

SIGNATURE PAGE

Company Name: CME Associates
(PRINT)

Preparer's Name: Trevor J. Taylor, PE, PP, CME, CFM, Senior Vice President
(PRINT)

Signature: _____ January 28, 2025
(DATE)

Address: 3141 Bordentown Avenue
Parlin, New Jersey 08859

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E-Mail Address: trevort@cmeusa1.com

*****(This should be the email where Contracts would be sent)*****

Contact Person: Trevor J. Taylor, PE, PP, CME, CFM, Senior Vice President

FEIN: _____
(Federal Employee ID)

BRC: _____
(Business Registration Certificate)

*****PLEASE COMPLETE AND SUBMIT WITH YOUR RFPQ RESPONSE*****

(Revised 2/2017)