07/20/16

Taxpayer Identification# 812-901-915/000

Dear Business Representative:

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

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

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

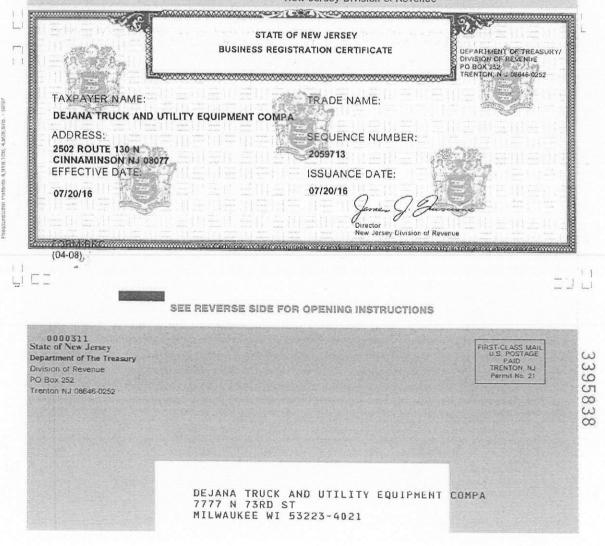
We have attached a Proof of Registration Certificate for your use. To comply with the law, if you are currently under contract or entering into a contract with a State agency, you must provide a copy of the certificate to the contracting agency.

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

I wish you continued success in your business endeavors.

Sincerely,

James J. Fruscione Director New Jersey Division of Revenue



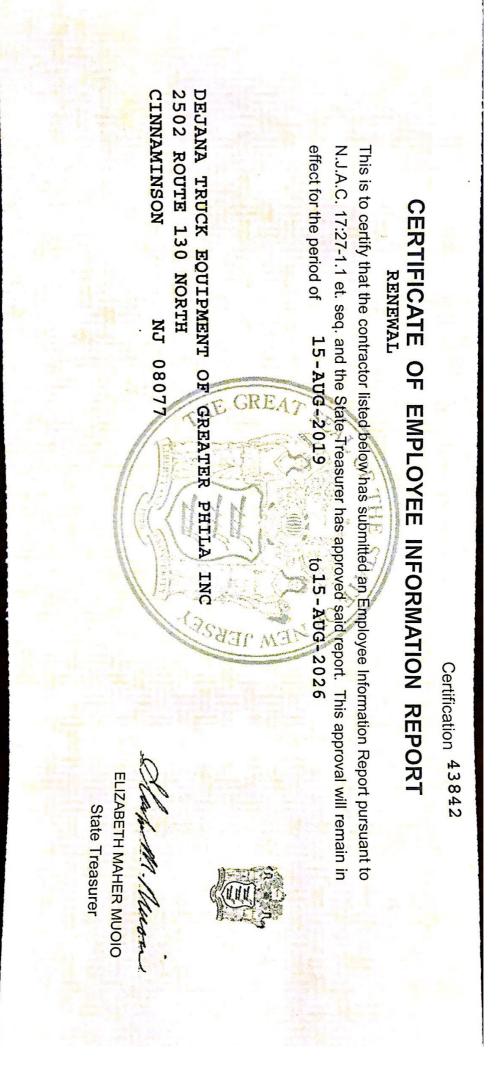


EXHIBIT A

(Revised: January, 2016)

MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE N.J.S.A. 10:5-31 et seq. (P.L. 1975, C. 127) N.J.A.C. 17:27

GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS

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

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

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

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union of the contractor's commitments under this chapter and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to meet targeted county employment goals established in accordance with N.J.A.C. I7:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, and labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

In conforming with the targeted employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

- Letter of Federal Affirmative Action Plan Approval
- Certificate of Employee Information Report
- Employee Information Report Form AA-302 (electronically provided by the Division and distributed to the public agency through the Division's website at: http:// www.state.nj.us/treasury/contract_compliance/.

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Purchase & Property, CCAU, EEO Monitoring Program as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Purchase & Property, CCAU, EEO Monitoring Program for conducting a compliance investigation pursuant to N_LA_C_1727_11 et seg

investigation pursuant to N.J.A.C. 17.27-1.1 et seq.	
Company DEJANA truch + Usi lity Egp	
Signature Steph Boh	
ESCNJ 18/19-42	

Appendix C	
Name_Greeson Baker	
5.0	
Title Muri. Bidden	

Page 45 of 65

February 14, 2019 @ 11:00 a.m.

Class 4 and 5 Trucks

NJ State Approved Cooperative Pricing System #65MCESCCPS

Educational Services Commission of New Jersey

Business Office 1660 Stelton Road Piscataway, New Jersey 08854

Chapter 271 Political Contribution Disclosure Form

(Contracts that Exceed \$17,500.00) Ref. N.J.S.A. 19:44A-20.26

The undersigned, being authorized and knowledgeable of the circumstances, does hereby certify that Desawa Hruch + Utimy Egf (Business Entity) has made the following reportable political contributions to any elected official, political candidate or any political committee as defined in N.J.S.A. 19:44-20.26 during the twelve (12) months preceding this award of contract:

Reportable Contributions

Date of	Amount of	Name of Recipient	Name of
Contribution	Contribution	Elected Official/	Contributor
		Committee/Candidate	

The Business Entity may attach additional pages if needed.

Ø	No Reportable	Contributions	(Please	check	(\checkmark)) if applicable.))
---	---------------	---------------	---------	-------	----------------	-------------------	---

I certify that DESANA truck & U filing Egg (Business Entity) made no reportable contributions to any elected official, political candidate or any political committee as defined in N.J.S.A. 19:44-20.26.

Certification

I certify that the information provided above is in full compliance with Public law 2005 – Chapter 271.

Name of Authorized Agent Grann Balar			
Name of Authorized Agent Greyn Baker Signature Jeen Both		Muri Bidden	
Business Entity DESONA fruck & Ufility	Egp		

ESCNJ 18/19-42 Class 4 and 5 Trucks Page 48 of 65

February 14, 2019 @ 11:00 a.m.

NJ State Approved Cooperative Pricing System #65MCESCCPS

STATEMENT OF OWNERSHIP DISCLOSURE

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

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

Name of Organization: Deserver truck + Utility Ear
Organization Address: 7777 N 73rd St
City, State, ZIP: Milwaukee WI 53723
Part I Check the box that represents the type of business organization:
Sole Proprietorship (skip Parts II and III, execute certification in Part IV)
Non-Profit Corporation (skip Parts II and III, execute certification in Part IV)
For-Profit Corporation (any type) 📈 Limited Liability Company (LLC)
Partnership
Other (be specific):
Part II Check the appropriate box
The list below contains the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be. (COMPLETE THE LIST BELOW IN THIS SECTION)
No one stockholder in the corporation owns 10 percent or more of its stock, of any class, or no individual partner in the partnership owns a 10 percent or greater interest therein, or no member in the limited liability company owns a 10 percent or greater interest therein, as the case may be. (SKIP TO

PART IV)

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

Name of Individual or Business Entity	Home Address (for Individuals) o	r Business Address
Douglas Dynamicus LLC	7777 N 73rd St. Milwauhee	wI 53223
ESCNJ 18/19-42 Class 4 and 5 Trucks	Page 62 of 65	February 14, 2019 @ 11:00 a.i

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

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

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

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

Stockholder/Partner/Member and Corresponding Entity Listed in Part II	Home Address (for Individuals) or Business Address

Part IV Certification

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

Full Name (Print):	Greenory Baker	Title:	Mun: Bialda
Signature:	Sharp Bah	Date:	2/13/19

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

APPENDIX A AMERICANS WITH DISABILITIES ACT OF 1990 Equal Opportunity for Individuals with Disability

The contractor and the Educational Services Commission of New Jersey (hereafter "owner") do hereby agree that the provisions of Title 11 of the Americans With Disabilities Act of 1990 (the "Act") (42 U.S.C. S121 01 et seq.), which prohibits discrimination on the basis of disability by public entities in all services, programs, and activities provided or made available by public entities, and the rules and regulations promulgated pursuant there unto, are made a part of this contract. In providing any aid, benefit, or service on behalf of the owner pursuant to this contract, the contractor agrees that the performance shall be in strict compliance with the Act. In the event that the contractor, its agents, servants, employees, or subcontractors violate or are alleged to have violated the Act during the performance of this contract, the contractor shall defend the owner in any action or administrative proceeding commenced pursuant to this Act. The contractor shall indemnify, protect, and save harmless the owner, its agents, servants, and employees from and against any and all suits, claims, losses, demands, or damages, of whatever kind or nature arising out of or claimed to arise out of the alleged violation. The contractor shall, at its own expense, appear, defend, and pay any and all charges for legal services and any and all costs and other expenses arising from such action or administrative proceeding or incurred in connection therewith. In any and all complaints brought pursuant to the owner's grievance procedure, the contractor agrees to abide by any decision of the owner which is rendered pursuant to said grievance procedure. If any action or administrative proceeding results in an award of damages against the owner, or if the owner incurs any expense to cure a violation of the ADA which has been brought pursuant to its grievance procedure, the contractor shall satisfy and discharge the same at its own expense.

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

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

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

Company	DEJAN	A Truck.	+ Utility Egp	
Signature	Gun	Both	0 //	_
	0			•

Name Gregory Baker Title Mun: Biddn

Appendix A

ESCNJ 18/19-42 Class 4 and 5 Trucks

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February 14, 2019 @ 11:00 a.m.

Educational Services Commission of New Jersev DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN PART 1: CERTIFICATION **BIDDERS MUST COMPLETE PART 1 BY CHECKING EITHER BOX.**

FAILURE TO CHECK EITHER BOX WILL RENDER THE PROPOSAL NON-RESPONSIVE.

Pursuant to Public Law 2012, c. 25, any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract must complete the certification below to attest, under penalty of perjury, that neither the person or entity, nor any of its parents, subsidiaries, or affiliates, is identified on the Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran. The Chapter 25 list is found on the Division's website at http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf. Bidders must review this list prior to completing the below certification. Failure to complete the certification will render a bidder's proposal non-responsive. If the Director finds a person or entity to be in violation of law, s/he shall take action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

PLEASE CHECK EITHER BOX:

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I certify, pursuant to Public Law 2012, c. 25, that neither the person/entity listed above nor any of the entity's parents,

subsidiaries, or affiliates is listed on the N.J. Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). I further certify that I am the person listed above, or I am an officer or representative of the entity listed above and am authorized to make this certification on its behalf. I will skip Part 2 and sign and complete the Certification below.

OR

I am unable to certify as above because I or the bidding entity and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below. Failure to provide such will result in the proposal being rendered as non-responsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.

Part 2

PLEASE PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN

You must provide a detailed, accurate and precise description of the activities of the bidding person/entity, or one of its parents, subsidiaries or affiliates, engaging in the investment activities in Iran outlined above by completing the boxes below.

PROVIDE INFORMATION RELATIVE TO THE ABOVE QUESTIONS. PLEASE PROVIDE THOROUGH ANSWERS TO EACH QUESTION. IF YOU NEED TO MAKE ADDITIONAL ENTRIES, USE ADDITIONAL PAGES

Name:		
Description of Activities:	Blader/Vendor:	
Duration of Engagement:	Anticipated Cessatio	on Date
Bidder/Vendor		
Contact Name:	Contact Phone Number:	
of my knowledge are true and complete. entity. I acknowledge that the Educationa acknowledge that I am under a continuin Services Commission of New Jersey to no information contained herein. I acknowle certification, and if I do so, I recognize tha my agreements(s) with the Educational S option may declare any contract(s) result Full Name (Print): Green Contract(s) Title: Mun B.ddm	y oath, hereby represent and state that the foregoing info I attest that I am authorized to execute this certification of al Services Commission of New Jersey is relying on the info go obligation from the date of this certification through the both the Educational Services Commission of New Jersey in edge that I am aware that it is a criminal offense to make a at I am subject to criminal prosecution under the law and services Commission of New Jersey and that the Education ting from this certification void and unenforceable. Date: $2/13/19$ Date: 2/13/19	on behalf of the below-referenced person or ormation contained herein and thereby e completion of contracts with the Educational n writing of any changes to the answers of a false statement or misrepresentation in this that it will also constitute a material breach of nal Services Commission of New Jersey at its
ESCNJ 18/19-42	Page 53 of 65	February 14, 2019 @ 11:00 a.m.

Class 4 and 5 Trucks

n.

Form W-9
(Rev. December 2014)
Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

11/01/100	I HEVER ALE GET VICE						1							
	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 -	0100800040						ano mu					
	DEJANA TRUCK & UTILITY EQUIPMENT COMPANY, LLC													
3	2 Business name/disregarded entity name, if different from above													
Dal	3 Check appropriate box for federal tax classification; check only one of the following seven boxes:				4 E	xei	motions	(cod	05.2	nnly r	nly tr			
5 Z Individual/colo accortization C Conception C Conception C and a conception C restances to certain entities, not										t individuals; see				
oe	(LIIÇ	Instructions on page 3): Exempt payee code (if any)												
ctic	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partners									,081110				
Print or type	Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the tax classification of the single-member owner.	n the line ab	ove	a for			if any)	HI PA	IUA	repo	rung			
Ins	Other (see instructions) >>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>						n arry) Io account		inad	outeida	1145115			
tio 1	5 Address (number, street, and apt, or suite no.)	Requester	r's r	name							100 Q Q.			
eci	7777 N 73rd ST.	110000000		10011110	uno a	00	1000 (00		9					
ŝ	6 City, state, and ZIP code													
See	MILWAUKEE, WI 53223													
	7 List account number(s) here (optional)		******					****						
	and any addition of the departments													
Par	Taynayay Identification Number (TIN)													
			Coo	iolo			umber	********						
	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to av ip withholding. For individuals, this is generally your social security number (SSN). However, f		300	aar se	T	y n	umber	~	T					
backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part Linstructions on page 3. For other								-						
entitie	es, it is your employer identification number (EIN). If you do not have a number, see How to ge					L		1	L					
'IN o	n page 3.	0												
	If the account is in more than one name, see the instructions for line 1 and the chart on page	4 for	Em	ploye	ar ider	ntif	ication	numi	ber					
guide	lines on whose number to enter.		8	1	_	2	9 0	1	9	1	5			
and the second								L	L					
Par														
Jnde	r penalties of perjury, I certify that:													
I. Th	e number shown on this form is my correct taxpayer identification number (or I am waiting for	r a numbe	er to	o be	issue	d t	o me);	and						
2. Ia	m not subject to backup withholding because: (a) I am exempt from backup withholding, or (I	o) I have n	tot	beer	notil	lied	d by th	e Inte	erna	I Rev	/enue			
	ervice (IRS) that I am subject to backup withholding as a result of a failure to report all interest	or divider	nds	s, or i	(c) the	e IP	RS has	notil	lied	me t	hat I			
no	longer subject to backup withholding; and													
3. Ia	im a U.S. citizen or other U.S. person (defined below); and													
4. The	e FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	ng is corre	ect.											
Certi	fication instructions. You must cross out item 2 above if you have been notified by the IRS t	hat you a	re (curre	ntly s	ub	ject to	bacl	кир	with	noldi			
secal	use you have failed to report all interest and dividends on your tax return. For real estate trans	sactions, i	ten	n 2 d	oes r	ot	apply.	For	mor	tgag	е			
	est paid, acquisition or abandonment of secured property, cancellation of debt, contributions rally, payments other than interest and dividends, you are not required to sign the certification													
	ictions on page 3.	i, but you	111	nar h	IOVIG	e y	ourco	reci	THA	. 366	s the			
Sigr	and the second s				1		1			-				
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Gel	neral Instructions · Form 1098 (home m (tuition)	ortgage inti	eres	51); 1(199-Ft	(St)	udent la	an in	leres	st), 10	98-T			
Sectio	on references are to the Internal Revenue Code unless otherwise noted. + Form 1099-C (cance	eled debt)												

Section relatences are to the internal Revenue Cocc unless otherwise noted. Future developments, information about developments affecting Form W-9 (such as legislation enacted after we release it) is at *twww.is.gov/fw9*.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- * Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 Form 1099-B (stock or mutual fund sales and certain other transactions by
- brokers)
- . Form 1099-S (proceeds from real estate transactions)
- . Form 1099-K (merchant card and third party network transactions)

• Form 1099-A (acquisition or abandonment of secured property)

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

- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2. By signing the filled-out form, you:
- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- 2. Certify that you are not subject to backup withholding, or

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

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.

Cal. No. 10231X



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/26/2019

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.											
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).											
DECEMBER 1-414-443-0000 CONTACT											
PRODUCER NAME: Hays Companies PHONE (A/C, No. Ext): (A/C, No):											
1200 North Montain Bard duits 1	0.0			É-MAIL							
1200 North Mayfair Road, Suite 1	00			AUDICE		URER(S) AFFOR	DING COVERAGE	NAIC #			
INSURER(S) AFFORDING COVERAGE NAIC# Milwaukee, WI 53226 INSURERA: TRAVELERS PROP CAS CO OF AMER 25674											
INSURED INSURER B: TRAVELERS IND CO OF CT 25682											
Douglas Dynamics Inc.											
7777 North 73rd Street				INSURE							
,,,, NOICH /JLU SCIEEL				INSURE							
Milwaukee, WI 53223				INSURE	RF:						
			NUMBER: 55447272				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 TYPE OF INSURANCE		SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)		LIMITS				
A X COMMERCIAL GENERAL LIABILITY	x	x	TC2J-GLSA-1116L933-	18	08/01/18	08/01/19	DAMAGE TO BENITED	000,000			
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OTHER:			010 43630300 700 10		00/01/10	08/01/19	\$ COMBINED SINGLE LIMIT				
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X ANY AUTO											
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							(Per accident) \$				
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B AND EMPLOYERS' LIABILITY Y / N			TRJ-UB-8E081836-18		08/01/18	08/01/19		000,000			
ANYPROPRIETOR/PARTNER/EXECUTIVE	N/A										
(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000				
DESCRIPTION OF OPERATIONS below											
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACORI	0 101, Additional Remarks Schede	ule, may l	be attached if mor	re space is requir	red)				
Named Insured Includes: Dejana			And and a second se								
RE: ESCNJ 18/19-42 Class 4 and ESCNJ is additional insured and	5 Tr	ruck	s		above refe	renced pol	licies where required by	written			
contract. General Liability is 3	Prima	arv	and Non-Contributory	7.	anove rere	-oneda por	addred wi				
		- 4									
CERTIFICATE HOLDER				CAN	CELLATION						
Educational Services Commission of New Jersey c/o Business Administrator- Board Secretary SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.											
1660 Stelton Road AUTHORIZED REPRESENTATIVE											
Discharge WT 00054							ala:				
Piscataway, NJ 08854		τ	JSA			D	al J Sofio				
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NJ State Approved Cooperative Pricing System #65MCESCCPS

ACCEPTANCE OF BID And CONTRACT AWARD

Class 4 and 5 Trucks

TO BE COMPLETED BY RESPONDENT

In compliance with the Request for Bid, the undersigned warrants that I/we have examined the Instructions to Respondents, and, being familiar with all of the conditions surrounding the proposed projects, hereby offer and agree to furnish all labor, materials, and supplies incurred in compliance with all terms, conditions, specifications and amendments in the Request for Bid and any written exceptions to the bid. Signature also certifies understanding and compliance with the certification requirements of the ESCNJ's Terms and Conditions and any special Terms and Conditions if applicable. The undersigned understands that his/her competence and responsibility and that of any proposed subcontractors, time of completion, as well as other factors of interest to the ESCNJ as stated in the evaluation section will be a consideration in making the award. Your bid for contracting services is hereby accepted. As contractor, you are now bound to sell the materials and services listed by the attached bid based upon the solicitation, including all terms, conditions, specifications. amendments as set forth in the Request for Bid. As contractor you are hereby cautioned not to commence any billable work or provide any material or service under this contract until contractor receives an executed purchase order from a Co-op member. The parties intend this contract to constitute the final and complete agreement between the ESCNJ and contractor, and no other agreements, oral or otherwise, regarding the subject matter of this contract, shall bind any of the parties hereto. No change or modification of this contract shall be valid unless it shall be in writing and signed by both parties to this contract. If any provision of this contract is deemed invalid or illegal by any appropriate court of law, the remainder of this contract shall not be affected thereby. The term of the agreement shall commence on award and continue for two years unless terminated, canceled or extended. By mutual written agreement, the contract may be extended as permitted by law.

Company Name DEJANA TRuch + Utility Eg	Date 2/13/19					
Company Address 2502 Route 130 N	_City CinnaminisonState NS_Zip Code_08077					
Contact Person FRANK Backle	Title NJ SALES Rep.					
Authorized Signature (ink only) Surger Bah	Title_ <u>municipal_Biddla</u>					
ACCEPTANCE OF BID AND CONTRACT AWARD BELOW TO BE COMPLETED ONLY BY ESCNJ						

Awarding Agency: Educational Services Commission of New Jersey

Agency Executive:

Patrick M. Moran, SBA/BS

Awarded this	Awarded this _	2200	day of	rch 2019	Contract Number	r <u>#ESCNJ 18/19-4</u>
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