@CUSTOMONLINE.COM

Chairman

Title

08/27/2026 01:16:51 pm

Date

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: Jay Whitchurch
   Date of birth: 10/28/1970
   Home address: 1217 Tamranae Court
   City: Austin State/Province/Territory: TX Zip/Postal Code: 78746
   Country: US

   Business Address: 70 Suffolk Court
   City: Hauppauge State/Province/Territory: NY Zip/Postal Code: 11788
   Country US
   Telephone: 800-598-8989

   Other present address(es):
   City: State/Province/Territory: Zip/Postal Code:
   Country:
   Telephone:

   List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President	09/01/2022	Treasurer	
Chairman of Board		Shareholder	
Chief Exec. Officer	01/01/2023	Secretary	
Chief Financial Officer		Partner	
Vice President			
(Other)			

3. Do you have an equity interest in the business submitting the questionnaire?
   YES [X] NO [ ] If Yes, provide details.
   Minority common stockholder

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?
   YES [ ] NO [X] If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?
YES [ ] NO [X] If Yes, provide details.

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?
YES [X] NO [ ] If Yes, provide details.
Various state and local governments, Education Institutes and Federal Governmental Agengies

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:
   a. Been debarred by any government agency from entering into contracts with that agency?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?
YES [ ] NO [X] If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.
   a. Is there any felony charge pending against you?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

b. Is there any misdemeanor charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

c. Is there any administrative charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

f. In the past 5 years, have you been found in violation of any administrative or statutory charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

11. In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

12. In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

13. For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

I, Jay Whitchurch, hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Jay Whitchurch, hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Custom Computer Specialists, LLC

Name of submitting business

Electronically signed and certified at the date and time indicated by:
Jay Whitchurch JWHITCHURCH@CUSTOMONLINE.COM

Chief Executive Officer

Title

09/24/2026 02:59:27 pm

Date

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: James Thwing
   Date of birth: 07/03/1990
   Home address: 11225 West Cave Boulevard
   City: Dripping Springs State/Province/Territory: TX Zip/Postal Code: 78620
   Country: US

   Business Address: 70 Suffolk Ct., Ste 100
   City: Hauppauge State/Province/Territory: NY Zip/Postal Code: 11788
   Country US
   Telephone: 7374652354

   Other present address(es):
   City: State/Province/Territory: Zip/Postal Code:
   Country:
   Telephone:

   List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President		Treasurer	
Chairman of Board		Shareholder	
Chief Exec. Officer		Secretary	
Chief Financial Officer	06/01/2026	Partner	
Vice President	05/01/2025		
(Other)			

3. Do you have an equity interest in the business submitting the questionnaire?
   YES [X] NO [ ] If Yes, provide details.
   Small number of units that vest over time. Less than 1% ownership.

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?
   YES [ ] NO [X] If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?
YES [ ] NO [X] If Yes, provide details.

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?
YES [ ] NO [X] If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:
   a. Been debarred by any government agency from entering into contracts with that agency?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?
YES [ ] NO [X] If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.
   a. Is there any felony charge pending against you?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

b. Is there any misdemeanor charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

c. Is there any administrative charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

f. In the past 5 years, have you been found in violation of any administrative or statutory charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

11. In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

12. In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

13. For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

I, James Thwing, hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, James Thwing, hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Custom Computer Specialists, LLC

Name of submitting business

Electronically signed and certified at the date and time indicated by:
James Thwing JTHWING@CUSTOMONLINE.COM

Chief Financial Officer

Title

09/24/2026 02:17:45 pm

Date

COUNTY OF NASSAU

CONSULTANT'S, CONTRACTOR'S AND VENDOR'S DISCLOSURE FORM

1. Name of the Entity: Custom Computer Specialists, LLC

Address: 70 Suffolk Ct

City: Hauppauge State/Province/Territory: NY Zip/Postal Code: 11788

Country: US

2. Entity's Vendor Identification Number: 112497640

3. Type of Business: Ltd. Liability Co (specify)

4. List names and addresses of all principals; that is, all individuals serving on the Board of Directors or comparable body, all partners and limited partners, all corporate officers, all parties of Joint Ventures, and all members and officers of limited liability companies (attach additional sheets if necessary):

First Name	Greg				
Last Name	Galdi				
MI		Suffix			
Address	70 Suffolk Court				
City	Hauppauge	State/Province/ Territory:	NY	Zip/Postal Code:	11788
Country	US				
Position	Chairman of Board				

5. List names and addresses of all shareholders, members, or partners of the firm. If the shareholder is not an individual, list the individual shareholders/partners/members. If a Publicly held Corporation, include a copy of the 10K in lieu of completing this section.
If none, explain.

See Attached

1 File(s) uploaded: ccs officers 20260924.docx

First Name	Greg		
Last Name	Galdi		
MI		Suffix	
Address	70 Suffolk Court		

City	Hauppauge	State/Province/ Territory:	NY	Zip/Postal Code:	11788
Country	US				
Position	Chairman of Board				

6. List all affiliated and related companies and their relationship to the firm entered on line 1. above (if none, enter "None"). Attach a separate disclosure form for each affiliated or subsidiary company that may take part in the performance of this contract. Such disclosure shall be updated to include affiliated or subsidiary companies not previously disclosed that participate in the performance of the contract.

ConexSys, LLC is a wholly owned subsidiary, Custom Parent, Inc. wholly owns proposer, neither will be in any way involved in performance.

7. List all lobbyists whose services were utilized at any stage in this matter (i.e., pre-bid, bid, post-bid, etc.). If none, enter "None." The term "lobbyist" means any and every person or organization retained, employed or designated by any client to influence - or promote a matter before - Nassau County, its agencies, boards, commissions, department heads, legislators or committees, including but not limited to the Open Space and Parks Advisory Committee and Planning Commission. Such matters include, but are not limited to, requests for proposals, development or improvement of real property subject to County regulation, procurements. The term "lobbyist" does not include any officer, director, trustee, employee, counsel or agent of the County of Nassau, or State of New York, when discharging his or her official duties.

Are there lobbyists involved in this matter?
YES [ ] NO [X]

(a) Name, title, business address and telephone number of lobbyist(s):

(b) Describe lobbying activity of each lobbyist. See below for a complete description of lobbying activities.

(c) List whether and where the person/organization is registered as a lobbyist (e.g., Nassau County, New York State):

8. VERIFICATION: This section must be signed by a principal of the consultant, contractor or Vendor authorized as a signatory of the firm for the purpose of executing Contracts.

The undersigned affirms and so swears that he/she has read and understood the foregoing statements and they are, to his/her knowledge, true and accurate.

Electronically signed and certified at the date and time indicated by:
Kenneth Wygand [KWYGAND@CUSTOMONLINE.COM]

Dated: 09/25/2026 04:37:02 pm

Title: Senior Director

The term lobbying shall mean any attempt to influence: any determination made by the Nassau County Legislature, or any member thereof, with respect to the introduction, passage, defeat, or substance of any local legislation or resolution; any determination by the County Executive to support, oppose, approve or disapprove any local legislation or resolution, whether or not such legislation has been introduced in the County Legislature; any determination by an elected County official or an officer or employee of the County with respect to the procurement of goods, services or construction, including the preparation of contract specifications, including by not limited to the preparation of requests for proposals, or solicitation, award or administration of a contract or with respect to the solicitation, award or administration of a grant, loan, or agreement involving the disbursement of public monies; any determination made by the County Executive, County Legislature, or by the County of Nassau, its agencies, boards, commissions, department heads or committees, including but not limited to the Open Space and Parks Advisory Committee, the Planning Commission, with respect to the zoning, use, development or improvement of real property subject to County regulation, or any agencies, boards, commissions, department heads or committees with respect to requests for proposals, bidding, procurement or contracting for services for the County; any determination made by an elected county official or an officer or employee of the county with respect to the terms of the acquisition or disposition by the county of any interest in real property, with respect to a license or permit for the use of real property of or by the county, or with respect to a franchise, concession or revocable consent; the proposal, adoption, amendment or rejection by an agency of any rule having the force and effect of law; the decision to hold, timing or outcome of any rate making proceeding before an agency; the agenda or any determination of a board or commission; any determination regarding the calendaring or scope of any legislature oversight hearing; the issuance, repeal, modification or substance of a County Executive Order; or any determination made by an elected county official or an officer or employee of the county to support or oppose any state or federal legislation, rule or regulation, including any determination made to support or oppose that is contingent on any amendment of such legislation, rule or regulation, whether or not such legislation has been formally introduced and whether or not such rule or regulation has been formally proposed.

Custom Computer Specialists, LLC Officers:

- Gregory Galdi (ggaldi@customonline.com)
- Jay Whitchurch (jwhitchurch@customonline.com)
- James Thwing (jthwing@customonline.com)

CCS Summary Cap Table	% Ownership	Notes	Address
Columbia River Partners	58.2%	The other investment firms are invested through CRP and CRP has board control	400 Union St, Suite 400 Seattle, WA 98101
Greg Galdi	24.9%	Only principal with >10%	70 Suffolk Ct., Ste 100 Hauppauge, NY 11788
Net Activity	0.3%		6100 Oak Tree Blvd Suite 200 Independence, OH 44131
Clarity Technology Group	1.1%		7208 ACC Blvd Raleigh, NC 27617
Info Solutions	0.6%		920 Justinson St., Wilmington, DE 19801
eKeeper	0.3%		7701 W. Kilgore Ave #1B Yorktown, IN 47396
Other Smaller Shareholders (none with more than 10%)	14.6%		400 Union St, Suite 400 Seattle, WA 98101
	100.0%		

REQUISITION

RQIT26000130 25/AUG/2026

VENDOR:		REQUISITIONER:	
VPRIME TECH INC		IT DEPARTMENT OF INFORMATION TECH	
1400 BROADFIELD BLVD STE 200		240 OLD COUNTRY ROAD	
		6TH FLOOR	
HOUSTON	TX 77084	MINEOLA	NY 11501
		J.CARNEY/DOUG RODRIGUEZ	
TEL:(833)333-1314		TEL:(516)571-4093	
FAX:( ) -		FAX:(516)571-3918	

ITEM	DESCRIPTION	QTY	U/M	UNIT COST	TOTAL	
	001 838-34			1.00 EA	110,944.8000	110,944.80

COMMUNICATIONS SECURITY SYSTEM, SOFTWARE/HARDWARE

FAZ-3100G-BDL-1263-12 FORTIANALYZER-3100G HARDWARE PLUS 1 YEAR
FORTICARE PREMIUM AND FORTIANALYZER
ENTERPRISE PROTECTION
TERM: TBD UPON ISSUANCE OF PO

SEND LICENSE KEY(S) TO DOUG RODRIGUEZ: DRODRIGUEZ@NASSAUCOUNTYNY.GOV

BILL TO: I.T. ACCOUNTS PAYABLE
240 OLD COUNTRY ROAD 6TH FLOOR
MINEOLA, NY 11501
EMAIL TO: ITACCOUNTING@NASSAUCOUNTYNY.GOV

* END *

ESTIMATED TOTAL: 110,944.80

REQ DOC INQUIRY 2140

OPEN MARKET; QUOTE #000903
VENDOR EMAIL: RRAND@CUSTOMONLINE.COM

A) FORTIANALYZER-3100G HARDWARE PLUS 1 YEAR FORTICARE PREMIUM AND FORTIANALYZER ENTERPRISE PROTECTION. TERM: TBD UPON PO ISSUANCE.
B) $98,096.05
C) NO
D) NO, THIS IS THE EXACT PRODUCT REQUIRED. NO SUBSTITUTIONS ALLOWED.
E) FORTIANALYZER REPLACEMENT IS REQUIRED AS THE CURRENT APPLIANCE IS APPROACHING END-OF-LIFE (EOL) AND WILL NO LONGER BE SUPPORTED.
F) N/A
G) N/A

6/26/26 - REJECTING BACK TO AGENCY TO ENCUMBER MORE FUNDS
* UPDATE: NEW VENDOR VPRIME TECH @ $110,944.80 BID - J.C. 6/26/26

FORMAL BID RECOMMENDATION

BID NUMBER: 83834-08206-184 OPEN: AUGUST 20, 2026

TITLE: FORTIANALYZER-3100G HARDWARE/SOFTWARE

DATE: SEPTEMBER 2, 2026

TO: DEANNA PRENDERGAST FROM: ADMINISTRATION

PLEASE REVIEW ATTACHED BID RESULT. NOTE YOUR RECOMMENDATION FOR AWARD.
FORWARD THIS TRANSMITTAL SHEET TOGETHER WITH BID FILE. RETAIN REQUISITION.

Date: SEPTEMBER 2, 2026

To: Supervisor From: *Deanna Prendergast, Buyer*

List of recommended awards in accordance with the attached summary is shown in column at right. The reason for award to other than low bidder is indicated on the reverse side of this page.

Deanna Prendergast
Buyer

Date: _____

To: Director From: Supervisor

☐ Concur ☐ Disagree (See Reverse)

Date: 9/3/26

To: Buyer From: Director

☒ Approved for Award

☐ Hold award pending discussion.

NO ☐ Subject to Legislature Approval

YES ☒ Subject to Legislature Approval

Joseph Bucci
Director

	BID RESULTS
Item	Bidder
001	Recommend this award be given to
	Custom Computer Specialists, LLC as the
	Lowest responsible bidder meeting
	Specifications and bid terms for all items.

OFFICE OF PURCHASING
SUMMARY OF BIDS
OPENED: August 20, 2026 AT 11:00 A.M.
BID NO: 83834-08206-184
REQ. NO: RQIT26000130
TITLE: FORTIANALYZER-3100G HARDWARE/SOFTWARE

ITEM #	ARTICLE	Qty.	UNIT	1 DERIVE TECHNOLOGIES	2 CUSTOM COMPUTER SPECIALISTS	3 BITBAGAN LLC	4 PRINCETON IT SERVICES, INC	5 KAMBRIAN	6 KENZAFI GROUP LLC	7 ITEGIX, LLC	8 LIGHTKUBE INC
1	FAZ-3100G-BDL-1263-12 FORTIANALYZER-3100G HARDWARE	1	Ea.	145720.21	114872.28	195436.512	133963.39	190122.32	190550.60	120180.00	115269.56
	(As per bid specs)										
	.										

OFFICE OF PURCHASING
SUMMARY OF BIDS
OPENED: August 20, 2026 AT 11:00 A.M.
BID NO: 83834-08206-184
REQ. NO: RQIT26000130
TITLE: FORTIANALYZER-3100G HARDWARE/SOFTWARE

ITEM #	ARTICLE	Qty.	UNIT	ICT RESOURCES	WHITE WING CONSULTING.	MARS BEAR TECH INC	PATHWAY COMMUNICATION	V PRIME TECH	BLACKHAWK DATA	HYPERTEC USA, INC
				9	10	11	12	13	14	15
1	FAZ-3100G-BDL-1263-12 FORTIANALYZER-3100G HARDWARE	1	Ea.	129944.49	139791.40	121571.06	158832.57	130654.72	117243.58	136771.89
	(As per bid specs)									

OFFICE OF PURCHASING
SUMMARY OF BIDS
OPENED: August 20, 2026 AT 11:00 A.M.
BID NO: 83834-08206-184
REQ. NO: RQIT26000130
TITLE: FORTIANALYZER-3100G HARDWARE/SOFTWARE

ITEM #	ARTICLE	Qty.	UNIT	1 DERIVE TECHNOLOGIES	2 CUSTOM COMPUTER SPECIALISTS	3 BITBAGAN LLC	4 PRINCETON IT SERVICES, INC	5 KAMBRIAN	6 KENZAFI GROUP LLC	7 ITEGIX, LLC	8 LIGHTKUBE INC	9 ICT RESOURCES	10 WHITE WING CONSULTING	11 MARS BEAR TECH INC	12 PATHWAY COMMUNICATION	13 V PRIME TECH	14 BLACKHAWK DATA	15 HYPERTEC USA INC	DETAILS OF AWARD TO NO.	AMOUN
1	FAZ-3100G-BDL-1263-12 FORTIANALYZER-3100G HARDWARE (As Per Bid Specs)	1	Ea.	145720.21	114872.28	195436.512	133963.39	190122.32	190550.60	120180.00	115269.56	129944.49	139791.40	121571.06	158832.57	130654.72	117243.58	136771.89		
PRPARED BY			TERMS	NET	NET	3%	NET	NET	NET	NET	0.25%	NET	NET	NET	2%	NET	NET	NET		

Kimberly Stanton hereby certifies that the bids listed above were opened at the time and place specified therein and that the above is a correct transcription from all original bids received.

Date 8/20/26

PUBLIC BID OFFICER

NEW YORK STATE | Workers' Compensation Board

CERTIFICATE OF INSURANCE COVERAGE
DISABILITY AND PAID FAMILY LEAVE BENEFITS LAW

PART 1. To be completed by Disability and Paid Family Leave Benefits Carrier or Licensed Insurance Agent of that Carrier

1a. Legal Name & Address of Insured (use street address only) Custom Computer Specialists, LLC 70 Suffolk Court Hauppauge, NY 11788 Work Location of Insured *(Only required if coverage is specifically limited to certain locations in New York State, i.e., a Wrap-Up Policy)*	1b. Business Telephone Number of Insured (631) 864-1249 1c. Federal Employer Identification Number of Insured or Social Security Number 11-2497640
2. Name and Address of the Entity Requesting Proof of Coverage (Entity Being Listed as the Certificate Holder) Nassau County Department of Information Technology 240 Old Country Road Mineola, NY 11510	3a. Name of Insurance Carrier Lincoln Life & Annuity Company of New York 3b. Policy Number of Entity Listed in box "1a" 000010258499 3c. Policy effective period: 12/01/2019 to 01/01/2027

4. Policy provides the following benefits:
   - ☒ A. Both disability and paid family leave benefits.
   - ☐ B. Disability benefits only.
   - ☐ C. Paid family leave benefits only.

5. Policy covers:
   - ☒ A. All of the employer's employees eligible under the NYS Disability and Paid Family Leave Benefits Law.
   - ☐ B. Only the following class or classes of the employer's employees:

_____

_____

Under penalty of perjury, I certify that I am an authorized representative or licensed agent of the insurance carrier referenced above and that the named insured has NYS Disability and/or Paid Family Leave Benefits insurance coverage as described above.

Date Signed 02/10/2026 By Paul Martin

(Signature of insurance carrier's authorized representative or NYS Licensed Insurance Agent of that insurance carrier)

Telephone Number 800-423-2765 Name and Title Paul Martin VP, Group Claims

IMPORTANT: If Boxes 4A and 5A are checked, and this form is signed by the insurance carrier's authorized representative or NYS Licensed Insurance Agent of that carrier, this certificate is COMPLETE. Mail it directly to the certificate holder.

If Box 4B, 4C or 5B is checked, this certificate is NOT COMPLETE for purposes of Section 220, Subd. 8 of the NYS Disability and Paid Family Leave Benefits Law. It must be emailed to PAU@wcb.ny.gov or it can be mailed for completion to the Workers' Compensation Board, Plans Acceptance Unit, PO Box 5200, Binghamton, NY 13902-5200.

PART 2. To be completed by NYS Workers' Compensation Board (Only if box 4C or 5B of Part 1 has been checked)

State of New York
Workers' Compensation Board

According to information maintained by the NYS Workers' Compensation Board, the above-named employer has complied with the NYS Disability and Paid Family Leave Benefits Law (Article 9 of the Workers' Compensation Law) with respect to all of his/her employees.

Date Signed _____ By _____

(Signature of Authorized NYS Workers' Compensation Board Employee)

Telephone Number _____ Name and Title _____

Please Note**: Only insurance carriers licensed to write NYS disability and Paid Family Leave benefits insurance policies and NYS licensed insurance agents of those insurance carriers are authorized to issue Form DB-120.1. **Insurance brokers are NOT authorized to issue this form.

Additional Instructions for Form DB-120.1

By signing this form, the insurance carrier identified in Box 3 on this form is certifying that it is insuring the business referenced in box 1a for disability and/or Paid Family Leave benefits under the NYS Disability and Paid Family Leave Benefits Law. The Insurance carrier or its licensed agent will send this Certificate of Insurance Coverage (Certificate) to the entity listed as the certificate holder in Box 2.

The insurance carrier must notify the above certificate holder and the Workers' Compensation Board within 10 days IF a policy is cancelled due to nonpayment of premiums or within 30 days IF there are reasons other than nonpayment of premiums that cancel the policy or eliminate the insured from coverage indicated on this Certificate. (These notices may be sent by regular mail.) Otherwise, this Certificate is valid for one year after this form is approved by the insurance carrier or its licensed agent, or until the policy expiration date listed in Box 3c, whichever is earlier.

This Certificate is issued as a matter of information only and confers no rights upon the certificate holder. This Certificate does not amend, extend or alter the coverage afforded by the policy listed, nor does it confer any rights or responsibilities beyond those contained in the referenced policy.

This Certificate may be used as evidence of a NYS disability and/or Paid Family Leave benefits contract of insurance only while the underlying policy is in effect.

Please Note: Upon the cancellation of the disability and/or Paid Family Leave **benefits policy indicated on this form, if the business continues to be named on a permit, license or contract issued by a certificate holder, the business must provide that certificate holder with a new Certificate of Insurance Coverage for NYS disability and/or Paid Family Leave Benefits or other authorized proof that the business is complying with the mandatory coverage requirements of the NYS Disability and Paid Family Leave Benefits Law.**

NYS DISABILITY AND PAID FAMILY LEAVE BENEFITS LAW

§220. Subd. 8

(a) The head of a state or municipal department, board, commission or office authorized or required by law to issue any permit for or in connection with any work involving the employment of employees in employment as defined in this article, and not withstanding any general or special statute requiring or authorizing the issue of such permits, shall not issue such permit unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that the payment of disability benefits and after January first, two thousand and twenty-one, the payment of family leave benefits for all employees has been secured as provided by this article. Nothing herein, however, shall be construed as creating any liability on the part of such state or municipal department, board, commission or office to pay any disability benefits to any such employee if so employed.

(b) The head of a state or municipal department, board, commission or office authorized or required by law to enter into any contract for or in connection with any work involving the employment of employees in employment as defined in this article and notwithstanding any general or special statute requiring or authorizing any such contract, shall not enter into any such contract unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that the payment of disability benefits and after January first, two thousand eighteen, the payment of family leave benefits for all employees has been secured as provided by this article.

CERTIFICATE OF LIABILITY INSURANCE

6/30/2027

DATE (MM/DD/YYYY): 8/21/2026

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

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

PRODUCER Lockton Companies, LLC
DBA Lockton Insurance Brokers, LLC in CA
CA license #0F15767
8110 E Union Ave., Ste. 100
Denver CO 80237
denver-certs@lockton.com

CONTACT NAME:
PHONE (A/C, No, Ext):
FAX (A/C, No):
E-MAIL ADDRESS:

INSURED 1508413
Custom Computer Specialists, LLC
70 Suffolk Court
Hauppauge NY 11788

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Great Northern Insurance Company	20303
INSURER B : Chubb National Insurance Company	10052
INSURER C : Federal Insurance Company	20281
INSURER D : Great American Insurance Company	16691
INSURER E : Old Republic Insurance Company	24147
INSURER F : --- SEE ATTACHMENT ---	

COVERAGES **CERTIFICATE NUMBER:** 18671619 **REVISION NUMBER:** XXXXXXX

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY	Y	N	3602-87-58	6/30/2026	6/30/2027	EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 1,000,000
							MED EXP (Any one person)	$ 10,000
							PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 2,000,000
	X POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$ 2,000,000
	OTHER:							$
A	AUTOMOBILE LIABILITY	N	N	7358-93-93	6/30/2026	6/30/2027	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	$ XXXXXXX
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$ XXXXXXX
	HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$ XXXXXXX
							Comp/Coll Ded:	$ 1,000
B	X UMBRELLA LIAB X OCCUR	N	N	7989-61-26	6/30/2026	6/30/2027	EACH OCCURRENCE	$ 10,000,000
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$ 10,000,000
	X DED RETENTION $ 10,000							$ XXXXXXX
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		N	7175-65-20	6/30/2026	6/30/2027	X PER STATUTE OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N N N/A						E.L. EACH ACCIDENT	$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
D	Crime	N	N	06-184-48-17	6/30/2026	6/30/2027	$5,000,000	
E	Excess Crime			XSC F357067 01	6/30/2026	6/30/2027	$5M xs $5M	
F	Tech E&O Cyber/XS			See Attachment	8/25/2026	6/30/2027	See Attachment	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Additional Insured Coverage is afforded by form#80-02-2367 05/07 Certificate holder are included as additional insured with respect to General Liability, pursuant to and subject to the policy's terms, definitions, conditions and exclusions. as their interests may appear in regards to computer equipment in possession of the insured.

CERTIFICATE HOLDER

18671619
Nassau County Department of Information Technology
160 Old Country Road
Mineola NY 11501 USA

CANCELLATION See Attachments

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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The ACORD name and logo are registered marks of ACORD

Attachment Code: D619211 Master ID: 1508413, Certificate ID: 18671619

Type of Insurance	Policy Number	Insurer	Policy Term	Limits
Cyber/Tech E&O	ORCyber-1-00000130-001	Old Republic Insurance Company	8/25/2026-6/30/2027	$5,000,000
1st Excess Cyber/Tech E&O	MTE9049253 01	Indian Harbor Insurance Company	8/25/2026-6/30/2027	$5M XS $5M
2nd Excess Cyber/Tech E&O	EO5SACLI9P005	Liberty Surplus Insurance Corporation	8/25/2026-6/30/2027	$5M XS $10M

LOCKTON

Nassau County Department of Information Technology
160 Old Country Road
Mineola NY 11501

To whom it may concern:

In our continuing effort to provide timely certificate delivery, Lockton Companies is transitioning to paperless delivery of Certificates of Insurance, thus this is your final hard-copy delivery.

To ensure electronic delivery for future renewals of this certificate, we need your email address. Please contact us via one of the methods below, referencing Certificate ID 18671619.

- Email: mountainwestedelivery@lockton.com
- Phone: 303-728-8060

If you received this certificate through an internet link where the current certificate is viewable, we have your email and no further action is needed.

In the event your mailing address has changed, will change in the future, or you no longer require this certificate, please let us know using one of the methods above.

The above inbox and phone number is for automating electronic delivery of certificates only. Please do NOT send future certificate requests to this inbox or contact the phone number below with email updates.

Thank you for your cooperation and willingness in reducing our environmental footprint.

Lockton Companies

Nassau County Shared Services,
Office of Purchasing

Staff Summary A-67-2026

Subject: Munson Boat (RQPD26000154)	Date: August 11, 2026
Department: Department of Shared Services Office of Purchasing	Vendor Name: William E. Munson Co.
Department Head Name: Melissa Gallucci	Contract Number: A-67-2026
Department Head Signature Melissa Gallucci	Contract Manager Name: Anette Sullivan, Buyer

Internal Approvals

Date & Init.	Approval	Date & Init.	Approval
10/1/2026	CPO	10/13/26	Budget
10/7/26	County Atty.		County Exec
10/7/26	Insurance	10/16/26	

Significant Adverse Information Identified? [Yes /No _X_] (If Yes, attach memo.)

RECEIVED NASSAU COUNTY CLERK OF THE LEGISLATURE 2026 OCT 16 A 11:08

Narrative

Purpose: To authorize and award a purchase order for a Munson Boat for the Nassau County Police Department (NCPD) Marine Bureau.

Discussion: The Nassau County Police Department requests sole source approval for the purchase of (1) Munson Pack cat 36 foot landing craft catamaran boat. The requested purchase is for use by the Marine Bureau to facilitate maritime law enforcement, maritime hazardous device mitigation and dive operations. Funding for the requested vessel has been approved utilizing both a 2024 Port Security Grant Award and NCPD Asset Forfeiture funding.

Extensive research into various boat manufacturers was conducted and only the Munson boat was able to meet all the specifications required by the NCPD Marine Bureau. The landing craft catamaran style boat is needed for safety during dive operations and Munson Boats hold a US design patent # USD739,331S for the Pack cat landing craft catamaran style hull which is requested. This patented hull design offers greater stability for personnel to operate on and requires less water depth compared to other hull designs available in the market.

William E. Munson Co. is the sole source vendor of the Munson Boat.

Impact on Funding/Term: The maximum amount authorized under this purchase order shall be Nine Hundred Seventy-Four Thousand Three Hundred Forty-Seven Dollars ($974,347.00) from PDGT`2AY6FED BB208 AND PD2A 24

Recommendation: Department of Shared Services, Office of Purchasing recommends awarding a purchase order to William E. Munson Co., as the sole source provider.

COUNTY OF NASSAU

INTER – DEPARTMENTAL MEMO

TO: CLERK OF THE COUNTY LEGISLATURE **A-67-2026**

FROM: MELISSA GALLUCCI - COMMISSIONER OF SHARED SERVICES

DATE: August 11,2026

SUBJECT: RESOLUTION – THE NASSAU COUNTY POLICE DEPARTMENT

THIS RESOLUTION IS RECOMMENDED BY THE COMMISSIONER OF SHARED SERVICES TO AUTHORIZE AN AWARD AND TO EXECUTE A PURCHASE ORDER IN THE AMOUNT OF NINE HUNDRED SEVENTY-FOUR THOUSAND THREE HUNDRED FORTY-SEVEN DOLLARS ($974,347.00) FOR A MUNSON BOAT FOR THE NASSAU COUNTY POLICE DEPT. TO WILLIAM E. MUNSON, CO.

THE ABOVE-DESCRIBED RESOLUTION AND SUPPORTING DOCUMENTATION ATTACHED HERETO IS FORWARDED FOR YOUR REVIEW AND APPROVAL AND SUBSEQUENT TRANSMITTAL TO THE RULES COMMITTEE FOR INCLUSION IN ITS AGENDA.

Melissa Gallucci

MELISSA GALLUCCI
COMMISSIONER OF SHARED SERVICES

VB: gb
ENCL: (1) STAFF SUMMARY
(2) DISCLOSURE STATEMENT
(3) RESOLUTION
(4) CERTIFICATE OF LIABILITY INSURANCE
(5) POLITICAL CONTRIBUTION FORM

RULES RESOLUTION 2026

A RESOLUTION AUTHORIZING THE COMMISSIONER OF SHARED SERVICES TO AWARD AND EXECUTE A PURCHASE ORDER BETWEEN THE COUNTY OF NASSAU ACTING ON BEHALF OF THE NASSAU COUNTY POLICE DEPARTMENT AND WILLIAM E. MUNSON CO.

WHEREAS, the Commissioner of Shared Services is representing to the Rules Committee that the, WILLIAM E. MUNSON CO. is a sole source provider and meets all specifications for the product described in the said contract as determined by the Commissioner of Shared Services.

RESOLVED, that the Rules Committee of the Nassau County Legislature authorizes the Commissioner of Shared Services to award and execute the said Purchase Order with WILLIAM E. MUNSON CO.

COUNTY OF NASSAU

POLITICAL CAMPAIGN CONTRIBUTION DISCLOSURE FORM

1. Has the vendor or any corporate officers of the vendor provided campaign contributions pursuant to the New York State Election Law in (a) the period beginning April 1, 2016 and ending on the date of this disclosure, or (b), beginning April 1, 2018, the period beginning two years prior to the date of this disclosure and ending on the date of this disclosure, to the campaign committees of any of the following Nassau County elected officials or to the campaign committees of any candidates for any of the following Nassau County elected offices: the County Executive, the County Clerk, the Comptroller, the District Attorney, or any County Legislator?

YES [ ] NO [X] If yes, to what campaign committee?

Electronically signed and certified at the date and time indicated by:
Jesse Munson [JESSE@MUNSONBOATS.COM]

Dated: 07/14/2026 02:40:26 pm

Vendor: William E. Munson Company Inc.

Title: CEO

Rev. 3-2016

Business History Form

The contract shall be awarded to the responsible proposer who, at the discretion of the County, taking into consideration the reliability of the proposer and the capacity of the proposer to perform the services required by the County, offers the best value to the County and who will best promote the public interest.

In addition to the submission of proposals, each proposer shall complete and submit this questionnaire. The questionnaire shall be filled out by the owner of a sole proprietorship or by an authorized representative of the firm, corporation or partnership submitting the Proposal.

NOTE: All questions require a response, even if response is "none" or "not-applicable." No blanks.

(USE ADDITIONAL SHEETS IF NECESSARY TO FULLY ANSWER THE FOLLOWING QUESTIONS).

Date: 07/14/2026

1) Proposer's Legal Name: William E. Munson Company Inc.

2) Address of Place of Business: 15806 Preston Place

City: Burlington State/Province/ Territory: WA Zip/Postal Code: 98233

Country: US

3) Mailing Address (if different): 15806 Preston Place

City: Burlington State/Province/ Territory: WA Zip/Postal Code: 98233

Country: US

Phone: (360) 707-2752

Does the business own or rent its facilities? Own If other, please provide details:

4) Dun and Bradstreet number: 867238842

5) Federal I.D. Number: 911668354

6) The proposer is a: Corporation (Describe)

7) Does this business share office space, staff, or equipment expenses with any other business?
YES [ ] NO [X] If yes, please provide details:

8) Does this business control one or more other businesses?
YES [ ] NO [X] If yes, please provide details:

9) Does this business have one or more affiliates, and/or is it a subsidiary of, or controlled by, any other business?
YES [X] NO [ ] If yes, please provide details:

Munson Properties, LLC owns the land and building that Munson Boats rents

10) Has the proposer ever had a bond or surety cancelled or forfeited, or a contract with Nassau County or any other government entity terminated?
YES [ ] NO [X] If yes, state the name of bonding agency, (if a bond), date, amount of bond and reason for such cancellation or forfeiture: or details regarding the termination (if a contract).

11) Has the proposer, during the past seven years, been declared bankrupt?
YES [ ] NO [X] If yes, state date, court jurisdiction, amount of liabilities and amount of assets

12) In the past five years, has this business and/or any of its owners and/or officers and/or any affiliated business, been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency? And/or, in the past 5 years, have any owner and/or officer of any affiliated business been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency, where such investigation was related to activities performed at, for, or on behalf of an affiliated business.
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

13) In the past 5 years, has this business and/or any of its owners and/or officers and/or any affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies? And/or, in the past 5 years, has any owner and/or officer of an affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies, for matters pertaining to that individual's position at or relationship to an affiliated business.
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

14) Has any current or former director, owner or officer or managerial employee of this business had, either before or during such person's employment, or since such employment if the charges pertained to events that allegedly occurred during the time of employment by the submitting business, and allegedly related to the conduct of that business:
a) Any felony charge pending?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

b) Any misdemeanor charge pending?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

c) In the past 10 years, you been convicted, after trial or by plea, of any felony and/or any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

d) In the past 5 years, been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

e) In the past 5 years, been found in violation of any administrative, statutory, or regulatory provisions?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

15) In the past (5) years, has this business or any of its owners or officers, or any other affiliated business had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

16) For the past (5) tax years, has this business failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide details for each such year. Provide a detailed response to all questions checked 'YES'. If you need more space, photocopy the appropriate page and attach it to the questionnaire.

17 Conflict of Interest:

a) Please disclose any conflicts of interest as outlined below. NOTE: If no conflicts exist, please expressly state "No conflict exists."

(i) Any material financial relationships that your firm or any firm employee has that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

no conflict exists

(ii) Any family relationship that any employee of your firm has with any County public servant that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

no conflict exists

(iii) Any other matter that your firm believes may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

no conflict exists

b) Please describe any procedures your firm has, or would adopt, to assure the County that a conflict of interest would not exist for your firm in the future.

Should a conflict arise we would notify the County and adhere to their guidelines

A. Include a resume or detailed description of the Proposer's professional qualifications, demonstrating extensive experience in your profession. Any prior similar experiences, and the results of these experiences, must be identified.

Have you previously uploaded the below information under in the Document Vault?
YES [ ] NO [X]

Is the proposer an individual?
YES [ ] NO [X] Should the proposer be other than an individual, the Proposal MUST include:

i) Date of formation;

06/01/1994

ii) Name, addresses, and position of all persons having a financial interest in the company, including shareholders, members, general or limited partner. If none, explain.

Jesse Munson
23832 110th Place W
Woodway WA 98020
98% owner

Jon Wise
820 Vista Drive
Camano Island, WA 98282
2% owner

iii) Name, address and position of all officers and directors of the company. If none, explain.

Jesse Munson, CEO
23832 110th Place W
Woodway WA 98020

Jon Wise, President
820 Vista Drive
Camano Island WA 98282

Stephanie Munson, Secretary Treasurer
23832 110th Place W
Woodway WA 98020

iv) State of incorporation (if applicable);

WA

v) The number of employees in the firm;

65

vi) Annual revenue of firm;

18000000

vii) Summary of relevant accomplishments

The William E. Munson Company Inc. has designed and manufactured over 1000 welded aluminum boats for commercial and government clients throughout the world

viii) Copies of all state and local licenses and permits.

B. Indicate number of years in business.

32

C. Provide any other information which would be appropriate and helpful in determining the Proposer's capacity and reliability to perform these services.

Visit our website - www.munsonboats.com

D. Provide names and addresses for no fewer than three references for whom the Proposer has provided similar services or who are qualified to evaluate the Proposer's capability to perform this work.

Company	New York State Police		
Contact Person	Kevin Gardner		
Address	1220 Washington Ave. Bldg. 22		
City	Albany	State/Province/Territory	NY
Country	US		
Telephone	(845) 388-1705		
Fax #			
E-Mail Address	Kevin.Gardner@troopers.ny.gov		

Company	New York State Department of Environmental Conservation		
Contact Person	Peter Buck		
Address	1115 State Route 86		
City	Ray Brook	State/Province/Territory	NY
Country	US		
Telephone	(518) 402-9240		
Fax #			
E-Mail Address	peter.buck@dec.ny.gov		

Company	Washington State Department of Fish and Wildlife		
Contact Person	Taylor Kimball		
Address	19 Bellwether Way STE 203		
City	Bellingham	State/Province/Territory	WA
Country	US		
Telephone	(360) 594-2351		
Fax #			
E-Mail Address	taylor.kimball@dfw.wa.gov		

I, Jesse Munson, hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Jesse Munson, hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Name of submitting business: William E. Munson Company Inc.

Electronically signed and certified at the date and time indicated by:
Jesse Munson JESSE@MUNSONBOATS.COM

CEO
Title

09/10/2026 06:26:36 pm
Date

15806 Preston Place, Burlington, WA USA 98233
Phone: 360 707 2752 Fax: 360 707 2842
www.munsonboats.com

July 14, 2026

The William E. Munson Company Inc. Board of Directors:

Jesse Munson - CEO
23832 110th Pl. W
Woodway WA 98020

Stephanie Munson – Secretary Treasurer
23832 110th Pl. W
Woodway WA 98020

Jon Wise - President
820 Vista Dr.
Camano Island WA 98282

STATE OF WASHINGTON

BUSINESS LICENSE

Issue Date: Jul 31, 2026

Unified Business ID #: 601569620
Business ID #: 001
Location: 0003
Expires: Aug 31, 2027

Profit Corporation

WILLIAM E. MUNSON COMPANY
15806 PRESTON PL
BURLINGTON WA 98233-3550

UNEMPLOYMENT INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE
MISCELLANEOUS VEHICLE DEALER #10219 - ACTIVE
INDUSTRIAL INSURANCE - ACTIVE
VESSEL DEALER #10218 - ACTIVE

LICENSING RESTRICTIONS:
Not licensed to hire minors without a Minor Work Permit.

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

John Ryser
Director, Department of Revenue

STATE OF WASHINGTON

UBI: 601569620 001 0003

Expires: Aug 31, 2027

WILLIAM E. MUNSON COMPANY
15806 PRESTON PL
BURLINGTON WA 98233-3550

UNEMPLOYMENT INSURANCE - ACTIVE
INDUSTRIAL INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE
VESSEL DEALER #10218 - ACTIVE
MISCELLANEOUS VEHICLE DEALER #10219 - ACTIVE

John Ryser
Director, Department of Revenue

IMPORTANT!

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY BEFORE POSTING THIS LICENSE

General Information

Post this Business License in a visible location at your place of business.

If you were issued a Business License previously, **destroy the old one and post this one in its place.**

Login to My DOR at dor.wa.gov if you need to make changes to your business name, location, mailing address, telephone number, or business ownership.

Telephone: 360-705-6741

Endorsements

All endorsements should be renewed by the expiration date that appears on the front of this license to avoid any late fees.

If there is no expiration date, the endorsements remain active as long as you continue required reporting. Tax Registration, Unemployment Insurance, and Industrial Insurance endorsements require you to submit periodic reports. Each agency will send you the necessary reporting forms and instructions.

For assistance or to request this document in an alternate format, visit http://business.wa.gov/BLS or call (360) 705-6741. Teletype (TTY) users may use the Washington Relay Service by calling 711.

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: Jesse Munson
   Date of birth: 10/27/1976
   Home address: 23832 110th Place W.
   City: Woodway State/Province/Territory: WA Zip/Postal Code: 98020
   Country: US

   Business Address: 15806 Preston Place
   City: Burlington State/Province/Territory: WA Zip/Postal Code: 98233
   Country US
   Telephone: 3607072752

   Other present address(es):
   City: Burlington State/Province/Territory: WA Zip/Postal Code: 98233
   Country: US
   Telephone: 3607072752

   List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President		Treasurer	
Chairman of Board		Shareholder	
Chief Exec. Officer	10/03/2016	Secretary	
Chief Financial Officer		Partner	
Vice President			
(Other)			

3. Do you have an equity interest in the business submitting the questionnaire?
   YES [X] NO [ ] If Yes, provide details.
   I am 98% owner

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?
   YES [ ] NO [X] If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?
YES [ ] NO [X] If Yes, provide details.

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?
YES [X] NO [ ] If Yes, provide details.
Munson Boats has sold dozens of boats to city, county, state and federal clients in the last 3 years.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:
   a. Been debarred by any government agency from entering into contracts with that agency?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?
YES [ ] NO [X] If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.
   a. Is there any felony charge pending against you?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

b. Is there any misdemeanor charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

c. Is there any administrative charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

f. In the past 5 years, have you been found in violation of any administrative or statutory charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

11. In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

12. In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

13. For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

I, Jesse Munson, hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Jesse Munson, hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

William E. Munson Company
Name of submitting business

Electronically signed and certified at the date and time indicated by:
jesse munson JESSE@MUNSONBOATS.COM

CEO
Title

08/03/2026 12:36:56 pm
Date

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: Jon Wise
   Date of birth: 08/19/1969
   Home address: 820 Vista Drive
   City: Camano Island State/Province/Territory: WA Zip/Postal Code: 98282
   Country: US

   Business Address: Munson Boats
   City: Burlington State/Province/Territory: WA Zip/Postal Code: 98233
   Country US
   Telephone: 3607072752

   Other present address(es):
   City: Burlington State/Province/Territory: Zip/Postal Code: 98233
   Country: US
   Telephone: 3607072752

   List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President	08/08/2011	Treasurer	
Chairman of Board		Shareholder	
Chief Exec. Officer		Secretary	
Chief Financial Officer		Partner	
Vice President			
(Other)			

3. Do you have an equity interest in the business submitting the questionnaire?
   YES [X] NO [ ] If Yes, provide details.
   2% Ownership

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?
   YES [ ] NO [X] If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?
YES [ ] NO [X] If Yes, provide details.

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?
YES [ ] NO [X] If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:
   a. Been debarred by any government agency from entering into contracts with that agency?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?
YES [ ] NO [X] If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.
   a. Is there any felony charge pending against you?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

b. Is there any misdemeanor charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

c. Is there any administrative charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

f. In the past 5 years, have you been found in violation of any administrative or statutory charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

11. In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

12. In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

13. For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

I, Jon Wise, hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Jon Wise, hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

William E. Munson Company

Name of submitting business

Electronically signed and certified at the date and time indicated by:
Jon Wise JON@MUNSONBOATS.COM

President

Title

08/03/2026 04:18:00 pm

Date

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: Stephanie Munson
   Date of birth: 10/20/1976
   Home address: 11701 Bella Coola Rd
   City: Woodway State/Province/Territory: WA Zip/Postal Code: 98020
   Country: US

   Business Address: 15806 Preston Pl
   City: Burlington State/Province/Territory: WA Zip/Postal Code: 98233
   Country US
   Telephone: 3607072752

   Other present address(es):
   City: State/Province/Territory: Zip/Postal Code:
   Country:
   Telephone:

   List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President		Treasurer	08/03/2020
Chairman of Board		Shareholder	
Chief Exec. Officer		Secretary	08/03/2020
Chief Financial Officer		Partner	
Vice President			
(Other)			

3. Do you have an equity interest in the business submitting the questionnaire?
   YES [ ] NO [X] If Yes, provide details.

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?
   YES [ ] NO [X] If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?
YES [ ] NO [X] If Yes, provide details.

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?
YES [ ] NO [X] If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:
   a. Been debarred by any government agency from entering into contracts with that agency?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?
YES [ ] NO [X] If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.
   a. Is there any felony charge pending against you?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

b. Is there any misdemeanor charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

c. Is there any administrative charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

f. In the past 5 years, have you been found in violation of any administrative or statutory charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

11. In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

12. In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

13. For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

I, Stephanie Munson, hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Stephanie Munson, hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

William E Munson Company

Name of submitting business

Electronically signed and certified at the date and time indicated by:
Stephanie Munson STEPHANIEMUNSON2@GMAIL.COM

Secretary Treasurer

Title

08/24/2026 02:35:39 pm

Date

COUNTY OF NASSAU

CONSULTANT'S, CONTRACTOR'S AND VENDOR'S DISCLOSURE FORM

1. Name of the Entity: William E. Munson Company Inc.

Address: 15806 Preston Place

City: Burlington State/Province/Territory: WA Zip/Postal Code: 98233

Country: US

2. Entity's Vendor Identification Number: 911668354

3. Type of Business: Closely Held Corp (specify) _____

4. List names and addresses of all principals; that is, all individuals serving on the Board of Directors or comparable body, all partners and limited partners, all corporate officers, all parties of Joint Ventures, and all members and officers of limited liability companies (attach additional sheets if necessary):

5. List names and addresses of all shareholders, members, or partners of the firm. If the shareholder is not an individual, list the individual shareholders/partners/members. If a Publicly held Corporation, include a copy of the 10K in lieu of completing this section.
If none, explain.

Jesse Munson - 98% Owner
23832 110th Place W
Woodway WA 98020

Jon Wise - 2% Owner
820 Vista Drive
Camano Island, WA 98282

6. List all affiliated and related companies and their relationship to the firm entered on line 1. above (if none, enter "None"). Attach a separate disclosure form for each affiliated or subsidiary company that may take part in the performance of this contract. Such disclosure shall be updated to include affiliated or subsidiary companies not previously disclosed that participate in the performance of the contract.

none

7. List all lobbyists whose services were utilized at any stage in this matter (i.e., pre-bid, bid, post-bid, etc.). If none, enter "None." The term "lobbyist" means any and every person or organization retained, employed or designated by any client to influence - or promote a matter before - Nassau County, its agencies, boards, commissions, department heads, legislators or committees, including but not limited to the Open Space and Parks Advisory Committee and Planning Commission. Such matters include, but are

not limited to, requests for proposals, development or improvement of real property subject to County regulation, procurements. The term "lobbyist" does not include any officer, director, trustee, employee, counsel or agent of the County of Nassau, or State of New York, when discharging his or her official duties.

Are there lobbyists involved in this matter?
YES [ ] NO [X]

(a) Name, title, business address and telephone number of lobbyist(s):

none

1 File(s) uploaded: Lobbyist letter.doc

(b) Describe lobbying activity of each lobbyist. See below for a complete description of lobbying activities.

none

1 File(s) uploaded: Lobbyist letter.doc

(c) List whether and where the person/organization is registered as a lobbyist (e.g., Nassau County, New York State):

none

1 File(s) uploaded: Lobbyist letter.doc

8. VERIFICATION: This section must be signed by a principal of the consultant, contractor or Vendor authorized as a signatory of the firm for the purpose of executing Contracts.

The undersigned affirms and so swears that he/she has read and understood the foregoing statements and they are, to his/her knowledge, true and accurate.

Electronically signed and certified at the date and time indicated by:
Jesse Munson [JESSE@MUNSONBOATS.COM]

Dated: 07/14/2026 02:38:38 pm

Title: CEO

The term lobbying shall mean any attempt to influence: any determination made by the Nassau County Legislature, or any member thereof, with respect to the introduction, passage, defeat, or substance of any local legislation or resolution; any determination by the County Executive to support, oppose, approve or disapprove any local legislation or resolution, whether or not such legislation has been introduced in the County Legislature; any determination by an elected County official or an officer or employee of the County with respect to the procurement of goods, services or construction, including the preparation of contract specifications, including by not limited to the preparation of requests for proposals, or solicitation, award or administration of a contract or with respect to the solicitation, award or administration of a grant, loan, or agreement involving the disbursement of public monies; any determination made by the County Executive, County Legislature, or by the County of Nassau, its agencies, boards, commissions, department heads or committees, including but not limited to the Open Space and Parks Advisory Committee, the Planning Commission, with respect to the zoning, use, development or improvement of real property subject to County regulation, or any agencies, boards, commissions, department heads or committees with respect to requests for proposals, bidding, procurement or contracting for services for the County; any determination made by an elected county official or an officer or employee of the county with respect to the terms of the acquisition or disposition by the county of any interest in real property, with respect to a license or permit for the use of real property of or by the county, or with respect to a franchise, concession or revocable consent; the proposal, adoption, amendment or rejection by an agency of any rule having the force and effect of law; the decision to hold, timing or outcome of any rate making proceeding before an agency; the agenda or any determination of a board or commission; any determination regarding the calendaring or scope of any legislature oversight hearing; the issuance, repeal, modification or substance of a County Executive Order; or any determination made by an elected county official or an officer or employee of the county to support or oppose any state or federal legislation, rule or regulation, including any determination made to support or oppose that is contingent on any amendment of such legislation, rule or regulation, whether or not such legislation has been formally introduced and whether or not such rule or regulation has been formally proposed.

15806 Preston Place, Burlington, WA USA 98233
Phone: 360 707 2752 Fax: 360 707 2842
www.munsonboats.com

July 14, 2026

The William E. Munson Company Inc. Board of Directors:

Jesse Munson - CEO
23832 110th Pl. W
Woodway WA 98020

Stephanie Munson – Secretary Treasurer
23832 110th Pl. W
Woodway WA 98020

Jon Wise - President
820 Vista Dr.
Camano Island WA 98282

REQUISITION

RQPD26000154 25/AUG/2026

VENDOR:
WILLIAM E. MUNSON COMPANY INC.
15806 PRESTON PLACE

BURLINGTON WA 98233

TEL:(360)707-2752
FAX:( ) -

REQUISITIONER:
PD POLICE DEPARTMENT
MARINE BUREAU
FOOT OF FIRST AVENUE
EAST ROCKAWAY NY 11518
POLOCHER/CR14/FED/208
TEL:(516)573-4450
FAX:( ) -

ITEM	DESCRIPTION	QTY	U/M	UNIT COST	TOTAL
001	120-23	1.00	EA	974,347.0000	974,347.00

BOATS (OVER 21 FT.)

(1) MUNSON 36' PACKCAT WELDED ALUMINUM CATAMARAN LANDING CRAFT WITH ALL ITEMS AS SPECIFIED IN ATTACHED PRICE QUOTE#6758. INCLUDES ALL ACCESSORIES AND SHIPPING.

TERMS: 50% DUE ON COMPLETION OF ALUMINUM HULL.
50% DUE NET 30 UPON DELIVERY OF VESSEL.

ESTIMATED TOTAL: 974,347.00

REQ HEADER ENT 2100

1. REQUEST TO PURCHASE THIS VESSEL FOR MARITIME PATROL, DIVE OPERATIONS AND IED MITIGATION.
2. MARINE BUREAU MEMBERS AND DIVERS WILL UTILIZE THIS VESSEL/WORK PLATFORM TO TRANSPORT PERSONNEL, EQUIPMENT AND SPECIAL TOOLS TO SUCCESSFULLY INITIATE PATROL, DIVE AND IED MITIGATIONS.
3. N/A.
4. MARINE BUREAU IS IN NEED OF A LANDING CRAFT VESSEL TO EXPAND OUR CAPABILITIES.
5. N/A.
6. N/A.

VENDOR CONTACT JESSE@MUNSONBOATS.COM
THE ABOVE IS IN REAGRDS TO MB-14-2026
PORT SECURTTY GRANT#EMW-2024-PU-05403
AFI# 25-007
SOLE SOURCE APPROVAL- ROBERT CLEARY- -1/23/2026

Quote: 6758

15806 Preston Place, Burlington WA USA 98233
Phone: 360 707 2752 Fax: 360 757 2442
www.munsonboats.com Jesse@MunsonBoats.com

March 24, 2026
Specification And Quotation
For One
36' PackCat Landing Craft
For
Nassau County Police
Contact: Joe Locher
Phone: 516-639-7620
Email: jlocher@pdcn.org

OVERVIEW: The following describes a 36' PackCat welded aluminum catamaran landing craft (U.S. Patents D739331S and 8281730B2) 2026 production model. Detailed drawings will be submitted for approval prior to construction. Boat shall exit the factory as a completed vessel, adhering to the following specifications. Pricing is based on raw material costs at time of quote. Pricing is subject to change based on actual material costs at the time of construction.

GENERAL SPECIFICATIONS:

1. Hull Length: 36 feet
2. Beam: 13 feet
3. Transom Deadrise: 24 degrees each hull section
4. Person and Cargo Capacity: 6000 lbs
5. Propulsion: Twin 350hp Honda iST Outboard Motors
6. Fuel Capacity: 250 gallons (Dual 125 gallon tanks)
7. Bow Door Clearance: 96 inches
8. Bottom Plating: 5/16 inch 5086-H116
9. Side Plating: ¼ inch 5086-H116
10. Deck Plating: 3/16 inch 5052-H32
11. Centerline Vertical Keel (CVK): 1/2" x 6" 6061-T6

HULL PACKAGE:

36' PackCat landing craft incorporating two symmetrical longitudinally aligned hull sections with 24° deadrise, a low profile tunnel connecting the two longitudinally aligned hulls, and 96" wide bow door.

The tunnel shall be in the water at rest to add stability and floatation.

Hull shall include watertight structural bulkheads.

8″ welded aluminum inspection hatches shall be installed to provide access to all below deck compartments.

Eight (8) 10″ welded aluminum cleats shall be installed. (4 Per Side)

A ¾″ aluminum double padeye shall be welded on centerline of the bow.

¼″ rolled plate, 7″ radius bow corners shall be installed on the port and starboard sides of the bow door opening.

The transom shall be setup for outboard power and set at 103 degrees off baseline for proper outboard trim

The motor well shall be self-bailing via two 2.5″ pipe drains running out through transom. Drains shall be equipped with rubber flappers to divert water from entering slop well when operating the boat in reverse.

The stern shall incorporate a full width cross seat/locker forward of the motor well. Lockers will house batteries and fuel filter systems and offer general storage. Locker will have two (2) 3/16" welded aluminum weatherproof hatches with 1-1/2″ angle aluminum frame, key lockable 316 series Stainless Steel "T" handle latches, welded 100mm aluminum hinges with grease fitting and Stainless Steel pins, and 1/8″ thick PORON neoprene hatch seal.

316 Series Stainless Steel fastening hardware shall be used throughout the vessel.

WELDING:

The hull and superstructure shall be constructed of marine grade aluminum and MIG welded throughout.

All weld seams in the hull shall be welded 100%, both interior & exterior.

A minimum of 15% helium / 85% argon inert shielding gas mix shall be used for all aluminum welding to ensure proper weld penetration and reduce the occurrence of weld porosity.

Welding shall be performed in accordance with American Welding Society Structural Welding Code for Aluminum.

All surface areas shall be shiny, mill finish, with no grind marks, splatters, or blemishes.

HULL OUTFITTING:

1¼″ Sch 40 pipe safety railings shall be installed 36″ above main deck along port & stbd sides from stern to midship.

Six (6) Open scuppers installed flush with the deck at midship and two (2) large pipe drains in the stern shall create a self-bailing main deck. Drains and scuppers shall be sized and installed in accordance with ABYC deck drainage requirements.

Two (2) 1/4" x 4" Beaching wear plates shall be installed, one on each bow forefoot.

A wave breaker shall be installed on forward hull span between the two catamaran hulls to increase ride comfort.

Two (2) 26" wide side doors shall be installed. Doors shall swing inboard and forward in direction, and lock in the closed position.

One (1) Four way lifting padeyes shall be installed in hull complete with stainless steel wear inserts.

Two (2) 15" x 24" welded aluminum deck hatches shall be installed on the main deck.

One (1) Set of tie down rails shall be installed. Tie down rails consist of 1.25" sch 40 pipe installed above the main deck on port and starboard sides with 4" of clearance below the pipe.

Johnson Duramax DB-503 3" D-rubber fender shall be installed on the gunwale, port and starboard sides. D-rubber shall be permanently attached with a full length capture rail 100% welded to the hull and mechanically fastened on each end to prevent "shrinkage" in cold temperatures. All breaks in the D-Rubber shall be capped with welded aluminum, interruptions shall be flat plate, terminations shall be angled aluminum tubing to create a smooth transition. (Skip welding techniques shall not be used)

Two (2) 7.5 lb Divers Dream zinc anodes, shall be installed on brackets that are welded to the transom.

A bimini top with stainless steel tube framing and marine grade canvas shall be installed over the aft deck.

BOW DOOR OUTFITTING:

A 96 inch wide drop down bow door shall be installed to enable personnel transport.

The hull shall incorporate port and starboard bow lockers framing the door opening.

12V electric-over-hydraulic rams shall be installed to operate the bow door.

The bow door shall be outfitted with two (2) ¾" stainless steel positive locking pin to prevent the bow door from opening while underway.

A replaceable rubber gasket seals the bow door watertight when closed.

The inside face of the bow door shall be double plated for a smooth working surface.

Switches to operate the bow door shall be installed locally and at the main console.

The port and starboard bow door lockers shall be extended aft and incorporate weatherproof lockable hatches to provide additional storage.

An auxiliary bow steering station shall be installed at the rear of an extended bow door locker.

A the bow door shall be set up to allow the davit winch to serve as a backup in the event of

hydraulic failure.

FUEL SYSTEM:

Dual 125 gallon non-integral fuel tanks shall be installed complete with fill, vent, 12V sender and fuel level gauge on console. Fuel tanks shall be built from ¼" plate, pressure tested to 4 psi and bolted into hull framing using doublers and stainless steel fasteners.

Two (2) fuel filter/water separators shall be installed complete with shut off valves. Filters to be Racor 320 or equivalent.

Fuel system shall comply with U.S. diurnal emission standards.

12V 140 CFM bilge blower installed in fuel tank compartment.

WHEELHOUSE:

A 100" wide x 120" long x 80" tall walk around wheelhouse shall be installed aft on centerline. House is constructed from .190" plate and framed as per std. house framing using 1.5" square tube.

House is equipped with three Diamond Seaglaze "full glass" doors, port and starboard 24" sliding side door and an aft hinged door. Doors shall have locks and be keyed alike.

House has aluminum framed sliding windows installed forward on port and starboard sides, remaining windows are fixed aluminum framed style.

The wheelhouse windows shall be tinted, windshields to remain clear.

Black out shades shall be supplied for the windows.

"Diamond Heat" window heaters shall be integrated into the forward windshields.

The wheelhouse roof is outfitted with 1" pipe top railing.

The main wheelhouse roof will be outfitted with two (2) "Lewmar 10" x 10" roof hatches

The house deck is non-skid coated.

The main wheelhouse back will be fitted with a 1" pluggable drain.

An aluminum control console with angled face and an overhead radio bar shall be installed in the wheelhouse on the starboard side. The design will allow the operator to easily steer while both sitting & standing.

Access to the console shall be provided by a flush mounted bolt on access panel on the forward side of the console for ease of maintenance and future upgrades.

A Co-pilot console with storage shall be installed opposite the main console.

The aft side of the console shall include 3/16" welded aluminum weatherproof hatches with 1

-1/2" angle aluminum frame, key lockable 316 series Stainless Steel "T" handle latches, welded 100mm aluminum hinges with grease fitting and Stainless Steel pins, and 1/8" thick PORON neoprene hatch seal.

Two (2) Cup holders shall be installed at the console.

Two (2) Aluminum tables shall be mounted on folding brackets and installed in the wheelhouse. A rubber T-handle latch shall hold each table secure in the down position when not in use.

Two (2) retractable computer monitor mounts installed (universal monitor mount). One at the helm and one at the co-pilot work station.

Ceiling mounted stowage / electronics consoles shall be installed in the wheelhouse.

The wheelhouse interior shall be insulated with 1" marine grade insulation and paneled with 1/8" white paneling with sound deadening liner.

A 1" pipe overhead grab rail shall be installed running lengthwise on centerline inside the wheelhouse.

Pipe ladder rungs shall be welded to the side of the wheelhouse to provide access to the roof.

Port and starboard storage lockers will be welded to the front of the wheelhouse down at the main deck level under the windshield with locking access lids

One (1) 3" cable pass-through shall be installed in the wheelhouse. Pass-through shall include plug for watertight seal when not in use.

Two (2) Shoxs 2000 seat shall be installed in the wheelhouse in the pilot and co-pilot positions.

A settee consisting of a single two person bench and table shall be installed in the wheelhouse along the aft bulkhead facing forward. Storage to be provided in seat locker via lift up seat cushion.

One (1) Seat/storage locker with 3" seat cushion and backrest with 2" back cushion shall be installed in the wheelhouse aft of the co-pilot position. Access to the storage compartment is provided through a lift up seat cushion.

Two (2) Exterior lockers shall be installed on the aft wheelhouse bulkhead. The locker storage compartment is accessed through a 3/16" welded aluminum weatherproof hatch with 1-1/2" angle aluminum frame, 316 series stainless steel "T" handle latch, welded 100mm aluminum hinges with grease fitting and stainless steel pins, and 1/8" thick PORON neoprene hatch seal.

FORWARD "Trunk Cabin":

A full width "trunk cabin" measuring 30" fore & aft shall be installed on the forward bulkhead of the main wheelhouse. Access to the trunk cabin is located between the pilot and co-pilot consoles. The trunk cabin shall feature a Zolotone coated interior.

HEAD SYSTEMS:

An all aluminum stand up Head Compartment with lockable door shall be installed. Head compartment installation includes:

One (1) lockable door
One (1) portlight
One (1) toilet paper holder
One (1) 12V LED red/white dome light

Privacy curtains shall be installed on all windows as needed.

The head door shall be a Diamond Sea Glaze swinging aluminum door, be keyed same as main cabin doors, and open to the aft deck.

A Dometic self-contained head system shall be installed. The toilet includes an integral 6.5 gallon holding tank and shall be plumbed to and overboard pump out and vent. Model to be M65-5000 or equivalent.

Head is freshwater flush and shall be tied into the freshwater supply.

WATER SYSTEMS:

25 gallon polyethylene tank suitable for potable water shall be installed below decks and plumbed for freshwater use.

Freshwater plumbing shall be supplied via a 12V, 4.5 GPM Flojet pressure pump to maintain constant, uniform water flow at water fixtures.

12V freshwater wash down pump system shall be installed complete with spigot, 25' hose coil, and nozzle. Storage for the hose coil shall be supplied. Pump is a 3.5 gpm Johnson "Aqua Jet" or equivalent.

An additional outlet with 25' coiled hose shall be supplied with the washdown system.

HEATING AND AIR CONDITIONING:

A Webasto AT40 forced air diesel fired cabin heater rated for 12,000 BTU's shall be installed complete with thermostat and outlets for windshield defrost and cabin heat. Fuel to be supplied by a 5 gallon diesel tank.

A120V Dometic Brisk II air conditioner with heating element & control knob shall be installed on the wheelhouse roof. The A/C unit runs via genset or shorepower.

DAVIT:

A 4" pipe davit rated at 1,000lbs. working load shall be installed. Davit is 80" high with 42" reach, swivels 360 degrees and is lockable every 90 degrees.

A maximum capacity plaque shall be installed on the davit.

A Thern stainless steel manual hand crank winch shall be installed on the davit. Winch is spooled with 30' of stainless steel line terminating with an eyelet and shackle.

A glass-reinforced nylon open face snatch block rated at 700lbs. deadweight shall be supplied.

ANCHORING:

Vessel will include an anchor package consisting of one (1) 33lb Rocna anchor, 30′ of 3/8" galvanized chain and 150′ of 5/8" 3-strand Proset anchor line.

Proper storage for the anchor shall be provided.

TOWING:

A 4″ Sch 80 aluminum pipe tow bitt with 1″ 316 stainless crucifix pin shall be installed aft on centerline. The towing bitt shall be sized to accept one round turn and three figure eight's of the towline.

A line parting knife shall be mounted in the vicinity of the tow bit.

A tow line guide shall be integrated into the motor guard.

A tow line spool shall be installed at/on the tow bit.

150' of 1/2" synthetic 12-strand tow line with a 12" eye splice shall be supplied.

DIVING:

Four (4) Roll Control tank holders shall be installed to accommodate compressed air tanks (scuba tanks).

Two (2) Removable flip out dive ladders shall be installed on the bow door.

Two (2) Removable side door dive ladders shall be included with the vessel. Storage for ladders will be provided.

STERN GUARDS AND PLATFORMS:

A fixed aluminum guard made from 2" aluminum pipe shall be welded to the transom to protect the outboard motors.

A small welded aluminum swim step with non-skid shall be installed on the transom.

ELECTRICAL SYSTEM:

The vessel's electrical system shall be 12vDC and 240/120vAC.

All electrical cable shall be marine grade copper tinned boat cable and labeled for each circuit.

Cables should be routed in wireways wherever possible. Wherever exposed to potential damage, cables shall be protected with rubber.

Electrical cable shall be sized in accordance with the American Boat & Yacht Council.

All electrical cables shall be marked in accordance with the markings in electrical drawings.

All electrical switches shall be of a heavy-duty type and properly insulated.

The electrical system shall be grounded. In any case the hull shall not be used as part of a galvanic feeding loop.

GENERATOR:

A Northern Lights 5 kilowatt diesel generator shall be installed under deck complete with ventilation and a flush and guttered deck hatch.

A remote start/stop control panel shall be installed near the console.

Generator to have 1-1/2" raw-water cooled exhaust complete with water-lock muffler. Vented loop to be installed as needed in the raw water exhaust cooling line to prevent siphoning.

A 3/4" raw water pickup shall be installed with electric-actuated Banjo ball valve, pickup screen and sea strainer. Top of sea strainer to be located at least 6" above the resting waterline.

One (1) Racor 110A (or equivalent) diesel fuel filter/water separator with metal bowl and shutoff valve shall be installed for the generator fuel supply.

Generator battery bank consisting of a single battery with on/off switch shall be installed. Battery bank will have a combination switch to allow the generator to be started off the main engine batteries in the event the generator battery is discharged.

A 25 gallon non-integral diesel fuel tank shall be installed complete with fill, vent, 12V sender and fuel level gauge on console. Gauge shall have a placard reading "Diesel" installed. Fuel tank shall be pressure tested to 4 psi and bolted into the hull using brackets and stainless steel fasteners.

240V/120V AC ACCESSORIES:

A 240v 60hz 50amp shorepower circuit with transfer switch (for use with generator) shall be installed in the vessel with a Blue Seas Systems 360 series 1210 main breaker panel and ProSafe 60amp galvanic isolator. This includes One (1) 120v AC 15 amp GFI Duplex outlet. A 50 amp shore power cable shall be supplied.

A True Charge II 20 amp battery charger shall be installed.

Four (4) 120VAC 15 amp GFCI Duplex outlets shall be installed.

Outlet shall be installed with placard indicating the outlet supplies "120VAC/60Hz" power.

12V DC ACCESSORIES:

Two (2) 12V 8 position distribution panels shall be installed on the console.

A pair of 12V self-parking windshield wipers shall be installed on the forward windshields. Each wiper assembly consists of a fully sealed, marine rated wiper motor fitted with a heavy duty

pantographic wiper arm and matching blade.

Four (4) 12V fans with a 3-speed setting shall be installed overhead.

One (1) 12V air trumpet horn shall be installed with momentary push button on dash.

One (1) Dual USB outlet with weather cover shall be installed in the vessel. Outlet has one USB-A and one USB-C port.

One (1) Raw water wash down pump system shall be installed complete with spigot, 25' hose coil, and nozzle. Storage for the hose coil shall be supplied. Pump is a 5.0 gpm Jabsco "HotShot" or equivalent.

Six (6) 12V 2200 GPH bilge pumps shall be installed with auto float switch.

LIGHTING:

LED navigation lights shall be installed to USCG requirements.

Four (4) 12V LED red/white dome lights shall be installed in the wheelhouse.

Six (6) Rigid Industries D-Series Pro 3" LED Flood lights shall be installed on the wheelhouse roof. Each is rated at 3168 lumens of output.

Two (2) GoLight 20204GT LED search light with 544,000 candle power shall be installed on the wheelhouse roof with a control pad at the console.

One (1) Whelen Century 23" LED blue light bar shall be installed on the wheelhouse roof. Controls for the light bar shall be installed at the console.

NAVIGATION ELECTRONICS:

A Furuno NavNet TZTouch3 TZT12F 12" chart plotter shall be installed on the vessel. This includes local area maps, external GPS antenna, side-scanning transom mounted transducer, and NMEA 2000 network. A Furuno NavNet ethernet hub shall be installed.

An additional Furuno NavNet TZTouch3 TZT12F 12" touchscreen display shall be installed on the vessel for dual-screen setup.

A Furuno DRS2DNXT 19" solid state radar dome shall be installed. This system features a 25W, 48 nautical mile range with 5.2 degree beam width and variable rotation speed (24/36/48 rpm). Solid-state radar possesses advanced doppler-effect motion tracking capabilities, better resolution, and improved features.

A Furuno FM4800 VHF marine radio with AIS receiver shall be installed complete with Shakespeare antenna and stainless steel adjustable antenna mount.

A customer-supplied radio shall be installed in the vessel. installation includes Munson-supplied Shakespeare antenna and lily mount.

A Whelen 295 SL100 siren system with 100W speaker horn shall be installed on the vessel. The

system controller and microphone shall be installed at the console.

A FLIR M-Series, model M364C, multi-spectral (thermal and low-light) camera shall be installed.

A Raymarine AIS5000 class A AIS encrypted transceiver shall be installed with dedicated GPS antenna. This AIS transceiver is reserved exclusively for government vessels, including first responders, search and rescue, and law enforcement agencies.

The M364C has a thermal detection range of 1.7 nautical miles for a 30-foot vessel and 0.5 nautical miles for a human.

The unit has the following features:

- 640 x 512 pixel thermal imaging.
- High Definition 1920 x 1080 low-light imaging.
- Optical color overlay on thermal imaging for better night identification.
- 4x digital zoom for thermal imaging.
- 30x optical and 12x digital zoom for visible imaging.
- 360 degree continuous pan and 90 degree tilt.
- Automatic window defrost.
- Radar integration for target tracking.
- Gyro-stabilized gimbal allows the camera to auto-pan and tilt with ocean movement.

A joystick control pad shall be installed at the dash. Imaging shall be fed to and displayed on the multifunction display.

The radar dome shall be mounted on an aluminum plate radar arch.

A Sionyx nightwave marine night vision camera shall be installed on the vessel with the imaging displayed on the multifunction display.

Boat shall have back up camera with display monitor at the pilot station.

OUTFITTING AND SAFETY EQUIPMENT:

A carbon monoxide detector shall be mounted in the wheelhouse.

Three (3) Kidde 10lb. dry chemical fire extinguishers or equivalent shall be installed with mounting brackets. Lockers housing extinguishers shall be marked via USCG approved placard.

This extinguisher has a USCG B-II, Class 4-A:60B:C rating.

One (1) Fireboy MA2 Series automatic engine room flooding fire extinguishing system to be installed with manual pull cable at operator console.

One (1) 24" life ring with throw line shall be installed with mounting bracket.

A spare Honda 350 iST outboard motor shall be supplied with the vessel. (Right hand rotation)

A spare left hand rotation lower unit shall be supplied with the vessel.

Twelve (12) Mustang ice commander suits shall be supplied with the vessel.

CBRNE:

A "Mini Rad-V" vehicle mounted sensitive radiation detector with alarm shall be installed on the vessel.

PAINT, GRAPHICS, AND MARKINGS:

Matson Industrial Floor Grip Non-skid deck coating shall be applied to all main deck walking surfaces. (Color- 223 Gray)

Cabin interior components painted Zolatone silver gray.

Vinyl wrap shall be applied to the cabin exterior. (Details and color TBD)

E-Paint anti-fouling bottom paint system with epoxy barrier coat applied to 4" above waterline. (Black as standard.)

Top side of hull to remain bare aluminum finish.

Non-reflective vinyl graphics shall be applied. (Specifics to be determined after order has been received)

"Sharkhide" Aluminum Protectant shall be applied to the gunnel tops and hull exterior.

A U.S. Coast Guard rating placard shall be installed at the dash.

A bow door warning placard shall be installed adjacent to the bow door.

Bow door switch to be mounted on a bow door switch placard.

Secondary bow door switch to be mounted on a bow door switch placard.

PROPULSION:

Twin 350 HP Honda iST four-stroke outboard engines (Models BF350AUDO and BF350AUCDA) with 30" shafts and stainless steel propellers shall be installed.

An engine start battery bank shall be installed. Banks are connected by selector switches, allowing each engine to be started via either bank or with both banks in parallel.

The main helm station shall be installed with Honda Intelligent Shift & Throttle (iST) Binnacle Control, dual Honda HD-5 digital displays, twin engine trim panel, twin-engine key switch and emergency shutoff lanyard.

SeaStar Optimus 360 Electronic Power Steering (EPS) shall be installed with electronic helm, joystick, CanTrak color display and SeaStation GPS anchoring. Autopilot functionality is included automatically with the Optimus 360 package.

The second station shall be installed on the aft wheelhouse bulkhead and outfitted with a SeaStar

Optimus 360 Electronic Helm, Joystick and CanTrak color display.

SEA TRIALS:

Vessel shall undergo testing (Sea Trials) after completion to verify proper function and performance of all systems.

SHIPPING:

Shipping of the completed vessel to Rockaway, NY shall be provided.

Owner/Buyer to be responsible for any off loading charges.

DOCUMENTATION & KEYS:

One (1) Operation & Maintenance Manual shall be supplied with the craft. Includes OEM technical literature for all supplied equipment, operator/safety instructions, as-built boat drawings, as-built electrical system drawings.

Vessel to include two (2) complete key sets. (Doors, Hatches, Ignition)

Original Bill of Sale and Manufacturer's Statement of Origin documents shall be delivered with the boat conveying free and clear title(s).

TOTAL PRICE, F. O. B. ROCKAWAY, NY:___$974,347.00

For William E. Munson Company,

Jesse Munson, CEO

Nassau County Police Department

BRUCE A. BLAKEMAN
NASSAU COUNTY EXECUTIVE

1490 Franklin Avenue
Mineola, New York 11501
(516) 573-8800

PATRICK J. RYDER
POLICE COMMISSIONER

Date: December 23, 2025

To: Nassau County Division of Purchasing

From: Lieutenant Adam J. Fischer, Serial No. 8602, Shield No. 372, Commanding Officer, Marine Bureau.

Subject: SOLE SOURCE JUSTIFICATION-PATENTED HULL DESIGN AND STANDARDIZATION OF FLEET WITH SURROUNDING PARTNER AGENCIES

The Nassau County Police Department requests sole source approval for the purchase of (1) Munson Packcat 36 foot landing craft catamaran boat. The requested purchase is for use by the Marine Bureau to facilitate maritime law enforcement, maritime hazardous device mitigation and dive operations. Funding for the requested vessel has been approved utilizing both a 2024 Port Security Grant Award and NCPD Asset Forfeiture funding.

Extensive research into various boat manufacturers was conducted and only the Munson boat was able to meet all of the specifications required by the NCPD Marine Bureau. The landing craft catamaran style boat is needed for safety during dive operations and Munson Boats hold a US design patent # USD739,331S for the Packcat landing craft catamaran style hull which is requested. This patented hull design offers greater stability for personnel to operate on and requires less water depth compared to other hull designs available in the market.

The NCPD Marine Bureau dive team routinely trains with and conducts missions with both the New York State Police and the Federal Bureau of Investigation who both utilize Munson Packcat landing craft catamaran boats in their fleets. This purchase would accomplish a standardization of dive boat fleets between these agencies and ensure similar training similarities, similar ride and handling characteristics, electronics and mechanical systems compatibility and provide overall increased safety to members of all agencies.

If another manufacturers vessel is considered for purchase for this project, there would likely be an increase in training and personnel costs due to increased training timelines and the complexities having to utilize multiple different types of vessels and systems.

Munson Boats specialize in producing vessels built for police, military and other governmental agencies. They are the sole manufacturer and seller of these vessels and do not sell through distributors.

Attachment:

- Sole Source letter from Munson Boats

Thank you for your consideration.
Respectfully,

Lt. Adam J. Fischer
Commanding Officer, Marine Bureau
Nassau County Police Department

15806 Preston Place, Burlington, WA USA 98233
Phone: 360 707 2752 Fax: 360 707 2842
www.munsonboats.com

September 8. 2026

Re: Sole Source for Munson Boats

To Whom It May Concern:

The William E. Munson Company is the sole manufacturer and seller of Munson Boats. Munson Boats are not sold through distributors or dealers as our boats are specialized and built to order for each client. Munson Boats are sold from only one source – the William E. Munson Company located in Burlington, WA.

Sincerely,

Jesse Munson, CEO
William E. Munson Company
jesse@munsonboats.com

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/09/2026

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

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

PRODUCER		
Trucordia Insurance Services, LLC Trucordia Ins Svs, LLC DBA: PO Box 31038 Bellingham WA 98228	CONTACT NAME: Barbara Noll PHONE (A/C, No, Ext): (800) 540-2258 FAX (A/C, No): E-MAIL ADDRESS: barb@belterinsurance.com	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A : National Casualty Company	11991
INSURED WILLIAM E MUNSON COMPANY, INC, DBA: Munson Boats 15806 PRESTON PLACE BURLINGTON WA 98233	INSURER B : Markel America Insurance Company	28932
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** 26-27 Master **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. *LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. LIMITS SHOWN ARE INCLUSIVE OF AMOUNTS REQUESTED BY THE CERTIFICATE HOLDER AND MAY NOT REFLECT POLICY LIMIT AMOUNTS IN EXCESS OF THOSE REQUESTED. ***Not Applicable in WY**

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR ☒ Marine General Liability GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC ☒ OTHER: Quota Share 50%	Y		OMO4815134	08/30/2026	08/30/2027	EACH OCCURRENCE	$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 1000000
							MED EXP (Any one person)	$ 10,000
							PERSONAL & ADV INJURY	$ 1,000,000
							GENERAL AGGREGATE	$ 2,000,000
							PRODUCTS - COMP/OP AGG	$ 2,000,000
								$
A	AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ONLY ☒ NON-OWNED AUTOS ONLY			RBO0005596	08/30/2026	08/30/2027	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
							Uninsured motorist combined single	$ 1,000,000
A	UMBRELLA LIAB ☒ OCCUR ☒ EXCESS LIAB ☐ CLAIMS-MADE DED RETENTION $			XLO0037400	08/30/2026	08/30/2027	EACH OCCURRENCE	$ 5,000,000
							AGGREGATE	$ 5,000,000
							Quota Share 50%	$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N ☐ (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A					☐ PER STATUTE ☒ OTH-ER	WA Stop-Gap
							E.L. EACH ACCIDENT	$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
A	Builders Risk P&I, Inventory(Cargo)			OMO4815134	08/30/2026	08/30/2027	BR - Any One Vessel P&I Limit/Ded Inventory Limit/Ded	2,500,000/5,000 1,000,000/None 2,000,000/10,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Per policy forms and conditions: Includes Blanket Additional Insured endrs. # OM-38 (12-15), Primary Non-Contributory Endrs. # OM-79(3/15), and Completed Operations Endrs # OM-P-9

Insurer B-Markel American Insurance Company.

Policy # 9CE7058-0 8/30/2026-8/30/2027 50% Quota Share Marine General Liability.

Policy #9CE7059-0 8/30/2026-8/30/2027 50% Quota Share $5M Excess

CERTIFICATE HOLDER

Nassau County
1 West Street
Mineola NY 11801

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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Nassau County Shared Services,
Office of Purchasing

Staff Summary A-68-2026

RECEIVED
NASSAU COUNTY
CLERK OF THE LEGISLATURE
2026 OCT 16 A 11:08

Subject: Fleetfocus M5 & Fuelfocus Software Maintenance and Support (RQIT26000146)	Date: August 19, 2026
Department: Department of Shared Services, Office of Purchasing	Vendor Name: Assetworks in.
Department Head Name: Melissa Gallucci	Contract Number: A-68-2026
Department Head Signature: Melissa Gallucci	Contract Manager Name: Timothy Funaro

Internal Approvals			
Date & Init.	**Approval**	**Date & Init.**	**Approval**
10/8/2026	CPO	AP 10/13/26	Budget
10/8/2026 M. Deroy	County Atty.		County Exec.
10/8/2026 SM	Insurance	10/16/26	

Material Adverse Information Identified? [Yes __/No _X_] (If yes, attach memo.)

Narrative

Purpose: To award and execute a purchase order between the Nassau County Department of Information Technology and Assetworks for Fleetfocus M5 & Fuelfocus Software Maintenance and Support.

Discussion: The Department of Shared Services, Office of Purchasing, has determined that this is a sole source procurement. This request is for the annual AssetWorks FleetFocus M5 & FuelFocus software maintenance & support renewal used by DPW & PD. This software is for the work order system used by all Public Works Fleet maintenance staff for recording maintenance labor, parts, and vehicle inventory. In addition, this software is required for any Nassau County vehicle including police to get fuel through the automated fuel system. AssetWorks is the sole source provider and hold all rights to sales, distribution, implementation and development services, software licenses, maintenance and support to the entirety of AssetWorks suite of software and hardware solutions.

Impact on Funding: The maximum amount authorized under this purchase order shall be One Hundred Four Thousand Five Hundred Fifteen Dollars and Sixty Five Cents. ($104,515.65) from general funds ITGEN 1430 DE5A5 ITPW00 and ITGEN 1430 DE5A5 ITPDH10.

Recommendation: Department of Shared Services, Office of Purchasing recommends awarding a purchase order to AssetWorks Inc. as the sole source provider.

RULES RESOLUTION

A RESOLUTION AUTHORIZING THE COMMISSIONER OF SHARED SERVICES TO AWARD AND EXECUTE A PURCHASE ORDER BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF THE NASSAU COUNTY DEPARTMENT OF INFORMATION TECHNOLOGY AND ASSETWORKS INC..

WHEREAS, the NASSAU COUNTY DEPARTMENT OF SHARED SERVICES, OFFICE OF PURCHASING is representing to the Rules Committee that the firm Assetworks Inc. is a sole source provider and meets all specifications for the service described in the said contract as determined by the Commissioner of Shared Services.

RESOLVED, that the Rules Committee of the Nassau County Legislature authorizes the Commissioner of Shared Services to award and execute the said Purchase Order with Assetworks Inc..

COUNTY OF NASSAU

INTER – DEPARTMENTAL MEMO

TO: CLERK OF THE COUNTY LEGISLATURE **A-68-2026**

FROM: MELISSA GALLUCCI - COMMISSIONER OF SHARED SERVICES

DATE: AUGUST 19, 2026

SUBJECT: RESOLUTION – THE NASSAU COUNTY DEPARTMENT OF INFORMATION TECHNOLOGY

THIS RESOLUTION IS RECOMMENDED BY THE COMMISSIONER OF SHARED SERVICES TO AUTHORIZE AN AWARD AND TO EXECUTE A PURCHASE ORDER IN THE AMOUNT OF ONE HUNDRED FOUR THOUSAND FIVE HUNDRED FIFTEEN DOLLARS AND SIXTY FIVE CENTS ($104,515.65) ON BEHALF OF THE NASSAU COUNTY DEPARTMENT OF INFORMATION TECHNOLOGY AND ASSETWORKS INC. FOR FLEETFOCUS M5 & FUELFOCUS SOFTWARE MAINTENANCE AND SUPPORT.

THE ABOVE DESCRIBED RESOLUTION AND SUPPORTING DOCUMENTATION ATTACHED HERETO IS FORWARDED FOR YOUR REVIEW, APPROVAL, AND SUBSEQUENT TRANSMITTAL TO THE RULES COMMITTEE FOR INCLUSION IN ITS AGENDA.

Melissa Gallucci

MELISSA GALLUCCI
COMMISSIONER OF SHARED SERVICES

MS: br
ENCL: (1) STAFF SUMMARY
(2) DISCLOSURE STATEMENT
(3) RESOLUTION
(4) BID SUMMARY
(5) BID PROPOSAL
(6) CERTIFICATE OF LIABILITY INSURANCE
(7) RECOMMENDATION OF AWARD
(8) POLITICAL CONTRIBUTION FORM

Business History Form

The contract shall be awarded to the responsible proposer who, at the discretion of the County, taking into consideration the reliability of the proposer and the capacity of the proposer to perform the services required by the County, offers the best value to the County and who will best promote the public interest.

In addition to the submission of proposals, each proposer shall complete and submit this questionnaire. The questionnaire shall be filled out by the owner of a sole proprietorship or by an authorized representative of the firm, corporation or partnership submitting the Proposal.

NOTE: All questions require a response, even if response is "none" or "not-applicable." No blanks.

(USE ADDITIONAL SHEETS IF NECESSARY TO FULLY ANSWER THE FOLLOWING QUESTIONS).

Date: 06/03/2026

1) Proposer's Legal Name: AssetWorks Inc

2) Address of Place of Business: 1001 Old Cassatt Road #204

City: Berwyn State/Province/ Territory: PA Zip/Postal Code: 19312

Country: US

3) Mailing Address (if different):

City: State/Province/ Territory: Zip/Postal Code:

Country:

Phone:

Does the business own or rent its facilities? Rent If other, please provide details:

4) Dun and Bradstreet number: 828548961

5) Federal I.D. Number: 460521049

6) The proposer is a: Corporation (Describe)

7) Does this business share office space, staff, or equipment expenses with any other business?
YES [ ] NO [X] If yes, please provide details:

8) Does this business control one or more other businesses?
YES [ ] NO [X] If yes, please provide details:

9) Does this business have one or more affiliates, and/or is it a subsidiary of, or controlled by, any other business?
YES [X] NO [ ] If yes, please provide details:

Constellation Software Inc (ultimate parent)
Toronto-Dominion Centre, 66 Wellington St W Suite 5300, Toronto, ON M5K 1E6, Canada

10) Has the proposer ever had a bond or surety cancelled or forfeited, or a contract with Nassau County or any other government entity terminated?
YES [ ] NO [X] If yes, state the name of bonding agency, (if a bond), date, amount of bond and reason for such cancellation or forfeiture: or details regarding the termination (if a contract).

11) Has the proposer, during the past seven years, been declared bankrupt?
YES [ ] NO [X] If yes, state date, court jurisdiction, amount of liabilities and amount of assets

12) In the past five years, has this business and/or any of its owners and/or officers and/or any affiliated business, been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency? And/or, in the past 5 years, have any owner and/or officer of any affiliated business been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency, where such investigation was related to activities performed at, for, or on behalf of an affiliated business.
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

13) In the past 5 years, has this business and/or any of its owners and/or officers and/or any affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies? And/or, in the past 5 years, has any owner and/or officer of an affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies, for matters pertaining to that individual's position at or relationship to an affiliated business.
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

14) Has any current or former director, owner or officer or managerial employee of this business had, either before or during such person's employment, or since such employment if the charges pertained to events that allegedly occurred during the time of employment by the submitting business, and allegedly related to the conduct of that business:
a) Any felony charge pending?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

b) Any misdemeanor charge pending?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

c) In the past 10 years, you been convicted, after trial or by plea, of any felony and/or any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

d) In the past 5 years, been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

e) In the past 5 years, been found in violation of any administrative, statutory, or regulatory provisions?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

15) In the past (5) years, has this business or any of its owners or officers, or any other affiliated business had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

16) For the past (5) tax years, has this business failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide details for each such year. Provide a detailed response to all questions checked 'YES'. If you need more space, photocopy the appropriate page and attach it to the questionnaire.

17 Conflict of Interest:

a) Please disclose any conflicts of interest as outlined below. NOTE: If no conflicts exist, please expressly state "No conflict exists."

(i) Any material financial relationships that your firm or any firm employee has that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No conflict exists.

(ii) Any family relationship that any employee of your firm has with any County public servant that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No conflict exists.

(iii) Any other matter that your firm believes may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No conflict exists.

b) Please describe any procedures your firm has, or would adopt, to assure the County that a conflict of interest would not exist for your firm in the future.

AssetWorks is a subsidiary of a publicly traded corporation on the Toronto stock exchange and all disclosures are required under Canadian Securities Law for its ultimate parent; Constellation Software Inc.

A. Include a resume or detailed description of the Proposer's professional qualifications, demonstrating extensive experience in your profession. Any prior similar experiences, and the results of these experiences, must be identified.

Have you previously uploaded the below information under in the Document Vault?
YES [X] NO [ ]

Is the proposer an individual?

YES [ ] NO [X] Should the proposer be other than an individual, the Proposal MUST include:

i) Date of formation;

12/23/2021

ii) Name, addresses, and position of all persons having a financial interest in the company, including shareholders, members, general or limited partner. If none, explain.

No one person has a larger than 5% interest in the corporation.

iii) Name, address and position of all officers and directors of the company. If none, explain.

1 File(s) uploaded: AssetWorks Inc is a standalone subsidiary and wholly owned by Constellation Software Inc.docx

iv) State of incorporation (if applicable);

DE

v) The number of employees in the firm;

253

vi) Annual revenue of firm;

48000000

vii) Summary of relevant accomplishments

AssetWorks Inc is the leading provider of enterprise asset maintenance management software solutions.

viii) Copies of all state and local licenses and permits.

B. Indicate number of years in business.

45

C. Provide any other information which would be appropriate and helpful in determining the Proposer's capacity and reliability to perform these services.

AssetWorks Inc was founded in 1979 as Control Software Inc and in 2005 was purchased by Constellation Software Inc and renamed 'AssetWorks Inc.'

D. Provide names and addresses for no fewer than three references for whom the Proposer has provided similar services or who are qualified to evaluate the Proposer's capability to perform this work.

Company	City of New York		
Contact Person	Dan Krantz		
Address	One Center Street- 17th Floor		
City	New York	State/Province/Territory	NY
Country	US		
Telephone	(212) 386-0377		
Fax #			
E-Mail Address	dkrantz@dcas.nyc.gov		

AssetWORKS

AssetWorks Inc is a standalone subsidiary and wholly owned by Constellation Software Inc., the ultimate parent. AssetWorks Inc does **not** have a Board of Directors but does maintain the following person as authorized signatory solely for AssetWorks Inc:

Greg Richards, General Manager

AssetWorks Inc
1001 Old Cassatt Road, Suite 204
Berwyn, PA 19312

Home address:

3932 Broadmoor Loop, Broomfield, CO 80023

No one person owns more than 5% of the ultimate parent; Constellation Software Inc. and the Board of Directors are as follows:

John Billowits (Chairman)

Mark Miller (President of Constellation Software)

Jamal Baksh (Chief Financial Officer)

Lawrence Cunningham (Vice Chairman)

Claire Kennedy (Independent Director)

Robert Kittel (Director)

Donna Parr (Independent Director)

Andrew Pastor (Director)

Laurie Schultz (Director)

Company	SEPTA		
Contact Person	Justin Benante		
Address	1234 Market Street		
City	Phila	State/Province/Territory	PA
Country	US		
Telephone	(215) 580-7022		
Fax #			
E-Mail Address	jbenante@septa.org		

Company	State of New Jersey		
Contact Person	Jenise Steppe		
Address	P.O. Box 211		
City	Trenton	State/Province/Territory	NJ
Country	US		
Telephone	(609) 292-0795		
Fax #			
E-Mail Address	Jenise.Steppe@treas.nj.gov		

I, Lynn Sons, hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Lynn Sons, hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Name of submitting business: AssetWorks Inc

Electronically signed and certified at the date and time indicated by:
Lynn Sons LYNN.SONS@ASSETWORKS.COM

Compliance Manager
Title

06/04/2026
Date

COUNTY OF NASSAU

POLITICAL CAMPAIGN CONTRIBUTION DISCLOSURE FORM

1. Has the vendor or any corporate officers of the vendor provided campaign contributions pursuant to the New York State Election Law in (a) the period beginning April 1, 2016 and ending on the date of this disclosure, or (b), beginning April 1, 2018, the period beginning two years prior to the date of this disclosure and ending on the date of this disclosure, to the campaign committees of any of the following Nassau County elected officials or to the campaign committees of any candidates for any of the following Nassau County elected offices: the County Executive, the County Clerk, the Comptroller, the District Attorney, or any County Legislator?

YES [ ] NO [X] If yes, to what campaign committee?

Electronically signed and certified at the date and time indicated by:
Lynn Sons [LYNN.SONS@ASSETWORKS.COM]

Dated: 06/03/2026 07:54:48 am

Vendor: AssetWorks

Title: Compliance Manager

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: Greg Richards
Date of birth: 03/30/1969
Home address: 3932 Broadmoor Loop
City: Broomfield State/Province/Territory: CO Zip/Postal Code: 80023
Country: US

Business Address: 1001 Old Cassatt Rd, Suite 204
City: Berwyn State/Province/Territory: PA Zip/Postal Code: 19312
Country US
Telephone: 6106879202

Other present address(es):
City: Berwyn State/Province/Territory: PA Zip/Postal Code: 19312
Country: US
Telephone: 6106879202

List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President
Chairman of Board
Chief Exec. Officer
Chief Financial Officer
Vice President
(Other)
Treasurer
Shareholder
Secretary
Partner

Type Other
Description General Manager
Start Date 05/02/2012

3. Do you have an equity interest in the business submitting the questionnaire?
YES [ ] NO [X] If Yes, provide details.

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?
YES [ ] NO [X] If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?
YES [ ] NO [X] If Yes, provide details.

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?
YES [ ] NO [X] If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:
   a. Been debarred by any government agency from entering into contracts with that agency?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?
YES [ ] NO [X] If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.

a. Is there any felony charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

b. Is there any misdemeanor charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

c. Is there any administrative charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

f. In the past 5 years, have you been found in violation of any administrative or statutory charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

11. In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

12. In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

13. For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?

YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

I, Greg Richards, hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Greg Richards, hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

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AssetWorks, Inc

Name of submitting business

Electronically signed and certified at the date and time indicated by:
Greg Richards GREG.RICHARDS@ASSETWORKS.COM

General Manager

Title

06/09/2026 06:57:38 pm

Date

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: Lynn Sons
   Date of birth: 03/13/1962
   Home address: 7 Summit Drive
   City: Bryn Mawr State/Province/Territory: PA Zip/Postal Code: 19010
   Country: US

   Business Address: 1001 Old Cassatt Rd, Suite 204
   City: Berwyn State/Province/Territory: PA Zip/Postal Code: 19312
   Country US
   Telephone: 6106879202

   Other present address(es):
   City: Berwyn State/Province/Territory: PA Zip/Postal Code: 19312
   Country: US
   Telephone: 6106879202

   List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President		Treasurer	
Chairman of Board		Shareholder	
Chief Exec. Officer		Secretary	
Chief Financial Officer		Partner	
Vice President			
(Other)			

Type Other
Description Compliance Manager
Start Date 05/02/2012

3. Do you have an equity interest in the business submitting the questionnaire?
   YES [ ] NO [X] If Yes, provide details.

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?
YES [ ] NO [X] If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?
YES [ ] NO [X] If Yes, provide details.

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?
YES [ ] NO [X] If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

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   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

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YES [ ] NO [X] If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

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e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

f. In the past 5 years, have you been found in violation of any administrative or statutory charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

11. In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

12. In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

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YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

I, Lynn Sons, hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Lynn Sons, hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

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AssetWorks Inc

Name of submitting business

Electronically signed and certified at the date and time indicated by:
Lynn Sons LYNN.SONS@ASSETWORKS.COM

Compliance Manager

Title

10/07/2026 11:44:07 am

Date

Condensed Consolidated Interim Financial Statements
(In U.S. dollars)

CONSTELLATION SOFTWARE INC.

For the three months ended March 31, 2026 and 2025
Unaudited

CONSTELLATION SOFTWARE INC.

Condensed Consolidated Interim Statements of Financial Position

(In millions of U.S. dollars, except per share amounts. Due to rounding, numbers presented may not foot.)

Unaudited

		March 31, 2026		December 31, 2025
Assets				
Current assets:				
Cash and cash equivalents	$	3,010	$	3,089
Accounts receivable		1,630		1,467
Unbilled revenue		478		450
Inventories		83		66
Other assets (note 6)		755		726
		5,956		5,798
Non-current assets:				
Property and equipment		239		241
Right of use assets		390		384
Deferred income taxes		369		355
Investments in associates (note 5)		683		655
Other assets (note 6)		425		345
Intangible assets (note 7)		8,907		8,388
		11,013		10,368
Total assets	$	16,969	$	16,167
Liabilities and Shareholders' Equity				
Current liabilities:				
Debt with recourse to Constellation Software Inc. (note 8)	$	-	$	-
Liability of CSI under the IRGA (note 8)		655		775
Debt without recourse to Constellation Software Inc. (note 9)		585		591
Accounts payable and accrued liabilities		1,759		1,941
Dividends payable (note 12)		21		21
Deferred revenue		2,891		2,215
Provisions (note 10)		17		17
Acquisition holdback payables		238		218
Lease obligations		149		141
Income taxes payable		217		150
		6,532		6,069
Non-current liabilities:				
Debt with recourse to Constellation Software Inc. (note 8)		1,480		1,489
Liability of CSI under the IRGA (note 8)		478		458
Debt without recourse to Constellation Software Inc. (note 9)		1,925		2,051
Deferred income taxes		935		890
Acquisition holdback payables		234		208
Lease obligations		289		282
Other liabilities (note 6)		487		451
		5,828		5,830
Total liabilities		12,360		11,899
Shareholders' equity (note 12):				
Capital stock		99		99
Accumulated other comprehensive income (loss)		98		130
Retained earnings		3,687		3,347
Non-controlling interests (note 18)		725		692
		4,609		4,267
Subsequent events (notes 19)				
Total liabilities and shareholders' equity	$	16,969	$	16,167

See accompanying notes to the condensed consolidated interim financial statements.

CONSTELLATION SOFTWARE INC.

Condensed Consolidated Interim Statements of Income (loss)
(In millions of U.S. dollars, except per share amounts. Due to rounding, numbers presented may not foot.)

Unaudited

	Three months ended March 31, 2026	2025
Revenue		
License	$ 91	$ 96
Professional services	546	487
Hardware and other	100	74
Maintenance and other recurring	2,444	1,996
	3,181	2,654
Expenses		
Staff	1,687	1,412
Hardware	57	40
Third party license, maintenance and professional services	312	254
Travel, telecommunications, supplies, software and equipment	159	131
Professional fees	64	47
Other, net	87	70
Depreciation	55	46
Amortization of intangible assets (note 7)	326	272
	2,745	2,272
Foreign exchange loss (gain)	(45)	32
IRGA/TSS Membership liability revaluation charge (note 8)	(76)	94
Finance and other expense (income) (note 13)	(15)	(80)
Share in net (income) loss of equity investee (note 5)	(10)	0
Bargain purchase gain (note 4)	0	-
Impairment of intangible and other non-financial assets (note 7)	8	3
Finance costs (note 13)	81	71
	(58)	119
Income (loss) before income taxes	493	262
Current income tax expense (recovery) (note 11)	172	137
Deferred income tax expense (recovery)	(78)	(49)
Income tax expense (recovery)	93	89
Net income (loss)	400	174
Net income (loss) attributable to:		
Common shareholders of Constellation Software Inc.	367	136
Non-controlling interests (note 18)	33	38
Net income (loss)	400	174
Earnings per common share of Constellation Software Inc.		
Basic and diluted (note 14)	$ 17.32	$ 6.41

See accompanying notes to the condensed consolidated interim financial statements.

CONSTELLATION SOFTWARE INC.

Condensed Consolidated Interim Statements of Comprehensive Income (loss)
(In millions of U.S. dollars, except per share amounts. Due to rounding, numbers presented may not foot.)

Unaudited

	Three months ended March 31,	
	2026	2025
Net income (loss)	$ 400	$ 174
Items that are or may be reclassified subsequently to net income (loss):		
Foreign currency translation differences from foreign operations and other, net of tax	(37)	79
Items that will not be reclassified to net income (loss):		
Changes in the fair value of equity investments at FVOCI	-	120
Other comprehensive income (loss), net of income tax	(37)	199
Total comprehensive income (loss)	$ 363	$ 372
Total other comprehensive income (loss) attributable to:		
Common shareholders of Constellation Software Inc.	(32)	139
Non-controlling interests (note 18)	(5)	60
Total other comprehensive income (loss)	$ (37)	$ 199
Total comprehensive income (loss) attributable to:		
Common shareholders of Constellation Software Inc.	335	275
Non-controlling interests (note 18)	28	97
Total comprehensive income (loss)	$ 363	$ 372

See accompanying notes to the condensed consolidated interim financial statements.

CONSTELLATION SOFTWARE INC.

Condensed Consolidated Interim Statement of Changes in Equity
(In millions of U.S. dollars, except per share amounts. Due to rounding, numbers presented may not foot.)

Unaudited

Three months ended March 31, 2026

	Equity Attributable to Common Shareholders of CSI					
	Capital stock	Accumulated other comprehensive income (loss)	Retained earnings	Total	Non-controlling interests	Total equity
Balance at January 1, 2026	**$ 99**	**$ 130**	**$ 3,347**	**$ 3,576**	**$ 692**	**$ 4,267**
Total comprehensive income (loss):						
Net income (loss)	-	-	367	367	33	400
Other comprehensive income (loss)						
Foreign currency translation differences from foreign operations and other, net of tax and changes in the fair value of equity investments at FVOCI	-	(32)	-	(32)	(5)	(37)
Total other comprehensive income (loss)	**-**	**(32)**	**-**	**(32)**	**(5)**	**(37)**
Total comprehensive income (loss)	**-**	**(32)**	**367**	**335**	**28**	**363**
Transactions with owners, recorded directly in equity						
Other movements in non-controlling interests	-	-	(5)	(5)	5	0
Dividends to shareholders of the Company	-	-	(21)	(21)	-	(21)
Balance at March 31, 2026	**$ 99**	**$ 98**	**$ 3,687**	**$ 3,884**	**$ 725**	**$ 4,609**

See accompanying notes to the condensed consolidated interim financial statements.

CONSTELLATION SOFTWARE INC.

Condensed Consolidated Interim Statement of Changes in Equity
(In millions of U.S. dollars, except per share amounts. Due to rounding, numbers presented may not foot.)

Unaudited
Three months ended March 31, 2025

	Equity Attributable to Common Shareholders of CSI					
	Capital stock	Accumulated other comprehensive income (loss)	Retained earnings	Total	Non-controlling interests	Total equity
Balance at January 1, 2025	**$ 99**	**$ (224)**	**$ 2,919**	**$ 2,795**	**$ 493**	**$ 3,288**
Total comprehensive income (loss):						
Net income (loss)	-	-	136	136	38	174
Other comprehensive income (loss)						
Foreign currency translation differences from foreign operations and other, net of tax	-	139	-	139	60	199
Total other comprehensive income (loss)	**-**	**139**	**-**	**139**	**60**	**199**
Total comprehensive income (loss)	**-**	**139**	**136**	**275**	**97**	**372**
Transactions with owners, recorded directly in equity						
Other movements in non-controlling interests	-	-	(4)	(4)	4	(0)
Dividends paid to non-controlling interests	-	-	-	-	(0)	(0)
Dividends to shareholders of the Company		-	(21)	(21)	-	(21)
Balance at March 31, 2025	**$ 99**	**$ (85)**	**$ 3,030**	**$ 3,045**	**$ 594**	**$ 3,639**

See accompanying notes to the condensed consolidated interim financial statements.

CONSTELLATION SOFTWARE INC.

Condensed Consolidated Interim Statements of Cash Flows

(In millions of U.S. dollars, except per share amounts. Due to rounding, numbers presented may not foot.)

Unaudited

	Three months ended March 31, 2026	Three months ended March 31, 2025
Cash flows from (used in) operating activities:		
Net income (loss)	400	174
Adjustments for:		
Depreciation	55	46
Amortization of intangible assets (note 7)	326	272
IRGA/TSS Membership liability revaluation charge (note 8)	(76)	94
Finance and other expense (income) (note 13)	(15)	(80)
Share in net (income) loss of equity investee (note 5)	(10)	0
Bargain purchase (gain) (note 4)	0	-
Impairment of intangible and other non-financial assets (note 7)	8	3
Finance costs (note 13)	81	71
Income tax expense (recovery)	93	89
Foreign exchange loss (gain)	(45)	32
Depreciation of third party costs	4	5
Change in non-cash operating assets and liabilities exclusive of effects of business combinations (note 17)	185	231
Transaction costs associated with equity securities classified as FVOCI	-	(2)
Income taxes paid	(107)	(107)
Net cash flows from (used in) operating activities	897	827
Cash flows from (used in) financing activities:		
Interest paid on lease obligations	(4)	(4)
Interest paid on debt	(61)	(62)
Increase (decrease) in Topicus revolving credit debt facility without recourse to CSI	(286)	31
Proceeds from issuance of debt facilities without recourse to CSI	244	27
Repayments of debt facilities without recourse to CSI	(73)	(30)
Other financing activities	4	(1)
Dividends paid to non-controlling interests	-	(0)
Debt transaction costs	(1)	(0)
Payments of lease obligations, net of sublease receipts	(38)	(31)
Dividends paid to common shareholders of the Company (note 12)	(21)	(21)
Net cash flows from (used in) in financing activities	(236)	(91)
Cash flows from (used in) investing activities:		
Acquisition of businesses (note 4)	(697)	(94)
Cash obtained with acquired businesses (note 4)	77	11
Post-acquisition settlement payments, net of receipts	(69)	(16)
Purchases of investments and other assets	(32)	(175)
Decrease (increase) in restricted cash	1	7
Interest, dividends and other proceeds received	12	11
Property and equipment purchased	(19)	(15)
Net cash flows from (used in) investing activities	(726)	(271)
Effect of foreign currency on cash and cash equivalents	(13)	33
Increase (decrease) in cash and cash equivalents	(78)	497
Cash and cash equivalents, beginning of period	$ 3,089	$ 1,980
Cash and cash equivalents, end of period	$ 3,010	$ 2,477

See accompanying notes to the condensed consolidated interim financial statements.

CONSTELLATION SOFTWARE INC.

Notes to Condensed Consolidated Interim Financial Statements
(In millions of U.S. dollars, except per share amounts and as otherwise indicated)
(Due to rounding, numbers presented may not foot)
Three months ended March 31, 2026 and 2025
(Unaudited)

Notes to the condensed consolidated interim financial statements

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17. Changes in non-cash operating assets and liabilities
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1. Reporting entity

Constellation Software Inc. is a company domiciled in Canada. The address of Constellation Software Inc.'s registered office is 66 Wellington Street West, Suite 5300, Toronto, Ontario, Canada. The condensed consolidated interim financial statements of Constellation Software Inc. as at and for the three-month period ended March 31, 2026 comprise Constellation Software Inc. and its subsidiaries (together referred to as "Constellation", "CSI", or the "Company") and the Company's interest in associates. The Company is engaged principally in the development, installation and customization of software as well as in the provisioning of related professional services and support for customers globally across over 100 diverse markets.

2. Basis of presentation

(a) Statement of compliance

These condensed consolidated interim financial statements have been prepared in accordance with International Accounting Standard 34, Interim Financial Reporting ("IAS 34") as issued by the International Accounting Standards Board ("IASB") and using the accounting policies disclosed in Note 3 of the Company's 2025 annual consolidated financial statements, available on the System for Electronic Document Analysis and Retrieval ("SEDAR+") at www.sedarplus.com, except as disclosed herein.

These condensed consolidated interim financial statements were approved and authorized for issuance by the Board of Directors of the Company on May 12, 2026.

These condensed consolidated interim financial statements should be read in conjunction with the Company's 2025 annual consolidated financial statements.

(b) Basis of measurement

The condensed consolidated interim financial statements have been prepared on the historical cost basis except for certain assets and liabilities initially recognized in connection with business combinations, derivative financial instruments, equity securities, and contingent consideration related to business acquisitions, which are measured at their estimated fair value.

(c) Functional and presentation of currency

The condensed consolidated interim financial statements are presented in U.S. dollars, which is Constellation's functional currency.

(d) Use of estimates and judgements

The preparation of the condensed consolidated interim financial statements in conformity with IFRS requires management to make judgements, estimates and assumptions that affect the application of accounting policies and reported amounts of assets, liabilities, income and expenses, consistent with those disclosed in the 2025 annual consolidated financial statements and described in these condensed consolidated interim financial statements. Actual results may differ from these estimates.

Estimates and underlying assumptions are reviewed on an ongoing basis. Estimates are based on historical experience and other assumptions that are considered reasonable in the circumstances. The actual amount or values may vary in certain instances from the assumptions and estimates made. Changes will be recorded, with corresponding effect in profit or loss, when, and if, better information is obtained.

3. Material accounting policies

Unless otherwise noted in the condensed consolidated interim financial statements, the material accounting policies used in preparing these condensed consolidated interim financial statements are unchanged from those disclosed in the Company's 2025 annual consolidated financial statements and have been applied consistently to all periods presented in these condensed consolidated interim financial statements.

The accounting policies have been applied consistently by Constellation's subsidiaries.

Recent accounting pronouncements not yet adopted:

The IASB has issued IFRS 18, Presentation and Disclosure in Financial Statements (replacing IAS 1, Presentation of Financial Statements), with an aim to improve how information is communicated in the financial statements, with a focus on information in the statement of income that will become effective on January 1, 2027. The Company is assessing the impacts IFRS 18 will have on the consolidated financial statements.

4. Business acquisitions

(a) On February 13, 2026, the Company completed the acquisition of 100% of the shares of Synchronoss Technologies, Inc. ("Synchronoss") for cash proceeds of $309.

Synchronoss is a software company that offers cloud-based software and services that enable communications service providers and other enterprises to manage, monetize, and securely deliver digital content, messaging, and customer engagement solutions. The acquired business operates in the communications and media market. The acquisition has been accounted for using the acquisition method with the results of operations included in the condensed consolidated interim financial statements for three months ended March 31, 2026 from the date of the acquisition.

The goodwill recognized in connection with this acquisition is primarily attributable to the application of the Company's best practices to improve the operations of the company acquired, synergies with existing businesses of the Company, and other intangible assets that do not qualify for separate recognition including assembled workforce. The goodwill is not expected to be deductible for income tax purposes.

The gross contractual amounts of acquired receivables was $15; however, the Company has recorded an allowance of $NIL as part of the acquisition accounting to reflect contractual cash flows that are not expected to be collected.

Due to the complexity and timing of this acquisition, the Company is in the process of determining and finalizing the estimated fair value of the net assets acquired. The amounts determined on a provisional basis generally relate to net asset assessments and measurement of the assumed liabilities. The provisional purchase price allocations may differ from the final purchase price allocations, and these differences may be material. Revisions to the allocations will occur as additional information about the fair value of assets and liabilities becomes available.

The impact of acquisition accounting applied on a provisional basis in connection with the acquisition of Synchronoss is as follows:

Assets acquired:		
Cash	$	34
Accounts receivable		15
Other current assets		12
Property and equipment		2
Right of use assets		4
Other non-current assets		4
Technology assets		111
Customer assets		175
		356
Liabilities assumed:		
Current liabilities		31
Deferred revenue		0
Deferred income taxes		29
Long-term lease obligations		8
Other non-current liabilities		7
		75
Goodwill		28
Total consideration	**$**	**309**

The acquisition of Synchronoss contributed revenue of $22 and a net loss of $2 for the three months ended March 31, 2026. If this acquisition had occurred on January 1, 2026, the Company estimates that pro-forma consolidated revenue and pro-forma condensed consolidated interim net income would have been $3,201 and $402 compared to the actual amounts reported in the consolidated statement of income (loss) for three months ended March 31, 2026.

(b) During the three months ended March 31, 2026, the Company completed a number of additional acquisitions for aggregate cash consideration of $388 plus cash holdbacks of $91 and contingent consideration with an estimated acquisition date fair value of $21. The total consideration resulting from the additional acquisitions in the three months ended March 31, 2026 was $500. The contingent consideration is payable on the achievement of certain financial targets in the post-acquisition periods. The obligation for contingent consideration for acquisitions during the three months ended March 31, 2026 has been recorded at its estimated fair value at the various acquisition dates. The estimated fair value of the applicable contingent consideration is calculated using the estimated financial outcome and resulting expected contingent consideration to be paid and inclusion of a discount

rate as appropriate. For these arrangements, which include both maximum, or capped, and unlimited contingent consideration amounts, the estimated increase to the initial consideration is not expected to exceed $27.

Aggregate contingent consideration of $225 (December 31, 2025 - $215) has been reported in the condensed consolidated interim statement of financial position at its estimated fair value relating to applicable acquisitions completed in the current and prior periods. Changes made to the estimated fair value of contingent consideration are included in other, net in the condensed consolidated interim statements of income (loss). An expense of $4 has been recorded for the three months ended March 31, 2026 (an expense of $7 for the three months ended March 31, 2025).

No additional acquisitions were deemed to be individually significant. The majority of the businesses acquired during the period were acquisitions of shares and the remainder were asset acquisitions. The cash holdbacks are generally payable over a two-year period and are adjusted, as necessary, for such items as working capital or net tangible asset assessments, as defined in the agreements, and claims under the respective representations and warranties of the purchase and sale agreements.

The additional acquisitions during the three months ended March 31, 2026 include software companies catering to the following markets: accounting, agriculture equipment dealers, asset management, automotive, aviation, chemicals, content management, education, enterprise resource planning, financial services, fitness, gaming, gas monitoring, government, healthcare, hospitality, human capital, insurance, legal, manufacturing, mining, planning, policy and procedure management, procurement, real estate, retail management and distribution, social compliance, and telematics all of which are software businesses similar to existing businesses operated by the Company. The acquisitions have been accounted for using the acquisition method with the results of operations included in these consolidated financial statements from the date of each acquisition.

The goodwill recognized in connection with these additional acquisitions is primarily attributable to the application of Constellation's best practices to improve the operations of the companies acquired, synergies with existing businesses of Constellation, and other intangible assets that do not qualify for separate recognition including assembled workforce. Goodwill in the amount of $19 is expected to be deductible for income tax purposes.

The gross contractual amounts of acquired receivables was $43; however, the Company has recorded an allowance of $2 as part of the acquisition accounting to reflect contractual cash flows that are not expected to be collected.

Due to the complexity and timing of certain additional acquisitions made, the Company is in the process of determining and finalizing the estimated fair value of the net assets acquired as part of the acquisitions closed during the three months ended March 31, 2026 and the last nine months of 2025. The amounts determined on a provisional basis generally relate to net asset assessments and measurement of the assumed liabilities, including acquired contract liabilities. The provisional purchase price allocations may differ from the final purchase price allocations, and these differences may be material. Revisions to the allocations will occur as additional information about the fair value of assets and liabilities becomes available. The cash consideration associated with these provisional estimates (including individually significant acquisitions) totals $1,830.

The aggregate impact of acquisition accounting applied in connection with the aggregate of business acquisitions that are not individually significant in the period ended March 31, 2026 is as follows:

Assets acquired:		
Cash	$	43
Accounts receivable		41
Other current assets		39
Property and equipment		8
Right of use assets		17
Other non-current assets		2
Deferred income taxes		5
Technology assets		229
Customer assets		273
		656
Liabilities assumed:		
Current liabilities		55
Deferred revenue		70
Deferred income taxes		93
Long-term lease obligations		13
Other non-current liabilities		1
		231
Non-controlling interest		(0)
Goodwill		76
Bargain purchase gain		(0)
Aggregate purchase price	**$**	**500**
Non-cash consideration:		
Fair value of investment in affiliate in which control was acquired		(0)
Total consideration		**500**

(c) The 2026 additional business acquisitions did not have a material impact to either the consolidated revenue or the consolidated net income (loss) for the three months ended March 31, 2026. The materiality threshold is reviewed on a regular basis taking into account the quantitative (contribution to revenue and net income (loss)) and

qualitative (size and comparability with other Constellation businesses) factors of current period acquisitions on both an individual and aggregate basis.

(d) The chart below outlines the significant measurement period adjustments and adjustments to estimated holdback payables on prior year acquisitions which have been reflected on the condensed consolidated interim statement of financial position as of December 31, 2025.

Current Assets:	
Accounts receivable	(3)
Unbilled revenue	1
Inventories	(2)
Acquisition holdback receivables	-
Other assets	(0)
	(5)
Non-current Assets:	
Property and equipment	0
Right of use assets	0
Intangible assets	(0)
	(0)
Total assets	(5)
Current liabilities:	
Accounts payable and accrued liabilities	0
Deferred revenue	1
Acquisition holdback payables	(5)
Lease obligations	0
Income taxes payable	(0)
	(5)
Non-current liabilities:	
Deferred income taxes	(0)
Acquistion holdback payables	0
Lease obligations	0
Other liabilities	(0)
	0
Total liabilities	(5)

5. Investments in associates

Investments in associates comprise the following:

	March 31, 2026	December 31, 2025
Investment in Asseco	590	575
Other investments in associates	93	80
	683	655

Investment in Asseco:

The Company owns 19,207,886 shares in Asseco Poland S.A. ("Asseco") representing an ownership interest of approximately 23.14%. Asseco offers comprehensive, proprietary IT solutions for certain sectors of the economy and is listed on the Polish Warsaw Stock Exchange (the "WSE"). The Company applies the equity method of accounting to its investment in Asseco as a result of its ability to exercise significant influence over Asseco. Under the equity method of accounting, the investment is initially recognized at cost and is subsequently adjusted to reflect the Company's share of profit or loss and other comprehensive income (loss) of Asseco. The Company has elected to use "lag reporting" in relation to its investment in Asseco. The Company will record its share of profit or loss and other comprehensive income (loss) on a "three-month lag" because the concurrent financial information is impracticable to obtain from Asseco. Due to the complexity and timing of the investment, the Company is in the process of determining and finalizing the estimated fair value of the net assets acquired. The provisional purchase price allocation may differ from the final purchase price allocation, and these differences may be material. Revisions to the allocation will occur as additional information about the fair value of assets and liabilities becomes available.

The below table presents a reconciliation of the investment in Asseco from the beginning of the period to the end of the period:

At January 1, 2026	575
Share in net (income) loss of equity investee	11
Share in other comprehensive income (loss) of equity investee	4
Dividends received	-
Foreign exchange and other adjustments	0
At March 31, 2026	590

The fair value of the Company's investment in Asseco based on the share price of Asseco at March 31, 2026 is $872.

Summarized Financial Information:

The tables below provide summarised financial information for the investment in Asseco as at December 31, 2025, due to the application of lag reporting. The information disclosed reflects the amounts presented in the financial statements of Asseco and not the Company's share of those amounts. The amounts have been amended to reflect adjustments made by the Company when using the equity method, including fair value adjustments and significant events during the lag reporting period.

CONSTELLATION SOFTWARE INC.

Notes to Condensed Consolidated Interim Financial Statements
(In millions of U.S. dollars, except per share amounts and as otherwise indicated)
(Due to rounding, numbers presented may not foot)
Three months ended March 31, 2026 and 2025
(Unaudited)

Summarized Statement of Financial Position:

Current assets	3,461
Non-current assets	2,388
Current liabilities	1,982
Non-current liabilities	1,024
Net assets	2,843
Non-controlling interest	(1,782)
Net assets attributable to the shareholders of Asseco	1,061
Topicus' share of net assets	253
Goodwill	337
Investment in Asseco	590

Summarized Statement of Income (loss):

Revenue	1,243
Operating profit	126
Net income	82
Net income attributable to the shareholders of Asseco	46
Share in net income (loss) of equity investee	11

Summarized Statement of Other Comprehensive Income (loss):

Other comprehensive income	28
Other comprehensive income attributable to the shareholders of Asseco	16
Share in other comprehensive income (loss) of equity investee	4

6. Other assets and other non-current liabilities

(a) Other assets

		March 31, 2026		December 31, 2025
Prepaid expenses and other current assets	$	429	$	376
Holdback receivable		1		1
Investment tax credits recoverable		63		53
Sales tax receivable		56		56
Equity securities held for trading		3		52
Income tax and other receivables		201		188
Total other current assets	$	755	$	726
Investment tax credits recoverable	$	15	$	19
Costs to obtain a contract		113		110
Non-current trade and other receivables and other assets		297		217
Total other non-current assets	$	425	$	345

(b) Other non-current liabilities

		March 31, 2026		December 31, 2025
Contingent consideration	$	123	$	122
Deferred revenue		123		119
Other non-current liabilities		241		210
Total other non-current liabilities	$	487	$	451

CONSTELLATION SOFTWARE INC.

Notes to Condensed Consolidated Interim Financial Statements
(In millions of U.S. dollars, except per share amounts and as otherwise indicated)
(Due to rounding, numbers presented may not foot)
Three months ended March 31, 2026 and 2025
(Unaudited)

7. Intangible Assets

	Technology Assets	Customer Assets	Backlog	Non-compete agreements	Trademarks	Goodwill	Total
Cost							
Balance at January 1, 2025	$ 5,733	$ 5,485	$ 17	$ 2	$ 28	$ 1,474	$ 12,739
Acquisitions through business combinations	783	749	0	-	-	268	1,801
Effect of movements in foreign exchange	282	258	0	(0)	3	74	616
Balance at December 31, 2025	$ 6,798	$ 6,492	$ 17	$ 2	$ 31	$ 1,816	$ 15,157
Balance at January 1, 2026	$ 6,798	$ 6,492	$ 17	$ 2	$ 31	$ 1,816	$ 15,157
Acquisitions through business combinations	340	448	(0)	-	-	105	893
Effect of movements in foreign exchange and other	(35)	(39)	(0)	0	(0)	(11)	(87)
Balance at March 31, 2026	$ 7,103	$ 6,900	$ 17	$ 2	$ 30	$ 1,910	$ 15,963
Accumulated amortization and impairment losses							
Balance at January 1, 2025	$ 3,340	$ 1,894	$ 17	$ 2	$ 9	$ 23	$ 5,284
Amortization for the period	677	504	0	(0)	2	-	1,182
Impairment charge	14	13	-	-	-	11	38
Effect of movements in foreign exchange	163	101	0	(0)	-	-	264
Balance at December 31, 2025	$ 4,193	$ 2,512	$ 17	$ 2	$ 10	$ 34	$ 6,769
Balance at January 1, 2026	$ 4,193	$ 2,512	$ 17	$ 2	$ 10	$ 34	$ 6,769
Amortization for the period	184	141	(0)	0	0	-	326
Impairment charge	0	0	-	-	-	0	0
Effect of movements in foreign exchange	(23)	(16)	(0)	0	-	-	(39)
Balance at March 31, 2026	$ 4,354	$ 2,637	$ 17	$ 2	$ 10	$ 34	$ 7,056
Carrying amounts							
At January 1, 2025	$ 2,393	$ 3,591	$ 0	$ (0)	$ 20	$ 1,451	$ 7,455
At December 31, 2025	$ 2,606	$ 3,980	$ 0	$ -	$ 21	$ 1,782	$ 8,388
At January 1, 2026	$ 2,606	$ 3,980	$ 0	$ -	$ 21	$ 1,782	$ 8,388
At March 31, 2026	$ 2,749	$ 4,263	$ 0	$ (0)	$ 20	$ 1,876	$ 8,907

8. Debt with recourse to CSI and Liability of CSI under the IRGA

	CSI Facility	Senior Notes	Liability of CSI under the IRGA	Debentures	Term Loan	Total
Principal outstanding (and, except for debentures, equal to fair value)	$ -	$ 1,000	$ 1,133	$ 356	$ 86	$ 2,574
Deduct: Unamortized transaction costs included in debt balance	-	(6)	-	-	(0)	(6)
Add: Unamortized debt premium	-	-	-	45	-	45
Carrying value at March 31, 2026	-	994	1,133	401	86	- 2,613
Current portion	-	-	655	-	-	655
Non-current portion	-	994	478	401	86	1,959

CSI Facility

On January 31, 2024, the Company completed an amendment and restatement of its existing credit facility agreement (the "CSI Facility"). The facility limit was increased from $840 to $1,085, with a syndicate of existing and new institutions. The agreement has also moved from a secured to an unsecured facility structure, which continues to be available for general corporate purposes including acquisitions and working capital. The CSI Facility is guaranteed by certain subsidiaries of the Company. The CSI Facility bears a variable interest rate with no fixed repayments required over the term to maturity. Interest rates are calculated at standard U.S. and Canadian reference rates plus interest rate spreads based on a leverage table. The CSI Facility contains standard events of default which if not remedied within a cure period would trigger the repayment of any outstanding balance. As at March 31, 2026, $nil (December 31, 2025 – $nil) had been drawn from this credit facility, and letters of credit totaling $13 (December 31, 2025 - $13) were issued, which limits the borrowing capacity on a dollar-for-dollar basis.

Senior Notes

On February 16, 2024, the Company completed a private offering of $500 aggregate principal amount of 5.158% senior notes due 2029 and $500 aggregate principal amount of 5.461% senior notes due 2034 (collectively, the "Senior Notes"). The Senior Notes are senior unsecured obligations of the Company and rank equally in right of payment to all of the Company's existing and future senior unsecured indebtedness, including the CSI Facility. The Senior Notes are guaranteed by certain subsidiaries of the Company on the same basis as such subsidiaries have guaranteed the CSI Facility. Transaction costs associated with the Senior Notes are being amortized through profit or loss using the effective interest rate method.

Liability of CSI under the terms of the IRGA/TSS Members Agreement

On December 23, 2014, in accordance with the terms of the purchase and sale agreement for the initial acquisition of Total Specific Solutions ("TSS") by CSI, and on the basis of the term sheets attached thereto, Constellation and the sellers of TSS along with certain members of TSS' executive management team (collectively, the "Joday Group") among others, entered into a Members Agreement (the "TSS Members Agreement") pursuant to which the Joday Group acquired 33.29% of the voting interests in Constellation Software Netherlands Holding Coöperatief U.A. (which was renamed to Topicus.com Coöperatief U.A., ("Topicus Coop")), a subsidiary of Constellation and the indirect owner of 100% of TSS at the time of the acquisition. Total proceeds from this transaction was EUR 39.

On January 5, 2021, the TSS Members Agreement was terminated in conjunction with the acquisition of Topicus.com B.V., the reorganization of Topicus Coop and the execution of the Investors Rights and Governance Agreement ("IRGA"). The IRGA was established to create certain contractual obligations of the parties in respect of the governance of Topicus and Topicus Coop. The IRGA provides for transfer restrictions in respect of the ordinary units of Topicus Coop ("Topicus Coop Ordinary Units" or the "Topicus Coop Units").

Any time after January 5, 2021, any member of the Joday Group has the right, at their option, to sell any number of its Topicus Coop Units to CSI at a cash price per Topicus Coop Unit determined in accordance with the IRGA. Upon the exercise of such option by a member of the Joday Group, CSI will be obligated to purchase 33.33% of such Topicus Coop Units within 30 days, and an additional 33.33% on each of the first and the second anniversary of such initial purchase with the exception of certain items including the Company's obligations under the IRGA associated with the investment in Sygnity and Asseco which have been classified as a current liability and are expected to be settled through providing Joday their prorated share of the investments. Notwithstanding the foregoing, CSI can offer Topicus the right to purchase such Topicus Coop Units in lieu of CSI.

In the event of a change of control of CSI, any member of the Joday Group has the right, at their option, to sell all of its Topicus Coop Units to CSI at a cash price per Topicus Coop Unit determined in accordance with the IRGA. Upon the exercise of such option by a member of the Joday Group, CSI will be obligated to purchase all such Topicus Coop Units. Notwithstanding the foregoing, CSI can offer Topicus the right to purchase such Topicus Coop Units in lieu of CSI.

If CSI reduces its economic interest in Topicus by a sale or transfer of its economic interest (and not due to any additional issuance of any shares or equity by Topicus) by more than one-third (calculated on a fully converted basis in accordance with the IRGA), any member of the Joday Group has the right, at their option, to sell to CSI one-third of its Topicus Coop Units at a cash price per Topicus Coop Unit determined in accordance with the IRGA. Upon the exercise of such put option by a member of the Joday Group, CSI will be obligated to purchase all such put Topicus Coop Units. Notwithstanding the foregoing, CSI can offer Topicus the right to purchase such Topicus Coop Units in lieu of CSI. Any member of the Joday Group has a similar right to sell one-half or all of its remaining Topicus Coop Units, respectively, at its option, if CSI further reduces its remaining fully-diluted economic interest in Topicus by a sale or transfer of its economic interest by one-half and again if CSI sells its entire remaining economic interest in Topicus.

All of the Topicus Coop Ordinary Units held by the Joday Group and Ijssel B.V. (collectively, the "Topicus Coop Exchangeable Units") are exchangeable, directly or indirectly, for Topicus Subordinate Voting Shares. All of the above rights of members of the Joday Group apply to any Topicus Subordinate Voting Shares issued on an exchange of Topicus Coop Exchangeable Units.

At any time after December 31, 2023, CSI has the right, at its option, to buy all of the Topicus Coop Units and shares of Topicus held by certain members of the Joday Group (excluding Joday Investments VI B.V. ("Joday")) at a cash price per Topicus Coop Unit (or share of Topicus, as applicable) determined in accordance with the IRGA. After December 31, 2043, CSI has the same right to buy all of the Topicus Coop Units and shares of Topicus held by the remaining members of the Joday Group, including Joday.

In addition, if certain individuals affiliated with Joday are terminated from their employment with Topicus Coop or an affiliate thereof for urgent cause (as defined in the Dutch Civil Code), CSI has the right, at its option, to buy all of Topicus Coop Units held by such individuals at a cash price per Topicus Coop Unit determined in accordance with the IRGA.

The Company has continued to classify the above obligations of CSI under the terms of the IRGA as a liability. The main valuation driver in such calculation is the maintenance and other recurring revenue of Topicus. Maintenance and recurring revenue of Topicus for the trailing twelve months on a pro-forma basis determined at the end of the current reporting period was used as the basis for valuing the interests at each redemption date, excluding Sygnity. The valuation of the Company's obligations under the IRGA associated with the Company's investment in Sygnity and Asseco are based on the fair value of these investments as determined by their respective share prices at the end of each reporting period and the aggregate liability under the IRGA associated with these two investments has been classified as a current liability. The valuation of CSI's obligations under the IRGA is also impacted by the change in the net tangible assets of Topicus (as defined under the IRGA). As the net tangible assets increase (which is typically the result of net profits in the applicable period), the valuation of CSI's obligations under the IRGA increases. Any increase or decrease in the value of such liability is recorded as an expense or income in the condensed consolidated interim statements of income (loss) for the period.

Debentures

On October 1, 2014 and November 19, 2014, the Company issued debentures with a total principal value of C$96 for total proceeds of C$91. On September 30, 2015, the Company issued another tranche of debentures (collectively with the 2014 issuances called the "Debentures") with a total principal value of C$186 for total proceeds of C$214.

On October 6, 2023, a total of C$213 principal amount of debentures ("2023 Debentures") were issued at a price of C$133.00 per C$100.00 principal amount of 2023 Debentures purchased representing proceeds to the Company of C$283 which was used by the Company to pay down indebtedness under its existing credit facility. The 2023 Debentures were issued as an additional tranche of, and will form a single series with, the outstanding C$282 aggregate principal amount of Debentures.

The Debentures have a maturity date of March 31, 2040 (the "Maturity Date").

The interest rate from and including:

- March 31, 2024 but excluding March 31, 2025 is 10.4%
- March 31, 2025 but excluding March 31, 2026 is 8.9%
- March 31, 2026 but excluding March 31, 2027 is 8.6%

Subsequent from and including March 31, 2027 to but excluding the Maturity Date, the interest rate applicable to the Debentures will be reset on an annual basis on March 31 of each year, at a rate equal to the annual average percentage change in the All-items Consumer Price Index during the 12-month period ending on December 31 in the prior year (which amount may be positive or negative) plus 6.5%. Notwithstanding the foregoing, the interest rate applicable to the debentures will not be less than 0%. The Company may, subject to certain approvals, elect the Payment in Kind election ("PIK Election"), in lieu of paying interest in cash, to satisfy all or any portion of its interest obligation payable on an interest payment date by issuing to each Debenture holder PIK Debentures equal to the amount of the interest obligation to be satisfied. The PIK Debentures will have the same terms and conditions as the Debentures and will form part of the principal amount of the Debentures. If, on any interest payment date, the Company fails to pay the amount of interest owing on the Debentures in full in cash, the Company will not (A) declare or pay dividends of any kind on the Common Shares, nor (B) participate in any share buyback or redemption involving the Common Shares, until the date on which the Company pays such interest (or the unpaid portion thereof) in cash to holders of the Debentures; however, where the Company has issued PIK Debentures in respect of all or a portion of the amount of interest owing on the Debentures on an interest payment date, the Company

may resume declaring or paying dividends of any kind on the Common Shares and participating in any share buyback or redemption involving the Common Shares beginning on the next earlier of (i) the interest payment date of which the Company pays the amount of interest owing on the Debentures in full in cash and (ii) the date on which the Company repays all amounts owing under the PIK Debenture. All payments in respect of the Debentures will be subordinated in right of payment to the prior payment in full of all senior indebtedness of the Company.

The Debentures will be redeemable in certain circumstances at the option of the Company or the holder. During the period beginning on March 16 and ending on March 31 of each year, the Company will have the right, at its option, to give notice to holders of Debentures of its intention to redeem the Debentures, in whole or in part, on March 31 in the year that is five years following the year in which notice is given, at a price equal to the principal amount thereof plus accrued and unpaid interest up to but excluding the date fixed for redemption. During the period beginning on March 1 and ending on March 15 of each year, holders of Debentures will also have the right, at their option, to give notice to the Company of their intention to require the Company to repurchase (or to "put") the Debentures, in whole or in part, on March 31 in the year that is five years following the year in which notice is given, at a price equal to the principal amount thereof plus accrued and unpaid interest up to but excluding the date fixed for repurchase.

The fair value of the debentures as at March 31, 2026 was $414 (December 31, 2025 - $426).

Term Loan

One of CSI's subsidiaries has entered into a GBP 65 term debt facility with a financial institution for which CSI has guaranteed the debt. The facility bears a fixed rate of interest. The term loan contains events of default that, if not remedied, allow the loan note holder to require repayment of the loan principal and interest. The loan is due in 2028.

9. Debt without recourse to CSI

Certain of CSI's subsidiaries have entered into term debt facilities and revolving credit facilities with various financial institutions. CSI does not guarantee the debt of these subsidiaries, nor are there any cross-guarantees between subsidiaries. The credit facilities are collateralized by substantially all of the assets of the borrowing entity and its subsidiaries. The credit facilities typically bear interest at a rate calculated using an interest rate index plus a margin. The financing arrangements for each subsidiary typically contain certain restrictive covenants, which may include limitations or prohibitions on additional indebtedness, payment of cash dividends, redemption of capital, capital spending, making of acquisitions and sales of assets. In addition, certain financial covenants must be met by those subsidiaries that have outstanding debt.

During 2025, the Company breached a debt covenant associated with a Term loan in one of its subsidiaries. The aggregate value of the loan at December 31, 2025 was $51 and the loan had been classified as a current liability. The breach related to administrative requirements relating to holding a certain amount of cash in the ring-fenced entity and was unrelated to the financial performance of the entity. CSI subsequently transferred the required cash, which amounted to $2, to the entity in the ring-fence and received a formal waiver from the lender in 2026.

In conjunction with the acquisition of Optimal Blue, the Company had entered into a promissory note agreement ("Promissory Note"). The Promissory Note accrues interest at a rate of 7% per annum, is compounded annually and is payable in arrears. The first cash interest and principal payment under the Promissory Note is due on the day prior to the fifth anniversary and thereafter interest and principal payments will be due annually on the

subsequent anniversaries of that date. The Promissory Note matures in 2063, subject to earlier optional prepayment.

Debt without recourse to CSI comprises the following:

	Topicus Revolving Credit Facility	Debt Facilities	Promissory Note	Total
Principal outstanding (and equal to fair value)	$ 104	$ 1,925	$ 500	$ 2,529
Deduct: Carrying value of transaction costs included in debt balance	(2)	(18)	-	(20)
Carrying value at March 31, 2026	101	1,908	500	2,509
Current portion	101	483	-	585
Non-current portion	-	1,425	500	1,925

The annual minimum repayment requirements for the debt facilities without recourse to CSI (excluding the Topicus Revolving Credit Facility and the Promissory Note) are as follows:

Year	Debt Facilities
2026	135
2027	680
2028	403
2029	154
2030	406
2031	7
2032	142
2033 and subsequent years	-
	1,925

The annual minimum repayment requirements for the Promissory Note are as follows:

Year		March 31, 2026
2026 - 2029	$	7
2030- 2063		493
Total	$	500

10. Provisions

At January 1, 2026	$	30
Reversal		(1)
Provisions recorded during the period		6
Provisions used during the period		(10)
Effect of movements in foreign exchange and other		3
At March 31, 2026	$	29
Provisions classified as current liabilities		17
Provisions classified as other non-current liabilities		12

The provisions balance is comprised of various individual provisions for onerous contracts and other estimated liabilities of the Company of uncertain timing or amount.

11. Income taxes

Income tax expense is recognized based on management's best estimate of the actual income tax rate for the interim period applied to the pre-tax income of the interim period for each entity in the consolidated group. As a result of foreign exchange fluctuations, acquisitions and ongoing changes due to intercompany transactions amongst entities operating in different jurisdictions, the Company has determined that a reasonable estimate of a weighted average annual tax rate cannot be determined on a consolidated basis. The Company's consolidated effective tax rate in respect of continuing operations for the three months ended March 31, 2026 was 19% (34% for the three months ended March 31, 2025). The March 31, 2026 effective tax rate was impacted by $11 of current tax expense relating to certain revaluation charges recorded in the Condensed Consolidated Interim Statement of Income (loss).

Constellation is subject to tax audits in the countries in which the Company does business globally. These tax audits could result in additional tax expense in future periods relating to historical filings. Reviews by tax authorities generally focus on, but are not limited to, the validity of the Company's intercompany transactions, including financing and transfer pricing policies which generally involve subjective areas of taxation and a significant degree of judgment. If any of these tax authorities are successful with their challenges, the Company's income tax expense may be adversely affected and Constellation could also be subject to interest and penalty charges.

12. Capital and other components of equity

	Common Shares	
	Number	Amount
March 31, 2026	21,191,530	$ 99
December 31, 2025	21,191,530	$ 99

Dividends and other distributions to shareholders

During the three months ended March 31, 2026, the Company declared a $1.00 per share dividend to all common shareholders of record at close of business on March 27, 2026. The dividend declared in the quarter ended March 31, 2026 representing $21 was paid and settled on April 15, 2026.

The dividend declared in the quarter ended December 31, 2025 representing $21 was paid and settled on January 12, 2026.

13. Finance and other expense (income) and finance costs

	Three months ended March 31,	
	2026	2025
Interest income on cash	$ (12)	$ (11)
(Increase) decrease in the fair value of equity securities	(7)	(32)
(Increase) decrease in the fair value of derivative	6	(5)
Finance and other income	(3)	(32)
Finance and other expense (income)	$ (15)	$ (80)
Interest expense on debt and debentures	$ 64	$ 59
Interest expense on lease obligations	4	4
Amortization of debt related transaction costs	2	1
Amortization of debenture discount (premium)	(1)	(1)
Other finance costs	11	8
Finance costs	$ 81	$ 71

14. Earnings per share

Basic and diluted earnings per share

	Three months ended March 31,	
	2026	2025
Numerator:		
Net income (loss) attributable to common shareholders of CSI	$ 367	$ 136
Denominator:		
Basic and diluted shares outstanding	21,191,530	21,191,530
Earnings per share		
Basic and diluted	$ 17.32	$ 6.41

15. Financial instruments

Fair values versus carrying amounts

The carrying values of cash, accounts receivable, accounts payable, accrued liabilities, dividends payable, the majority of the acquisition holdbacks, and the CSI Facility, approximate their fair values due to the short-term nature of these instruments. The carrying value of the debt without recourse to CSI approximate their fair values as the debt is subject to market interest rates. The carrying value of the Senior Notes, IRGA liability and the Term Loan with recourse to CSI approximates fair value.

Fair value hierarchy

The table below analyzes financial instruments carried at fair value, by valuation method.

- level 1 inputs are quoted prices (unadjusted) in active markets for identical assets or liabilities;
- level 2 inputs are inputs other than quoted prices included in level 1 that are observable for the asset or liability either directly (i.e. prices) or indirectly (i.e. derived from prices); and
- level 3 inputs are inputs for the asset or liability that are not based on observable market data (i.e. unobservable inputs).

In the table below, the Company has segregated all financial assets and liabilities that are measured at fair value into the most appropriate level within the fair value hierarchy based on the inputs used to determine the fair value at the measurement date.

Financial assets and financial liabilities measured at fair value as at March 31, 2026 and December 31, 2025 in the condensed consolidated interim financial statements are summarized below.

	March 31, 2026				December 31, 2025			
	Level 1	Level 2	Level 3	Total	Level 1	Level 2	Level 3	Total
Assets:								
Equity securities	$ 88	$ -	$ -	$ 88	$ 64	$ -	$ -	$ 64
Derivatives	-	-	10	10	-	-	9	9
	88	**-**	**10**	**98**	**64**	**-**	**9**	**73**
Liabilities:								
Contingent consideration	-	-	225	225	-	-	215	215
Derivatives	-	-	15	15	-	-	8	8
	-	**-**	**239**	**239**	**-**	**-**	**223**	**223**

There were no transfers of fair value measurement between level 1, 2 and 3 of the fair value hierarchy in the periods ended March 31, 2026 and December 31, 2025.

The following table shows a reconciliation from the beginning balances to the ending balances for fair value measurements in level 3 of the fair value hierarchy.

Contingent Consideration

Balance at January 1, 2026	$ 215
Increase from business acquisitions	21
Cash payments	(16)
Charges (recoveries) through profit or loss	7
Foreign exchange and other movements	(2)
Balance at March 31, 2026	225
Contingent consideration classified as current liabilities	102
Contingent consideration classified as other non-current liabilities	123

Estimates of the fair value of contingent consideration are performed by the Company on a quarterly basis. Key unobservable inputs include revenue/profitability growth rates and the discount rates applied (7% to 11%). The estimated fair value increases as the annual revenue/profitability growth rate increases and as the discount rate decreases and vice versa.

Derivative assets and derivative liabilities

Derivative assets and liabilities relate to contractual arrangements of the Company which have uncertain outcomes. If the probability of the outcomes associated with the contractual arrangements increases, the underlying value of the derivative will increase. If the probability of the outcomes decreases, the underlying value of the derivative will decrease. Assuming a probability of 100% and utilizing the observable inputs as of March 31, 2026, the maximum exposure of the Company's derivative liabilities is approximately $58 as of March 31, 2026.

16. Contingencies

In the normal course of operations, the Company is subject to litigation and claims from time to time. The Company may also be subject to lawsuits, investigations and other claims, including environmental, labour, income and sales tax, product, customer disputes and other matters. Management believes that adequate provisions have been recorded in the accounts where required. Although it is not always possible to estimate the extent of potential costs, if any, management believes that the ultimate resolution of such contingencies will not have a material adverse impact on the results of operations, financial position or liquidity of the Company.

17. Changes in non-cash operating assets and liabilities

	Three months ended March 31,	
	2026	2025
Decrease (increase) in current accounts receivable	$ (115)	$ (34)
Decrease (increase) in current unbilled revenue	(20)	(27)
Decrease (increase) in other current assets	(59)	(49)
Decrease (increase) in inventories	1	0
Decrease (increase) in other non-current assets	(14)	0
Increase (decrease) in other non-current liabilities	9	23
Increase (decrease) in current accounts payable and accrued liabilities, excluding holdbacks from acquisitions	(242)	(172)
Increase (decrease) in current deferred revenue	628	487
Increase (decrease) in current provisions	(3)	1
Change in non-cash operating working capital	$ 185	$ 231

18. Non-controlling interests

Topicus:

Constellation's equity interest in Topicus, a company based in the Netherlands, is 60.65% (39.35% being non-controlling interest). On May 16, 2022, Topicus also acquired a controlling interest of 72.68% in Sygnity S.A. ("Sygnity"), a company based in Poland. The remaining 27.32% represents non-controlling interest.

Adapt IT:

On January 3, 2022, the Company acquired a controlling interest in Adapt IT Holdings Limited ("Adapt IT"), a company based in South Africa. The Company has an interest of 73.93% in Adapt IT (the remaining 26.07% represents non-controlling interest)

Lumine:

The Company reflects an equity interest of 61.40% in Lumine, a company based in Canada, and a non-controlling interest in Lumine of 38.60%.

The following tables summarize the information relating to the Company's non-controlling interests in Topicus, Adapt-IT and Lumine as at March 31, 2026 and December 31, 2025:

	As at March 31, 2026		
	Topicus Coop	**Adapt-IT**	**Lumine**
Non-controlling interest	39.35%	26.07%	38.60%
Current assets	810	50	559
Non-current assets	2,180	63	1,059
Total assets	2,990	113	1,618
Current liabilities	1,184	41	472
Non-current liabilities	831	21	316
Total liabilities	2,015	63	788
Less: Non-controlling interest of subsidaries, including interests held by CSI	46	-	-
Net assets after allocation of non-controlling interests (including interests held by CSI)	929	50	830
Inter-group eliminations	(14)	-	10
Total	915	50	840
Net assets allocated to the non-controlling interests of subsidiary	360	13	324
Add: Non-controlling interest of subsidaries not owned by CSI	27	-	-
Total non-controlling interest	387	13	324

	As at December 31, 2025		
	Topicus Coop	**Adapt-IT**	**Lumine**
Non-controlling interest	39.35%	26.07%	38.60%
Current assets	741	36	616
Non-current assets	2,209	68	772
Total assets	2,950	104	1,387
Current liabilities	1,192	34	240
Non-current liabilities	841	23	328
Total liabilities	2,033	57	568
Less: Non-controlling interest of subsidaries, including interests held by CSI	48	-	-
Net assets after allocation of non-controlling interests (including interests held by CSI)	869	47	819
Inter-group eliminations	(25)	-	9
Total	844	47	828
Net assets allocated to the non-controlling interests of subsidiary	332	12	320
Add: Non-controlling interest of subsidaries not owned by CSI	27	-	-
Total non-controlling interest	359	12	320

CONSTELLATION SOFTWARE INC.

Notes to Condensed Consolidated Interim Financial Statements
(In millions of U.S. dollars, except per share amounts and as otherwise indicated)
(Due to rounding, numbers presented may not foot)
Three months ended March 31, 2026 and 2025
(Unaudited)

The following tables summarizes the information on the condensed consolidated interim statement of income (loss) relating to Topicus, Adapt-IT and Lumine for the three months ended March 31 2026 and 2025.

	Three months ended March 31, 2026		
	Topicus Coop	Adapt-IT	Lumine
Revenue	510	34	208
Expenses	435	27	186
Income (loss) before income taxes	75	6	23
Income tax expense	11	2	4
Net income (loss) prior to non-controlling interest allocation	64	4	19
Less: Non-controlling interest of subsidaries, including interests held by CSI	2	-	-
Net income (loss) after allocation of non-controlling interest	62	4	19
Inter-group eliminations	(2)	-	1
Total	60	4	20
Net income (loss) attributable to non-controlling interests	23	1	8
Add: Non-controlling interest of subsidaries not owned by CSI	1	-	-
Total non-controlling interest	25	1	8

	Three months ended March 31, 2025		
	Topicus Coop	Adapt-IT	Lumine
Revenue	374	26	179
Expenses	289	23	150
Income (loss) before income taxes	85	3	28
Income tax expense	10	1	8
Net income (loss) prior to non-controlling interest allocation	75	2	21
Less: Non-controlling interest of subsidaries, including interests held by CSI	0	-	-
Net income (loss) after allocation of non-controlling interest	75	2	21
Inter-group eliminations	(2)	-	1
Total	73	2	21
Net income (loss) attributable to non-controlling interests	29	1	8
Add: Non-controlling interest of subsidaries not owned by CSI	0	-	-
Total non-controlling interest	29	1	8

Financial information on the statement of cash flows for Topicus, Adapt-IT and Lumine for the three months ended March 31, 2026 and 2025:

	Three months ended March 31, 2026		
	Topicus Coop	Adapt-IT	Lumine
Cash flows from (used in) operating activities	329	12	20
Cash flows from (used in) financing activities	(299)	(1)	155
Cash flows from (used in) investing activities	(26)	(0)	(277)

	Three months ended March 31, 2025		
	Topicus Coop	Adapt-IT	Lumine
Cash flows from (used in) operating activities	284	14	40
Cash flows from (used in) financing activities	25	(4)	(6)
Cash flows from (used in) investing activities	(217)	(0)	4

19. Subsequent events

On May 12, 2026 the Company declared a $1.00 per share dividend that is payable on July 10, 2026 to all common shareholders of record at close of business on June 19, 2026.

Subsequent to March 31, 2026, the Company completed or has open commitments to acquire a number of businesses for aggregate cash consideration of $627 on closing plus total estimated deferred payments of $159 for total consideration of $786. The business acquisitions operate in the local government, printing, financial services, healthcare, security, education, marketing management, gaming, aviation, justice, manufacturing, mining, asset management, utilities, legal, defence, dealer, and travel verticals and are all software companies similar to the existing business of the Company.

COUNTY OF NASSAU

CONSULTANT'S, CONTRACTOR'S AND VENDOR'S DISCLOSURE FORM

1. Name of the Entity: AssetWorks Inc

Address: 1001 Old Cassatt Road #204

City: Berwyn State/Province/Territory: PA Zip/Postal Code: 19312

Country: US

2. Entity's Vendor Identification Number: 460521049

3. Type of Business: Other (specify) Private corporation- 100% owned by Constellation Software Inc

4. List names and addresses of all principals; that is, all individuals serving on the Board of Directors or comparable body, all partners and limited partners, all corporate officers, all parties of Joint Ventures, and all members and officers of limited liability companies (attach additional sheets if necessary):

First Name Greg
Last Name Richards
MI Suffix
Address 1001 Old Cassatt Rd
City Berwyn State/Province/Territory: PA Zip/Postal Code: 19312
Country US
Position Gneral Manager

5. List names and addresses of all shareholders, members, or partners of the firm. If the shareholder is not an individual, list the individual shareholders/partners/members. If a Publicly held Corporation, include a copy of the 10K in lieu of completing this section.
If none, explain.

AssetWorks Inc is a standalone subsidiary and 100% owned by Constellation Software Inc., its ultimate parent. Constellation Software Inc is a publicly traded corporation on the Toronto stock exchange and as such does not have a 10K. A copy of the 2025 Interim Financial Statement has been attached.

6. List all affiliated and related companies and their relationship to the firm entered on line 1. above (if none, enter "None"). Attach a separate disclosure form for each affiliated or subsidiary company that may take part in the performance of this contract. Such disclosure shall be updated to include affiliated or subsidiary companies not previously disclosed that participate in the

performance of the contract.

AssetWorks Inc is 100% owned by Constellation Software inc, but the performance of the contract is solely the responsibility of AssetWorks Inc.

7. List all lobbyists whose services were utilized at any stage in this matter (i.e., pre-bid, bid, post-bid, etc.). If none, enter "None." The term "lobbyist" means any and every person or organization retained, employed or designated by any client to influence - or promote a matter before - Nassau County, its agencies, boards, commissions, department heads, legislators or committees, including but not limited to the Open Space and Parks Advisory Committee and Planning Commission. Such matters include, but are not limited to, requests for proposals, development or improvement of real property subject to County regulation, procurements. The term "lobbyist" does not include any officer, director, trustee, employee, counsel or agent of the County of Nassau, or State of New York, when discharging his or her official duties.

Are there lobbyists involved in this matter?
YES [ ] NO [X]

(a) Name, title, business address and telephone number of lobbyist(s):

(b) Describe lobbying activity of each lobbyist. See below for a complete description of lobbying activities.

(c) List whether and where the person/organization is registered as a lobbyist (e.g., Nassau County, New York State):

8. VERIFICATION: This section must be signed by a principal of the consultant, contractor or Vendor authorized as a signatory of the firm for the purpose of executing Contracts.

The undersigned affirms and so swears that he/she has read and understood the foregoing statements and they are, to his/her knowledge, true and accurate.

Electronically signed and certified at the date and time indicated by:
Lynn Sons [LYNN.SONS@ASSETWORKS.COM]

Dated: 06/03/2026 12:16:49 pm

Title: Compliance Manager

The term lobbying shall mean any attempt to influence: any determination made by the Nassau County Legislature, or any member thereof, with respect to the introduction, passage, defeat, or substance of any local legislation or resolution; any determination by the County Executive to support, oppose, approve or disapprove any local legislation or resolution, whether or not such legislation has been introduced in the County Legislature; any determination by an elected County official or an officer or employee of the County with respect to the procurement of goods, services or construction, including the preparation of contract specifications, including by not limited to the preparation of requests for proposals, or solicitation, award or administration of a contract or with respect to the solicitation, award or administration of a grant, loan, or agreement involving the disbursement of public monies; any determination made by the County Executive, County Legislature, or by the County of Nassau, its agencies, boards, commissions, department heads or committees, including but not limited to the Open Space and Parks Advisory Committee, the Planning Commission, with respect to the zoning, use, development or improvement of real property subject to County regulation, or any agencies, boards, commissions, department heads or committees with respect to requests for proposals, bidding, procurement or contracting for services for the County; any determination made by an elected county official or an officer or employee of the county with respect to the terms of the acquisition or disposition by the county of any interest in real property, with respect to a license or permit for the use of real property of or by the county, or with respect to a franchise, concession or revocable consent; the proposal, adoption, amendment or rejection by an agency of any rule having the force and effect of law; the decision to hold, timing or outcome of any rate making proceeding before an agency; the agenda or any determination of a board or commission; any determination regarding the calendaring or scope of any legislature oversight hearing; the issuance, repeal, modification or substance of a County Executive Order; or any determination made by an elected county official or an officer or employee of the county to support or oppose any state or federal legislation, rule or regulation, including any determination made to support or oppose that is contingent on any amendment of such legislation, rule or regulation, whether or not such legislation has been formally introduced and whether or not such rule or regulation has been formally proposed.

REQUISITION

RQIT26000146 18/AUG/2026

VENDOR:
ASSETWORKS INC
998 OLD EAGLE SCHOOL RD
SUITE 1215
WAYNE PA 19087

TEL:(610)687-9202
FAX:(610)971-9447

REQUISITIONER:
IT DEPARTMENT OF INFORMATION TECH
240 OLD COUNTRY ROAD
6TH FLOOR
MINEOLA NY 11501
J.CARNEY/SASY SALOMON
TEL:(516)571-9923
FAX:(516)571-3918

ITEM	DESCRIPTION	QTY	U/M	UNIT COST	TOTAL	
001	920-45	1.00	EA	104,515.6500	104,515.65	

COMPUTER SOFTWARE MAINTENANCE/SUPPORT

ANNUAL FLEETFOCUSM5 & FUELFOCUS SOFTWARE MAINTENANCE AND SUPPORT
RENEWAL TERM: 9/1/2026 - 8/31/2027

FLEETFOCUS M5 LICENSE FOR UP TO 4,500 VEHICLE ASSETS $74,433.76
INCLUDING MOTOR POOL, REPLACEMENT, KPI/DASHBOARD,
AND SHOP PORTAL MODULES; BUSINESS OBJECTS ENTERPRISE
AND CRYSTAL DEVELOPER,NAPA INTEGRATION,& API SUBSCRIPTION
FUELFOCUS SOFTWARE, PUBLIC WORKS (12 ICU'S/SITES) $14,633.78
FUELFOCUS SOFTWARE, POLICE DEPARTMENT (11 ICU'S/SITES) $13,229.41
FUEL SITE AT MANHASSET ROAD MAINTENANCE GARAGE $ 2,218.70
==========
$104,515.65

SEND LICENSE KEYS TO SASY SALOMON: SSALOMON@NASSAUCOUNTYNY.GOV -AND-
ANDREW LESTER: ALESTER@NASSAUCOUNTYNY.GOV

BILL TO: I.T. ACCOUNTS PAYABLE
240 OLD COUNTRY ROAD 6TH FLOOR
MINEOLA, NY 11501
EMAIL TO: ITACCOUNTING@NASSAUCOUNTYNY.GOV

* END *

REQUISITION

RQIT26000146 18/AUG/2026

VENDOR:
ASSETWORKS INC
998 OLD EAGLE SCHOOL RD
SUITE 1215
WAYNE PA 19087

TEL:(610)687-9202
FAX:(610)971-9447

REQUISITIONER:
IT DEPARTMENT OF INFORMATION TECH
240 OLD COUNTRY ROAD
6TH FLOOR
MINEOLA NY 11501
J.CARNEY/SASY SALOMON
TEL:(516)571-9923
FAX:(516)571-3918

ESTIMATED TOTAL: 104,515.65

AssetWorks
1001 Old Cassatt Road Suite 204
Berwyn PA 19312

County of Nassau
240 Old Country Road, 6th Floor
Mineola, NY 11501

AssetWorks Fleet Invoice

AssetWORKS

Invoice Number: SIN021693
Invoice Date: 8/31/2026
Terms: Net 30
Invoice Due Date: 9/30/2026
Project Number: NASSAUCO-M5-MA2026; NASSAUCO-M5-MA2025
PO No.:

	Description/Notes	Total
1	Description *FleetFocus M5* Software Maintenance and Support for period September 1, 2026 - August 31, 2027	$74,433.76
2	Description *FuelFocus Software* Maintenance and Support, 12 ICUs - Public Works for period September 1, 2026 - August 31, 2027	$14,633.78
3	Description *FuelFocus Software* Maintenance and Support, 11 ICUs - Police Department for period September 1, 2026 - August 31, 2027	$13,229.41
4	Description *Fuel Site* at Manhasset Road Maintenance Garage Software Maintenance and Support for the period September 1, 2026 - August 31, 2027	$2,218.70

Subtotal	$104,515.65
Tax Total	$0.00
Invoice Total	$104,515.65

ALL SOFTWARE ELECTRONICALLY DELIVERED

All amounts are shown and payable in USD

AssetWorks US Tax ID # 46-0521049 - Canada GST/HST # 83411 3896 RT0001

Remit by CHECK to: AssetWorks, Inc. PO Box 202525. Dallas, TX. 75320-2525
Remit by EFT / ACH / WIRE to: Wells Fargo ABA Rtg# 122105278 Acct# 5076434348 Swift Address WFBIUS6S
Remit by CREDIT CARD: Accepted for invoices under $10,000.00. Larger amounts are subject to an additional 4% fee for credit card processing

If you have any questions regarding this invoice, please contact arsupport@assetworks.com. Thank You!

AssetWORKS

1001 Old Cassatt Road | Suite 204 | Berwyn PA 19312
Tel (484) 588-5515 Fax (610) 971-9447

MAINTENANCE RENEWAL STATEMENT

Number 8046 M5FL MNT26

TO: **Nassau County**
FROM: **AssetWorks Inc.**
DATE: **May 21, 2026**
RE: **FleetFocus M5 Maintenance and Support Renewal**

Prices valid through August 31, 2027

Annual Software Maintenance and Support for period 9/1/2026 - 8/31/2027

FleetFocus M5 license for up to 4,500 vehicle assets Including Motor Pool, Replacement, KPI/Dashboard, and Shop Portal modules; Business Objects Enterprise, Crystal Developer, NAPA Integration, and API subscription - all existing APIs excluding Telematics Cloud	$	74,433.76
FuelFocus software, Public Works (12 ICUs / sites)	$	14,633.78
FuelFocus software, Police Department (11 ICUs / sites)	$	13,229.41
Fuel Site at Manhasset Road Maintenance Garage	$	2,218.70
Includes product updates and enhancements, unlimited email and telephone support for 12 months		
Subtotal, Current Maintenance, not including tax and options	**$**	**104,515.65**

OPTIONAL MAINTENANCE BUNDLES

AssetWorks Academy Users Conference Admission [ ] Quantity @ $1,450.00/person

Management Review [ ] *Check here to receive a quote*

AssetWorks will perform onsite assessment relating maintenance practices to available system functionality to optimize organizational performance. This review will be scheduled at a mutually convenient time.

For Visa, MasterCard, and American Express payments, add 4%:

Sales Tax: 0.0000% $ -

All software updates are electronically delivered

GRAND TOTAL DUE, $ US **$ 104,515.65**

REMIT TO:

CHECKS
AssetWorks Inc.
PO Box 202525
Dallas TX 75320-2525

EFT, ACH, OR DIRECT DEPOSIT
Wells Fargo, 8601 N. Scottsdale Rd., Scottsdale AZ 85253
ABA # 122105278
Account # 5076434348

US Tax ID # 46-0521049
Canada GST/HST # 834113896 RT0001

If you require a separate invoice, complete this form and return it by email or fax; AssetWorks will issue an invoice as you instruct below. *If your organization requires us to reference a purchase order number on our invoice*, we must receive that PO by email to Alexis.Scheifley@AssetWorks.com or by fax to (610) 971-9447. ***Do not mail POs to our remittance address***.

Terms

Unless there is a signed agreement between the parties, this maintenance renewal is subject to the terms and conditions of the AssetWorks Master Service Agreement found at ***http://www.assetworks.com/TC-Fleet/.*** The parties will continue to be bound by those terms during any renewal period unless otherwise agreed by both parties through a signed amendment. Notification of termination of maintenance is required 90 days prior to annual renewal date.

SOLE SOURCE

FleetFocus is proprietary property of AssetWorks Inc. and protected by law. Another party cannot alter, modify, change, manipulate or provide maintenance for this product without infringing upon AssetWorks' ownership rights. Accordingly, **AssetWorks is the sole source for software, maintenance and services of its products.**

I, the undersigned, accept this maintenance renewal as described above.

Name: _____ **Title:** _____
Signature: _____ **Date:** _____
[ ] PO REQUIRED: #_____ [ ] NO PO REQUIRED [ ] NO SEPARATE INVOICE NEEDED

[ ] Please MAIL invoice to: _____
[ ] Please E-MAIL invoice to: _____

→ If you have any questions, please contact Alexis Scheifley at Alexis.Scheifley@AssetWorks.com. ***Thank You!*** ←

Bruce A. Blakeman
COUNTY EXECUTIVE

Nancy Stanton-Molaro
COMMISSIONER

DEPARTMENT OF INFORMATION TECHNOLOGY

June 16, 2026

TO: Robert Cleary, Chief Compliance Officer
Nassau County Dept. of Shared Services

Subject: Sole Source Requisition Justification RQIT26000146

Robert,

This requisition is for the annual AssetWorks FleetFocus M5 & FuelFocus software maintenance & support renewal used by DPW & PD that begins on 9/1/2026. This software is for the work order system used by all Public Works Fleet Maintenance staff for recording maintenance labor, parts, and vehicle inventory. In addition, this software is required for any Nassau County vehicle including police to get fuel through the automated fuel system. The cost is $104,515.65. Please note, the vendor is the sole source owner/supplier of the software and its maintenance. I have attached the quote with the highlighted sole source statement as well

Please let I.T. know if anything further is needed to approve the creation of the P.O.

Thank you,
Nancy

Nancy Stanton, Commissioner Of Information Technology
N.C. Dept. of Information Technology

240 OLD COUNTRY ROAD - MINEOLA, NEW YORK 11501 (516) 571-4311
Fax: (516) 571-3918

AssetWORKS

TO: **Nassau County**

FROM: **AssetWorks Inc.**

DATE: **June 5, 2026**

RE: **ASSETWORKS INC. (FLEET) - SOLE SOURCE PROVIDER**

AssetWorks Inc. is the Sole Source Provider and holds all rights to sales, distribution, implementation and development services, software licenses, maintenance, and support to the entirety of AssetWorks' suite of software and hardware solutions including but not limited to the following:

- AssetWorks GPS™
- AssetWorks GPS with Secure Fueling
- FleetFocus™ FA, FleetFocus M5, and FleetFocus Enterprise Asset Management System (EAM)
- FleetFocus™ Telematics Cloud Interface
- FuelFocus™ Fueling Management System and FuelDrive™
- MAXQueue™
- KeyValet™ Automated Motor Pool Management System.
- FluidFocus™ Interface
- FuelFocusEV™ Integration and AssetWorks CMS™ Charge Management Service

AssetWorks Inc. a stand-alone subsidiary of Constellation Software Inc. (TSX:CSU) incorporated in Delaware and headquartered in Wayne, Pennsylvania with Federal ID number 46-0521049.

Please feel free to contact me with any questions or concerns at:

Greg Richards, General Manager
AssetWorks Inc.
1001 Old Cassatt Rd, Suite 204
Berwyn, PA 19312
Tel: 610-687-9202/Email: lynn.sons@assetworks.com – (POC)

Signature:

Greg Richards,
General Manager

Compliance Approval

Status	Approved On	Approved By
Approved	**06/16/2026 10:09 AM**	**Allison Malhame**

Comment / Reject Reason

Go Actions

Action	Action On	Action By	Comments
Approved by Compliance	06/16/2026 10:09AM	Allison Malhame	
Submitted to Compliance	06/16/2026 06:51AM	Nancy Stanton	

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/29/2026

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

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

PRODUCER
Marsh Canada Limited
120 Bremner Boulevard, Suite 800
Toronto, ON M5J 0A8
CANADA

CN102165922-sndrd-GAWUP-26-27 Assetw

INSURED
CONSTELLATION SOFTWARE INC. AND
ASSETWORKS INC
1001 OLD CASSATT ROAD
BERWYN, PA 19312

CONTACT NAME:
PHONE (A/C, No, Ext):
FAX (A/C, No):
E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Federal Insurance Company	20281
INSURER B : ACE American Insurance Company	22667
INSURER C : XL Specialty Insurance Company	37885
INSURER D : Chubb Insurance Company Of Canada	1560196
INSURER E :	
INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** HOU-003960826-15 **REVISION NUMBER:** 4

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO-JECT LOC OTHER:			9950-48-39 WUC	09/27/2026	09/27/2027	EACH OCCURRENCE	$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 1,000,000
							MED EXP (Any one person)	$ 25,000
							PERSONAL & ADV INJURY	$ 1,000,000
							GENERAL AGGREGATE	$ 2,000,000
							PRODUCTS - COMP/OP AGG	$ 1,000,000
								$
A	AUTOMOBILE LIABILITY X ANY AUTO X OWNED AUTOS ONLY X HIRED AUTOS ONLY X SCHEDULED AUTOS X NON-OWNED AUTOS ONLY			7360-03-97	09/27/2026	09/27/2027	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
								$
D	X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION $			78183369	09/27/2026	09/27/2027	EACH OCCURRENCE	$ 9,000,000
							AGGREGATE	$ 9,000,000
								$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		(27)71764342	09/27/2026	09/27/2027	X PER STATUTE OTH-ER	
							E.L. EACH ACCIDENT	$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
C	Professional Liability Tech E&O & Cyber			US00158153EO26A	09/27/2026	09/27/2027	Limit	10,000,000
							SIR	2,500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Nassau County is included as additional insured (except workers compensation, Professional Liability and Errors & Omissions) where required by written contract.

CERTIFICATE HOLDER

NASSAU COUNTY
ATTN: OFFICE OF PURCHASING
240 OLD COUNTRY ROAD, ROOM 307
MINEOLA, NY 11501

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Marsh USA LLC

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AGENCY CUSTOMER ID: CN102165922
LOC #: Canada

ADDITIONAL REMARKS SCHEDULE

AGENCY Marsh Canada Limited	NAMED INSURED CONSTELLATION SOFTWARE INC. AND ASSETWORKS INC 1001 OLD CASSATT ROAD BERWYN, PA 19312
POLICY NUMBER	
CARRIER / NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance

THE US COMMERCIAL GENERAL LIABILITY POLICY, US AUTOMOBILE POLICY, US WORKERS COMPENSATION & EMPLOYER'S LIABILITY POLICY, AND TECHNOLOGY E&O LIABILITY POLICY HAVE BEEN PLACED BY SERVICE OF MARSH USA INC. MARSH CANADA LIMITED HAS ONLY ACTED IN THE ROLE OF A CONSULTANT TO THE CLIENT WITH RESPECT TO THESE PLACEMENTS WHICH ARE INDICATED HERE FOR YOUR CONVENIENCE.

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NEW YORK STATE | Workers' Compensation Board

CERTIFICATE OF NYS WORKERS' COMPENSATION INSURANCE COVERAGE

1a. Legal Name & Address of Insured (use street address only) AssetWorks Inc 1001 Old Cassatt Road #204 Berwyn, PA 19312 Work Location of Insured *(Only required if coverage is specifically limited to certain locations in New York State, i.e., a Wrap-Up Policy)*	1b. Business Telephone Number of Insured 610-687-9202 1c. NYS Unemployment Insurance Employer Registration Number of Insured DB578 30-3 1d. Federal Employer Identification Number of Insured or Social Security Number 460521049
2. Name and Address of Entity Requesting Proof of Coverage (Entity Being Listed as the Certificate Holder) NassauCounty 240 Old Country Rd Mineola, NY 11501	3a. Name of Insurance Carrier Federal Insurance Company 3b. Policy Number of Entity Listed in Box "1a" (21) 7176-43-42 3c. Policy effective period 09/27/2026 to 09/27/27 3d. The Proprietor, Partners or Executive Officers are ☒ included. (Only check box if all partners/officers included) ☐ all excluded or certain partners/officers excluded.

This certifies that the insurance carrier indicated above in box "3" insures the business referenced above in box "1a" for workers' compensation under the New York State Workers' Compensation Law. **(To use this form, New York (NY) must be listed under Item 3A on the INFORMATION PAGE of the workers' compensation insurance policy)**. The Insurance Carrier or its licensed agent will send this Certificate of Insurance to the entity listed above as the certificate holder in box "2".

The insurance carrier must notify the above certificate holder and the Workers' Compensation Board within 10 days IF a policy is canceled due to nonpayment of premiums or within 30 days IF there are reasons other than nonpayment of premiums that cancel the policy or eliminate the insured from the coverage indicated on this Certificate. (These notices may be sent by regular mail.) Otherwise, this **Certificate is valid for one year after this form is approved by the insurance carrier or its licensed agent, or until the policy expiration date listed in box "3c", whichever is earlier.**

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policy listed, nor does it confer any rights or responsibilities beyond those contained in the referenced policy.

This certificate may be used as evidence of a Workers' Compensation contract of insurance only while the underlying policy is in effect.

Please Note: Upon cancellation of the workers' compensation policy indicated on this form, if the business continues to be named on a permit, license or contract issued by a certificate holder, the business must provide that certificate holder with a new Certificate of Workers' Compensation Coverage or other authorized proof that the business is complying with the mandatory coverage requirements of the New York State Workers' Compensation Law.

Under penalty of perjury, I certify that I am an authorized representative or licensed agent of the insurance carrier referenced above and that the named insured has the coverage as depicted on this form.

Approved by: Paul Morrissette
(Print name of authorized representative or licensed agent of insurance carrier)

Approved by: _____ September 29, 2026
(Signature)

Title: Senior Vice President

Telephone Number of authorized representative or licensed agent of insurance carrier: _____

Please Note: Only insurance carriers and their licensed agents are authorized to issue Form C-105.2. Insurance brokers are NOT authorized to issue it.

Workers' Compensation Law

Section 57. Restriction on issue of permits and the entering into contracts unless compensation is secured.

1. The head of a state or municipal department, board, commission or office authorized or required by law to issue any permit for or in connection with any work involving the employment of employees in a hazardous employment defined by this chapter, and notwithstanding any general or special statute requiring or authorizing the issue of such permits, shall not issue such permit unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that compensation for all employees has been secured as provided by this chapter. Nothing herein, however, shall be construed as creating any liability on the part of such state or municipal department, board, commission or office to pay any compensation to any such employee if so employed.

2. The head of a state or municipal department, board, commission or office authorized or required by law to enter into any contract for or in connection with any work involving the employment of employees in a hazardous employment defined by this chapter, notwithstanding any general or special statute requiring or authorizing any such contract, shall not enter into any such contract unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that compensation for all employees has been secured as provided by this chapter.

NEW YORK STATE | Workers' Compensation Board

CERTIFICATE OF INSURANCE COVERAGE
DISABILITY AND PAID FAMILY LEAVE BENEFITS LAW

PART 1. To be completed by Disability and Paid Family Leave Benefits Carrier or Licensed Insurance Agent of that Carrier

1a. Legal Name & Address of Insured (use street address only)

Assetworks Inc
1001 Old Cassatt Rd
Suite 204
Berwyn,PA 19312

Work Location of Insured *(Only required if coverage is specifically limited to certain locations in New York State, i.e., Wrap-Up Policy)*

1b. Business Telephone Number of Insured

1c. Federal Employer Identification Number of Insured or Social Security Number

46-0521049

2. Name and Address of Entity Requesting Proof of Coverage (Entity Being Listed as the Certificate Holder)

NassauCounty
240 Old Country Rd
Mineola, NY 11501

3a. Name of Insurance Carrier

The Prudential Insurance Company of America

3b. Policy Number of Entity Listed in Box "1a"

CG-52028-NY

3c. Policy effective period

01/01/2026 to 12/31/2026

4. Policy provides the following benefits:
   - [X] A. Both disability and paid family leave benefits.
   - [ ] B. Disability benefits only.
   - [ ] C. Paid family leave benefits only.

5. Policy covers:
   - [X] A. All of the employer's employees eligible under the NYS Disability and Paid Family Leave Benefits Law.
   - [ ] B. Only the following class or classes of employer's employees:

Under penalty of perjury, I certify that I am an authorized representative or licensed agent of the insurance carrier referenced above and that the named insured has NYS Disability and/or Paid Family Leave Benefits insurance coverage as described above.

Date Signed February 21, 2026 By [signature]
(Signature of insurance carrier's authorized representative or NYS Licensed Insurance Agent of that insurance carrier)

Telephone Number (215) 784-2883 Name and Title Vice President, Contracts

IMPORTANT: If Boxes 4A and 5A are checked, and this form is signed by the insurance carrier's authorized representative or NYS Licensed Insurance Agent of that carrier, this certificate is COMPLETE. Mail it directly to the certificate holder.

If Box 4B, 4C or 5B is checked, this certificate is NOT COMPLETE for purposes of Section 220, Subd. 8 of the NYS Disability and Paid Family Leave Benefits Law. It must be mailed for completion to the Workers' Compensation Board, Plans Acceptance Unit, PO Box 5200, Binghamton, NY 13902-5200.

PART 2. To be completed by the NYS Workers' Compensation Board (Only if Box 4C or 5B of Part 1 has been checked)

State of New York
Workers' Compensation Board

According to information maintained by the NYS Workers' Compensation Board, the above-named employer has complied with the NYS Disability and Paid Family Leave Benefits Law with respect to all of his/her employees.

Date Signed _____ By _____
(Signature of Authorized NYS Workers' Compensation Board Employee)

Telephone Number _____ Name and Title _____

Please Note: *Only insurance carriers licensed to write NYS disability and paid family leave benefits insurance policies and NYS licensed insurance agents of those insurance carriers are authorized to issue Form DB-120.1.* ***Insurance brokers are NOT authorized to issue this form.***

DB-120.1 (10-17)

Additional Instructions for Form DB-120.1

By signing this form, the insurance carrier identified in Box 3 on this form is certifying that it is insuring the business referenced in box "1a" for disability and/or paid family leave benefits under the New York State Disability and Paid Family Leave Benefits Law. The Insurance Carrier or its licensed agent will send this Certificate of Insurance to the entity listed as the certificate holder in Box 2.

The insurance carrier must notify the above certificate holder and the Workers' Compensation Board within 10 days IF a policy is cancelled due to nonpayment of premiums or within 30 days IF there are reasons other than nonpayment of premiums that cancel the policy or eliminate the insured from coverage indicated on this Certificate. (These notices my be sent by regular mail.) Otherwise, this Certificate is valid for one year after this form is approved by the insurance carrier or its licensed agent, or until the policy expiration date listed in Box 3c, whichever is earlier

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policy listed, nor does it confer any rights or responsibilities beyond those contained in the referenced policy.

This certificate may be used as evidence of a Disability and/or Paid Family Leave Benefits contract of insurance only while the underlying policy is in effect.

Please Note: Upon the cancellation of the disability and/or paid family leave benefits policy indicated on this form, if the business continues to be named on a permit, license or contract issued by a certificate holder, the business must provide that certificate holder with a new Certificate of NYS Disability and/or Paid Family Leave Benefits Coverage or other authorized proof that the business is complying with the mandatory coverage requirements of the New York State Disability and Paid Family Leave Benefits Law.

DISABILITY AND PAID FAMILY LEAVE BENEFITS LAW

§220. Subd. 8

(a) The head of a state or municipal department, board, commission or office authorized or required by law to issue any permit for or in connection with any work involving the employment of employees in employment as defined in this article, and not withstanding any general or special statute requiring or authorizing the issue of such permits, shall not issue such permit unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that the payment of disability benefits and after January first, two thousand and twenty-one, the payment of family leave benefits for all employees has been secured as provided by this article. Nothing herein, however, shall be construed as creating any liability on the part of such state or municipal department, board, commission or office to pay any disability benefits to any such employee if so employed.

(b) The head of a state or municipal department, board, commission or office authorized or required by law to enter into any contract for or in connection with any work involving the employment of employees in employment as defined in this article and notwithstanding any general or special statute requiring or authorizing any such contract, shall not enter into any such contract unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that the payment of disability benefits and after January first, two thousand eighteen, the payment of family leave benefits for all employees has been secured as provided by this article.

Nassau County Shared Services,
Office of Purchasing

Staff Summary A-69-2026

Subject: Wheel Loader (S/B 76051-08136-173 /REQ: RQPW26000042)	Date: August 21, 2026
Department: Department of Shared Services Office of Purchasing	Vendor Name: All Island Equipment Corp.
Department Head Name: Melissa Gallucci	Contract Number: A-69-2026
Department Head Signature: Melissa Gallucci	Contract Manager Name: Anette Sullivan, Buyer

RECEIVED NASSAU COUNTY CLERK OF THE LEGISLATURE 2026 OCT 16 A 11:08

Internal Approvals

Date & Init.	Approval	Date & Init.	Approval
10/8/2026	Chief Procurement Officer	AP 10/13/26	Budget
10/8/2026	County Attorney	10/16/26	County Executive
10/8/2026			

Significant Adverse Information Identified? Yes / No **X** (If Yes, attach memo.)

Narrative

Purpose: To award and execute a purchase order between the Nassau County Department of Public Works and All Island Equipment Corporation for a Wheel Loader.

Discussion: This solicitation was advertised in The New York Post and The NYS Contract Reporter, in addition to being posted to the Nassau County Bid Solicitation Board. Minority Affairs was also notified of this solicitation.

Vendors Viewed the solicitation 16	**Vendors bid on this solicitation 1**
6 Woman owned business	Woman owned business
3 Minority (African/American)	Minority (African/American)
14 Small Business	Small Business
Service Disabled (Veteran) owned	Service Disabled (Veteran) Owned
Veteran Owned Business	Veteran Owned Business
None of the Above	None of the Above

The identified lowest responsible bidder, All Island Equipment Corporation is not listed in the above categories.

Impact on Funding/Term: The maximum amount authorized under this purchase shall be Two Hundred Seventeen Thousand Seven Hundred Dollars ($217,700.00) from funds PWCAPCAP 00005.

Recommendation: Department of Shared Services, Office of Purchasing recommends an award be given to All Island Equipment Corporation, as the lowest responsible vendor meeting specifications.

COUNTY OF NASSAU

INTER – DEPARTMENTAL MEMO

TO: CLERK OF THE COUNTY LEGISLATURE **A-69-2026**

FROM: MELISSA GALLUCCI - COMMISSIONER OF SHARED SERVICES

DATE: AUGUST 21, 2026

SUBJECT: RESOLUTION– THE NASSAU COUNTY DEPARTMENT OF PUBLIC WORKS

THIS RESOLUTION IS RECOMMENDED BY THE COMMISSIONER OF SHARED SERVICES TO AUTHORIZE AN AWARD AND TO EXECUTE A PURCHASE ORDER IN THE AMOUNT OF TWO HUNDRED SEVENTEEN THOUSAND SEVEN HUNDRED DOLLARS ($217,700.00) ON BEHALF OF THE NASSAU COUNTY DEPARTMENT OF PUBLIC WORKS TO ALL ISLAND EQUIPMENT CORPORATION FOR AWHEEL LOADER.

.

THE ABOVE-DESCRIBED DOCUMENT ATTACHED HERETO IS FORWARDED FOR YOUR REVIEW AND APPROVAL AND SUBSEQUENT TRANSMITTAL TO THE RULES COMMITTEE FOR INCLUSION IN ITS AGENDA.

Melissa Gallucci

MELISSA GALLUCCI
COMMISSIONER OF SHARED SERVICES

KS
ENCL: (1) STAFF SUMMARY
(2) MEMO
(3) RESOLUTION
(4) DISCLOSURE STATEMENT
(5) BID PROPOSAL
(6) RECOMMENDATION OF AWARD
(7) BID TABULATION
(8) CERTIFICATE OF LIABILITY INSURANCE

RULES RESOLUTION 2026

A RESOLUTION AUTHORIZING THE COMMISSIONER OF SHARED SERVICES TO AWARD AND EXECUTE A PURCHASE ORDER BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF THE NASSAU COUNTY DEPARTMENT OF PUBLIC WORKS, AND ALL ISLAND EQUIPMENT CORPORATION.

WHEREAS, the NASSAU COUNTY DEPARTMENT OF SHARED SERVICES, OFFICE OF PURCHASING has received competitive bids under sealed bid solicitation # 76051-08136-173 for a wheel loader for The Nassau County Department of Public Works, as more particularly described in the bid document; and

WHEREAS, the Commissioner of Shared Services is representing to the Rules Committee that All Island Equipment Corporation submitted the lowest responsible bid and meets all specifications for the product and/or services described in the said bid document as determined by the Commissioner of Shared Services.

RESOLVED, that the Rules Committee of the Nassau County Legislature authorizes the Commissioner of Shared Services to award and execute the said Purchase Order with All Island Equipment Corporation.

COUNTY OF NASSAU

POLITICAL CAMPAIGN CONTRIBUTION DISCLOSURE FORM

1. Has the vendor or any corporate officers of the vendor provided campaign contributions pursuant to the New York State Election Law in (a) the period beginning April 1, 2016 and ending on the date of this disclosure, or (b), beginning April 1, 2018, the period beginning two years prior to the date of this disclosure and ending on the date of this disclosure, to the campaign committees of any of the following Nassau County elected officials or to the campaign committees of any candidates for any of the following Nassau County elected offices: the County Executive, the County Clerk, the Comptroller, the District Attorney, or any County Legislator?

YES [ ] NO [X] If yes, to what campaign committee?

Electronically signed and certified at the date and time indicated by:
Renee Pisculli [RENEE@ALLISLANDEQUIPMENT.COM]

Dated: 08/18/2026 01:17:00 pm

Vendor: All Island Equipment Corp.

Title: Sec/Controller

Rev. 3-2016

Business History Form

The contract shall be awarded to the responsible proposer who, at the discretion of the County, taking into consideration the reliability of the proposer and the capacity of the proposer to perform the services required by the County, offers the best value to the County and who will best promote the public interest.

In addition to the submission of proposals, each proposer shall complete and submit this questionnaire. The questionnaire shall be filled out by the owner of a sole proprietorship or by an authorized representative of the firm, corporation or partnership submitting the Proposal.

NOTE: All questions require a response, even if response is "none" or "not-applicable." No blanks.

(USE ADDITIONAL SHEETS IF NECESSARY TO FULLY ANSWER THE FOLLOWING QUESTIONS).

Date: 07/16/2026

1) Proposer's Legal Name: All Island Equipment Corp.

2) Address of Place of Business: 39 Jersey Street

City: West Babylon State/Province/ Territory: NY Zip/Postal Code: 11704

Country: US

3) Mailing Address (if different):

City: State/Province/ Territory: Zip/Postal Code:

Country:

Phone:

Does the business own or rent its facilities? Own If other, please provide details:

4) Dun and Bradstreet number: 054992318

5) Federal I.D. Number: 11-2246143

6) The proposer is a: Corporation (Describe)

7) Does this business share office space, staff, or equipment expenses with any other business?
YES [ ] NO [X] If yes, please provide details:

8) Does this business control one or more other businesses?
YES [ ] NO [X] If yes, please provide details:

9) Does this business have one or more affiliates, and/or is it a subsidiary of, or controlled by, any other business?
YES [ ] NO [X] If yes, please provide details:

10) Has the proposer ever had a bond or surety cancelled or forfeited, or a contract with Nassau County or any other government entity terminated?
YES [ ] NO [X] If yes, state the name of bonding agency, (if a bond), date, amount of bond and reason for such cancellation or forfeiture: or details regarding the termination (if a contract).

11) Has the proposer, during the past seven years, been declared bankrupt?
YES [ ] NO [X] If yes, state date, court jurisdiction, amount of liabilities and amount of assets

12) In the past five years, has this business and/or any of its owners and/or officers and/or any affiliated business, been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency? And/or, in the past 5 years, have any owner and/or officer of any affiliated business been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency, where such investigation was related to activities performed at, for, or on behalf of an affiliated business.
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

13) In the past 5 years, has this business and/or any of its owners and/or officers and/or any affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies? And/or, in the past 5 years, has any owner and/or officer of an affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies, for matters pertaining to that individual's position at or relationship to an affiliated business.
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

14) Has any current or former director, owner or officer or managerial employee of this business had, either before or during such person's employment, or since such employment if the charges pertained to events that allegedly occurred during the time of employment by the submitting business, and allegedly related to the conduct of that business:
a) Any felony charge pending?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

b) Any misdemeanor charge pending?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

c) In the past 10 years, you been convicted, after trial or by plea, of any felony and/or any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

d) In the past 5 years, been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

e) In the past 5 years, been found in violation of any administrative, statutory, or regulatory provisions?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

15) In the past (5) years, has this business or any of its owners or officers, or any other affiliated business had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

16) For the past (5) tax years, has this business failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide details for each such year. Provide a detailed response to all questions checked 'YES'. If you need more space, photocopy the appropriate page and attach it to the questionnaire.

17 Conflict of Interest:

a) Please disclose any conflicts of interest as outlined below. NOTE: If no conflicts exist, please expressly state "No conflict exists."

(i) Any material financial relationships that your firm or any firm employee has that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No conflict exists

(ii) Any family relationship that any employee of your firm has with any County public servant that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No conflict exists

(iii) Any other matter that your firm believes may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No conflict exists

b) Please describe any procedures your firm has, or would adopt, to assure the County that a conflict of interest would not exist for your firm in the future.

We would identify any employee that may have familiar or financial relationship with any County public servant and make sure that they have NO involvement.

A. Include a resume or detailed description of the Proposer's professional qualifications, demonstrating extensive experience in your profession. Any prior similar experiences, and the results of these experiences, must be identified.

Have you previously uploaded the below information under in the Document Vault?
YES [X] NO [ ]

Is the proposer an individual?

YES [ ] NO [X] Should the proposer be other than an individual, the Proposal MUST include:

i) Date of formation;

10/18/1971

ii) Name, addresses, and position of all persons having a financial interest in the company, including shareholders, members, general or limited partner. If none, explain.

First Name	Gary				
Last Name	Wade				
MI		Suffix			
Address	96 Bayview Ave				
City	Babylon	State/Province/ Territory	NY	Zip/Postal Code	11702
Country	US				
Position	President				

First Name	Daryl				
Last Name	Wade				
MI		Suffix			
Address	39 Jersey Street				
City	West Babylon	State/Province/ Territory	NY	Zip/Postal Code	11704
Country	US				
Position	Shareholder				

iii) Name, address and position of all officers and directors of the company. If none, explain.

First Name	Renee				
Last Name	Pisculli				
MI		Suffix			
Address	96 Bayview Ave				
City	Babylon	State/Province/ Territory	NY	Zip/ Postal Code	11702
Country	US				
Position	Secretary				

First Name	Gary		
Last Name	Wade		
MI		Suffix	

Address	96 Bayview Ave				
City	Babylon	State/Province/ Territory	NY	Zip/ Postal Code	11702
Country	US				
Position	President				

First Name	Daryl				
Last Name	Wade				
MI		Suffix			
Address	39 Jersey Street				
City	West Babylon	State/Province/ Territory	NY	Zip/ Postal Code	11704
Country	US				
Position	Shareholder				

iv) State of incorporation (if applicable);

NY

v) The number of employees in the firm;

20

vi) Annual revenue of firm;

20000000

vii) Summary of relevant accomplishments

We hold several municipal contracts with Suffolk County, Town of Riverhead, Town of Islip Department of Sanitation, City of New York, Town of Oyster Bay, Nassau County

viii) Copies of all state and local licenses and permits.

B. Indicate number of years in business.

54

C. Provide any other information which would be appropriate and helpful in determining the Proposer's capacity and reliability to perform these services.

We have been in business for over 50 years servicing municipalities and have several municipal contracts

D. Provide names and addresses for no fewer than three references for whom the Proposer has provided similar services or who are qualified to evaluate the Proposer's capability to perform this work.

Company	Town of Islip DPW		
Contact Person	Tom Owens		
Address	401 Main Street		
City	Islip	State/Province/Territory	NY

Country	US
Telephone	(631) 988-2727
Fax #	
E-Mail Address	towens@islipny.gov

Company	Town of Southampton		
Contact Person	Marc Braeger		
Address	20 Jackson Ave		
City	Hampton Bays	State/Province/Territory	NY
Country	US		
Telephone	(631) 702-2579		
Fax #			
E-Mail Address	mbraeger@southamptontownny.gov		

Company	Town of Oyster Bay		
Contact Person	Mike Cipriano		
Address	150 Miller Place		
City	Syosset	State/Province/Territory	NY
Country	US		
Telephone	(516) 677-5825		
Fax #			
E-Mail Address	mcipriano@oysterbay-ny.gov		

I, Renee Pisculli , hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Renee Pisculli , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Name of submitting business: All Island Equipment Corp.

Electronically signed and certified at the date and time indicated by:
Renee Pisculli RENEE@ALLISLANDEQUIPMENT.COM

Sec/Controller
Title

08/18/2026 01:33:44 pm
Date

New York State Department of Taxation and Finance

Certificate of Authority

Identification number

11-2246143

(Use this number on all returns and correspondence)

VALIDATED

7/6/2009

Dept of Tax
and Finance

ALL ISLAND EQUIPMENT CORP.
39 JERSEY ST
WEST BABYLON NY 11704-1206

is authorized to collect sales and use taxes under Articles 28 and 29 of the New York State Tax Law.

Nontransferable

This certificate must be prominently displayed at your place of business.
Fraudulent or other improper use of this certificate will cause it to be revoked.
The certificate may not be photocopied or reproduced.

405011108098 1DC3 - 1880635 P0000115- 01 DTF-17-A-R (11/08)

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: Gary Wade
   Date of birth: 12/30/1968
   Home address: 96 Bayview Ave.
   City: Babylon State/Province/Territory: NY Zip/Postal Code: 11702
   Country: US

   Business Address: 39 Jersey Street
   City: West Babylon State/Province/Territory: NY Zip/Postal Code: 11704
   Country US
   Telephone: 631-643-2605

   Other present address(es):
   City: State/Province/Territory: Zip/Postal Code:
   Country:
   Telephone:

   List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President	01/01/1988	Treasurer	
Chairman of Board		Shareholder	
Chief Exec. Officer		Secretary	
Chief Financial Officer		Partner	
Vice President			
(Other)			

3. Do you have an equity interest in the business submitting the questionnaire?
   YES [X] NO [ ] If Yes, provide details.
   64%

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?
   YES [ ] NO [X] If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?
YES [ ] NO [X] If Yes, provide details.

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?
YES [ ] NO [X] If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:
   a. Been debarred by any government agency from entering into contracts with that agency?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?
YES [ ] NO [X] If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.
   a. Is there any felony charge pending against you?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

b. Is there any misdemeanor charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

c. Is there any administrative charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

f. In the past 5 years, have you been found in violation of any administrative or statutory charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

11. In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

12. In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

13. For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

I, Gary Wade, hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Gary Wade, hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

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All Island Equipment Corp.

Name of submitting business

Electronically signed and certified at the date and time indicated by:
Gary Wade GARY@ALLISLANDEQUIPMENT.COM

President

Title

08/18/2026 01:27:41 pm

Date

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: Daryl Wade
   Date of birth: 03/17/1974
   Home address: 8 Ashford Dr
   City: Bohemia State/Province/Territory: NY Zip/Postal Code: 11716
   Country: US

   Business Address: 39 Jersey Street
   City: West Babylon State/Province/Territory: NY Zip/Postal Code: 11704
   Country US
   Telephone: 6316432605

   Other present address(es):
   City: State/Province/Territory: Zip/Postal Code:
   Country:
   Telephone:

   List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President		Treasurer	
Chairman of Board		Shareholder	07/15/2020
Chief Exec. Officer		Secretary	
Chief Financial Officer		Partner	
Vice President			
(Other)			

3. Do you have an equity interest in the business submitting the questionnaire?
   YES [X] NO [ ] If Yes, provide details.
   34%

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?
   YES [ ] NO [X] If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?
YES [ ] NO [X] If Yes, provide details.

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?
YES [ ] NO [X] If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:
   a. Been debarred by any government agency from entering into contracts with that agency?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?
YES [ ] NO [X] If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.
   a. Is there any felony charge pending against you?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

b. Is there any misdemeanor charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

c. Is there any administrative charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

f. In the past 5 years, have you been found in violation of any administrative or statutory charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

11. In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

12. In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

13. For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

I, Daryl Wade, hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Daryl Wade, hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

All Island Equipment Corp

Name of submitting business

Electronically signed and certified at the date and time indicated by:
Daryl Wade DWADE@ALLISLANDEQUIPMENT.COM

Shareholder

Title

08/18/2026 01:31:03 pm

Date

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: Renee Pisculli
   Date of birth: 07/14/1968
   Home address: 96 Bayview Ave
   City: Babylon State/Province/Territory: NY Zip/Postal Code: 11702
   Country: US

   Business Address: 39 Jersey Street
   City: West Babylon State/Province/Territory: NY Zip/Postal Code: 11704
   Country US
   Telephone: 631-643-2605

   Other present address(es):
   City: State/Province/Territory: Zip/Postal Code:
   Country:
   Telephone:

   List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President		Treasurer	
Chairman of Board		Shareholder	
Chief Exec. Officer		Secretary	07/01/2010
Chief Financial Officer		Partner	
Vice President			
(Other)			

3. Do you have an equity interest in the business submitting the questionnaire?
   YES [ ] NO [X] If Yes, provide details.

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?
   YES [ ] NO [X] If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?
YES [ ] NO [X] If Yes, provide details.

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?
YES [ ] NO [X] If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:
   a. Been debarred by any government agency from entering into contracts with that agency?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?
YES [ ] NO [X] If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.
   a. Is there any felony charge pending against you?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

b. Is there any misdemeanor charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

c. Is there any administrative charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

f. In the past 5 years, have you been found in violation of any administrative or statutory charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

11. In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

12. In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

13. For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

I, Renee Pisculli , hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Renee Pisculli , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

All Island Equipment corp.

Name of submitting business

Electronically signed and certified at the date and time indicated by:
Renee Pisculli RENEE@ALLISLANDEQUIPMENT.COM

Sec/Controller

Title

08/18/2026 01:18:55 pm

Date

COUNTY OF NASSAU

CONSULTANT'S, CONTRACTOR'S AND VENDOR'S DISCLOSURE FORM

1. Name of the Entity: All Island Equipment Corp.

Address: 39 Jersey Street

City: West Babylon State/Province/Territory: NY Zip/Postal Code: 11704

Country: US

2. Entity's Vendor Identification Number: 11-2246143

3. Type of Business: Closely Held Corp (specify)

4. List names and addresses of all principals; that is, all individuals serving on the Board of Directors or comparable body, all partners and limited partners, all corporate officers, all parties of Joint Ventures, and all members and officers of limited liability companies (attach additional sheets if necessary):

First Name Renee
Last Name Pisculli
MI Suffix
Address 96 Bayview Ave
City Babylon State/Province/ Territory: NY Zip/Postal Code: 11702
Country US
Position Secretary

First Name Gary
Last Name Wade
MI Suffix
Address 96 Bayview Ave
City Babylon State/Province/ Territory: NY Zip/Postal Code: 11702
Country US
Position President

5. List names and addresses of all shareholders, members, or partners of the firm. If the shareholder is not an individual, list the individual shareholders/partners/members. If a Publicly held Corporation, include a copy of the 10K in lieu of completing

this section.
If none, explain.

First Name	Daryl
Last Name	Wade
MI	Suffix
Address	39 Jersey Street
City	West Babylon State/Province/ Territory: NY Zip/Postal Code: 11704
Country	US
Position	Shareholder

First Name	Gary
Last Name	Wade
MI	Suffix
Address	39 Jersey Street
City	West Babylon State/Province/ Territory: NY Zip/Postal Code: 11704
Country	US
Position	President

6. List all affiliated and related companies and their relationship to the firm entered on line 1. above (if none, enter "None"). Attach a separate disclosure form for each affiliated or subsidiary company that may take part in the performance of this contract. Such disclosure shall be updated to include affiliated or subsidiary companies not previously disclosed that participate in the performance of the contract.

None

7. List all lobbyists whose services were utilized at any stage in this matter (i.e., pre-bid, bid, post-bid, etc.). If none, enter "None." The term "lobbyist" means any and every person or organization retained, employed or designated by any client to influence - or promote a matter before - Nassau County, its agencies, boards, commissions, department heads, legislators or committees, including but not limited to the Open Space and Parks Advisory Committee and Planning Commission. Such matters include, but are not limited to, requests for proposals, development or improvement of real property subject to County regulation, procurements. The term "lobbyist" does not include any officer, director, trustee, employee, counsel or agent of the County of Nassau, or State of New York, when discharging his or her official duties.

Are there lobbyists involved in this matter?
YES [ ] NO [X]

(a) Name, title, business address and telephone number of lobbyist(s):

(b) Describe lobbying activity of each lobbyist. See below for a complete description of lobbying activities.

(c) List whether and where the person/organization is registered as a lobbyist (e.g., Nassau County, New York State):

8. VERIFICATION: This section must be signed by a principal of the consultant, contractor or Vendor authorized as a signatory of the firm for the purpose of executing Contracts.

The undersigned affirms and so swears that he/she has read and understood the foregoing statements and they are, to his/her knowledge, true and accurate.

Electronically signed and certified at the date and time indicated by:
Renee Pisculli [RENEE@ALLISLANDEQUIPMENT.COM]

Dated: 08/18/2026 01:21:35 pm

Title: Sec/Controller

The term lobbying shall mean any attempt to influence: any determination made by the Nassau County Legislature, or any member thereof, with respect to the introduction, passage, defeat, or substance of any local legislation or resolution; any determination by the County Executive to support, oppose, approve or disapprove any local legislation or resolution, whether or not such legislation has been introduced in the County Legislature; any determination by an elected County official or an officer or employee of the County with respect to the procurement of goods, services or construction, including the preparation of contract specifications, including by not limited to the preparation of requests for proposals, or solicitation, award or administration of a contract or with respect to the solicitation, award or administration of a grant, loan, or agreement involving the disbursement of public monies; any determination made by the County Executive, County Legislature, or by the County of Nassau, its agencies, boards, commissions, department heads or committees, including but not limited to the Open Space and Parks Advisory Committee, the Planning Commission, with respect to the zoning, use, development or improvement of real property subject to County regulation, or any agencies, boards, commissions, department heads or committees with respect to requests for proposals, bidding, procurement or contracting for services for the County; any determination made by an elected county official or an officer or employee of the county with respect to the terms of the acquisition or disposition by the county of any interest in real property, with respect to a license or permit for the use of real property of or by the county, or with respect to a franchise, concession or revocable consent; the proposal, adoption, amendment or rejection by an agency of any rule having the force and effect of law; the decision to hold, timing or outcome of any rate making proceeding before an agency; the agenda or any determination of a board or commission; any determination regarding the calendaring or scope of any legislature oversight hearing; the issuance, repeal, modification or substance of a County Executive Order; or any determination made by an elected county official or an officer or employee of the county to support or oppose any state or federal legislation, rule or regulation, including any determination made to support or oppose that is contingent on any amendment of such legislation, rule or regulation, whether or not such legislation has been formally introduced and whether or not such rule or regulation has been formally proposed.

FORMAL SEALED BID PROPOSAL

STATE OF NEW YORK

COUNTY OF NASSAU

BIDS WILL BE RECEIVED AND OPENED AT OFFICE OF PURCHASING, 1 WEST STREET, NORTH ENTRANCE, MINEOLA, NEW YORK 11501 OFFICE HOURS 9 AM – NOON & 1 PM – 4:45 PM

BID NUMBER 76051-08136-173

Dated: 7/2/26

BID OPENING DATE 8/13/26 11:00 A.M. E.D.T.

BUYER	TELEPHONE	REQUISITION NUMBER
Anette Sullivan	516 571 6103	RQPW26000040

OFFICE OF PURCHASING AUG 13 2026 OPENED 11AM

PREPARE YOUR BID ON THIS FORM USING BLACK INK OR TYPEWRITER

BID TITLE: Wheel Loader

- ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED

THE UNDERSIGNED BIDDER AFFIRMS AND DECLARES THAT HE/SHE HAS CAREFULLY EXAMINED THE ADVERTISED INVITATION FOR BIDS, THE BID TERMS AND CONDITIONS, AND DETAILED SPECIFICATIONS, AND CERTIFIES THAT THIS BID IS SIGNED WITH FULL KNOWLEDGE AND ACCEPTANCE OF ALL THE PROVISIONS THEREOF AND OFFERS AND AGREES, IF THIS BID IS ACCEPTED WITHIN NINETY (90) DAYS FROM THE BID OPENING DATE TO FURNISH ANY OR ALL THE ITEMS UPON WHICH PRICES ARE HEREINAFTER QUOTED IN THE QUANTITY AND AT THE PRICES BID.

CASH DISCOUNT OF 0 PERCENT WILL BE ALLOWED FOR PROMPT PAYMENT WITHIN 20 BUSINESS DAYS.

THE BIDDER CERTIFIES THAT: (A) THE BID HAS BEEN ARRIVED AT BY THE BIDDER INDEPENDENTLY AND HAS BEEN SUBMITTED WITHOUT COLLUSION WITH ANY OTHER VENDOR OF MATERIALS, SUPPLIES OR EQUIPMENT OF THE TYPE DESCRIBED IN INVITATION FOR BIDS, AND (B) THE CONTENTS OF THE BID HAVE NOT BEEN COMMUNICATED BY THE BIDDER, NOR, TO ITS BEST KNOWLEDGE AND BELIEF, BY ANY OF ITS EMPLOYEES OR AGENTS, TO ANY PERSON NOT AN EMPLOYEE OR AGENT OF BIDDER OR ITS SURETY ON ANY BOND FURNISHED HEREWITH PRIOR TO OFFICIAL OPENING OF THE BID.

DELIVERY MADE TO:
NC DPW
170 Cantiague Rock Road
Hicksville NY 11801 J. Rivera 516 571 6861

GUARANTEED DELIVERY DATE
180 DAYS AFTER RECEIPT OF ORDER

EMPLOYERS FEDERAL TAX ID NUMBER
11-2246143

TOLL FREE TELEPHONE NUMBER:
BIDS MUST BE SIGNED BY PROPRIETOR, PARTNER OR OFFICER AUTHORIZED TO SIGN FOR CORPORATION

NAME OF BIDDER All Island Equipment Corp.

ADDRESS 39 Jersey Street

CITY West Babylon STATE NY ZIP CODE 11704 TELEPHONE 631-643-2605

SIGNATURE OF AUTHORIZED INDIVIDUAL

Gary Wade, President
PRINT OR TYPE NAME OF SIGNER AND TITLE

IN EXECUTING THIS BID, THE BIDDER WARRANTS THAT THE PRICES SUBMITTED HEREIN ARE NOT HIGHER THAN THOSE OFFERED TO ANY GOVERNMENTAL OR COMMERCIAL CONSUMER FOR LIKE DELIVERIES. THE PRICES HEREIN SHOULD NOT INCLUDE ANY FEDERAL EXCISE TAXES OR SALES TAXES IMPOSE BY ANY STATE OR MUNICIPAL GOVERNMENT. SUCH TAXES, IF INCLUDED, MUST BE DEDUCTED BY THE BIDDER WHEN SUBMITTING BID. BIDDERS ARE REQUESTED TO ALSO READ THE TERMS AND CONDITIONS.

BID TERMS AND CONDITIONS

1. Bids on equipment must be on standard new equipment, latest model, except as otherwise specifically stated in proposal or detailed specification. Where any part of nominal appurtenances of equipment is not described, it shall be understood that all equipment and appurtenances which are usually provided in the manufacturer's stock model shall be furnished.
2. Bids on materials and supplies must be for new items except as otherwise specifically stated in bid or detailed specifications.
3. Bidder declares that the bid is made without any connection with any other Bidder, submitting a bid for the same items, and is in all respects fair and without collusion or fraud.
4. PRICES The provisions of the New York State Fair Trade Law (Fed-Crawford Act) and the federal price discrimination law (Robinson-Patman Act) do not apply to purchases made by the County.
5. SURETY In the event that an award is made hereunder, The Director of Purchase reserves the right to request successful bidders to post, within one week, security for faithful performance, with the understanding that the whole or any part thereof may be used by the County of Nassau to supply any deficiency that may arise from any default on the part of the Bidder. Such security must meet all the requirements of the County Attorney and be approved by the County Attorney.

6. SAMPLES Samples, when required, must be submitted strictly in accordance with instructions; otherwise bid may not be considered. If samples are requested subsequent to bid opening they shall be delivered within five (5) days of the request for bid to have consideration. Samples must be furnished free of charge and must be accompanied by descriptive memorandum invoices indicating if the Bidder desires their return; also specifying the address to which they are to be returned, provided they have not been used or made useless by tests. Award samples may be held for comparison with deliveries. Samples will be returned at the Bidders risk and expense.

7. Award The Director, Office of Purchasing reserves the right before making award to make investigations as to whether or not the items, qualifications or facilities offered by the Bidder meet the requirements set forth herein and are sample and sufficient to insure the proper performance in the event of award. The Bidder must be prepared, if requested by the Director, to present evidence of experience, ability and financial standing, as well as a statement as to plant, machinery and capacity of the manufacturer for the production and distribution of the material on which he is bidding. Upon request of the Director, successful bidder shall file certification from the manufacturer relative to authorization, delivery, service and guarantees. If it is found that the conditions of the bids are not complied with or that articles or equipment proposed to be furnished do not meet the requirements called for, or that the qualification, financial standing or facilities are not satisfactory, the Director may reject such bids. It is distinctly understood, however, that nothing in the foregoing shall mean or imply that it is obligatory upon the Director to make any examinations before award; and it is further understood that, if such examination is made, it in no way relieves the Bidder from fulfilling all requirements and conditions of the bid.

8. Awards will be made to the lowest responsible Bidder. Cash discounts will not be a factor in determining awards, except in tie bids. Consideration will be given to the reliability of the Bidder, the quantities of the materials, equipment or supplies to be furnished, their conformity with the specifications, the purpose for which required and the terms of delivery.

9. The Director reserves the right to reject and all bids in whole or in part and to waive technical defects, irregularities and omissions if in his judgment the best interests of the County will be served.

10. Unless otherwise indicated herein, the Director reserves the right to make award by items, by classes, by group of items, or as a whole.

11. DELIVERIES Upon failure of the Vendor to deliver within the time specified, or within reasonable time as interpreted by the Director, or failure to make replacement of rejected articles, when so requested immediately or as directed by the Director, the Director may purchase from other sources to take the place of the item rejected or not delivered. The Director reserves the right to authorize immediate purchase from other sources against rejections on any order when necessary. On all-such purchases the Vendor agrees to promptly reimburse the County for excess cost occasioned by such purchases. Should the cost be less, the Vendor shall have no claim to the difference. Such purchases will be deducted from order quantity.

12. An order may be canceled at the Vendors expense upon nonperformance. Failure of the Vendor to furnish additional surety within ten (10) days from date of requested shall be sufficient cause for the cancellation of the order.

13. When in the determination of the Director, the articles or equipment delivered fail to meet County specifications or, if in the determination of the Director, the Vendor consistently fails to deliver as ordered, the Director reserves the right, to cancel the order and purchase the balance from other sources at Vendor expense.

14. Delivery must be made as ordered and in accordance with the bid. If delivery instructions do not appear on order. It will be interpreted to mean prompt delivery. The decision of the Director as to reasonable compliance with delivery terms shall be final. Burden of proof of delay in receipt of order shall rest with the Vendor.

15. The County Agencies will not schedule any deliveries for Saturdays, Sundays or Legal Holiday, except commodities required for daily consumption or where the delivery is an emergency, a replacement, or is overdue, in which event the convenience of the Agency will govern.

16. Supplies shall be securely and properly packed for shipment, according to accepted commercial practice, without extra charge for packing cases, reels, bailing or sacks, the containers to remain the property of the agency unless definitely stated otherwise in the bid.

17. The Vendor shall be responsible for delivery of supplies in good condition at point of destination. The Vendor shall file all claims with carrier for breakage, imperfections and other losses, which will be deducted from invoices. The receiving Agency will note for the benefit of Vendor when packages are not received in good conditions.

18. All supplies which are customarily labeled or identified must have securely affixed thereto the original un-mutilated label or marking of the manufacturer.

19. Billings for deliveries must be rendered on County claim forms.

20. Furniture, machines, and other equipment must be delivered, installed and set in place as directed, ready for use unless otherwise specified.

21. Deliveries are subject to reweighing at destination by the County and payment will be made on the basis of materials delivered. Normal shrinkage will be allowed in such instances where shrinkage is possible. Short weight shall be sufficient cause for cancellation of order at Vendors expense.

22. GUARANTEES BY BIDDER Bidder hereby guarantees: (a) To save the County, its agents and employees harmless from liability of any nature or kind for the use of any copyrighted or un-copyrighted composition, secret process, patented or unpatented invention, article or appliance furnished or used in the performance hereof of which the Bidder is not the Patentee, assignee or licensee, and to defend any action brought against the County in the name of the County and under the direction of the County Attorney at the sole cost of the Bidder or in the sole option of the Director to pay the cost of such defense to the County. (b) His products against defective material or workmanship and to repair any damages or marring occasioned in transit.

(c) To furnish adequate protection from damage for all work and to repair damages of any kind, for which he or his workmen are responsible, to the building or equipment, to this own work or the work of other Vendors, or in the opinion of the Director to pay for the same by deductions in payments due under this contract.

(d) To pay for ail permits, licenses and fees and give all notices and comply with all laws ordinances, rules and regulations of the city, village or town in which the installation his to be made, and of the County of Nassau and the State of New York.

(e) To carry proper insurance in the opinion of the Director, and approved by the County Attorney to protect the County from loss in case of accident, fire and theft.

(f) That he will keep himself fully informed, of all municipal ordinances and regulations, state and national laws in any manner affecting the work or goods herein specified, and any extra work contracted for by him, and shall at all times observe and comply with said ordinances, laws and regulations, including all provisions of the Workmen Compensation and Labor Laws, and shall indemnify and save harmless the County of Nassau and the Nassau County Legislature from loss and liability upon any and all Claims on account of any physical injury to persons, including death, or damage to property and from all cost and expenses in suits which may be brought against the same on account of such injuries irrespective of the actual cost of the same and irrespective of whether the same shall have been due to the negligence of the Bidder or his agents.

(g) That the items furnished shall conform to all the provisions of the bid and this warranty shall survive acceptance, or use of any material so furnished.

(h) That all deliveries will not be inferior to the accepted bid sample.

23. LABOR LAWS and ANTIDISCRIMINATION. Upon the vendor acceptance hereof, the vendor agrees to comply with Article IX, Section 2 C of the Constitution of the State of New York, Section 220 220a, 220b, 220d, 220e and 230 of the Labor Law, Section 5 and 12 of the Lien Law, Article 2 of the Uniform Commercial Code, Sections 108 and 109 as well as Article 18 of the General Municipal Law, Section 2218 of the County Government Law of Nassau County. Section 224.2 of the Nassau County Administrative Code, the provisions of the anti-Discrimination Order of Nassau County, and the vendor shall keep himself fully informed of all additional municipal ordinances and regulations, State and National Laws in any manner affecting this order and the goods or services delivered or rendered or to be delivered or rendered there under, and shall at all times observe and comply with said ordinances, laws and regulations at his sole cost and expense.

24. ASSIGNMENT. The contractor is hereby prohibited from assigned, transferring, conveying, subletting or otherwise disposing of this contract or his right, title, or interest therein, or his power to execute such contract, to any other person or corporation without the previous consent in writing of the officer, board or agency awarding the contract.

25. The County of Nassau will not be responsible nor liable for any shipment or delivery of any materials, supplies, or equipment without it's express written instructions or valid Purchase Order.

26. No agreements, changes, modifications or alterations shall be deemed effective nor shall the same be binding upon the County unless in writing and signed by the Director, Office of Purchasing or his duly/ designated representative.

Director. Office of Purchasing

DISCLOSURE STATEMENT

THE NASSAU COUNTY LEGISLATURE REQUIRES THE FOLLOWING INFORMATION PRIOR TO CONSIDERATION FOR AN AWARD.

Bidders Name:

Address:

Telephone No: Fax No:

1. State Whether: A Corporation XX

   Individual _____

   Partnership _____

GUIDELINES FOR DISCLOSURE

THE NASSAU COUNTY LEGISLATURE REQUIRES THE NAMES AND HOME* ADDRESSES OF ALL PRINCIPALS. DISCLOSURE MUST BE PROVIDED AS INDICATED BY TYPE OF OWNERSHIP. (PLEASE LIST ALL REQUIRED INFORMATION ON A SEPARATE SHEET AND ATTACH TO BID.)

1) Sole Proprietorship/Individual. The Name and Home Address of the Sole Proprietorship/Individual.

2) Closely Held Corporation. The Name and Home Addresses of all Shareholders, Officers and Directors.

3) Publicly Traded Corporation. Only the page(s) of the SEC FORM 10-K setting forth the name of all officers and directors.

4) Not for Profit Corporation. The Names and Home Addresses of all members, Officer and Directors.

5) Partnership. The Names and Home Address of all General and Limited Partners.

6) Limited Liability Company. The Names and Home Addresses of all Members.

7) Limited Liability Partnership. The Name and Home Addresses of all Members.

8) Joint Venture. The Names and Home Addresses of all Joint Ventures.

NOTE: IF ANY ENTITY IS TIERED, YOU MUST ALSO LIST ALL INDIVIDUAL PRINCIPALS OF THE TIERED ENTITY.
*IN THE CASE OF PUBLICLY TRADED CORPORATIONS THE SEC FORM 10K SUFFICES AND HOME ADDRESSES ARE NOT NECESSARY.

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.

BIDDER SIGN HERE All Island Equipment Corp. President
BIDDER **TITLE**

OFFICE OF PURCHASING
COUNTY OF NASSAU STATE OF NEW YORK
49300-05056-112

FORMAL SEALED BID PROPOSAL
76051-08136-173

QUALIFICATION STATEMENT

BIDDER'S NAME: All Island Equipment Corp.

ADDRESS: 39 Jersey Street, West Babylon, NY 11704

1. STATE WHETHER: CORPORATION XX INDIVIDUAL _____ PARTNERSHIP _____

2. IF A CORPORATION OR PARTNERSHIP LIST NAME(S) AND ADDRESS(S) OF OFFICER(S) OR MEMBER(S)
   PRESIDENT Gary Wade 96 Bayview Ave., Babylon, NY 11702
   VICE PRESIDENT
   SECRETARY Renee Pisculli 96 Bayview Ave., Babylon, NY 11702
   TREASURER

3. HAVE YOU FILED A QUALIFICATION STATEMENT WITH THE COUNTY OF NASSAU? Yes
   IF SO WHEN?

4. HOW MANY YEARS HAS YOUR ORGANIZATION BEEN IN BUSINESS UNDER YOUR PRESENT NAME? 55

5. HAVE YOU, OR YOUR FIRM, EVER FAILED TO COMPLETE ANY WORK AWARDED TO YOU? No
   IF SO, WHERE AND WHY?

6. IN WHAT OTHER LINES OF BUSINESS ARE YOU OR YOUR FIRM INTERESTED? N/A

7. WHAT IS THE EXPERIENCE OF THE PRINCIPAL INDIVIDUALS OF YOUR ORGANIZATION RELATING TO THE SUBJECT OF THIS BID?

INDIVIDUALS NAME	PRESENT POSITION	YEARS OF EXPERIENCE	MAGNITUDE AND TYPE OF WORK	IN WHAT CAPACITY
Gary Wade	President	38		

8. IN WHAT MANNER HAVE YOU INSPECTED THIS PROPOSED WORK? EXPLAIN IN DETAIL

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.

BIDDER SIGN HERE All Island Equipment Corp. President
BIDDER **TITLE**

9. THE CONTRACT, IF AWARDED TO YOU OR YOUR FIRM, WILL HAVE THE PERSONAL SUPERVISION OF WHOM? GIVE NAME AND PRESENT POSITION

Gary Wade, President

10. BIDDERS ARE REQUIRED TO COMPLETE THIS FORM PROVIDING THREE (3) REFERENCES OF PAST PERFORMANCE. REFERENCES SHOULD INVOLVE PROJECTS AND/OR SERVICE SITUATIONS OF SIMILAR SIZE AND SCOPE TO THIS BID. REFERENCES MUST HAVE HAD DEALING WITH THE BIDDER WITHIN THE LAST THIRTY-SIX (36) MONTHS. THE COUNTY RESERVES THE RIGHT TO CONTACT ANY OR ALL OF THE REFERENCES SUPPLIED FOR AN EVALUATION OF PAST PERFORMANCE IN ORDER TO ESTABLISH THE RESPONSIBILITY OF THE BIDDER BEFORE THE ACTUAL AWARD OF THE BID AND/OR CONTRACT. COMPLETION OF THE REFERENCE FORM IS REQUIRED.

NASSAU COUNTY (AND ANY OF ITS AGENCIES) MAY BE LISTED AS AN ADDITIONAL REFERENCE, BUT MAY NOT BE SUBSTITUTED FOR ANY OF THE THREE REQUIRED REFERENCES.

1. REFERENCE'S NAME: Town of Islip DPW
ADDRESS: 401 Main Street
Islip, NY
TELEPHONE: 631-988-2727 CONTACT PERSON Comm Tom Owens
CONTRACT DATE:

2. REFERENCE'S NAME: Town of Oyster Bay
ADDRESS: 150 Miller Place
Syosset, NY
TELEPHONE: 516-677-5825 CONTACT PERSON Mike Cipriano
CONTRACT DATE:

3. REFERENCE'S NAME: Town of Southampton
ADDRESS: 20 Jackson Ave
Hampton Bays, NY
TELEPHONE: 631-702-2579 CONTACT PERSON Marc Braeger

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.

BIDDER SIGN HERE All Island Equipment Corp. President
BIDDER **TITLE**

CONTRACT DATE:

USE SEPARATE PAGE IF ADDITIONAL SPACE IS NEEDED.

I certify that all the statements contained in this document are true, complete and correct to the best of my knowledge and belief and are made in good faith, including data contained in the Organization's Relevant Experience. A false certification or failure to disclose information shall be grounds for disqualification or termination of any award.

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.

BIDDER SIGN HERE All Island Equipment Corp. — **BIDDER**

President — **TITLE**

IRAN DIVESTMENT ACT COMPLIANCE CERTIFICATION

Pursuant to General Municipal Law Section 103-g, which generally prohibits the County from entering into contracts with persons engaged in investment activities in the energy sector of Iran, the Bidder submits the following certification:

PLEASE CHECK ONE:

[X] By submission of this Bid, I certify, and in the case of a joint Bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of my knowledge and belief, that the Bidder is not on the list created pursuant to paragraph (b) of subdivision 3 of Section 165-a of the State Finance Law.

OR

[ ] I am unable to certify that the Bidder does not appear on the list created pursuant to paragraph (b) of subdivision 3 of Section 165-a of the State Finance Law. I have attached a signed statement setting forth in detail why I cannot so certify.

Dated: 7/9/26

(Signature of Bidder)

Print Name: Gary Wade

Print Title: President

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.

BIDDER SIGN HERE All Island Equipment Corp. — **BIDDER**

President — **TITLE**

Appendix EE

EQUAL EMPLOYMENT OPPORTUNITIES FOR MINORITIES AND WOMEN

The provisions of this Appendix EE are hereby made a part of the document to which it is attached.

The Contractor shall comply with all federal, State and local statutory and constitutional anti-discrimination provisions. In addition, Local Law No. 14-2002, entitled "Participation by Minority Group Members and Women in Nassau County Contracts," governs all County Contracts as defined by such title and solicitations for bids or proposals for County Contracts. In accordance with Local Law 14-2002:

(a) The Contractor shall not discriminate against employees or applicants for employment because of race, creed, color, national origin, sex, age, disability or marital status in recruitment, employment, job assignments, promotions, upgradings, demotions, transfers, layoffs, terminations, and rates of pay or other forms of compensation. The Contractor will undertake or continue existing programs related to recruitment, employment, job assignments, promotions, upgradings, transfers, and rates of pay or other forms of compensation to ensure that minority group members and women are afforded equal employment opportunities without discrimination.

(b) At the request of the County contracting agency, the Contractor shall request each employment agency, labor union, or authorized representative of workers with which it has a collective bargaining or other agreement or understanding, to furnish a written statement that such employment agency, union, or representative will not discriminate on the basis of race, creed, color, national origin, sex, age, disability, or marital status and that such employment agency, labor union, or representative will affirmatively cooperate in the implementation of the Contractor's obligations herein.

(c) The Contractor shall state, in all solicitations or advertisements for employees, that, in the performance of the County Contract, all qualified applicants will be afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status.

(d) The Contractor shall make Best Efforts to solicit active participation by certified minority or women-owned business enterprises ("Certified M/WBEs") as defined in Section 101 of Local Law No. 14-2002, including the granting of Subcontracts.

(e) The Contractor shall, in its advertisements and solicitations for Subcontractors, indicate its interest in receiving bids from Certified M/WBEs and the requirement that Subcontractors must be equal opportunity employers.

(f) Contractors must notify and receive approval from the respective Department Head prior to issuing any Subcontracts and, at the time of requesting such authorization, must submit a signed Best Efforts Checklist.

(g) Contractors for projects under the supervision of the County's Department of Public Works shall also submit a utilization plan listing all proposed Subcontractors so that, to the greatest extent feasible, all Subcontractors will be approved prior to commencement of work. Any additions or changes to the list of subcontractors under the utilization plan shall be approved by the Commissioner of the Department of Public Works when made. A copy of the utilization plan any additions or changes thereto shall be submitted by the Contractor to the Office of Minority Affairs simultaneously with the submission to the Department of Public Works.

(h) At any time after Subcontractor approval has been requested and prior to being granted, the contracting agency may require the Contractor to submit Documentation Demonstrating Best Efforts to Obtain Certified Minority or Women-owned Business Enterprises. In addition, the contracting agency may require the Contractor to submit such documentation at any time after Subcontractor approval when the contracting agency has reasonable cause to believe that the existing Best Efforts Checklist may be inaccurate. Within ten working days (10) of any such request by the contracting agency, the Contractor must submit Documentation.

(i) In the case where a request is made by the contracting agency or a Deputy County Executive acting on behalf of the contracting agency, the Contractor must, within two (2) working days of such request, submit evidence to demonstrate that it employed Best Efforts to obtain Certified M/WBE participation through proper documentation.

(j) Award of a County Contract alone shall not be deemed or interpreted as approval of all Contractor's Subcontracts and Contractor's fulfillment of Best Efforts to obtain participation by Certified M/WBEs.

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.

BIDDER SIGN HERE All Island Equipment Corp. President
BIDDER **TITLE**

(k) A Contractor shall maintain Documentation Demonstrating Best Efforts to Obtain Certified Minority or Women-owned Business Enterprises for a period of six (6) years. Failure to maintain such records shall be deemed failure to make Best Efforts to comply with this Appendix EE, evidence of false certification as M/WBE compliant or considered breach of the County Contract.

(l) The Contractor shall be bound by the provisions of Section 109 of Local Law No. 14-2002 providing for enforcement of violations as follows:

a. Upon receipt by the Executive Director of a complaint from a contracting agency that a County Contractor has failed to comply with the provisions of Local Law No. 14-2002, this Appendix EE or any other contractual provisions included in furtherance of Local Law No. 14-2002, the Executive Director will try to resolve the matter.

b. If efforts to resolve such matter to the satisfaction of all parties are unsuccessful, the Executive Director shall refer the matter, within thirty days (30) of receipt of the complaint, to the American Arbitration Association for proceeding thereon.

c. Upon conclusion of the arbitration proceedings, the arbitrator shall submit to the Executive Director his recommendations regarding the imposition of sanctions, fines or penalties. The Executive Director shall either (i) adopt the recommendation of the arbitrator (ii) determine that no sanctions, fines or penalties should be imposed or (iii) modify the recommendation of the arbitrator, provided that such modification shall not expand upon any sanction recommended or impose any new sanction, or increase the amount of any recommended fine or penalty. The Executive Director, within ten days (10) of receipt of the arbitrators award and recommendations, shall file a determination of such matter and shall cause a copy of such determination to be served upon the respondent by personal service or by certified mail return receipt requested. The award of the arbitrator, and the fines and penalties imposed by the Executive Director, shall be final determinations and may only be vacated or modified as provided in the civil practice law and rules ("CPLR").

(m) The contractor shall provide contracting agency with information regarding all subcontracts awarded under any County Contract, including the amount of compensation paid to each Subcontractor and shall complete all forms provided by the Executive Director or the Department Head relating to subcontractor utilization and efforts to obtain M/WBE participation..

Failure to comply with provisions (a) through (m) above, as ultimately determined by the Executive Director, shall be a material breach of the contract constituting grounds for immediate termination. Once a final determination of failure to comply has been reached by the Executive Director, the determination of whether to terminate a contract shall rest with the Deputy County Executive with oversight responsibility for the contracting agency.

Provisions (a), (b) and (c) shall not be binding upon Contractors or Subcontractors in the performance of work or the provision of services or any other activity that are unrelated, separate , or distinct from the County Contract as expressed by its terms.

The requirements of the provisions (a), (b) and (c) shall not apply to any employment or application for employment outside of this County or solicitations or advertisements therefore or any existing programs of affirmative action regarding employment outside of this County and the effect of contract provisions required by these provisions (a), (b) and (c) shall be so limited.

The Contractor shall include provisions (a), (b) and (c) in every Subcontract in such manner that these provisions shall be binding upon each Subcontractor as to work in connection with the County Contract.

As used in this Appendix EE the term "Best Efforts Checklist" shall mean a list signed by the Contractor, listing the procedures it has undertaken to procure Subcontractors in accordance with this Appendix EE.

As used in this Appendix EE the term "County Contract" shall mean (i) a written agreement or purchase order instrument, providing for a total expenditure in excess of twenty-five thousand dollars ($25,000), whereby a County contracting agency is

committed to expend or does expend funds in return for labor, services, supplies, equipment, materials or any combination of the foregoing, to be performed for, or rendered or furnished to the County; or (ii) a written agreement in excess of one hundred thousand dollars ($100,000), whereby a County contracting agency is committed to expend or does expend funds for the acquisition, construction, demolition, replacement, major repair or renovation of real property and improvements thereon. However, the term "County Contract" does not include agreements or orders for the following services: banking services, insurance policies or contracts, or contracts with a County contracting agency for the sale of bonds, notes or other securities.

As used in this Appendix EE the term "County Contractor" means an individual, business enterprise, including sole proprietorship, partnership, corporation, not-for-profit corporation, or any other person or entity other than the County, whether a contractor, licensor, licensee or any other party, that is (i) a party to a County Contract, (ii) a bidder in connection with the award of a County Contract, or (iii) a proposed party to a County Contract, but shall not include any Subcontractor.

As used in this Appendix EE the term "County Contractor" shall mean a person or firm who will manage and be responsible for an entire contracted project.

As used in this Appendix EE "Documentation Demonstrating Best Efforts to Obtain Certified Minority or Women-owned Business Enterprises" shall include, but is not limited to the following:

a. Proof of having advertised for bids, where appropriate, in minority publications, trade newspapers/notices and magazines, trade and union publications, and publications of general circulation in Nassau County and surrounding areas or having verbally solicited M/WBEs whom the County Contractor reasonably believed might have the qualifications to do the work. A copy of the advertisement, if used, shall be included to demonstrate that it contained language indicating that the County Contractor welcomed bids and quotes from M/WBE Subcontractors. In addition, proof of the date(s) any such advertisements appeared must be included in the Best Effort Documentation. If verbal solicitation is used, a County Contractor's affidavit with a notary's signature and stamp shall be required as part of the documentation.

b. Proof of having provided reasonable time for M/WBE Subcontractors to respond to bid opportunities according to industry norms and standards. A chart outlining the schedule/time frame used to obtain bids from M/WBEs is suggested to be included with the Best Effort Documentation

c. Proof or affidavit of follow-up of telephone calls with potential M/WBE subcontractors encouraging their participation. Telephone logs indicating such action can be included with the Best Effort Documentation

d. Proof or affidavit that M/WBE Subcontractors were allowed to review bid specifications, blue prints and all other bid/RFP related items at no charge to the M/WBEs, other than reasonable documentation costs incurred by the County Contractor that are passed onto the M/WBE.

e. Proof or affidavit that sufficient time prior to making award was allowed for M/WBEs to participate effectively, to the extent practicable given the timeframe of the County Contract.

f. Proof or affidavit that negotiations were held in Best Efforts with interested M/WBEs, and that M/WBEs were not rejected as unqualified or unacceptable without sound business reasons based on (1) a thorough investigation of M/WBE qualifications and capabilities reviewed against industry custom and standards and (2) cost of performance The basis for rejecting any M/WBE deemed unqualified by the County Contractor shall be included in the Best Effort Documentation

g. If an M/WBE is rejected based on cost, the County Contractor must submit a list of all sub-bidders for each item of work solicited and their bid prices for the work.

h. The conditions of performance expected of Subcontractors by the County Contractor must also be included with the Best Effort Documentation

i. County Contractors may include any other type of documentation they feel necessary to further demonstrate their Best Efforts regarding their bid documents.

As used in this Appendix EE the term "Executive Director" shall mean the Executive Director of the Nassau County Office of Minority Affairs; provided, however, that Executive Director shall include a designee of the Executive Director except in the case of final determinations issued pursuant to Section (a) through (l) of these rules.

As used in this Appendix EE the term "Subcontract" shall mean an agreement consisting of part or parts of the contracted work of the County Contractor.

As used in this Appendix EE, the term "Subcontractor" shall mean a person or firm who performs part or parts of the contracted work of a prime contractor providing services, including construction services, to the County pursuant to a county contract. Subcontractor shall include a person or firm that provides labor, professional or other services, materials or supplies to a prime contractor that are necessary for the prime contractor to fulfill its obligations to provide services to the County pursuant to a county contract. Subcontractor shall not include a supplier of materials to a contractor who has contracted to provide goods but no services to the County, nor a supplier of incidental materials to a contractor, such as office supplies, tools and other items of nominal cost that are utilized in the performance of a service contract.

Provisions requiring contractors to retain or submit documentation of best efforts to utilize certified subcontractors and requiring Department head approval prior to subcontracting shall not apply to inter-governmental agreements. In addition, the tracking of expenditures of County dollars by not-for-profit corporations, other municipalities, States, or the federal government is not required.

Prohibition of Gifts. In accordance with County Executive Order 2-2018, the Contractor shall not offer, give, or agree to give anything of value to any County employee, agent, consultant, construction manager, or other person or firm representing the County (a "County Representative"), including members of a County Representative's immediate family, in connection with the performance by such County Representative of duties involving transactions with the Contractor on behalf of the County, whether such duties are related to this Agreement or any other County contract or matter. As used herein, "anything of value" shall include, but not be limited to, meals, holiday gifts, holiday baskets, gift cards, tickets to golf outings, tickets to sporting events, currency of any kind, or any other gifts, gratuities, favorable opportunities or preferences. For purposes of this subsection, an immediate family member shall include a spouse, child, parent, or sibling. The Contractor shall include the provisions of this subsection in each subcontract entered into under this Agreement.

Disclosure of Conflicts of Interest. In accordance with County Executive Order 2-2018, the Contractor has disclosed as part of its response to the County's Business History Form, or other disclosure form(s), any and all instances where the Contractor employs any spouse, child, or parent of a County employee of the agency or department that contracted or procured the goods and/or services described under this Agreement. The Contractor shall have a continuing obligation, as circumstances arise, to update this disclosure throughout the term of this Agreement.

Vendor Code of Ethics. By executing this Agreement, the Contractor hereby certifies and covenants that:

1) The Contractor has been provided a copy of the Nassau County Vendor Code of Ethics issued on June 5, 2019, as may be amended from time to time (the "Vendor Code of Ethics"), and will comply with all of its provisions;
2) All of the Contractor's Participating Employees, as such term is defined in the Vendor Code of Ethics (the "Participating Employees"), have been provided a copy of the Vendor Code of Ethics prior to their participation in the underlying procurement;
3) All Participating Employees have completed the acknowledgement required by the Vendor Code of Ethics;
4) The Contractor will retain all of the signed Participating Employee acknowledgements for the period it is required to retain other records pertinent under this Agreement;
5) The Contractor will continue to distribute the Vendor Code of Ethics, obtain signed Participating Employee acknowledgements as new Participating Employees are added or changed during the term of this Agreement, and

retain such signed acknowledgements for the period the Contractor is required to retain other records pertinent to performance under this Agreement; and

6) The Contractor has obtained the certifications required by the Vendor Code of Ethics from any subcontractors or other lower tier participants who have participated in procurements for work under this Agreement.

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.

BIDDER SIGN HERE All Island Equipment Corp. President

BIDDER **TITLE**

INDEMNIFICATION:

Contractor agrees to indemnify and hold harmless County and its agents, officers and employees, from and against any and all losses, costs, expenses (including attorneys' fees and disbursements), damages and liabilities, arising out of or in connection with any acts or omissions of Contractor, its officers, agents or employees, provided, however, that Contractor shall not be responsible for that portion, if any, of a loss that is caused by the negligence of the County; and provided, further, that Contractor shall not be liable for consequential, indirect or special damages. Contractor shall, at County's demand and at County's direction, defend at its own risk and expense any and all suits, actions or legal proceedings which may be brought against County, its agents, officers or employees in connection with a loss for which Contractor is responsible under this paragraph.

DEFINITIONS:

•The term "County" as used herein, shall be deemed as reference to the County of Nassau, State of New York.
•The term "Contractor" as used herein, shall be deemed as reference to the successful bidder, vendor, proprietor, partnership, or corporation receiving an award to perform any or all of the services specified herein in accordance with the terms of this agreement.
•The term "agency" as used herein, shall be deemed as the department, division, bureau, office, agency or other Nassau County establishment authorized to receive the service specified herein.
• The term "Director" as used herein, shall be deemed as reference to the Director of the Office of Purchasing.
• The term "Blanket Order" as used herein, shall be deemed as the multiple use pricing agreement as a result of this bid.
• The term "Purchase Order" as used herein, shall be deemed as the single use pricing agreement as a result of this bid.
• The term "complete" as written in this bid must include all equipment, delivery and installation of same in its entirety, as listed in the contract documents, and is to include all supervision, labor, materials, plant equipment, transportation, testing, (if required) incidentals, and other facilities as necessary and/or required to execute all the work as herein specified, or as incidentally required to provide a complete operating installation.

NOTE: INSERT FEDERAL IDENTIFICATION NUMBER IN SPACE PROVIDED ON PAGE 1.

M/WBE, SDVOB and DBE Participation: The County encourages the participation of certified Service-Disabled Veteran-Owned Businesses ("SDVOB"), Minority or Women-Owned Business Enterprises ("M/WBE"), and Disadvantaged Business Enterprises ("DBE") in the bidding process. A Contractor that is certified by New York State or the County as a SDVOB, M/WBE, and/or DBE should include this information in their bid. For more information regarding the County's SDVOB, M/WBE, or DBE programs, please visit the Nassau County Office of Minority Affairs website

IMPORTANT

PRICE MUST BE INSERTED WITH TYPEWRITER OR INK. BIDS MUST BE SIGNED IN INK. TO ASSURE OFFER REACHING IN TIME, **YOU ARE URGED TO MAIL YOUR FORMAL SEALED BID EARLY**. **THIS FORMAL SEALED BID MUST REACH OUR OFFICE BY 11:00 A.M**. LATE FORMAL SEALED BIDS WILL NOT BE ACCEPTED.

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BIDDER SIGN HERE All Island Equipment Corp. President
BIDDER **TITLE**

REQUIRED VENDOR DISCLOSURE FORMS

Prior to the bid opening, the following disclosure forms (the "Disclosure Forms") must be submitted in the Nassau County Vendor Portal at

https://apex5.nassaucountyny.gov/ords/f?p=312:LOGIN_DESKTOP:3445712403627:

a. A duly completed and verified Business History Form, together with a current certified or verified financial statement and/or other commercially reliable written evidence of the bidder's credit, financial standing and capacity to perform in accordance with the terms of the Contract.

b. All officers, and any individuals who hold a ten percent (10%) or greater ownership interest in the bidder, shall complete and verify the Principal Questionnaire.

c. The County of Nassau Consultant's, Contractor's and Vendor's Disclosure Form

d. Additionally, if the bidder utilizes the services of any individual or organization for the purposes of conducting lobbying activities and is awarded the contract, the successful proposer will be required to provide a copy of the Lobbyist Registration and Disclosure Form, completed and verified by that individual/organization.

PLEASE NOTE:

- If a bidder has previously submitted the Disclosure Forms in the Nassau County Vendor Portal, the bidder must ensure that the forms on file in the Portal are current, accurate, and have been recertified within three (3) months prior to the bid opening date. The bidder must also ensure that their response to question 7, and its subparts, on the Consultant's, Contractor's, and Vendor's Disclosure Form is provided in relation to the specific solicitation under consideration.

PLEASE FILL OUT THE ABOVE FORMS THEY MUST BE FILLED OUT IN THE PORTAL PRIOR TO THE BID OPENING.

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BIDDER SIGN HERE All Island Equipment Corp. — President
BIDDER — **TITLE**

REQUESTS FOR INFORMATION OR CLARIFICATION

Before bidding, bidders must examine all of the Contract documents, including the specifications, any drawings, and all instructions. If the bidder finds any inconsistency, ambiguity, omission or error in the specifications, drawings, instructions or any other Contract document, or if the bidder is in doubt as to the meaning of any term or condition of the Contract, the bidder must promptly so notify the **Office of Purchasing** in writing prior to the bid opening. The failure of the bidder to notify the **Office of Purchasing**, prior to the bid opening of any inconsistency, ambiguity, omission or error that the bidder actually found, or that should have been discovered by a reasonably prudent bidder, will preclude and negate acceptance of the bidder's claim.

If the **Office of Purchasing** receives a notification from a bidder of a differing site condition or an inconsistency, ambiguity, omission or error in the Contract documents, the **Office of Purchasing** will, as it deems necessary or desirable, issue a written interpretation or correction to the Contract documents as an amendment to the Contract documents. Any such amendment will be made available electronically to each person that received a copy of the Contract documents as reflected in the records of the **Office of Purchasing** , and any such amendment will also be available at the place where the Contract documents are available for inspection by prospective bidders.

Upon such mailing or delivery, such amendment shall become part of the Contract documents and shall be binding on all bidders, whether or not they have had actual notice of such addendum.

Please note that all bidder requests for information or clarification must be received by the Authority at least 72 hours prior to the bid opening. Any bidder requests for information or issues with the contract documents presented after that time may not be addressed by the Office of Purchasing.

Ordinance # 153-2018

Pursuant to Ordinance # 153-2018, a bidder that is awarded a contract under this bid is required to pay the County an administrative service charge in accordance with the following schedule:

Value of Contract	Administrative Fee
$0-$10,000	$0
Over $10,000-$50,000	$160
Over $50,000-$100,000	$266
Over $100,000	$533

After an award, the successful bidder(s) will be notified by the Director of Shared Services, or their designee, when payment of the administrative charge is due. Please note, if you are a religious, charitable, nonprofit, or not-for-profit organization, please include this information in your bid for consideration by the Director of the Shared Services to waive the fee.

SCOPE: It is the intent of the County of Nassau to properly describe by these specifications and terms an adequate method of providing: **a Wheel Loader.**

AWARD: Award, if any, will be made to the lowest responsible bidder, who in the opinion of the Director of Purchasing, meets the specifications and qualifications stated herein. The Director of Purchasing reserves the right to make an award be items, groups, or classes of items or as a whole. Awards will be made in accordance with the terms and conditions attached hereto and made part hereof.

PURPOSE: The purpose of this bid is to establish a price structure on which items and/or services listed herein will be purchased at once by Purchase Order.

DELIVERY: Bidders are required to state guaranteed delivery date in terms of days after receipt of order in the space provided below and on page one. Bidders are cautioned to post realistic delivery dates. Guaranteed delivery dates will be strictly enforced. Must be made within 15 days A/R/O unless stated otherwise below:

Delivery to be made 90-120 **Days A/R/O.**

Delivery shall be made **ONLY** upon receipt of a Purchase Order, or in the case of a Blanket Order, upon receipt of a Direct Purchase Order(s) from a using agency authorized to use the Blanket Order which will be issued to the successful bidder. Purchase Order and Direct Purchase Order shall indicate the destination address. Inside delivery is required on all deliveries.
Bidders agree that all orders shall be effective and binding upon the contractor when PLACED IN THE MAIL addressed to the Contractor at the address shown on the Blanket Order/Purchase Order PRIOR TO MIDNIGHT OF THE FINAL DAY OF CONTRACT.

BILLING: Shall be made on County claim forms or Certified Invoices to the individual using County Agency upon completion of deliveries made against applicable Purchase Order(s) or Direct Purchase Order(s).

NO PARTIAL PAYMENTS WILL BE PAID.

**********VENDOR CLAIM CERTIFICATION**********
IF A CLAIM VOUCHER IS NOT BEING SUBMITTED, THE FOLLOWING CERTIFICATION **MUST** APPEAR ON THE INVOICE:

I HEREBY CERTIFY THAT ALL ITEMS OR SERVICES WERE DELIVERED OR RENDERED AS SET FORTH IN THIS CLAIM; THAT THE PRICES CHARGED ARE IN ACCORDANCE WITH REFERENCED PURCHASE ORDER, DIRECT PURCHASE ORDER OR CONTRACT, THAT THE CLAIM IS JUST, TRUE AND CORRECT; THAT THE BALANCE STATED HEREIN IS ACTUALLY DUE AND OWING AND HAS NOT BEEN PREVIOUSLY CLAIMED; THAT NO TAXES FROM WHICH THE COUNTY IS EXEMPT ARE INCLUDED; AND THAT ANY AMOUNTS CLAIMED FOR DISBURSEMENTS HAVE ACTUALLY AND NECESSARILY BEEN MADE.

CLAIMANT NAME DATE

BY (SIGNATURE) TITLE

*CLAIM VOUCHERS AND CERTIFIED INVOICES NOT PROPERLY COMPLETED WILL BE RETURNED TO YOU UNPAID**

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BIDDER **TITLE**

TOTAL CONSUMPTION: Total consumption of order awarded may be PLUS/MINUS those quantities without any price change.

INSPECTION: Bidders should be aware of Inspection and Delivery requirements as stipulated.

PRICE DISCREPANCY: In the event of a discrepancy between the unit price and the extension price, the unit price will govern.

RETENTION OF BID: Vendor is required to make a copy of his completed bid document and applicable attachments. Any purchase orders issued against this bid will refer to the bid and attachments to designate items awarded.

METHOD OF BIDDING: Please submit unit price in the appropriate column.

ADDITIONAL BIDS: The County reserves the right, for any un-contemplated additional requirements of extraordinary quantities of particular items to call for new bids, therefore, whenever in the opinion of the Director of the Office of Purchase it is in the best interests of the County of Nassau to do so.

TAX PROVISION: Purchases made by the County of Nassau are not subject to State, Local Sales Taxes or Federal Excise Taxes. Federal Exemption #A-109538 State Exemption #EX 7213062C. The County of Nassau is not subject to any Existing "Fair Trade Agreements" and bidders should be governed accordingly.

SPECIFICATIONS: Submit complete specifications and illustrations of products offered with the bid. Acceptance of a bid and designation of a manufacturer's catalog description, brand name or number in any Purchase or Blanket Order resulting there-from shall not be construed as qualification of the specifications of this bid or relief there-from, except as specifically stated in the Purchase or Blanket Order.

PRODUCT IDENTIFICATION: If a product(s) is identified by a BRAND NAME, a substitute of equal quality, construction, finish, composition, size, workmanship and performance characteristics may be acceptable. In submitting a bid, each bidder warrants that the substitute product being offered is an equal. Bid sheets shall be so noted of the manufacturer's name and brand of the product offered as an equal. If as a result of an award, a delivery is made of a brand or product represented as an equal which is subsequently deemed to be unacceptable, the Contractor shall be required, at his expense, to pick up the rejected item and replace it with brand(s) listed in this bid, or an acceptable equal which will have the approval of the Director.

PROTECTION FROM CLAIM AGAINST "OR EQUAL": In the event of any claim by any unsuccessful bidder concerning or relating to the issue of "equal or better" or "or equal", the successful bidder agrees, at his own cost and expense, to defend such claims or claims and agrees to hold the County of Nassau free and harmless from any and all claims for loss or damage arising out of this transaction for any reason whatsoever.

ALTERNATIVE ITEM: In submitting a bid on a commodity other than as specified, bidder shall furnish complete data and identification with respect to the alternate commodity he proposes to furnish. Consideration will be given to proposals submitted on alternate commodities to the extent that such action is deemed to serve the best interests of the County. If a bidder does not indicate that the commodity he proposes to furnish is other than as specified, it will be construed to mean that the bidder proposes to furnish the exact commodity as described. Consideration of the alternate shall be at the sole discretion of the Director. MORE THAN ONE (1) BID ON EACH ITEM WILL NOT BE CONSIDERED, UNLESS OTHERWISE SPECIFIED BY THE COUNTY.

EQUIVALENT BIDS: Bidders may offer a product of the same capability, but of different manufacture and model than that specified in this bid. The use of the name of a manufacturer, brand, make or catalog designation is specifying items

described herein does not restrict or preclude bidders from offering equivalent or better product bids. Such a designation is used only to indicate the character, quality and minimum performance desired. Equal or better product bids are permissible. A bidder submitting an equal or better product shall, at his own cost and expense be responsible for submitting proof and/or a demonstration of equivalence, compatibility and performance. However, acceptance of an equivalent product shall be strictly at the discretion of the Director. Any omission of the term "or equal" in any specific bid item listing should be disregarded by the bidder. All bidders shall have an absolute right to submit "equivalent" bids notwithstanding any other provision of the bid specifications.

WARRANTY: The successful bidder warrants the equipment furnished and all associated equipment against any defects in design, workmanship and materials against failure to operate satisfactorily for one (1) year from the date of acceptance by the using department and/or agency of the equipment, other than defects or failure shown by the Contractor that have arisen solely from accident or abuse occurring after delivery to the Nassau County agency. Contractor agrees to replace any parts, which in the opinion of the user, shall fail from the above reasons.

IMPORTANT NOTES: If a company policy or trade practice requires a different warranty period, the bidder may so state without fear of disqualifications. However, the bidder is cautioned that the length of warranty may, in some cases, be a deciding factor in making an award.

Equipment furnished hereunder shall meet the standards set forth in the Occupational Safety and Health Act of 1970.

BIDDER SHALL STATE WARRANTY PERIOD: 3 Year 3000 hours.

NOTE: All warranties take effect only upon written acceptance of equipment by using agency and shall run full term from that point.

BIDDER SHALL INDICATE COST AND TERM OF ANY EXTENDED WARRANTY OPTION, IF AVAILABLE:

_____

_____

_____

REDUCTION IN PRICES: If an award is made, the Contractor agrees, should prices be reduced to the general trade during the requirement period, the County shall receive the benefit of such reduction immediately upon effect. It shall be incumbent upon the Contractor to notify the Purchasing Department of such price reductions.

NON-ASSIGNMENT: In accordance with Section 138 of the State Finance Law, the contract may not be assigned by the Contractor or its right, title or interest therein assigned, transferred, conveyed, sublet or otherwise disposed of without the previous consent, in writing, of Nassau County and any attempts to assign the contract without the County's written consent are null and void.

PRICE PROTECTION: Bidders are required to state period of price protection (in terms of days) after the bid opening.

STATE PRICE PROTECTION PERIOD: 180 **DAYS AFTER BID OPENING**

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.

BIDDER SIGN HERE All Island Equipment Corp. President
BIDDER **TITLE**

EXTENSION OF PRICE: It is anticipated that additional quantities of items specified herein may be required in the ensuing year. According, the County of Nassau requests that the prices bid be protected and be available to the County of Nassau for one (1) year from the date of the award. Economic conditions may not permit the price protection for an entire year. Bidders are requested to state the period for which bid prices will be applicable to potential additional orders.
180 days.

INSURANCE AND WORKERS COMPENSATION: The successful bidder agrees to obtain from an insurance company, authorized to do business in the State of New York, and keep in force during the term of any agreement, a policy of Comprehensive and General Liability Insurance naming the Contractor as an insured, and naming the County of Nassau as an additional insured, including but not limited to the torts and negligence of Contractor's personnel, with a combined minimum single limit of three million dollars ($3,000,000.00) for bodily injury and property damage for any one occurrence at the Contractor's sole cost and expense. Evidence of insurance may be required prior to Notice of Award or issuance of a Purchase Order.

The Contractor shall comply with all provisions of the Workers' Compensation Law and shall furnish a certificate showing evidence of current coverage.

PRODUCT LIABILITY INSURANCE: The successful bidder agrees to obtain from an insurance company authorized to do business in the State of New York, and keep in force during the term of an agreement, a policy of Product Liability Insurance, including foreign objects, with a combined minimum single limit of one million dollars ($1,000,000.00) for each occurrence, at the Contractor's sole cost and expense, and shall furnish a certificate showing evidence of current coverage. Evidence of insurance may be required prior to Notice of Award or issuance of a Purchase Order.

NEW YORK STATE PRICES: Bidders must represent and warrant that if they are under contract with New York State for items specified herein, that the price quoted to the County is not higher than the price per unit quoted to New York State for like quantities.

VENDOR RESPONSIBILITY CRITERIA: The Director of Purchasing reserves the right before making an award to make investigations as to whether or not the qualifications, services, facilities or items offered by the bidder meet the requirements set forth herein and are ample and sufficient to ensure the proper performance in the event of an award. The bidder must be prepared, if requested by the Director of Purchasing, to present evidence of experience, ability, financial standing, as well as a statement as to plant, machinery, trained personnel and capacity for the rendition of the service on which the vendor is bidding. Upon request of the Director, the successful bidder shall file certification from the manufacturer relative to authorization, delivery, service and guarantees. If it is found that the conditions of the bid are not complied with or that the services or equipment proposed to be furnished do not meet the requirements called for, or that the qualifications, financial standing, or facilities are not satisfactory, the Director may reject such bids. It is distinctly understood, however, that nothing in the forgoing shall mean or imply that it is obligatory upon the Director to make any examinations before an award; and it is further understood that, if such examination is made, it in no way relieves the bidder from fulfilling all requirements and conditions of the bid.

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.

BIDDER SIGN HERE All Island Equipment Corp. — **BIDDER**

President — **TITLE**

Pursuant to State Finance Law §§139-j and 139-k, this Bid includes and imposes certain restrictions on communications between a Governmental Entity and an Offeror/bidder during the procurement process. An Offeror is restricted from making contacts from the earliest posting, on a Governmental Entity's website, in a newspaper of general circulation, or in the procurement opportunities newsletter in accordance with article four-C of the economic development law of written notice, advertisement or solicitation of a request for proposal, invitation for bids, or solicitation of proposals, or any other method provided for by law or regulation for soliciting a response from Offerors intending to result in a Procurement Contract with a Governmental Entity through final award and approval of the Procurement Contract by the Governmental Entity and, if applicable, the Office of the State Comptroller ("Restricted Period") to other than the Designated Contacts for the Governmental Procurement unless it is a Contact that is included among certain statutory exceptions set forth in State Finance Law §139-j(3)(a). The Designated Contact(s) for this Governmental Procurement, as of the date hereof, are identified on the first page of this solicitation. County employees also are required to obtain certain information when Contacted during the Restricted Period and make a determination of the responsibility of the Offeror pursuant to these two statutes. Certain findings of non-responsibility can result in rejection for contract award and in the event of two findings within a 4-year period, the Offeror is debarred from obtaining governmental Procurement Contracts. Further information about these requirements can be found on the County's website. All questions or concerns regarding this Bid must be directed to the designated contact person named on the first page of the bid.

OFFEROR'S AFFIRMATION OF UNDERSTANDING OF AND AGREEMENT PURSUANT TO STATE FINANCE LAW §139-j(3) and §139-j(6)(b)

Offeror Certification:

Offeror affirms that it understands and agrees to comply with the procedures of the Government Entity relative to permissible Contacts as required by State Finance Law §139-j(3) and §139-j(6)(b).

Date: 7/9/26

Signature:

Name: Gary Wade

Title: President

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BIDDER SIGN HERE All Island Equipment Corp. **BIDDER** President **TITLE**

Contractor Name:

All Island Equipment Corp.

Contractor Address:

39 Jersey Street, West Babylon, NY 11704

NON-COLLUSIVE BIDDING CERTIFICATION REQUIRED BY SECTION 139-D OF THE STATE FINANCE LAW

BY SUBMISSION OF THIS BID, BIDDER AND EACH PERSON SIGNING ON BEHALF OF BIDDER CERTIFIES, AND IN THE CASE OF A JOINT BID, EACH PARTY THERETO CERTIFIES AS TO ITS OWN ORGANIZATION, UNDER PENALTY OR PERJURY, THAT TO THE BEST OF HIS/HER KNOWLEDGE AND BELIEF:

[1] The prices of this bid have been arrived at independently, without collusion, consultation, communication, or agreement for the purposes of restricting competition, as to any matter relating to such prices with any other Bidder or with any competitor;

[2] Unless otherwise required by law, the prices which have been quoted in this bid have not been knowingly disclosed by the Bidder and will not knowingly be disclosed by the Bidder prior to opening, directly or indirectly, to any other Bidder or to any competitor; and

[3] No attempt has been made or will be made by the Bidder to induce any other person, partnership or corporation to submit or not to submit a bid for the purpose of restricting competition.

A BID SHALL NOT BE CONSIDERED FOR AWARD NOR SHALL ANY AWARD BE MADE WITH [1], [2], [3] ABOVE HAVE NOT BEEN COMPLETE WITH; PROVIDED HOWEVER, THAT IF IN ANY CASE THE BIDDER(S) CANNOT MAKE THE FOREGOING CERTIFICATION, THE BIDDER SHALL SO STATE AND SHALL FURNISH BELOW A SIGNED STATEMENT WHICH SETS FORTH IN DETAIL THE REASONS THEREFORE:

[AFFIX ADDENDUM TO THIS PAGE IF SPACE IS REQUIRED FOR STATEMENT]

Subscribed to under penalty of perjury under the laws of the State of New York,

this 9 day of July, 20 26 as the act and deed of said Corporation or Partnership.

Identifying Data:

Potential Contractor:
All Island Equipment Corp.

Address:
39 Jersey Street, West Babylon, NY 11704

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BIDDER SIGN HERE All IslandEquipment Corp. — **BIDDER**

President — **TITLE**

OFFICE OF PURCHASING
COUNTY OF NASSAU STATE OF NEW YORK
49300-05056-112

FORMAL SEALED BID PROPOSAL
76051-08136-173

Street: 39 Jersey Street

City, Town, etc: West Babylon, NY 11704

Telephone: 631-643-2605 Title: _____

If applicable, responsible Corporate Officer

Name Gary Wade Title President

Signature: _____ Sign Here

FAILURE TO COMPLETE THIS FORM AND SIGN IN APPROPRIATE PLACE MAY RESULT IN AUTOMATIC REJECTION OF THE BID.

GENERAL INSTRUCTIONS: All bidders must adhere to the following conditions:

As per New York State Municipal Law 103, no exception can be taken to any material term and/or condition of this bid with the exception of any warranties as presented in this bid for the specific commodity or service required.

Any language in any proposal or document submitted by a bidder as part of their bid that is accepted by the County of Nassau cannot be in conflict with any material term and/or condition relevant to this bid with the exception of any warranties or the specifications of the commodity of service required by this bid. If there is any conflict between the bidder's terms and conditions and the terms and conditions of this bid, the terms and conditions of this bid shall govern.

Bidders must insert **FEDERAL IDENTIFICATION NUMBER** in the space provided on page one of this bid.

Late Formal Sealed Bids will NOT be accepted. Bidders are urged to mail bids early to assure delivery on time. Bids must be received by 11:00 A.M. on the bid opening date.

Prices **MUST** be inserted with **TYPEWRITER OR INK**. Entries with **WHITE OUT**, **CROSS-OUTS OR LIFT-OFF TAPE MUST** BE INITIALED or that entry will be disqualified.

Bidders should submit bid with unit price in the appropriate column on bid pages or forms attached hereto. In the event of a discrepancy between the unit price and the extension, the unit price shall govern. Bidders shall submit one (1) original bid document and all applicable attachments. Any order issued against this bid will refer to the bid and attachments to designate items awarded. Bidders agree that all, Direct Purchase Orders and/or Purchase Orders shall be effective and binding upon the Contractor when place in the mail, addressed to the Contractor at the address shown on the Direct Purchase Order or the Purchase Order.

Bidders **MUST** state manufacturer's name and catalog number of each item bid.

ABSOLUTELY NO MINIMUM ORDERS shall be applied to this bid.

Purchases made by Nassau County are not subject to State or Local Sales Tax or Federal Excise Taxes.

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.

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President — **TITLE**

Federal Exemption Number: A-109538 **State Exemption Number: EX 7213062C**

Inside (receiving dock) delivery is required on all orders.

The rights and obligations of the parties under this agreement shall be governed by the laws of the State of New York.Bids are hereby solicited for the commodities and/or services specified herein which are to be delivered and/or performed at the locations indicated, and in strict accordance with all specifications, terms and conditions attached hereto and made part hereof.

Bid document must be signed by proprietor, partner or corporate officer.

The clauses contained in these bid forms set forth the wishes of the County of Nassau in regard to the purchase and/or services required. However, the Director reserves the right to waive irregularities, omissions, or other technical defects if, in its judgment, the best interest of the County of Nassau will be served accordingly.

Bidders may take exception to paragraphs of the bid under a separate cover letter to be attached to this bid, indicating the specific bid page, paragraph and the exception(s). In any event, the decision of the Director will be final.

Qualification statement **MUST BE COMPLETED** and submitted with bid. See page 4 for further details

IMPORTANT NOTE: The Director reserves the right to accept or reject any and all bids, or separable portions of offers, and waive technicalities, irregularities, and omissions if the Director determines the best interests of the County of Nassau will be served. The Director, in his sole discretion, may accept or reject illegible, incomplete or vague bids and his decision shall be final. A conditional or revocable bid which clearly communicates the terms or limitations of acceptance may be considered and contract award may be made in compliance with the bidder's conditional or revocable terms in the offer. Prior to award, the Director reserves the right to seek clarifications, request bid revisions, or to request any information deemed necessary for proper evaluation of bids from all bidders deemed to be eligible for contract award. Failure to provide requested information may result in rejection of the bid.

EVALUATION:
The Director of the Office of Purchasing (hereinafter known as the Director) reserves the right before making award to make investigations as to whether or not the items, qualifications, services or facilities offered by the Bidder meet the requirements set forth herein and are ample and sufficient to insure the proper performance in the event of an award. The Bidder must be prepared, if requested by the Director, to present evidence of experience, ability and financial standing, as well as a statement as to plant, machinery, trained personnel and capacity for the rendition of the service on which he his bidding. Upon request of the Director of Purchasing, successful bidder shall file certification from the manufacturer relative to authorization, delivery, service and guarantees. If it is found that the conditions of the bids are not complied with or that the services or equipment proposed to be furnished do not meet the requirements called for, or that the qualifications, financial standing or facilities are not satisfactory, the Director may reject such bids. It is distinctly understood, however, that nothing in the foregoing shall mean or imply that it is obligatory upon the Director to make any examinations before award; and it is further understood that, if such examination is made, it in no way relieves the Bidder from fulfilling all requirements and conditions of the bid.

Contractor shall retain complete and accurate records and documents related to this Agreement for six (6) years following the later of termination or final payment. Such records shall at all times be available for audit and inspection by the County.

Governing Law – Consent to Jurisdiction and Venue; Governing Law. Unless otherwise specified in this Agreement or required by Law, exclusive original jurisdiction for all claims or actions with respect to this Agreement shall be in the Supreme Court in Nassau County in New York State and the parties expressly waive any objections to the same on any

grounds, including venue and forum non conveniens. This Agreement is intended as a contract under, and shall be governed and construed in accordance with, the Laws of New York State, without regard to the conflict of laws provisions Thereof

SPECIFICATIONS

It is the intent of these specifications to describe a new 2.5 Cu. Yd. Rubber Tired Wheel Loader such as the Hyundai HL930A (2026 or newer) current production model or approved equal.

Please check yes or no to each item, if you are offering an item that is an equal, please check no and indicate at the end of the bid what the alternate item you are offering is.

		COMPLY? YES | NO
ENGINE:		
Make/Model:	CUMMINS / B4.5	Yes
Type:	Water-cooled, 4-cycle, turbocharged charge air-cooled, direct injection, electronic controlled diesel engine.	Yes
Tier IV final/stage-4 minimum DOC and SCR Technologies		Yes
Engine must run on #2 Diesel –ultra low sulfur		Yes
Gross power:	133 h.p. @ 2,100 rpm's minimum	Yes
Net power:	130 h.p. @ 2,100 rpm's minimum	Yes
Maximum torque:	467 lb-ft @ 1,500 rpm's minimum	Yes
No. of cylinders:	4 minimum	Yes
Bore x Stroke:	4.21" x 4.88"	Yes
Displacement:	275 in3 minimum 4.5 liters	Yes
Compression ratio:	17.3 : 1 minimum	Yes
Air cleaner:	Dry, Two stage dual elements	Yes

ELECTRICAL:

ALL BIDS MUST BE F.O.B. DESTINATION AND INCLUDE DELIVERY WITHIN DOORS UNLESS OTHERWISE SPECIFIED.

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President — **TITLE**

24 Volt System		Yes
Alternator:	24 V, 95 Amp	Yes
Battery:	850 CCA 12 V (2)	Yes
Starting motor:	24 V, 7.8 kW	Yes

COMPLY? YES | NO

TRANSMISSION/TORQUE CONVERTER:

Torque converter type: 3-Elements, Single-stage, Single phase	Yes
Must have full automatic power-shift	Yes
Countershaft type transmission with soft in range and direction	Yes
Must be equipped with electronic soft shift, auto shift and kick-down as standard.	Yes
Minimum of (4) Four Forward Speeds	Yes
Minimum of (3) Reverse Speeds	Yes
Travel speeds:	
Forward:	
1st 4.3 m.p.h. minimum	Yes
2nd 7.9 m.p.h. minimum	Yes
3rd 15.5 m.p.h. minimum	Yes
4th 24.9 m.p.h. minimum	Yes
Reverse:	
1st 4.5 m.p.h. minimum	Yes
2nd 8.3 m.p.h. minimum	Yes
3rd 16.2 m.p.h. minimum	Yes

BRAKES; SERVICE/PARKING/EMERGENCY:

Service Brakes:	Hydraulically actuated, wet disc brakes actuate all 4 wheels independent axle-by-axle system.	Yes
	Self-adjusting & wheel speed brake.	Yes
Parking Brake:	Spring-applied, hydraulically released brake	Yes
Emergency Brake:	When brake oil pressure drops, indicator light alerts operator and parking brake automatically applies.	Yes
Type:	Load sensing hydrostatic articulated steering.	Yes
Pump:	Variable displacement piston pump 39 g.p.m	Yes

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Relief Valve Setting:	2,987 psi	Yes
Cylinder:	Double acting 2.4" x 1.4"	Yes
Steering Angle:	40° both right and left angle	Yes

COMPLY?
YES | NO

AXLES:

Drive system:	Four-wheel drive system	Yes
Mount:	Rigid front axle and oscillating rear axle	Yes
Rear axle oscillation:	±12° maximum of 24°	Yes
Hub reduction:	Planetary reduction at wheel end	Yes
Differential:	Front axle differential lock	Yes
	Rear axle conventional	Yes
Reduction ratio:	21.53 maximum	Yes

HYDRAULIC SYSTEM:

Must be a load sensing hydraulic system		Yes
Pump must be a variable axial piston type pump w/34.9 g.p.m minimum		Yes
Control valve:	3 Spool (Bucket, Boom, Aux)	Yes
	Pilot pressure controlled type	Yes
System pressure:	3,980 psi	Yes
	Machine shall be equipped with 3rd spool plumbed to end of loader arms.	Yes
Lift Circuit:	The valve has four functions; raise, hold, lower and float.	Yes
	Can adjust automatic kick-out from horizontal to full lift.	Yes
Tilt Circuit:	The valve has three functions; tilt back, hold and dump	Yes
	Can adjust automatic bucket positioner to desired load angle.	Yes
Cylinder:	Two lift cylinders 3.9" x 2' 6"	Yes
	One tilt cylinder 4.3" x 1' 8" minimum	Yes

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BIDDER SIGN HERE _____ **BIDDER** _____ **TITLE**

CYCLE TIMES:

Raise: 5.8 seconds maximum	Yes
Dump: 1.5 seconds maximum	Yes
Lower: 3.6 seconds maximum	Yes
Total: 10.9 seconds maximum	Yes

		COMPLY? YES | NO
CAPACITIES:		
Fuel Tank:	50 gallons minimum	Yes
DEF Tank:	5.0 gallons minimum	Yes
Cooling System:	8.3 gallons minimum	Yes
Crankcase:	2.9 gallons minimum	Yes
Transmission:	9.1 gallons minimum	Yes
Front Axle:	6.1 gallons minimum	Yes
Rear Axle:	6.1 gallons minimum	Yes
Hydraulic Tank:	23.8 gallons minimum	Yes
Hydraulic System (including tank):	34.3 gallons minimum	Yes
Bucket Capacity:	2.5 yd. heaped	Yes

TIRES:

(4) 17.5 R25 (L3) Tri-angle Radials, 2 star side wall rating, minimum.	Yes

BUCKET/COUPLER:

Machine shall include a General Purpose Bucket w/bolt-on cutting edges	Yes
General purpose bucket shall be 2.5 cubic yard heaped with ISO style hooks	Yes
Coupler shall be operated from inside cab	Yes
Factory installed ISO hydraulic coupler	Yes

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President — **TITLE**

PAINT:

Machine shall be factory painted county colors, orange & blue as per RAL codes Yes

	COMPLY? YES | NO
WEIGHTS & DIMENSIONS:	
Operating weight: 25,595 lbs. minimum	Yes
Dumping clearance at max height and 45° dump angle 8′ 10″	Yes
Reach at full lift 3′ 6″ minimum	Yes
Reach at 7ft. height 5.0ft minimum	Yes
Digging depth: 0.3ft. minimum	Yes
Overall length on ground 23′ 9″ minimum	Yes
Overall length at carry 23′ 9″ minimum	Yes
Overall height (fully raised) 15′ 11″ minimum	Yes
Bucket pivot max height 12.5ft. minimum	Yes
Front overhang: 8.1ft. minimum	Yes
Wheelbase: 9′ 6″ minimum	Yes
Ground Clearance: 1′ 3″ minimum	Yes
Height over exhaust 10′ 7″. minimum	Yes
Height over cab 10′ 10″ minimum	Yes
Roll-back on ground 42° minimum	Yes
Roll-back on carry 47° minimum	Yes
Dump angle 48° minimum	Yes
Clearance circle 34′ 8″ minimum	Yes
Over width 8′ minimum	Yes

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Tipping load straight 22,065 lbs. minimum	Yes
Tipping load full turn 17,637 lbs. minimum	Yes

OPERATORS CAB/STANDARD FEATURES:

Enclosed Cab with Heat and Air Conditioning	Yes
Shall be equipped with Ride Control	Yes
Wiper/Washer (front and rear) and Defroster	Yes
3" Retractable seat belt and adjustable air suspension (heated)	Yes
Unit shall be equipped with forward and reverse switch mounted in right hand loader joystick pilot operated.	

COMPLY? YES | NO

OPERATORS CAB/STANDARD FEATURES CONT'D:

F-N-R switch on joystick for forward, neutral, reverse	Yes
Auxiliary roller switch mounted on joystick to operate 3rd spool valve	Yes
Heated mirrors	Yes

Alarms, audible and visual:

Air filter clogging	Yes
Transmission error	Yes
Battery voltage	Yes
Brake oil pressure	Yes
Engine oil pressure	Yes
Parking brake	Yes
Water in fuel	Yes
Fuel level	Yes
Coolant level	Yes
Hydraulic oil temperature	Yes
Coolant temperature	Yes
Transmission and oil temperature	Yes

Gauges:

Engine coolant temperature	Yes
Fuel level	Yes
Speedometer	Yes

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President — **TITLE**

Transmission oil temperature	Yes
Indicator Lights:	
Pilot cut-off	Yes
High beam	Yes
Turn signal	Yes
LCD Display:	
Clock and fault code	Yes
Operating hour counter	Yes
Engine r.p.m.	Yes
Transmission gear range indicator	Yes

COMPLY? YES | NO

OPERATORS CAB/STANDARD FEATURES CONT'D:

LCD Display Cont'd:	
Job time and distance	Yes
Temperature (coolant/hyd oil/t/m oil)	Yes
Lighting system:	
1 LED Dome light	Yes
2 Stop and tail lights	Yes
4 Turn signals	Yes
Brake Lights (counterweight)	Yes
2 Head lights on from tower	Yes
4 Working lights on front roof	Yes
2 Working lights on rear roof	Yes
2 Working lights on grill	Yes
Cigar lighter and ashtray	Yes
Coat hook	Yes
Console box	Yes
(3) Rear view mirrors (1) inside (2 outside heated)	Yes
Roller type sunshade (front and rear windows)	Yes
Tinted safety glass	Yes

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One door cab	Yes
Magazine pocket	Yes
Radio/USB Player	Yes
Rubber floor mat	Yes
Wrist rest	Yes
Hydraulic oil level sight gauge	Yes
Hi-mate mobile remote management system (GPS), 5 Years Service at No Charge (Tracks position, gives service alerts and machine activity reports)	Yes
Scale System – weights, totals and access tracking reports included at No Charge	Yes
Unit shall be equipped with additional factory halogen lights	Yes
Front and rear License plate bracket with LED light factory installed	

COMPLY?
YES | NO

OPERATORS CAB/STANDARD FEATURES CONT'D:

(1) Cab mounted factory rotating beacon light shall be included	Yes
(4) AAVM camera system to be factory installed	Yes
Rear full swing-out fenders shall be included	Yes
Cab shall come equipped with additional halogen lights option	Yes
(10) Federal signal MP262V-WA strobes shall be installed as per County directions	Yes
Fuel ring and GPS to be installed prior to delivery to county	Yes

VENDOR REQUIREMENTS:

(1) Parts, operators manual shall be included.	Yes
(2) Complete sets of keys with unit upon delivery.	Yes
(3)Delivery charge shall be included to County Yard.	Yes

WARRANTY:

3 Years/3000 hours full machine warranty	Yes
Vendor shall be responsible for road travel time while machine is under warranty.	Yes

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President — **TITLE**

OPTIONAL ATTACHMENTS:

One (1) Set of 72" long x 60" wide carriage forks w/ISO coupler hooks	**Bid Price:**	$ 7,950
One (1) 2.25 cu. yd. 4-in-1 Bucket w/Bolt-On Edge, ISO coupler hooks	**Bid Price:**	$ 22,900
One (1) 8' Jib boom with ISO hooks	**Bid Price:**	$ 6,950

Furnish and install

Two Way Motorola Radio System

Provisions for (1) Motorola XTL-1500 two-way radio mounted in Havis console. Locate antenna on roof as per Motorola OEM manual specifications.

P/N# HKN4192B Power Cable, HAF4002A Antenna w/ Cable, HLN6863B Cable W/ Connector.

Local Motorola factory representative: Matt Tannenbaum, 212-629-1794, matt.tannenbaum@motorolasolutions.com

Fuel Authorization and GPS Monitoring Systems

Furnish and install Assetworks Fuelfocus fuel ring system and MOSS GPS monitoring unit compatible with existing NCDPW systems

Local installer: Movin On Sounds & Security

Bruce Cirillo, 516-204-5716, bruce@movinongps.com

Item #	Qty.	Unit	Description		Unit Price		Total Price
#1	(1)	Each	Wheel Loader	@	$ 179,900	=	$ 179,900

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President — **TITLE**

Please note if you are bidding an equal, please indicate the make and item number you are offering.

_____

_____

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BIDDER SIGN HERE All Island Equipment Corp. _____ President _____
BIDDER **TITLE**

FORMAL BID RECOMMENDATION

BID NUMBER 76051-08136-173 OPEN 08/13/26 TITLE Wheel Loader
DATE: 08/13/26 : **BUYER –Anette Sullivan** FROM:
ADMINISTRATION

PLEASE REVIEW ATTACHED BID RESULT. NOTE YOUR RECOMMENDATION FOR AWARD.

FORWARD THIS TRANSMITTAL SHEET TOGETHER WITH BID FILE. RETAIN REQUISITION.

Date: 08/18/26
To: Supervisor From: Anette Sullivan

List of recommended awards in accordance with the attached summary is shown in column at right. The reason for award to other than low bidder is indicated on the reverse side of this page.

Buyer

Date:

To: Director From: Supervisor

☐ Concur ☐ Disagree (See Reverse)

Date: 8/19

To: Buyer From: Director

☑ Approved for Award

☐ Hold award pending discussion

☑ Subject to Legislature Approval

Director

Item	Bid Results Bidder
	Recommendation of award be made to
	All Island Equipment Inc.as the lowest
	bidder meeting specs
	DPW accepted see email
	attached
	Wheel Loader 179,900
	Bucket 22,900
	Fork 7,950
	Jibboom 6950
	$217,700

COUNTY OF NASSAU
SHARED SERVICES
1 WEST STREET
MINEOLA, NEW YORK 11501-4894

To: File

From: Anette Sullivan, Buyer

Re: Low Vendor Response

The solicitation was posted on the solicitation board and advertised in the New York Post and the NYS Contract reporter. Sixteen vendors viewed the solicitation. All vendors that viewed the solicitation were contacted as a reminder of the bid opening date. The bid was active from 7/2/26 -8/13/26. We received one bid.

OFFICE OF PURCHASING
SUMMARY OF BIDS
OPENED: August 13, 2026 AT 11:00 A.M.
BID NO: 76051-08136-173
REQ. NO: RQPW26000042
TITLE: Wheel Loader

ITEM #	ARTICLE	Qty.	UNIT	ALL ISLAND EQUIPMENT CORP. $1.00	2	3	4	5	6	7	8	DETAILS OF AWARD TO NO.	AMOUNT
A)	One (1) Set of 72" long x 60" wide carriage forks w/ISO coupler hooks	1	Ea.	$7,950.00									
B)	One (1) 2.25 cu. yd. 4-in-1 Bucket w/Bolt-On Edge, ISO coupler hooks	1	Ea.	$22,900.00									
C)	One (1) 8' Jib boom with ISO hooks	1	Ea.	$6,950.00									
1	Wheel Loader	1	Ea.	$179,900.00									
PRPARED BY			TERMS	NET	NET	NET	NET	NET	NET	NET	NET		

Kimberly Stanton hereby certifies that the bids listed above were opened at the time and place specified therein and that the above is a correct transcription from all original bids received.

Date 8/13/26

PUBLIC BID OFFICER

Policy Number:

Date Entered: 10/2/2026

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/2/2026

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

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

PRODUCER
Hudson Valley Risk Management, LLC
PO Box 229
West Nyack, NY 10994

CONTACT NAME:
PHONE (A/C, No, Ext): (631) 422-2060 FAX (A/C, No): (631) 422-3982
E-MAIL ADDRESS: fjseibertcca@hotmail.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Erie Insurance Company	26263
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

INSURED
All Island Equipment Corp
39 Jersey Street
West Babylon, NY 11704

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. *LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. LIMITS SHOWN ARE INCLUSIVE OF AMOUNTS REQUESTED BY THE CERTIFICATE HOLDER AND MAY NOT REFLECT POLICY LIMIT AMOUNTS IN EXCESS OF THOSE REQUESTED. **Not Applicable in WY**

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	[X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS-MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [ ] POLICY [ ] PRO-JECT [ ] LOC [ ] OTHER:			Q458050089	9/30/2026	9/30/2027	EACH OCCURRENCE	$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 1,000,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 1,000,000
							GENERAL AGGREGATE	$ 2,000,000
							PRODUCTS - COMP/OP AGG	$ 2,000,000
								$
A	AUTOMOBILE LIABILITY [X] ANY AUTO [ ] OWNED AUTOS ONLY [ ] HIRED AUTOS ONLY [ ] SCHEDULED AUTOS [ ] NON-OWNED AUTOS ONLY			Q098080057	9/30/2026	9/30/2027	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
								$
A	[X] UMBRELLA LIAB [X] OCCUR EXCESS LIAB [ ] CLAIMS-MADE [ ] DED [ ] RETENTION$			Q338070040	9/30/2026	9/30/2027	EACH OCCURRENCE	$ 5,000,000
							AGGREGATE	$ 5,000,000
								$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y/N [N] (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		Q938000219	9/30/2026	9/30/2027	[X] PER STATUTE [ ] OTH-ER	
							E.L. EACH ACCIDENT	$ 100,000
							E.L. DISEASE - EA EMPLOYEE	$ 500,000
							E.L. DISEASE - POLICY LIMIT	$ 100,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate Holder is an Additional Insured per Additional Insured Endorsement CG 20 10

CERTIFICATE HOLDER

Nassau County
Office of Purchasing
1 West Street
Mineola, NY 11501

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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Nassau County Shared Services,
Office of Purchasing

Staff Summary A-76-2026

Subject: Hand Held Sonar Rescue Equipment (RQFC26000055)	Date: October 15, 2026
Department: Department of Shared Services Office of Purchasing	Vendor Name: Copper Collar Group LLC.
Department Head Name: Melissa Gallucci	Contract Number: A-76-2026
Department Head Signature Melissa Gallucci	Contract Manager Name: Timothy Funaro, Buyer

Internal Approvals			
Date & Init.	**Approval**	**Date & Init.**	**Approval**
10/19/2026	Chief Procurement Officer	10/19/26	Budget
10/19/2026 M. Dacey	County Attorney	10/19/26	County Executive
10/19/2026	NC Insurance		

Significant Adverse Information Identified? Yes / No **X** (If Yes, attach memo.)

Narrative

Purpose: To award and execute a purchase order between the Nassau County Fire Commission and Copper Collar Group LLC. for Hand Held Sonar Rescue Equipment.

Discussion: The Department of Shared Services, Office of Purchasing, has determined that this is a sole source procurement. The hand held sonar rescue equipment package includes (2) AquaEye Pro Handheld Sonars; (2) waterproof carrying cases; (2) charging Assemblies; (1) command hub tablet. This system is designed to locate drowning victims within minutes of dispatch; recognize characteristics of humans in water; mark the exact location on built-in screen. The manufacture of the AquaEye Pro and its related components VodaSafe Inc. can confirm the Copper Collar Group is the sole authorized dealer and distributor for the AquaEye in New York state.

Impact on Funding/Term: The maximum amount authorized under this purchase order shall be One Hundred Sixty Two Thousand Nine Hundred Seventy Dollars ($162,970.00) from general funds FCFCF 1300 BB211 and from PWCAPCAP 00005.

Recommendation: Department of Shared Services, Office of Purchasing recommends awarding a sole source purchase order to Copper Collar Group LLC.

RECEIVED
NASSAU COUNTY
CLERK OF THE LEGISLATURE
2026 OCT 19 P 3: 10

COUNTY OF NASSAU

INTER – DEPARTMENTAL MEMO

TO: CLERK OF THE COUNTY LEGISLATURE **A-76-2026**

FROM: MELISSA GALLUCCI - COMMISSIONER OF SHARED SERVICES

DATE: October 15, 2026

SUBJECT: RESOLUTION – THE NASSAU COUNTY FIRE COMMISSION

THIS RESOLUTION IS RECOMMENDED BY THE COMMISSIONER OF SHARED SERVICES TO AUTHORIZE AN AWARD AND TO EXECUTE A PURCHASE ORDER IN THE AMOUNT OF ONE HUNDRED SIXTY TWO THOUSAND NINE HUNDRED SEVENTY DOLLARS ($162,970.00) ON BEHALF OF THE NASSAU COUNTY FIRE COMMISSION AND COPPER COLLAR GROUP LLC. FOR HAND HELD SONAR RESCUE EQUIPMENT.

THE ABOVE DESCRIBED RESOLUTION AND SUPPORTING DOCUMENTATION ATTACHED HERETO IS FORWARDED FOR YOUR REVIEW, APPROVAL, AND SUBSEQUENT TRANSMITTAL TO THE RULES COMMITTEE FOR INCLUSION IN ITS AGENDA.

Melissa Gallucci

MELISSA GALLUCCI
COMMISSIONER OF SHARED SERVICES

MS: br
ENCL: (1) STAFF SUMMARY
(2) DISCLOSURE STATEMENT
(3) RESOLUTION
(4) BID SUMMARY
(5) BID PROPOSAL
(6) CERTIFICATE OF LIABILITY INSURANCE
(7) RECOMMENDATION OF AWARD
(8) POLITICAL CONTRIBUTION FORM

RULES RESOLUTION

A RESOLUTION AUTHORIZING THE COMMISSIONER OF SHARED SERVICES TO AWARD AND EXECUTE A PURCHASE ORDER BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF THE NASSAU COUNTY FIRE COMMISSION AND COPPER COLLAR GROUP LLC.

WHEREAS, the NASSAU COUNTY DEPARTMENT OF SHARED SERVICES, OFFICE OF PURCHASING is representing to the Rules Committee that the firm Copper Collar Group LLC.. is a sole source provider and meets all specifications for the service described in the said contract as determined by the Commissioner of Shared Services.

RESOLVED, that the Rules Committee of the Nassau County Legislature authorizes the Commissioner of Shared Services to award and execute the said Purchase Order with Copper Collar Group LLC.

Business History Form

The contract shall be awarded to the responsible proposer who, at the discretion of the County, taking into consideration the reliability of the proposer and the capacity of the proposer to perform the services required by the County, offers the best value to the County and who will best promote the public interest.

In addition to the submission of proposals, each proposer shall complete and submit this questionnaire. The questionnaire shall be filled out by the owner of a sole proprietorship or by an authorized representative of the firm, corporation or partnership submitting the Proposal.

NOTE: All questions require a response, even if response is "none" or "not-applicable." No blanks.

(USE ADDITIONAL SHEETS IF NECESSARY TO FULLY ANSWER THE FOLLOWING QUESTIONS).

Date: 10/16/2026

1) Proposer's Legal Name: Copper Collar Group, LLC

2) Address of Place of Business: 4083 Cedar Point Rd

City: Lakeland State/Province/ Territory: TN Zip/Postal Code: 38002

Country: US

3) Mailing Address (if different): 4083 Cedar Point Rd

City: Lakeland State/Province/ Territory: TN Zip/Postal Code: 38002

Country: US

Phone: (619) 757-3144

Does the business own or rent its facilities? Own If other, please provide details:

4) Dun and Bradstreet number: 117792589

5) Federal I.D. Number: 854054869

6) The proposer is a: Sole Proprietorship (Describe)

7) Does this business share office space, staff, or equipment expenses with any other business?
YES [ ] NO [X] If yes, please provide details:

8) Does this business control one or more other businesses?
YES [ ] NO [X] If yes, please provide details:

9) Does this business have one or more affiliates, and/or is it a subsidiary of, or controlled by, any other business?
YES [ ] NO [X] If yes, please provide details:

10) Has the proposer ever had a bond or surety cancelled or forfeited, or a contract with Nassau County or any other government entity terminated?
YES [ ] NO [X] If yes, state the name of bonding agency, (if a bond), date, amount of bond and reason for such cancellation or forfeiture: or details regarding the termination (if a contract).

11) Has the proposer, during the past seven years, been declared bankrupt?
YES [ ] NO [X] If yes, state date, court jurisdiction, amount of liabilities and amount of assets

12) In the past five years, has this business and/or any of its owners and/or officers and/or any affiliated business, been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency? And/or, in the past 5 years, have any owner and/or officer of any affiliated business been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency, where such investigation was related to activities performed at, for, or on behalf of an affiliated business.
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

13) In the past 5 years, has this business and/or any of its owners and/or officers and/or any affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies? And/or, in the past 5 years, has any owner and/or officer of an affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies, for matters pertaining to that individual's position at or relationship to an affiliated business.
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

14) Has any current or former director, owner or officer or managerial employee of this business had, either before or during such person's employment, or since such employment if the charges pertained to events that allegedly occurred during the time of employment by the submitting business, and allegedly related to the conduct of that business:
a) Any felony charge pending?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

b) Any misdemeanor charge pending?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

c) In the past 10 years, you been convicted, after trial or by plea, of any felony and/or any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

d) In the past 5 years, been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

e) In the past 5 years, been found in violation of any administrative, statutory, or regulatory provisions?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

15) In the past (5) years, has this business or any of its owners or officers, or any other affiliated business had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

16) For the past (5) tax years, has this business failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide details for each such year. Provide a detailed response to all questions checked 'YES'. If you need more space, photocopy the appropriate page and attach it to the questionnaire.

17 Conflict of Interest:

a) Please disclose any conflicts of interest as outlined below. NOTE: If no conflicts exist, please expressly state "No conflict exists."

(i) Any material financial relationships that your firm or any firm employee has that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No Conflict exists

(ii) Any family relationship that any employee of your firm has with any County public servant that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No Conflict Exists

(iii) Any other matter that your firm believes may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.

No conflict exists.

b) Please describe any procedures your firm has, or would adopt, to assure the County that a conflict of interest would not exist for your firm in the future.

Should a conflict arise, we would notify the county and adhere to their guidelines

A. Include a resume or detailed description of the Proposer's professional qualifications, demonstrating extensive experience in your profession. Any prior similar experiences, and the results of these experiences, must be identified.

Have you previously uploaded the below information under in the Document Vault?
YES [ ] NO [X]

Is the proposer an individual?
YES [ ] NO [X] Should the proposer be other than an individual, the Proposal MUST include:

i) Date of formation;

12/21/2020

ii) Name, addresses, and position of all persons having a financial interest in the company, including shareholders, members, general or limited partner. If none, explain.

Jon Klukas - President - 100% owner / operator, 4083 Cedar Point Rd., Lakeland, TN 38002.

iii) Name, address and position of all officers and directors of the company. If none, explain.

Jon Klukas - President - 100% owner / operator, 4083 Cedar Point Rd., Lakeland, TN 38002

iv) State of incorporation (if applicable);

TN

v) The number of employees in the firm;

1

vi) Annual revenue of firm;

1500000

vii) Summary of relevant accomplishments

Copper Collar Group is a SDVOB run by the operator, Jon Klukas - a retired Navy Master Diver. We provide equipment and training solutions to public safety and military maritime and dive teams and have trained over 1000 personnel on the use and employment of the equipment solutions we provide. We have been involved in dozens of recovery operations searching for drowning victims. Our highly experienced team is routinely called upon for major natural disasters such as the recent flooding in TX, and hurricane / flood evacuation and search and rescue. When we refer to "our team" that responds to natural disasters, when called upon, we bring volunteers that are former Navy Divers to assist communities in search and rescue. This is an all volunteer team that operates under our guidance.

viii) Copies of all state and local licenses and permits.

B. Indicate number of years in business.

6

C. Provide any other information which would be appropriate and helpful in determining the Proposer's capacity and reliability to perform these services.

We have the largest distribution network in the U.S. for the products and training that we provide, to include the AquaEye Pro sonar for search and rescue.

D. Provide names and addresses for no fewer than three references for whom the Proposer has provided similar services or who are qualified to evaluate the Proposer's capability to perform this work.

Company	New York State Police		
Contact Person	Neil Case		
Address	1220 Washington Ave		
City	Albany	State/Province/Territory	NY
Country	US		
Telephone	(607) 349-1204		

Fax #	
E-Mail Address	neil.case@troopers.ny.gov

Company	West Point Fire Department		
Contact Person	John DeFrancesco		
Address	721 Washington Rd		
City	West Point	State/Province/Territory	NY
Country	US		
Telephone	(845) 938-8118		
Fax #			
E-Mail Address	john.m.defrancesco4.civ@army.mil		

Company	East Islip Fire Department		
Contact Person	Jerry Leigh		
Address	30 East Main St		
City	East Islip	State/Province/Territory	NY
Country	US		
Telephone	(631) 224-1712		
Fax #			
E-Mail Address	freelance031@optonline.net		

I, jon klukas, hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, jon klukas, hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Name of submitting business: Copper Collar Group, LLC

Electronically signed and certified at the date and time indicated by:
jon klukas JON@COPPERCOLLAR.ORG

President
Title

10/16/2026
Date

COUNTY OF NASSAU

POLITICAL CAMPAIGN CONTRIBUTION DISCLOSURE FORM

1. Has the vendor or any corporate officers of the vendor provided campaign contributions pursuant to the New York State Election Law in (a) the period beginning April 1, 2016 and ending on the date of this disclosure, or (b), beginning April 1, 2018, the period beginning two years prior to the date of this disclosure and ending on the date of this disclosure, to the campaign committees of any of the following Nassau County elected officials or to the campaign committees of any candidates for any of the following Nassau County elected offices: the County Executive, the County Clerk, the Comptroller, the District Attorney, or any County Legislator?

YES [ ] NO [X] If yes, to what campaign committee?

Electronically signed and certified at the date and time indicated by:
jon klukas [JON@COPPERCOLLAR.ORG]

Dated: 10/16/2026 10:50:04 am

Vendor: Copper Collar Group, LLC

Title: President

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1. Principal Name: Jon Klukas
   Date of birth: 03/25/1974
   Home address: 4083 Cedar Point Rd
   City: Lakeland State/Province/Territory: TN Zip/Postal Code: 38002
   Country: US

   Business Address: 4083 Cedar Point Rd
   City: Lakeland State/Province/Territory: TN Zip/Postal Code: 38002
   Country US
   Telephone: 6197573144

   Other present address(es): 4083 Cedar Point Rd
   City: Lakeland State/Province/Territory: TN Zip/Postal Code: 38002
   Country: US
   Telephone: 6197573144

   List of other addresses and telephone numbers attached

2. Positions held in submitting business and starting date of each (check all applicable)

President	12/21/2020	Treasurer	
Chairman of Board		Shareholder	
Chief Exec. Officer	12/21/2020	Secretary	
Chief Financial Officer		Partner	
Vice President			
(Other)			

3. Do you have an equity interest in the business submitting the questionnaire?
   YES [X] NO [ ] If Yes, provide details.
   100%

4. Are there any outstanding loans, guarantees or any other form of security or lease or any other type of contribution made in whole or in part between you and the business submitting the questionnaire?
   YES [ ] NO [X] If Yes, provide details.

5. Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization other than the one submitting the questionnaire?
YES [ ] NO [X] If Yes, provide details.

6. Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer?
YES [ ] NO [X] If Yes, provide details.

NOTE: An affirmative answer is required below whether the sanction arose automatically, by operation of law, or as a result of any action taken by a government agency. Provide a detailed response to all questions checked "YES". If you need more space, photocopy the appropriate page and attach it to the questionnaire.

7. In the past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 in which you have been a principal owner or officer:
   a. Been debarred by any government agency from entering into contracts with that agency?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   b. Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   c. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

   d. Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?
YES [ ] NO [X] If 'Yes', provide details for each such instance. (Provide a detailed response to all questions check "Yes". If you need more space, photocopy the appropriate page and attached it to the questionnaire.)

9.
   a. Is there any felony charge pending against you?
   YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

b. Is there any misdemeanor charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

c. Is there any administrative charge pending against you?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

d. In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

e. In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

f. In the past 5 years, have you been found in violation of any administrative or statutory charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

11. In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

12. In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

13. For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges?
YES [ ] NO [X] If yes, provide an explanation of the circumstances and corrective action taken.

I, Jon Klukas, hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.

I, Jon Klukas, hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.

CERTIFICATION

A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.

Copper Collar Group, LLC

Name of submitting business

Electronically signed and certified at the date and time indicated by:
Jon Klukas JON@COPPERCOLLAR.ORG

President

Title

10/16/2026 10:52:09 am

Date

COUNTY OF NASSAU

CONSULTANT'S, CONTRACTOR'S AND VENDOR'S DISCLOSURE FORM

1. Name of the Entity: Copper Collar Group, LLC

Address: 4083 Cedar Point Rd

City: Lakeland State/Province/Territory: TN Zip/Postal Code: 38002

Country: US

2. Entity's Vendor Identification Number: 85-4054869

3. Type of Business: Ltd. Liability Co (specify)

4. List names and addresses of all principals; that is, all individuals serving on the Board of Directors or comparable body, all partners and limited partners, all corporate officers, all parties of Joint Ventures, and all members and officers of limited liability companies (attach additional sheets if necessary):

First Name Jon
Last Name Klukas
MI Suffix
Address 4083 Cedar Point RD
City Lakeland State/Province/ Territory: TN Zip/Postal Code: 38002
Country US
Position President

5. List names and addresses of all shareholders, members, or partners of the firm. If the shareholder is not an individual, list the individual shareholders/partners/members. If a Publicly held Corporation, include a copy of the 10K in lieu of completing this section.
If none, explain.

Jon Klukas - President and owner. 4083 Cedar Point Rd, Lakeland, TN 38002

6. List all affiliated and related companies and their relationship to the firm entered on line 1. above (if none, enter "None"). Attach a separate disclosure form for each affiliated or subsidiary company that may take part in the performance of this contract. Such disclosure shall be updated to include affiliated or subsidiary companies not previously disclosed that participate in the performance of the contract.

None

7. List all lobbyists whose services were utilized at any stage in this matter (i.e., pre-bid, bid, post-bid, etc.). If none, enter "None." The term "lobbyist" means any and every person or organization retained, employed or designated by any client to influence - or promote a matter before - Nassau County, its agencies, boards, commissions, department heads, legislators or committees, including but not limited to the Open Space and Parks Advisory Committee and Planning Commission. Such matters include, but are not limited to, requests for proposals, development or improvement of real property subject to County regulation, procurements. The term "lobbyist" does not include any officer, director, trustee, employee, counsel or agent of the County of Nassau, or State of New York, when discharging his or her official duties.

Are there lobbyists involved in this matter?
YES [ ] NO [X]

(a) Name, title, business address and telephone number of lobbyist(s):
N/A

(b) Describe lobbying activity of each lobbyist. See below for a complete description of lobbying activities.
N/A

(c) List whether and where the person/organization is registered as a lobbyist (e.g., Nassau County, New York State):
N/A

8. VERIFICATION: This section must be signed by a principal of the consultant, contractor or Vendor authorized as a signatory of the firm for the purpose of executing Contracts.

The undersigned affirms and so swears that he/she has read and understood the foregoing statements and they are, to his/her knowledge, true and accurate.

Electronically signed and certified at the date and time indicated by:
jon klukas [JON@COPPERCOLLAR.ORG]

Dated: 10/16/2026 10:55:22 am

Title: President

The term lobbying shall mean any attempt to influence: any determination made by the Nassau County Legislature, or any member thereof, with respect to the introduction, passage, defeat, or substance of any local legislation or resolution; any determination by the County Executive to support, oppose, approve or disapprove any local legislation or resolution, whether or not such legislation has been introduced in the County Legislature; any determination by an elected County official or an officer or employee of the County with respect to the procurement of goods, services or construction, including the preparation of contract specifications, including by not limited to the preparation of requests for proposals, or solicitation, award or administration of a contract or with respect to the solicitation, award or administration of a grant, loan, or agreement involving the disbursement of public monies; any determination made by the County Executive, County Legislature, or by the County of Nassau, its agencies, boards, commissions, department heads or committees, including but not limited to the Open Space and Parks Advisory Committee, the Planning Commission, with respect to the zoning, use, development or improvement of real property subject to County regulation, or any agencies, boards, commissions, department heads or committees with respect to requests for proposals, bidding, procurement or contracting for services for the County; any determination made by an elected county official or an officer or employee of the county with respect to the terms of the acquisition or disposition by the county of any interest in real property, with respect to a license or permit for the use of real property of or by the county, or with respect to a franchise, concession or revocable consent; the proposal, adoption, amendment or rejection by an agency of any rule having the force and effect of law; the decision to hold, timing or outcome of any rate making proceeding before an agency; the agenda or any determination of a board or commission; any determination regarding the calendaring or scope of any legislature oversight hearing; the issuance, repeal, modification or substance of a County Executive Order; or any determination made by an elected county official or an officer or employee of the county to support or oppose any state or federal legislation, rule or regulation, including any determination made to support or oppose that is contingent on any amendment of such legislation, rule or regulation, whether or not such legislation has been formally introduced and whether or not such rule or regulation has been formally proposed.

REQUISITION

RQFC26000055 14/OCT/2026

VENDOR:
COPPER COLLAR GROUP, LLC
4083 CEDAR POINT RD
LAKELAND TN 38002

TEL:(619)823-5342
FAX:( ) -

REQUISITIONER:
FC NASSAU COUNTY FIRE COMMISSION
1194 PROSPECT AVE.
WESTBURY NY 11590-2723
MICHELE GRIGONIS
TEL:(516)573-9871
FAX:(516)573-9860

ITEM	DESCRIPTION	QTY	U/M	UNIT COST	TOTAL
001	220-60	5.00	EA	29,995.0000	149,975.00

SONAR INSTRUMENTS, RESEARCH TYPE
AQUAEYE PRO COMMAND
PACKAGE INCLUDES (2) AQUAEYE PRO HANDHELD SONARS; (2) WATERPROOF CARRYING CASES; (2) CHARGING ASSEMBLIES; (1) COMMAND HUB TABLET; DESIGNED TO LOCATE DROWNING VICTIMS WITHIN MINUTES OF DISPATCH; RECOGN CHARACTERISTICS OF HUMAN IN WATER; MARK EXACT LOCATION ON BUILT-IN SCREEN; COMMAND HUB CONNECTS MULTIPLE AQUAEYE PRO DEVICES WITH TABLET FIVE (5) YEAR WARRANTY; ON-BOARD GPS WITH COORDINATES OGGED ON ALL SAVED SCANS; IP68 TABLET W/ MAPPING & SCANNED AREA INTEGRATION
SOLE SOURCE

002	220-60	1.00	EA	12,995.0000	12,995.00

SONAR INSTRUMENTS, RESEARCH TYPE
AQUAEYE TRAINING
ONE (1) 3-DAY AQUAEYE TRAIN THE TRAINER COURSE WITH ONE INSTRUCTOR; COST IS INCLUSIVE OF ALL TRAVEL, MATERIALS, AND TIME; COURSE WILL BE ADJUSTED TO MEET NASSAU COUNTY'S SCHEDULE AND CAN BE CONDUCTED OVER THE WEEKEND AT NO ADDITIONAL COST.
SOLE SOURCE

ESTIMATED TOTAL: 162,970.00

REQ DOC INQUIRY 2140

USING MULTIPLE FUNDING SOURCES TO PURCHASE HANDHELD SONAR RESCUE EQUIPMENT
FOR FIRE MARSHAL'S OFFICE AND WATER RESCUE

*****THIS IS A SOLE SOURCE PURCHASE*****

USING NASSAU COUNTY REGISTERED VENDOR COPPER COLLAR GROUP LLC
POC IS JON KLUKAS
JON@COPPERCOLLAR.ORG

FOR COPY OF QUOTE, SPECS, SOLE SOURCE LETTER AND DISTRIBUTION AGREEMENT
PLEASE CONTACT MICHELE GRIGONIS 3-9871

Copper Collar Group LLC
4083 Cedar Point Rd.
Lakeland, TN 38002 US
jon@coppercollar.org

Estimate

ADDRESS
Matt Colgan
Nassau County Fire Commission

ESTIMATE	1072
DATE	07/06/2026
EXPIRATION DATE	12/31/2026

DATE	SERVICE	DESCRIPTION	QTY	RATE	AMOUNT
	AquaEye Pro Command	Each AquaEye Pro 'Command' package includes: (2) AquaEye Pro handheld sonars, (2) waterproof carrying cases, (2) charging assemblies, and (1) Command Hub Tablet. The Command package comes with a 5-year warranty	5	29,995.00	149,975.00
	Aquaeye Training	One (3-day) AquaEye 'Train the Trainer' Course with one instructor. Cost is inclusive of all travel, materials and time. Course will be adjusted to meet Nassau County's schedule and can be conducted over the weekend at no additional cost.	1	12,995.00	12,995.00

Contact jess@coppercollar.org for billing questions. Estimate will be converted to an invoice once a Purchase Order is received. Payment via bank transfer or check is preferred.
** Estimate is valid until December 31, 2026.

**Copper Collar Group is a SDVOSB / WOSB run exclusively by veterans.

SUBTOTAL	162,970.00
TAX	0.00
TOTAL	**USD 162,970.00**

Accepted By

Accepted Date

BRUCE A. BLAKEMAN
County Executive

MICHAEL F. UTTARO
Chief Fire Marshal

Nassau County Fire Commission
Office of the Fire Marshal
1194 Prospect Avenue
Westbury, New York 11590
516-573-9901

October 9, 2026
Robert Cleary
Chief Procurement Officer

RE: Sole Source Justification AquaEye Sonar Systems

Mr. Cleary:

The Fire Commission intends to award a sole-source contract to Copper Collar LLC for the purchase of 5-AquaEye Pro Command Handheld Sonar Systems. The contract will also include a train-the-trainer class on the use of the equipment so that we can continue to train other members of the fire service.

These handheld sonars are able to scan a large area and decipher between a submerged human body and other anomalies submerged in water. The AquaEye is the only handheld sonar unit that combines ultrasound pings with an embedded AI to automatically filter out debris and map a victim's exact location. Additionally, the AquaEye is lightweight at 3 pounds, can float, and can be deployed in under 10 seconds. Other systems are heavy and may require mounting, both of which increase the time of deployment to over five minutes.

The department has not found an equivalent alternative to this product available on the market.
We believe that the price for these goods and services is fair and reasonable.

For these reasons it is appropriate that this service be procured as a sole source.

Bohdan J. Pilczak

Assistant Chief Fire Marshal
Deputy County Fire Coordinator

AQUAEYE

October 9, 2026

Subject: Sole-Source Confirmation AquaEye Pro

To Whom It May Concern:

VodaSafe Inc., the manufacturer of AquaEye Pro ("AquaEye"), provides this letter to confirm AquaEye's unique proprietary capabilities and the exclusive authorization of Copper Collar Group LLC ("CCG") for AquaEye sales and training in New York State.

Unique and proprietary technology

AquaEye Pro is a handheld sonar device that utilizes AI that is specifically designed to help rescue personnel locate drowning victims quickly. Its distinguishing capability is the integration of handheld sonar with proprietary artificial intelligence that analyzes sonar returns and automatically marks potential human targets for the operator.

This combination supports rapid deployment and reduces the interpretation burden associated with conventional sonar systems. Unlike traditional fish finders and sonar systems that rely primarily on an operator's interpretation of sonar imagery, AquaEye provides automated target identification within a handheld water-rescue device.

To the best of VodaSafe's knowledge, no other commercially available product offers this same combination of handheld operation and proprietary AI-assisted detection of potential drowning victims.

VodaSafe has filed a provisional patent application related to AquaEye technology, identified as application number **64041175**.

Exclusive dealer and distributor — New York State

VodaSafe confirms that Copper Collar Group LLC is the sole authorized dealer and distributor for AquaEye in New York State. No other dealer or distributor is authorized by VodaSafe to supply AquaEye within this territory.

Authorized operational-level and train-the-trainer provider

VodaSafe further confirms that Copper Collar Group LLC is the an authorized provider of AquaEye operational-level training and AquaEye train-the-trainer instruction in New York State.

This authorization includes instruction on device operation, deployment procedures, search protocols, interpretation of AquaEye's displayed information, and preparation of designated instructors to train personnel within their organizations using VodaSafe-approved methods and materials.

AQUAEYE

Accordingly, CCG is the sole authorized source in New York State for the supply of AquaEye equipment and the manufacturer-authorized operational-level and train-the-trainer services described above.

Please contact the undersigned for verification or additional information.

Best regards,

Eric Wolfe

Erik Wolfe
Director of Sales & Marketing
VodaSafe Inc.

U.S. Small Business Administration

202-205-8800 | sba.gov
409 3rd St, SW. Washington DC 20416

Feb. 27, 2023

COPPER COLLAR GROUP LLC
SAM UEI: VQY7NLWA3B46
4083 CEDAR POINT RD
LAKELAND, TN 38002

Dear COPPER COLLAR GROUP LLC:

I am writing to inform you that COPPER COLLAR GROUP LLC has been certified by the Veteran Small Business Certification Program (VetCert) at SBA. Your certification confirms your eligibility to compete for set-aside contracting opportunities, as well as other benefits, as a Service-Disabled Veteran-Owned Small Business (SDVOSB).

What you need to know:

- COPPER COLLAR GROUP LLC is certified as a Service-Disabled Veteran-Owned Small Business (SDVOSB) and publicly listed at veterans.certify.sba.gov.
- Your certification is valid for three (3) years from the date of this letter.
- You may visit SBA's website to download SBA-approved digital icons that indicate your certification status.
- SBA may conduct a program examination at your office or work site during your certification period to verify the accuracy of your certification.
- You may apply for recertification 120 days prior to your expiration date by logging in to your Veteran Small Business Certification profile.

What to do if your business changes:

You must inform SBA of any changes to the business that could affect its eligibility for the program, such as:

- a closure
- a change to the firm's ownership, business structure, or control
- filing of a bankruptcy
- a change in a Veteran-owner's active duty status

You can inform SBA of changes through the VetCert website at veterans.certify.sba.gov. Failure to report eligibility changes within 30 days of the change could result in:

- Civil and criminal penalties
- A referral to the Debarment and Suspension Committee
- Decertification and removal from the Veteran Small Business Certification Program

Please keep a copy of this letter to confirm COPPER COLLAR GROUP LLC's continued program eligibility. Thank you for your service to our country and for continuing to serve the United States through small business ownership.

Sincerely,

John B. Perkins

John B. Perkins
Director Veteran Small Business Certification Program

All SBA programs and services are extended to the public on a nondiscriminatory basis.

aquaeye
BY VODASAFE

DISTRIBUTION AGREEMENT

CONTRACT NUMBER: CCVS-240

This Distribution Agreement ("**Agreement**") is made by and between:

VodaSafe Inc. 225 – 2323 Quebec Street Vancouver, BC V5T 1R7 ("**VodaSafe**")	Copper Collar Group, LLC 4083 Cedar Point Rd Lakeland, TN 38002 ("**Distributor**")

Components of Agreement	
This Agreement is comprised of:	
Part 1:	This Cover Page, including Attachment 1 – Additional Terms ("**Additional Terms**"); and
Part 2:	The Standard Terms and Conditions attached to this Cover Page.

BACKGROUND

VodaSafe has developed a proprietary handheld water rescue sonar device known as AquaEye® ("**AquaEye®**"). VodaSafe and the Distributor wish to enter into this Agreement pursuant to which VodaSafe will authorize the Distributor to advertise, market, promote and sell AquaEye® to End Users in the Territory.

AGREEMENT

THE UNDERSIGNED HEREBY ACKNOWLEDGE THAT THE ATTACHED ADDITIONAL TERMS AND STANDARD TERMS AND CONDITIONS ARE INCORPORATED INTO THIS AGREEMENT BY REFERENCE, AND AGREE TO BE BOUND BY SUCH PROVISIONS.

The parties have executed this Agreement on December 13, 2023 (the "**Effective Date**") by signing below:

SIGNED AND DELIVERED **VODASAFE INC.** **Per:**	**SIGNED AND DELIVERED** **DISTRIBUTOR** **Per:**
Signature: Carlyn Loncaric (Dec 13, 2023 17:54 PST)	Signature: Jon P. Klukas .Jon Klukas Digitally signed by Jon Klukas Date: 2024.01.23 13:55:30 -08'00'
Print name: Carlyn Loncaric	Print name: Jon Klukas
Title: CEO	Title: CEO / Principal
I have authority to bind VodaSafe	I have authority to bind the Distributor.

aquaeye
BY VODASAFE

ATTACHMENT 1

ADDITIONAL TERMS

Territory:	**U.S. FEDERAL GOVERNMENT:** ***Copper Collar Group, LLC retains sole rights to the U.S. Federal Government market and States listed below as the Distributer for AquaEye® in these markets. All sales in these markets shall be referred to Copper Collar Group, LLC.** U.S. Navy, U.S. Army, U.S. Air Force, U.S. Marine Corps, U.S. Coast Guard, National Oceanographic and Atmospheric Administration (NOAA), Bureau of Land Management (BLM), Environmental Protection Agency (EPA), Department of the Interior, U.S. Army Corps. Of Engineers (USACE) Government Services Administration (GSA) Any other U.S. Federal Entity, group, or subgroup of the U.S. Federal Government not listed here. **STATES** VA, MD, NJ, NY, DE, PA, CT, MA, NH, ME, RI, VT
End Users:	First Responders, Public Safety and Emergency Management Professionals, U.S. Federal Government Agencies. NOTE: SUMMER CAMPS ARE NOT INCLUDED IN THIS AGREEMENT
Duration of Term:	1 Year

The Purchase Price excludes, and the Distributor is solely responsible and liable for, and will pay and remit promptly, all taxes (other than corporate income tax payable by VodaSafe) associated with, based on or due as a result of all amounts paid or payable by the Distributor to VodaSafe under this Agreement, including all applicable federal, state, provincial and municipal sales, use, value-added, property, excise, import, export, foreign, withholding and other governmental taxes, duties, charges, deductions, levies, fees, excises, tariffs and assessments of any nature now or hereafter imposed, and all related interest, penalties and expenses.

Purchase Price may be updated by VodaSafe with no less than 90 days written notice provided to Distributor.

Payment Terms

Unless otherwise agreed in writing between VodaSafe and the Distributor, the Distributor will pay the Purchase Price for each Product as follows:

Order under 10 AquaEye

Net 30 Terms

Orders 10+ AquaEye

50% due upon Purchase Order

50% due within 30-days of shipping the order to the end location. For clarity the 30-day period begins upon pickup of the order from VodaSafe' s location.

Shipment / Title

The Distributor will be responsible to arrange for shipment of all Products FCA (Free Carrier) (as defined in Incoterms 2010) from the VodaSafe's designated facility using a carrier designated by the Distributor. The Distributor will be responsible for all shipping costs and customs and import duties payable in connection with delivery of all Products to the Distributor's location. Risk of loss to the Products to be shipped to the Distributor under an accepted Order will transfer to the Distributor at the time that Product leaves the VodaSafe designated facility on a carrier designated by the Distributor.

Title to the Products shipped to the Distributor under an accepted Order will transfer to the Distributor upon receipt by VodaSafe of payment in full for such Products.

Defects

VodaSafe reserves the right, at its sole discretion, to determine whether any hardware and/or software in the shipped Products is defective. Defective hardware and/or software will, at VodaSafe's option, be replaced or the corresponding portion of the Purchase Price (as determined by VodaSafe) credited to the Distributor.

PART 2 – STANDARD TERMS AND CONDITIONS

1. **The Agreement.** This Agreement comprises the Cover Page, Attachment 1 – Additional Terms and this Part 2 – Standard Terms and Conditions. Capitalized terms used but not defined in these Standard Terms and Conditions have the meanings assigned to them elsewhere in the Agreement.

2. **Appointment and Relationship Management.** Subject to the provisions of this Agreement, VodaSafe appoints the Distributor to be an authorized distributor during the Term, and authorizes the Distributor during the Term to advertise, market, promote and sell AquaEye® to End Users in the Territory. The Distributor accepts the appointment and will in good faith perform the Distributor's obligations under this Agreement. The appointment and authorization set out in this Section are exclusive, non-transferable and non-sublicensable.

3. **Limited Term.** The term of this Agreement will commence on the Effective Date and, unless sooner terminated as provided in this Agreement, continue for the period stated in the Additional Terms (the "**Term**"). This Agreement will continue for an additional two years following the 2 year anniversary of the Effective Date unless either party provides notice

4. **Distributor Responsibilities.** In addition to its other responsibilities and obligations under this Agreement, the Distributor will:

   (a) consistent with prudent and ethical business practices and applicable laws, diligently and continuously advertise, market and promote AquaEye® to potential End Users in the Territory, including conducting pre-sales demonstrations of AquaEye®;

   (b) ensure that at least one representative of the Distributor completes VodaSafe's approved training program on the use and operation of AquaEye® so that Distributor personnel acquire and maintain product knowledge on and sales competence for AquaEye®;

   (c) solicit feedback ("**Feedback**") from End Users regarding the user and operation of AquaEye® and the potential market for sales of AquaEye® in the Territory, and to provide all such Feedback to VodaSafe on a monthly basis during the Term;

   (d) perform its obligations under this Agreement using technically qualified and properly trained and knowledgeable personnel of the Distributor;

   (e) commit a commercially reasonable number of sales and marketing personnel to the performance of its obligations under this Agreement;

   (f) at all times perform its obligations and exercise its rights under this Agreement and otherwise conduct itself in a lawful, ethical, fair, competent and professional manner, in accordance with applicable industry standards and best practices, and the standard of care, skill and diligence of an experienced professional in the relevant fields, and the Distributor will not by way of any act or omission negatively impact VodaSafe's reputation or customer goodwill;

   (g) provide End Users and potential End Users with accurate information regarding VodaSafe and AquaEye®, and the Distributor will not make or give any representations, warranties, conditions or other promises about VodaSafe or AquaEye®; and

   (h) not offer or promise to pay any money, gift or any other thing of value to any person for the purpose of influencing any action or decision by or on behalf of an End User or potential End User regarding any matter arising from,

connected with or relating to any transaction or potential transaction regarding AquaEye® or the performance of the Distributor's obligations or exercise of its rights under this Agreement.

5. **VodaSafe Obligations.** In addition to its other responsibilities and obligations under this Agreement, VodaSafe will:

   (a) assist the Distributor (including by participating in sales presentations and demonstrations) in dealing with a potential End User or in respect of a potential Order; and

   (b) provide the Distributor with a minimum of one training session(s) per year relating to use and sale of AquaEye® at no charge.

6. **VodaSafe Materials**

   (a) VodaSafe will make available to the Distributor electronic copies of VodaSafe's current advertising and marketing materials regarding AquaEye® (collectively "**Marketing Materials**"). Subject to the provisions of this Agreement, VodaSafe hereby grants to the Distributor a non-exclusive, non-assignable, non-transferable, non-sublicensable, limited, revocable license during the Term to reproduce and distribute Marketing Materials, in their original form, in the Territory for the sole purpose of advertising, marketing and promoting AquaEye® to potential End Users in the Territory. VodaSafe in its discretion may change the Marketing Materials from time to time, and the Distributor will promptly implement each change.

   (b) Subject to the provisions of this Agreement, VodaSafe hereby grants to the Distributor a non-exclusive, non-assignable, non-transferable, non-sublicensable, limited, revocable license during the Term to use VodaSafe's trademarks, service marks, trade names and logos as specified in writing by VodaSafe from time to time (collectively "**VodaSafe Marks**") in the Territory for the sole purpose of advertising, marketing and promoting AquaEye® to potential End Users in the Territory and strictly in accordance with provisions of this Agreement and the other commercially reasonable written standards and specifications communicated by VodaSafe to the Distributor from time to time. The Distributor will retain representative samples of its use of VodaSafe Marks, and will deliver those samples to VodaSafe for inspection and approval promptly on request by VodaSafe. VodaSafe in its discretion may change or modify VodaSafe Marks from time to time, and the Distributor will promptly implement each change. The Distributor's use of VodaSafe Marks is not for the purpose of distinguishing the Distributor's products or services, but for the sole purpose of advertising, marketing and promoting AquaEye®. All of the benefit and goodwill associated with the Distributor's use of each VodaSafe Mark will enure entirely to VodaSafe.

   (c) Except for the use of VodaSafe Marks in accordance with this Agreement, the Distributor will not adopt or use any trademarks, service marks, trade names, logos or other indicators of origin in association with AquaEye®.

7. **Purchase Price.** For each AquaEye® unit specified in an Order accepted by VodaSafe, the Distributor will pay the corresponding Purchase Price to VodaSafe in the manner and at the times set out in the Additional Terms. Purchase Pride or end user sales price are not to be posted or advertised online.

8. **Termination.**

   (a) Either party has the right to terminate this Agreement at any time before the end of the Term without cause upon giving not less than 30 days prior written notice to the other party.

   (b) VodaSafe will have the right at any time, in its sole discretion, to terminate this Agreement immediately upon written notice to the Distributor if (i) the Distributor breaches any of its payment obligations, or (ii) the Distributor breaches any other obligations under this Agreement and does not cure such breach to the satisfaction of VodaSafe within 10 days after receiving written notice (email being sufficient) of such breach from VodaSafe.

   (c) No termination of this Agreement will relieve either party from any obligation or liability that has accrued under this Agreement prior to the date of termination, or from the performance of its obligations under this Agreement to the effective date of termination.

   (d) In addition to those provisions of this Agreement that are expressly stated to survive termination, the following provisions of these Standard Terms and Conditions will survive any termination of this Agreement: 8(c), 8(d), 9, 10, 13, 14 and 16. In addition, the provisions of Section 17 and all defined terms will survive as necessary to interpret the other surviving Sections and Subsections.

9. **Confidential Information**

   (a) In this Agreement, "**Confidential Information**" means all confidential information disclosed by a party ("**Disclosing Party**") to the other party ("**Receiving Party**"), whether orally or in writing, that is designated as confidential or that reasonably should be understood to be confidential given the nature of the information and the circumstances of disclosure. VodaSafe's Confidential Information includes AquaEye®, all technical and user documentation relating thereto, including the Marketing Materials, ("**Documentation**") and the terms of this Agreement, and Confidential Information of each party includes its business and marketing plans, technology and technical information, product plans and designs, and

business processes disclosed by such party. However, Confidential Information does not include any information that (i) is or becomes generally known to the public without breach of any obligation owed to the Disclosing Party; (ii) was known to the Receiving Party prior to its disclosure by the Disclosing Party without breach of any obligation owed to the Disclosing Party; (iii) is received from a third party without breach of any obligation owed to the Disclosing Party; or (iv) was independently developed by the Receiving Party.

(b) Except as otherwise permitted in writing by the Disclosing Party: (i) the Receiving Party must use the same degree of care (but in no event less than reasonable care) that it uses to protect the confidentiality of its own confidential information of like kind not to disclose or use any Confidential Information of the Disclosing Party for any purpose outside the scope of this Agreement; and (ii) the Receiving Party must limit access to Confidential Information of the Disclosing Party to those of its employees, contractors and agents who need such access for purposes consistent with this Agreement and who have signed confidentiality agreements with the Receiving Party containing protections no less stringent than those in this Section.

(c) The Receiving Party may disclose Confidential Information of the Disclosing Party if it is compelled by law to do so, provided the Receiving Party gives the Disclosing Party prior notice of such compelled disclosure (to the extent legally permitted) and reasonable assistance, at the Disclosing Party's cost, if the Disclosing Party wishes to contest the disclosure.

(d) With respect to Confidential Information of the Disclosing Party disclosed to the Receiving Party prior to termination of this Agreement, the provisions of this Section will survive any termination of this Agreement (i) indefinitely with respect to Confidential Information that is a trade secret, and (ii) for a period of 3 years with respect to all other Confidential Information.

10. **Distributor's Representatives.** The Distributor is fully responsible and liable for all acts, omissions and liabilities by or on behalf of each of its employees and other representatives. The Distributor will ensure that each of its employees and other representatives complies with all of the restrictions, requirements and limitations set out or referenced in this Agreement regarding the performance of the Distributor's obligations and the exercise of the Distributor's rights under this Agreement and all related matters.

11. **Legal Compliance.** The Distributor will comply with all laws (including all applicable restrictions and requirements regarding the export and transmission of technical data and other regulated materials) applicable to the Distributor, the conduct of the Distributor's business, AquaEye®, and the performance of the Distributor's obligations and exercise of its rights under this Agreement. The Distributor will give prompt notice to VodaSafe of any changes to the laws in the Territory that might affect the parties' respective rights and obligations under this Agreement. Without limiting the foregoing in this Section, the Distributor will ensure that it has and maintains at all material times all rights, licenses, consents, approvals, agreements and other permissions required under all applicable laws for it to perform its obligations and exercise its rights under this Agreement.

12. **Ownership/Proprietary Rights**. Except as expressly provided in this Agreement, as between the parties, VodaSafe will at all times solely own and retain all rights, title and interests (including all intellectual property rights) throughout the world in, to and associated with AquaEye®, Documentation, VodaSafe Materials, VodaSafe Materials and Feedback.

13. **Limited Warranty; Exclusions**

(a) VodaSafe warrants to the Distributor that (i) each Product purchased from VodaSafe will operate substantially in accordance with the technical specifications contained in the Documentation, and (ii) the Documentation describes the material functions and features of each Product in reasonable detail, and (c) VodaSafe has not received any notice alleging that AquaEye® infringes any intellectual property right of a third party. The foregoing warranty in clauses (i) and (ii) is conditioned upon the Distributor using the Products substantially in accordance with the Documentation and instructions from VodaSafe, and the absence of any misuse, damage, alteration or modification of or to the Products. To the extent that a Product fails to meet the foregoing warranty in clauses (i) and (ii), then VodaSafe's obligation and the Distributor's sole remedy for that failure will be as set out under the heading "Defects" in the Additional Terms.

(b) EXCEPT AS EXPRESSLY SET OUT IN THIS AGREEMENT, VODASAFE MAKES, AND THE DISTRIBUTOR RECEIVES, NO WARRANTIES, REPRESENTATIONS OR CONDITIONS, EXPRESS, IMPLIED OR STATUTORY, REGARDING OR RELATING TO ANY PRODUCT, THE DOCUMENTATION OR ANY OTHER MATERIALS SUPPLIED TO THE DISTRIBUTOR IN CONNECTION THEREWITH. VODASAFE DOES NOT WARRANT THAT AQUAEYE® WILL BE CAPABLE OF ACHIEVING ANY PARTICULAR RESULT, OR THAT AQUAEYE® OR THE DOCUMENTATION WILL BE ERROR FREE OR WILL PERFORM IN AN UNINTERRUPTED MANNER. VODASAFE SPECIFICALLY DISCLAIMS, AND THE DISTRIBUTOR WAIVES, ALL IMPLIED WARRANTIES AND CONDITIONS OF MERCHANTABILITY, MERCHANTABLE QUALITY, DURABILITY,

NON-INFRINGEMENT, FITNESS FOR A PARTICULAR PURPOSE (EVEN IF VODASAFE HAS BEEN INFORMED OF THAT PURPOSE) AND ANY OTHER WARRANTIES ARISING BY STATUTE OR OTHERWISE IN LAW, OR FROM A COURSE OF DEALING OR USAGE OF TRADE, WITH RESPECT TO AQUAEYE®, THE DOCUMENTATION OR ANY OTHER MATERIALS SUPPLIED TO THE DISTRIBUTOR IN CONNECTION THEREWITH AND WITH RESPECT TO THE USE OF ANY OF THE FOREGOING.

14. **Limitation on Liability**

(a) EXCLUDING (i) EACH PARTY'S BREACH OF ITS CONDITIONS OF CONFIDENTIALITY OR PROTECTION OF CONFIDENTIAL INFORMATION SET OUT IN SECTION 9, (ii) THE NON-PAYMENT OF ANY AMOUNT OWING UNDER THIS AGREEMENT, (iii) THE DISTRIBUTOR'S BREACH OF ITS OBLIGATIONS UNDER SECTION 4 OR SUBSECTION 6(b) OR 6(c), AND (iv) DAMAGES ARISING FROM A PARTY'S WILLFUL MISCONDUCT OR GROSS NEGLIGENCE, IN NO EVENT WILL EITHER PARTY BE LIABLE UNDER CONTRACT (INCLUDING FUNDAMENTAL BREACH), TORT (INCLUDING NEGLIGENCE) OR OTHERWISE FOR ANY INCIDENTAL, CONSEQUENTIAL, INDIRECT, PUNITIVE OR SPECIAL LOSSES OR DAMAGES OR FOR ANY LOSSES OR DAMAGES RESULTING FROM LOSS OF BUSINESS, LOSS OF PROFITS, LOSS OF USE, LOSS OF OR DAMAGE TO DATA, COST OF SUBSTITUTE GOODS, OR DAMAGES FOR PURE ECONOMIC LOSS, HOWEVER CAUSED, WHETHER FORESEEABLE OR NOT, EVEN IF THAT PARTY IS ADVISED OF THE POSSIBILITY OF SUCH DAMAGES. THE DISTRIBUTOR WILL NOT ASSERT THAT ITS PAYMENT OBLIGATIONS UNDER THIS AGREEMENT ARE EXCLUDED AS VODASAFE'S LOST PROFITS.

(b) EXCEPT FOR VODASAFE'S LIABILITY RESULTING FROM A BREACH OF ITS CONDITIONS OF CONFIDENTIALITY OR PROTECTION OF CONFIDENTIAL INFORMATION SET OUT IN SECTION 9, IN NO EVENT WILL THE TOTAL LIABILITY OF VODASAFE FOR ANY LOSS OR DAMAGES RELATING TO THIS AGREEMENT EXCEED, IN THE AGGREGATE FOR ALL CLAIMS, THE AGGREGATE AMOUNT ACTUALLY PAID BY THE DISTRIBUTOR FOR PRODUCTS UNDER THIS AGREEMENT.

15. **Independent Parties.** The parties understand that the Distributor is providing services to VodaSafe under this Agreement as an independent contractor. Nothing in this Agreement will be construed to constitute the Distributor as a partner, employee or agent of VodaSafe, nor will either party have the authority to bind the other in any respect, it being intended that each will remain responsible for its own actions. The Distributor is engaged only for the purposes and to the extent set out in this Agreement. Neither the Distributor nor its personnel will be deemed to be VodaSafe's employees.

16. **Governing Law / Dispute Resolution**

(a) The governing law of the substance of this Agreement will be the commercial law of the Province of British Columbia, Canada, without reference to its conflicts of laws provisions, and the *United Nations Convention for the International Sale of Goods* and all implementing legislation will not apply. The procedural law will be the law of the place where arbitration is conducted.

(b) Any dispute arising out of or relating to this Agreement that is not settled by negotiated agreement or mediation among the parties within a reasonable time will be settled exclusively by binding arbitration by a single arbitrator. The location of the arbitration will be Vancouver, Canada. The arbitration will be governed by the *Commercial Arbitration Act* (BC). The arbitrator will be selected and the arbitration conducted using the rules and procedures for arbitrator selection under the International Center for Dispute Resolution in effect on the date of the commencement of the arbitration (the "**Rules**"). The arbitration proceeding will be conducted in English and all documentation will be presented and filed in English. The decision of the arbitrator will be final and binding on the parties, and judgment may be entered on the arbitration award and enforced by any court of competent jurisdiction. The prevailing party will be entitled to recover its reasonable legal costs relating to that aspect of its claim or defense on which it prevails, and any opposing costs awards will be offset. Notwithstanding the foregoing, either party will have the right to commence and prosecute any legal or equitable action or proceeding before any court of competent jurisdiction to obtain injunctive or other relief against the other party in the event that, in the opinion of that party, such action is necessary or desirable. The parties agree that, notwithstanding any otherwise applicable statute(s) of limitations, any arbitration proceeding must be commenced within one year of the acts, events or occurrences giving rise to the claim. The arbitrator will not:

(i) award damages excluded by the terms of this Agreement; or

(ii) award damages in excess of the amount, if any, limited by the terms of this Agreement.

(c) The dispute resolution procedure described in Subsection 16(b) is the sole and exclusive procedure for the resolution of any dispute that arises out of or is related to this Agreement,

except that either party has the right to seek preliminary or temporary injunctive relief from any court in any jurisdiction if, in that party's sole judgment, such action is necessary to avoid irreparable harm or to preserve the status quo. If a party seeks judicial injunctive relief as described in this Section, then the parties will continue to participate in good faith in the dispute resolution procedures described in Subsection 16(b). The parties agree that no court which a party petitions to grant preliminary or temporary injunctive relief may award damages or resolve the dispute.

(d) ALL CLAIMS AGAINST VODASAFE MUST BE BROUGHT IN THE DISTRIBUTOR'S OWN CAPACITY, AND NOT AS A PLAINTIFF OR CLASS MEMBER IN ANY PURPORTED CLASS OR REPRESENTATIVE PROCEEDING. THE DISTRIBUTOR AGREES THAT, BY ENTERING INTO THIS AGREEMENT AND PURCHASING AN AQUAEYE® UNIT, THE DISTRIBUTOR IS WAIVING THE RIGHT TO A TRIAL BY JURY OR TO PARTICIPATE IN A CLASS ACTION.

17. **General Provisions**

(a) Further Assurances. The parties will execute such further assurances and other documents and instruments and do such further and other things as may be necessary to implement and carry out the intent of this Agreement.

(b) Notices. All notices under this Agreement must be in writing and will be deemed given: (a) when delivered personally; (b) 5 days after being sent by registered or certified mail, return receipt requested; or (c) one day after deposit with a pre-paid commercial overnight carrier specifying next day delivery. All notices to a party will be sent to the address for that party set out on the Cover Page to this Agreement or to any subsequent address that either party gives to the other in accordance with this Subsection.

(c) Enurement. This Agreement will enure to the benefit of and be binding upon the parties and their respective successors and assigns.

(d) No Third Party Beneficiaries. Nothing in this Agreement or done pursuant to this Agreement will confer on any person, other than the parties and their respective successors and permitted assigns and the indemnified persons who are expressly indemnified pursuant to the provisions of this Agreement, any rights, benefits or remedies of any nature or kind, and no other person will be considered to be a third-party beneficiary under or by reason of this Agreement. For greater certainty, End Users are not parties to this Agreement or third party beneficiaries under this Agreement.

(e) Severability. If any provision of this Agreement is held to be unenforceable, then the remaining provisions will continue in full force and effect. The parties will in good faith negotiate a mutually acceptable and enforceable substitute for the unenforceable provision, which substitute will be as consistent as possible with the original intent of the parties.

(f) Modification and Waiver. This Agreement may not be modified except by a writing signed by authorized representatives of both parties. A waiver by either party of its rights under this Agreement is not binding unless in writing and signed by an authorized representative of the party waiving its rights. The non-enforcement or waiver of any provision on one occasion will not constitute a waiver of such provision on any other occasions unless expressly agreed in writing. No use of trade or other regular practice or method of dealing between the parties will be used to modify, interpret or supplement the terms of this Agreement.

(g) Currency. Unless otherwise specified in the Additional Terms, all dollar amounts referred to in this Agreement are in United States dollars.

(h) Entire Agreement. This Agreement, and the agreements and instruments referred to in this Agreement, constitute the entire agreement between the parties with respect to the subject-matter hereof and thereof and supersede all prior negotiations, proposals and agreements, whether oral or written, with respect to the subject-matter hereof and thereof.

(i) Headings and Number. The division of this Agreement into Sections and Subsections, and the headings of those Sections and Subsections, are for reference only and will not limit or control the meaning or interpretation of this Agreement. Words importing the singular number only include the plural and vice-versa, and words importing one gender only include all genders.

(j) Assignment. The Distributor has no right to assign its rights or delegate its rights or obligations under this Agreement without the prior written consent of VodaSafe, and any attempted assignment without such consent will be void.

(k) Counterpart and Electronic Means. This Agreement may be executed by electronic means and in counterpart and such counterparts together will constitute a single instrument. Execution and delivery of an executed counterpart of this Agreement by any electronic means capable of producing a printed copy will be equally effective as delivery of a manually executed counterpart.

END OF STANDARD TERMS AND CONDITIONS

COPPCOL-01

AGUY

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/13/2026

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

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

PRODUCER
Miller Loughry Beach Insurance Services, Inc.
214 W. College St.
Murfreesboro, TN 37130

CONTACT NAME:
PHONE (A/C, No, Ext): (615) 896-9292 FAX (A/C, No): (615) 849-1586
E-MAIL ADDRESS: mlbsupport@mlbins.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : RLI INSURANCE	13056
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Copper Collar Group LLC
4083 Cedar Point Rd
Lakeland, TN 38002

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$
	CLAIMS-MADE / OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$
	POLICY / PRO-JECT / LOC						PRODUCTS - COMP/OP AGG	$
	OTHER:							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB / OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB / CLAIMS-MADE						AGGREGATE	$
	DED / RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE / OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N (Mandatory in NH)	N / A					E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$
A	Professional Liab			RTP0050290	6/16/2026	6/16/2027		3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Nassau County is listed for additional insured.

CERTIFICATE HOLDER

Nassau County
1 West Street
Mineola, NY 11501

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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