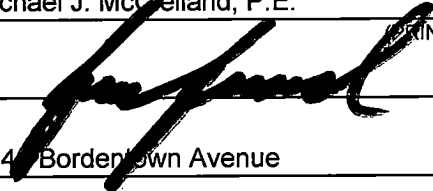


SIGNATURE PAGE

Company Name: CME Associates (PRINT)

Preparer's Name: Michael J. McClelland, P.E. (PRINT)

Signature:  (DATE)

Address: 314 Borden Town Avenue
Parlin, NJ 08859


Telephone No.: 732-727-8000


Fax No.: 732-727-3989

E-Mail Address: mmcclelland@cmeusa1.com

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

Contact Person: Michael J. McClelland, P.E.

FEIN: 
(Federal Employee ID)

BRC: 
(Business Registration Certificate)

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

(Revised 2/2017)