

1. Public Notice

Documents:

[11-5-20 RULES PUBLIC NOTICE.PDF](#)

2. Rules Meeting

Documents:

[R-11-5-20.PDF](#)

3. Contract

Documents:

[A-71-20 NCWEB.PDF](#)



PUBLIC NOTICE

PLEASE TAKE NOTICE THAT

THE NASSAU COUNTY LEGISLATURE WILL HOLD

A MEETING OF THE RULES COMMITTEE

ON

THURSDAY, NOVEMBER 5, 2020 AT 12:00 P.M.

IN

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

Please be advised that public attendance is permitted at this meeting, but due to health and safety concerns associated with the COVID-19 virus and New York State requirements restricting public gatherings, the maximum capacity of the Peter J. Schmitt Legislative Chamber is limited to fifty people, inclusive of elected officials, staff, and attendees. Passes will be distributed on a first come first served basis beginning one half hour prior to meeting and attendees will be given an opportunity to sign in to address the Legislature for a maximum of three minutes. Attendees will be subject to temperature checks prior to entering the chamber, and must adhere to social distancing guidelines and wear a mask while they are in the chamber.

This meeting will also be available for viewing online at <http://www.nassaucountyny.gov/agencies/Legis/index.html> As in-person attendance is limited, public comment on any item may be emailed to the Clerk of the Legislature at LegPublicComment@nassaucountyny.gov and will be made part of the formal record for this Legislative meeting.

While this meeting is open to the public at a reduced capacity, the Nassau County Legislature is committed to making its public meeting accessible to individuals with disabilities. If, due to a disability, you need an accommodation or assistance to participate in the public meeting or to obtain a copy of the transcript of the public hearing in an alternative format in accordance with the provisions of the Americans with Disabilities Act, please contact the Office of the Clerk of the Legislature at 571-4252, or the Nassau County Office for the Physically Challenged at 227-7101 or TDD telephone no. 227-8989.

**DATED: November 2, 2020
Mineola, NY**

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

NASSAU COUNTY LEGISLATURE

13th TERM MEETING AGENDA

RULES COMMITTEE

NOVEMBER 5, 2020 12:00 PM

Richard Nicoletto – Chairman

Howard Kopel – Vice Chairman

Steve Rhoads

Laura Schaefer

Kevan Abrahams – Ranking

Delia DeRiggi-Whitton

Siela Bynoe

Michael C. Pulitzer, Clerk of the Legislature

Clerk Item No.	Proposed By	Assigned To	<u>Summary</u>
A-71-20	PR	R	<u>RESOLUTION NO. -2020</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 CORRECTIONAL CENTER, AND GP JAGER INC. A-71-20



Nassau County

Office of Purchasing
Staff Summary A-71-2020

Subject: Muffin Monster Grinders
Department: Department of Shared Services, Office of Purchasing
Department Head Name: Melissa Gallucci
Department Head Signature <i>Melissa Gallucci</i>

Date: October 20, 2020
Vendor Name: GP Jager Inc.
Contract Number A-71-2020
Contract Manager Name Timothy Funaro

Proposed Legislative Action					
	To	Date	Approval	Info	Other
	Assgn Comm				
	Rules Comm				
	Full Leg				

Internal Approvals			
Date & Init.	Approval	Date & Init.	Approval
	Dept. Head		
<i>pf</i>	Budget	10/23/2020 <i>PSA</i>	County Atty.
	Deputy C.E.	<i>HW 10/26/20</i>	County Exec.

Narrative

Purpose: To authorize and award a purchase order for muffin monster grinders for the Nassau County Correctional Center.

Discussion: This is a sole source purchase. JWC Environmental is the inventor and owner of the muffin monster grinder, holds numerous patents and trademarks for this product, is the sole manufacture of this product, and the exclusive source for service parts for this equipment. GP Jager Inc. is the exclusive JWC Environmental representative for the State of New York and all counties that lie within the state boundaries. The muffin monster is the only grinder that will fit into the sewage pit at the Correctional Center. This is a direct replacement of the existing grinders, with no exception as no other grinders will operate in the Correctional Center's sewage pit. Further, the cost of the muffin monster grinders are reasonable in light of the benefits it provides to the County.

Impact on Funding: The maximum amount authorized under this purchase order shall be Three Hundred Nine Thousand Sixteen Dollars and Twenty Cents (\$309,016.20) from general funds DD418.

Recommendation: Department of Shared Services, Office of Purchasing recommends awarding this purchase order to GP Jager Inc. as the sole source provider for these grinders.

APPROVED: *T. Funaro* 10/23/20

INSURANCE SECTION

REAL ESTATE INSURANCE AND
BONDING CONTROLLER

2020 OCT 27 A 10 48

RECEIVED
ADMINISTRATIVE
SERVICES

COUNTY OF NASSAU
INTER – DEPARTMENTAL MEMO

TO: CLERK OF THE COUNTY LEGISLATURE

A-71-2020

FROM: MELISSA GALLUCCI - COMMISSIONER OF SHARED SERVICES

DATE: OCTOBER 21, 2020

SUBJECT: RESOLUTION – THE NASSAU COUNTY CORRECTIONAL CENTER

THIS RESOLUTION IS RECOMMENDED BY THE COMMISSIONER OF SHARED SERVICES TO AUTHORIZE AN AWARD AND TO EXECUTE A PURCHASE ORDER IN THE AMOUNT OF THREE HUNDRED NINE THOUSAND SIXTEEN DOLLARS AND TWENTY CENTS (\$309,016.20) ON BEHALF OF THE NASSAU COUNTY CORRECTIONAL CENTER TO GP JAGER INC. FOR THE MUFFIN MONSTER GRINDERS

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
COMMISSIONER OF SHARED SERVICES

MS: br

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



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 CORRECTIONAL CENTER, AND GP JAGER INC.

WHEREAS, the NASSAU COUNTY DEPARTMENT OF SHARED SERVICES, OFFICE OF PURCHASING is representing to the Rules Committee that the proposed award to GP Jager Inc. 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 GP Jager Inc.



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 ☒ If yes, to what campaign committee?

2. 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.

The undersigned further certifies and affirms that the contribution(s) to the campaign committees identified above were made freely and without duress, threat or any promise of a governmental benefit or in exchange for any benefit or remuneration.

Electronically signed and certified at the date and time indicated by:
GREGORY P. JAGER [GJAGER@JAGERINC.COM]

Dated: 10/20/2020 09:58:47 AM

Vendor: GP JAGER INC.

Title: PRESIDENT / OWNER



COUNTY OF NASSAU

LOBBYIST REGISTRATION AND DISCLOSURE FORM

1. Name, address and telephone number of lobbyist(s)/lobbying organization. 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.

NONE

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

NONE

3. Name, address and telephone number of client(s) by whom, or on whose behalf, the lobbyist is retained, employed or designated:

NONE

4. Describe lobbying activity conducted, or to be conducted, in Nassau County, and identify client(s) for each activity listed. See the last page for a complete description of lobbying activities.

NONE

5. The name of persons, organizations or governmental entities before whom the lobbyist expects to lobby:

NONE

6. If such lobbyist is retained or employed pursuant to a written agreement of retainer or employment, you must attach a copy of such document; and if agreement of retainer or employment is oral, attach a written statement of the substance thereof. If the written agreement of retainer or employment does not contain a signed authorization from the client by whom you have been authorized to lobby, separately attach such a written authorization from the client.

7. Has the lobbyist/lobbying organization or any of its corporate officers 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 ☒ If yes, to what campaign committee? If none, you must so state:

I understand that copies of this form will be sent to the Nassau County Department of Information Technology ("IT") to be posted on the County's website.

I also understand that upon termination of retainer, employment or designation I must give written notice to the County Attorney within thirty (30) days of termination.

VERIFICATION: 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.

The undersigned further certifies and affirms that the contribution(s) to the campaign committees listed above were made freely and without duress, threat or any promise of a governmental benefit or in exchange for any benefit or remuneration.

Electronically signed and certified at the date and time indicated by:
GREGORY P. JAGER [GJAGER@JAGERINC.COM]

Dated: 10/20/2020 09:59:40 AM

Vendor: GP JAGER INC.

Title: PRESIDENT / OWNER

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.

The term "lobbying" or "lobbying activities" does not include: Persons engaged in drafting legislation, rules, regulations or rates; persons advising clients and rendering opinions on proposed legislation, rules, regulations or rates, where such professional services are not otherwise connected with legislative or executive action on such legislation or administrative action on such rules, regulations or rates; newspapers and other periodicals and radio and television stations and owners and employees thereof, provided that their activities in connection with proposed legislation, rules, regulations or rates are limited to the publication or broadcast of news items, editorials or other comment, or paid advertisements; persons who participate as witnesses, attorneys or other representatives in public rule-making or rate-making proceedings of a County agency, with respect to all participation by such persons which is part of the public record thereof and all preparation by such persons for such participation; persons who attempt to influence a County agency in an adjudicatory proceeding, as defined by § 102 of the New York State Administrative Procedure Act.

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: 10/14/2020

1) Proposer's Legal Name: GP JAGER INC.

2) Address of Place of Business: 328 W. MAIN STREET

City: BOONTON State/Province/Territory: NJ Zip/Postal Code: 07005

Country: US

3) Mailing Address (if different): PO BOX 50

City: BOONTON State/Province/Territory: NJ Zip/Postal Code: 07005

Country: US

Phone: _____

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

4) Dun and Bradstreet number: none

5) Federal I.D. Number: 46-3762691

6) The proposer is a: Corporation (Describe) _____

7) Does this business share office space, staff, or equipment expenses with any other business?

YES ☐ NO ☒ If yes, please provide details:

8) Does this business control one or more other businesses?

YES ☐ NO ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

b) Any misdemeanor charge pending?

YES ☐ NO ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ 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.

NONE

(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.

NONE

(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.

NONE

- 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.

NO CONFLICT EXISTS. HOWEVER, WOULD A CONFLICT ARISE GP JAGER INC WOULD TAKE THE PROPER MEASURES TO CORRECT THE SITUATION.

- 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 ☒

Is the proposer an individual?

YES ☐ NO ☒ Should the proposer be other than an individual, the Proposal MUST include:

- i) Date of formation;

10/03/2013

- 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.

GREGORY P. JAGER, 328 W. MAIN STREET, BOONTON, NJ 07005, PRESIDENT/OWNER

First Name	GREGORY		
Last Name	JAGER		
MI	P	Suffix	
Address	PO BOX 50		
City	BOONTON	State/Province/Territory	NJ
Country	US	Zip/Postal Code	07005
Position	President		

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

GREGORY P. JAGER, 328 W. MAIN STREET, BOONTON, NJ 07005, PRESIDENT/OWNER

First Name	GREGORY		
Last Name	JAGER		
MI	P	Suffix	
Address	PO BOX 50		
City	BOONTON	State/Province/Territory	NJ
Country	US	Zip/Postal Code	07005
Position	President		

- iv) State of incorporation (If applicable);
NJ
- v) The number of employees in the firm;
3
- vi) Annual revenue of firm;
1500000
- vii) Summary of relevant accomplishments
NONE

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

1 File(s) Uploaded: GP Jager Inc. Business Registration Certificate.pdf

- B. Indicate number of years in business.
26
- C. Provide any other information which would be appropriate and helpful in determining the Proposer's capacity and reliability to perform these services.
IN 2013 I CHANGED THE COMPANY FROM G.P. JAGER & ASSOCIATES, INC. (INCORPORATED IN 1996) TO GP JAGER 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 SUFFOLK COUNTY DPW
Contact Person ROB DICAMILLO
Address 335 YAPHANK AVE
City YAPHANK State/Province/Territory NY
Country US
Telephone (631) 852-4010
Fax # (631) 852-4150
E-Mail Address ROBERT.DICAMILLO@SUFFOLKCOUNTYNY.GOV

Company PASSAIC VALLEY SEWAGE AUTHORITY
Contact Person THOMAS FUSCALDO
Address 600 WILSON AVENUE
City NEWARK State/Province/Territory NJ
Country US
Telephone (973) 817-5729
Fax #
E-Mail Address TFuscaldo@PVSC.COM

Company CITY OF NEW YORK DEP
Contact Person ANJEL FOUCHONG
Address 1 CENTRE STREET 18TH FLOOR
City NEW YORK State/Province/Territory NY
Country US

Telephone	(212) 386-6332
Fax #	(212) 669-8523
E-Mail Address	Afouchon@dcas.nyc.gov

I, GREGORY P. JAGER, 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 P. JAGER, 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: GP JAGER INC.

Electronically signed and certified at the date and time indicated by:
GREGORY P. JAGER [GJAGER@JAGERINC.COM]

PRESIDENT / OWNER

Title

10/23/2020 07:32:03 AM

Date

12/14/16

Taxpayer Identification# 463-762-691/000

Dear Business Representative:

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

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

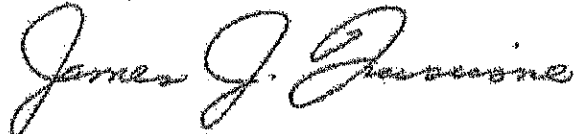
Additionally, please note that State law requires all contractors and sub-contractors with Public agencies to provide proof of their registration with the Division of Revenue. The law also amended Section 92 of the Casino Control Act, which deals with the casino service industry.

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

If you have any questions or require more information, feel free to call our Registration Hotline at (609)292-0292.

I wish you continued success in your business endeavors.

Sincerely,



James J. Fruscione
Director
New Jersey Division of Revenue

STATE OF NEW JERSEY
BUSINESS REGISTRATION CERTIFICATE

DEPARTMENT OF TREASURY/
DIVISION OF REVENUE
PO BOX 232
TRENTON, NJ 08646-0232

TAXPAYER NAME:

GP JAGER INC.

TRADE NAME:

ADDRESS:

328 WEST MAIN ST / PO BOX 50
BOONTON NJ 07006

SEQUENCE NUMBER:

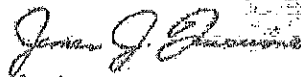
1628089

EFFECTIVE DATE:

10/03/13

ISSUANCE DATE:

12/14/16



Director
New Jersey Division of Revenue

THIS CERTIFICATE IS NOT VALID UNLESS IT IS SIGNED BY THE DIRECTOR OF THE DIVISION OF REVENUE. IT MUST BE PROMPTLY DISPLAYED AT ALL BUSINESS LOCATIONS.

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 P. JAGER
Date of birth: 04/10/1964
Home address: 328 W. MAIN STREET
City: BOONTON State/Province/Territory: NJ Zip/Postal Code: 07005
Country: US

Business Address: PO BOX 50
City: BOONTON State/Province/Territory: NJ Zip/Postal Code: 07005
Country: US
Telephone: 973-750-1180

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	<u>10/03/2013</u>	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 ☒ NO ☐ If Yes, provide details.

I AM THE OWNER / PRESIDENT OF GP JAGER INC.

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 ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ If yes, provide an explanation of the circumstances and corrective action taken.
-
- b. Is there any misdemeanor charge pending against you?
YES ☐ NO ☒ If yes, provide an explanation of the circumstances and corrective action taken.
-
- c. Is there any administrative charge pending against you?
YES ☐ NO ☒ 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? Y
YES ☐ NO ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ If yes, provide an explanation of the circumstances and corrective action taken.

I, GREGORY P. JAGER, 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 P. JAGER, 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.

GP JAGER INC.

Name of submitting business

Electronically signed and certified at the date and time indicated by:

GREGORY P. JAGER [GJAGER@JAGERINC.COM]

PRESIDENT / OWNER

Title

10/23/2020 08:40:18 AM

Date

COUNTY OF NASSAU

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

1. Name of the Entity: GP JAGER INC.

Address: PO BOX 50 , 328 W. MAIN STREET

City: BOONTON State/Province/Territory: NJ Zip/Postal Code: 07005

Country: US

2. Entity's Vendor Identification Number: 46-3762691

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	<u>GREGORY</u>		
Last Name	<u>JAGER</u>		
MI	<u>P</u>	Suffix	_____
Address	<u>PO BOX 50</u>		
City	<u>BOONTON</u>	State/Province/Territory:	<u>NJ</u> Zip/Postal Code: <u>07005</u>
Country	<u>US</u>		
Position	<u>President</u>		

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	<u>GREGORY</u>		
Last Name	<u>JAGER</u>		
MI	<u>P</u>	Suffix	_____
Address	<u>PO BOX 50</u>		
City	<u>BOONTON</u>	State/Province/Territory:	<u>NJ</u> Zip/Postal Code: <u>07005</u>
Country	<u>US</u>		
Position	<u>President</u>		

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 ☒

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

NONE

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

NONE

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

NONE

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:

GREGORY P. JAGER [GJAGER@JAGERINC.COM]

Dated: 10/20/2020 10:02:48 AM

Title: PRESIDENT / OWNER

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 but 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

RQCC20000123 19/SEP/2020

VENDOR:

JWC ENVIRONMENTAL, INC
2850 REDHILL AVE STE 125
SANTA ANA CA 92705
TEL: (949) 833-3888
FAX: (714) 428-4644

REQUISITIONER:

CC NASSAU COUNTY CORRECTIONAL CEN
100 CARMAN AVE.
EAST MEADOW NY 11554
CAPEL
TEL: (516) 572-4437
FAX: (516) 572-4332

2-3476

ITEM	DESCRIPTION	QTY	U/M	UNIT COST	TOTAL
001	890-65	1.00	EA	309,016.2000	309,016.20
SEWAGE/WASTE TREATMENT PLANTS EQUIPMENT AND SUPPLIES					
REPLACEMENT, UPGRADING, & REPAIR OF 12 MUFFIN MONSTER GRINDERS					
MOTOR CONTROLLER ENCLOSURE, & JWC TARIFF SURCHARGE					

JSANZ@JAGERINC.COM

CODE DD418

ESTIMATED TOTAL: 309,016.20

REQUISITION

RQCC20000123 18/SEP/2020

VENDOR:

JWC ENVIRONMENTAL, INC
2850 REDHILL AVE STE 125
SANTA ANA CA 92705

TEL: (949) 833-3888
FAX: (714) 428-4644

REQUISITIONER:

CC NASSAU COUNTY CORRECTIONAL CEN
100 CARMAN AVE.
EAST MEADOW NY 11554
CAPEL
TEL: (516) 572-4437
FAX: (516) 572-4332

W

GP JAGER, INC.
PO BOX 50
BOONTON, NJ 07005
USA
Voice: 973-750-1180
Fax: 973-750-1181

GP Jager Inc.

QUOTATION
Quote Number: 677-062920
Quote Date: Jun 29, 2020
Pages: 1
Lead time: 3-4 WKS ARO

NASSAU COUNTY CORRECTIONAL
100 CARMEN AVE
EAST MEADOW, NY 11654

NASSAU COUNTY CORRECTIONAL
100 CARMEN AVE
EAST MEADOW, NY 11654

677	7/28/20	Net 30 Days	JMC
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12.00	EQVAL CA	30001-3810 MUFFIN MONSTER GRINDER SN 6155, 6158, 6149, 6160, 6158, 6167, 6004249-2-1, 6004250-2-1 MUFFIN MONSTER 7CAM CUTTERS 1:1 STACK HARDENED ALLOY STL BUNA N ELASTOMERS MOTOR TYPE ELECTRIC SHP TFCO 208-230/480V NEW MOTOR NEW REDUCER NEW SPOOL NEW UNIBODY HOUSING NEW RETRO BASE GRINDER SN TBD PAINT EPOXY GREEN PC2200 MOTOR CONTROLLER IN A NEMA 4X FRP ENCLOSURE	23,820.60	285,847.20
8.00	PC2200	PC2200 MOTOR CONTROLLER IN A NEMA 4X FRP ENCLOSURE	2,283.00	18,264.00
12.00	TARIFF	PLEASE ADVISE SELECT THE SHIP WEIGHT 208-230/480V 1.574, 6004249-2-1, 6004250-2-1 JWC TARIFF SURCHARGE THE TARIFF SURCHARGE REPRESENTS THE INCREASED COST OF MANUFACTURING OUR PRODUCTS AS A RESULT OF THE GOVERNMENT-IMPOSED TRADE RESTRICTIONS	408.76	4,905.50
QUOTED BY JANELLE SANZ/GREG JAGER				

Subtotal	309,016.26
Freight	
TOTAL	309,016.26

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- [Buyers](#)
- [Vendors](#)
- [Energy](#)
- [BPO Search](#)
- [About Us](#)
- [FAQ](#)
- [Contact Us](#)

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1/22/2020

Vendor Name

DBA

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Phone

Enterprise type

Three Commodity Code

231

303

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Vendón Nara

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सहस्रसंज्ञा

NYC Environmental Inc.

(714) 428-4522

Corporation (C)

89065

1-1 of 1

Registered ✓

~~Head~~ VI # 45-277 126

~~Hand~~ Quota 1677-062920

Sole Source letter

SHERIFF / CORRECTIONAL CENTER - PURCHASE ORDER REQUESTS

Unit: Maintenance Date: 07/22/2020
 Vendor or Recommended Vendor: JWC Environmental a/k/a GP Jager Inc. Vendor: 452771126
 Blanket Order Number: _____

Item	Current Inventory	Item No.	Quantity	Unit Price	Total	Blanket Order Item Number
1 Replacement, upgrading, and repair of 12 muffin monster grinders	0	30004T-2410	12	\$ 23,820.60	\$ 285,847.20	
2 Motor controller enclosure	0	PC2200	8	\$ 2,283.00	\$ 18,264.00	
3 JWC tariff surcharge	0	TARIFF	12	\$ 408.75	\$ 4,905.00	
4					\$ 0.00	
5 Sole Source Letter and Quote# 677-062920 Attached.					\$ 0.00	
6					\$ 0.00	
7					\$ 0.00	
8					\$ 0.00	
9					\$ 0.00	
10					\$ 0.00	

PO or RQ number if item(s) previously purchased: _____ Date Last Received: _____ \$ 309,016.20

Detailed Reason for Purchase and Final Location for Order (Print):

Needed to replace, upgrade, and repair 12 existing muffin monster grinders at the Correctional Facility.
 Sole Source Letter and Quote# 677-062920 Attached.

Item Requested By: Peter Capel
 (Print Name)

[Signature]
 (Signature)

2-4437
 Phone No. / Extension

Budget Director Approval: _____

Date: _____

Chief Administrative Officer Approval: _____

Date: _____

Sheriff/Undersheriff Approval: _____

Date: _____

Required on Items over \$10,000 or food items over \$20,000

Entered By (Budget & Finance): _____

Date: _____

Object Code: _____

PO/RQ Number: _____

Sub Object Code: _____

Effective January 2018



JWC Environmental
2850 Red Hill Ave., Suite 125
Santa Ana, CA 92705
P: 949-833-3888
F: 949-833-8858
E: jwce@jwce.com

July 20, 2020

To: Gene Venezia
Nassau County Correctional Facility
100 Carmen Avenue
East Meadow, NY 11554

Subject: Sole Source Waiver of Bid

JWC Environmental is the inventor and owner of the Muffin Monster®, Channel Monster®, Auger Monster®, Screenings Washer Monster®, Honey Monster® and Monster Screening Systems®. We hold numerous patents and trademarks on these products.

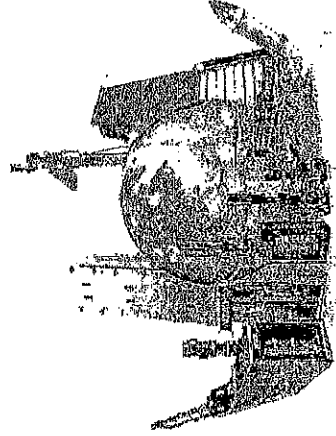
JWC Environmental is the sole manufacturer of these products and the exclusive source for service parts for this equipment.

The equipment proposed is a direct replacement of what currently is in operation at the Nassau County Correctional Facility with no exceptions.

GP Jager is the exclusive JWC Environmental representative for the State of New York and all counties that lie within the state boundaries. Please feel free to contact me at (714-673-8385) or (josephc@jwce.com) if we can provide any additional information.

Sincerely,

Joseph Clark
Eastern Regional Sales Manager



www.jwce.com



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/22/2020

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

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

PRODUCER Anita DaSilva, Agent 960 Kinderkamack Rd. State Farm River Edge, NJ 07661 	CONTACT NAME: Anita DaSilva	
	PHONE (A/C No, Ext): 201265440	FAX (A/C No): 2012654063
	E-MAIL Address: anita@anitadasilva.com	
INSURED G P Jager Inc. PO Box 50 Boonton, NJ 07005	INSURER(S) AFFORDING COVERAGE	
	INSURER A: State Farm Fire and Casualty Company	
	INSURER B: State Farm Indemnity Insurance Company	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

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

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	Y	Y	90-B0-Z980-8 F	01/11/2020	01/11/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ PRODUCTS - COM/PROP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	Y	Y	070-4569	09/15/2020	03/15/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Buick Z67BRU \$
	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	Y	Y	90-B1-S4651	01/27/2020	01/27/2021	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/ MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	N/A	90-CD-A903-7	06/25/2020	02/13/2021	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input checked="" type="checkbox"/> OTH-ER NJ/NY coverage E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

Additional Insured: Nassau County

CERTIFICATE HOLDER**CANCELLATION**

Nassau County
Office of Purchasing
One West Street 1st floor North Entrance
Mineola, N.Y. 11501

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

Anita DaSilva