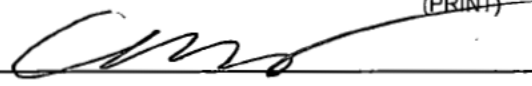


SIGNATURE PAGE

Company Name: H2M Associates, Inc. _____
(PRINT)

Preparer's Name: Charles A. Martello, P.E., LSRP _____
(PRINT)

Signature:  _____ July 6, 2026
(DATE)

Address: 4810 Belmar Boulevard, Suite 201 _____
Wall Township, NJ 07753 _____

Telephone No.: (732) 414-2661 _____

Fax No.: (731) 414-2662 _____

E-Mail Address: cmartello@h2m.com _____

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

Contact Person: Charles A. Martello, P.E., LSRP _____

FEIN:  _____
(Federal Employee ID)

BRC:  _____
(Business Registration Certificate)

PLEASE COMPLETE AND SUBMIT WITH YOUR RFPQ RESPONSE

(Revised 2/2017)