



WMG Historic Restoration, LLC
157 Bridgeton Pike, Suite 200-315
Mullica Hill, NJ 08062
609-202-4418

www.wmgrestoration.com
information@wmgrestoration.com

March 2, 2026

William H. Cawood
Cawood Architecture
william@cawoodarch.com

Dear Mr. Cawood:

Attached, please find WMG's pricing for the Bostwick House West Facade Stabilization and Rehabilitation Project.

Per your request we have enclosed the following documents:

- Completed and signed Financial Proposal form
- Completed Contractor qualifications statement
- Completed Conflict of Interest Affidavit and Disclosure
- Current Licenses: NJ, Phila, PA
- Current Women Owned Small Business certificate
- Sample Certificate of insurance.

Please note: WMG estimates a 6 month duration for the completion of the scope. We recommend starting no later than May in order to meet the substantial completion date of October 1, 2026.

Please do not hesitate to contact us if there is any additional information you need. I can be reached directly at (609) 202-4418 or by email at rebekah@wmgrestoration.com.

Thank you for your consideration of this proposal.

Best,

Rebekah Gallant, owner
WMG Historic Restoration

cc. clerk@bladenseburgmd.gov

Contractor / Builder Financial Proposal Form

REQUEST FOR PROPOSALS: BOSTWICK HOUSE WEST FAÇADE STABILIZATION AND REHABILITATION

FIRM / TEAM NAME:	WMG HISTORIC RESTORATION	
Description	Cost	
BOSTWICK HOUSE WEST FAÇADE STABILIZATION AND REHABILITATION		
TOTAL	\$407,000.	

ADDENDA: Please fill in and initial to acknowledge receipt of RFP Addenda, if applicable.

Addendum Number and Date	Initials

We hereby submit our proposal to the **Aman Trust and Town of Bladensburg** for the **BOSTWICK HOUSE WEST FAÇADE STABILIZATION AND REHABILITATION**.

1. I/We have received, read, and fully understand the drawings /specifications for the project, the Request for Proposals, and the Addenda.
2. I/We have examined the site, existing structures, access roads, existing utilities, and all existing conditions which affect the construction proposal.
3. I/We are able to provide all the materials, products, labor, equipment, supervision, managerial and professional services necessary for the project, and are able to construct the project as intended by the above-mentioned specifications. *(Exclude all masonry + electrical)* 
4. I/We are able to complete this project within the stipulated calendar days and/or critical completion dates specified by the Owner.

5. I/We clearly understand that this Construction Proposal Form must be completed and submitted in its entirety to be considered a responsive proposal. Failure to completely fill in all blanks may be cause for rejection of this proposal.
6. I/We clearly understand that the proposal price will be firm for a time period of 60 calendar days from the proposal opening date.
7. The firm represents, and it is a condition precedent to acceptance of this proposal, that the firm has not been a party to any agreement to propose a fixed or uniform price.

Proposal submitted by representative hereby designated as project contact:

NAME:	Michael Gallant
TITLE & FIRM NAME:	WMB Historic Restoration
ADDRESS:	157 Bridgton Pike Ste 200-315 Mullica Hill NJ 08062
PHONE:	609-202-4418
E-MAIL:	wmgrestoration@gmail.com
FEDERAL EIN #	27-2760171
DATE:	2-27-26
SIGNATURE:	

Contractor / Subcontractor Qualifications Statement

The undersigned certifies under oath the truth and correctness of all statements and of all answers to questions made hereinafter.

Project Identification: BOSTWICK HOUSE WEST FACADE STABILIZATION AND REHABILITATION

Company Name	WMC Historic Restoration
Contact Name	Michael Gallant
Contact Title	owner
Address, City, State, ZIP	157 Bridgton Pike Ste 200-315 Mullica Hill NJ 08062
Phone / Fax	609. 202. 4418
Email	wmcgrestoration@gmail.com
Website	wmcgrestoration.com

1.	How many years has your organization been in business?	15+
2.	How many years under your present name?	15+
3.	What time periods under a previous business name? (List below)	
	Company Name	Dates
4.	Is your organization licensed to do business in the State of Maryland?	<input checked="" type="radio"/> Yes <input type="radio"/> No
5.	Do you have a professional license in the State of Maryland?	<input checked="" type="radio"/> Yes <input type="radio"/> No

	Type of license	Contractor	License Number	13VH0589100
	Expiration date	3.31.26		
8.	Is your firm certified MBE in the State of Maryland?	<input checked="" type="radio"/> Yes <input type="radio"/> No		
9.	Have you in the previous five years, been denied a contract award on which you submitted the low bid/proposal in competitive bidding, or been refused pre-qualification?	Yes <input checked="" type="radio"/> No		
	If yes, please explain:			
10.	List four or more projects executed by your firm within the past five years that were similar in nature and scope to this project, and were in compliance with the <u>Secretary of the Interior's Standards</u> (if applicable). Attach photographic documentation of these projects, or refer us to your website. We may contact your references.			
	a.	Project Name	Liberty Park	
		Project Address	1 Audrey Zapp Dr. Jersey City NJ	
		Years of Construction	1889 - 1895	
		Client / Reference Name	DPHC NJ	
		Client / Reference Phone or Email	Larry Tutela Larry.Tutela@dep.nj.gov	
		Web link if available		
	b.	Project Name	Hancock House	
		Project Address	3 Front St. Hancock Bridge NJ	
		Years of Construction	1780 - 1784	
		Client / Reference Name	DPHC - NJ	
		Client / Reference Phone or Email	Larry Tutela	
		Web link if available		
	c.	Project Name	Powel House	
		Project Address	244 S. 3rd St. Philadelphia PA	
		Years of Construction	1765	

	Client / Reference Name	Justin Detweiler
	Client / Reference Phone or Email	610.388.0111
	Web link if available	
d.	Project Name	Ford Mansion
	Project Address	30 Washington Pl. Morristown NJ
	Years of Construction	1770 - 74
	Client / Reference Name	NPS
	Client / Reference Phone or Email	Blaize Harper 609.970.6004
	Web link if available	
e.	Project Name	Brinckford Deskler Morris
	Project Address	Germanstown PA
	Years of Construction	1752 - 60
	Client / Reference Name	NPS
	Client / Reference Phone or Email	RAAD: Marc Mayerson 732.268.7748
	Web link if available	wmgrestoration.com
9.	Provide names of key personnel to be involved in this project. Indicate the projects listed above with which they were involved. On attached sheets, give brief resumes of each person, describing specific experience and qualification that will indicate ability to perform work required on this project.	
a.	Name	Michael Gallant
	Specialty / Trade	Carpentry
	Project Role	Supervisor
	Years of experience	20+
	Years with this firm	20+
	Involved in projects listed above?	Yes

	b.	Name	Vadym Feschenko
		Specialty / Trade	Carpentry / Millwork
		Project Role	Carpenter
		Years of experience	20+
		Years with this firm	5
		Involved in projects listed above?	Yes
	c.	Name	Dan Dilks
		Specialty / Trade	Carpentry / Painting
		Project Role	on site super
		Years of experience	5
		Years with this firm	4
		Involved in projects listed above?	Yes
	d.	Name	Malachi Clark
		Specialty / Trade	Painter
		Project Role	Painter
		Years of experience	10
		Years with this firm	5
		Involved in projects listed above?	Yes
12.	Please indicate which portions of the work you will subcontract and the names of the subcontractors. Please attach brief resumes of each subcontractor firm, describing specific experience and qualification that will indicate ability to perform work required on this project.		
	a.	Firm Name	NA
		Specialty / Trade	
		Address, City, State, Zip	

		Phone	
		Email	
		Website	
		Years in business	
		Involved in projects listed above?	
		MBE?	Yes No
	b.	Firm Name	
		Specialty / Trade	
		Address, City, State, Zip	
		Phone	
		Email	
		Website	
		Years in business	
		Involved in projects listed above?	
		MBE?	Yes No
	c.	Firm Name	
		Specialty / Trade	
		Address, City, State, Zip	
		Phone	
		Email	
		Website	
		Years in business	
		Involved in projects listed above?	
		MBE?	Yes No

d.	Firm Name	
	Specialty / Trade	
	Address, City, State, Zip	
	Phone	
	Email	
	Website	
	Years in business	
	Are you involved in the projects listed above?	
	MBE?	Yes No

The undersigned certifies the truth and correctness of all statements.

	Prepared by:	<i>Michael Callant</i>
	Title:	<i>owner</i>
	Signature:	<i>Michael Callant</i>

Contractor / Builder Conflict of Interest Affidavit and Disclosure Form

A. "Conflict of interest" means that because of other activities or relationships with other persons, a person is unable or potentially unable to render impartial assistance or advice to the State, or the person's objectivity in performing the contract work is or might be otherwise impaired, or a person has an unfair competitive advantage.

B. "Person" has the meaning stated in COMAR 21.01.02.01B(64) and includes a bidder, offeror, contractor, consultant, or subcontractor or subconsultant at any tier, and also includes an employee or agent of any of them if the employee or agent has or will have the authority to control or supervise all or a portion of the work for which a bid or offer is made.

C. The bidder or offeror warrants that, except as disclosed in §D, below, there are no relevant facts or circumstances now giving rise or which could, in the future, give rise to a conflict of interest.

D. The following facts or circumstances give rise or could in the future give rise to a conflict of interest (explain detail—attach additional sheets if necessary):

E. The bidder or offeror agrees that if an actual or potential conflict of interest arises after the date of this affidavit, the bidder or offeror shall immediately make a full disclosure in writing to the procurement officer of all relevant facts and circumstances. This disclosure shall include a description of actions which the bidder or offeror has taken and proposes to take to avoid, mitigate, or neutralize the actual or potential conflict of interest. If the contract has been awarded and performance of the contract has begun, the contractor shall continue performance until notified by the procurement officer of any contrary action to be taken.

I DO SOLEMNLY DECLARE AND AFFIRM UNDER THE PENALTIES OF PERJURY THAT THE CONTENTS OF THIS AFFIDAVIT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

Date: 2.27.26

By: Michael Bellant (Authorized Representative and Affiant)



TO BE SUBMITTED WITH BID

**TOWN OF BLADENSBURG
Bid Proposal Form**

TOWN OF BLADENSBURG
4229 Edmonston Road
Bladensburg, MD 20710

BID DUE:
TIME: 5:00 p.m. EST

Michael J. Gallant, Owner

(Name of Bidder)

hereby submits the following proposal for WMG Historic Restoration. Having carefully examined the Request for Proposals, related documentation, the proposed Consultant Agreement and **Addenda Numbered** n/a (indicate numbers or N/A if none issued), and having received clarification on all items of conflict or upon which any doubt arose, and understanding that all prices bid will remain in effect throughout the term of the contract, whether completed at one time or in interrupted phases, the undersigned proposes to furnish all labor, equipment, materials, etc., required by the documents for the entire work, all in strict accordance with the contract documents.

Provide unit and hourly pricing for specific tasks and personnel.

SPECIAL TERMS AND CONDITIONS

- A. Failure to properly and completely fill in all blanks may be cause for rejection of this proposal.
- B. In addition to completing this Bid Proposal Form with bid price, Bidder should provide an estimate of budget and resources required.
- C. It is understood that the proposal price will be firm for a period of 90 calendar days from the proposal opening date, and that, if the undersigned is notified of acceptance of this proposal within this time period, the Bidder shall execute a contract for the above stated compensation.

Michael J. Gallant

Name of Bidder

Michael J. Gallant

3/2/2026

Signature

Date

Michael J. Gallant, owner WMG Historic Restoration, LLC

Name and Title of Individual Authorized to Bind Bidder

TO BE SUBMITTED WITH PROPOSAL

Non-Collusion Affidavit

Michael J. Gallant, being duly sworn on oath, deposes and says:

That he/she is the
Owner

(Owner, Partner, Title if on behalf of a Corporation)

of WMG Historic Restoration, LLC

(Name of Business, Corporation or Partnership)

the party submitting the Proposal; that no officer of the said Corporation has nor has any person, firm or corporation acting on its behalf; agreed, conspired, connived or colluded to produce a deceptive show of competition in the compilation of the Proposal being submitted herewith; and that the said Corporation has not in any manner, directly or indirectly, entered into any agreement, participated in any collusion to fix the Proposal Price of the Proposer herein or any competitor, or otherwise taken any action in restraint of free competitive bidding in connection with the contract for which the Proposal is submitted; that in making this Affidavit, the affiant represents that she has personal knowledge of the matters and facts herein stated. The Affiant hereby declares and affirms under the penalties of perjury that the foregoing is true to the best of her knowledge and information.

To be signed by a duly authorized Officer.

Michael J. Gallant (SEAL)
Name

Title Owner

Date: March 2, 2026

TO BE SUBMITTED WITH PROPOSAL.

**AFFIDAVIT WITH RESPECT TO NON-CONVICTION, NON-SUSPENSION AND FALSE
PRETENSES**

I hereby affirm that:

1. I am the owner (Title) and duly authorized representative of

WVG Historic Restoration, LLC (Name of Business Entity) whose address is

157 Bridgeton Pike, Suite 200-315

Mullica Hill, NJ 08062

and that I possess the legal authority to make this affidavit on behalf of myself and the firm for which I am acting.

2. Except as described in Paragraph 7 below, neither I nor the Business Entity nor, to the best of my knowledge, any of its officers, directors, or partners or any of its employees directly involved in obtaining contracts with the State, or any county, bi-county or multi-county agency or subdivision of the State have been convicted, or in an official investigation or other proceeding admitted in writing or under oath, acts or omissions which constitute bribery, attempted bribery or conspiracy to bribe under the provisions of Criminal Law Article of the Annotated Code of Maryland or under the laws of any state or the federal government (conduct prior to July 1, 1977 is not required to be reported); and
3. Except as described in Paragraph 7 below, neither I nor the Business Entity nor, to the best of my knowledge, any of its officers, directors, or partners or any of its employees directly involved in obtaining contracts with the State, or any county, bi-county or multi-county agency or subdivision of the State have been convicted under a State or federal law or statute of any offense enumerated in §16-203 of the State Finance and Procurement Article; and
4. Except as described in Paragraph 7 below, neither I nor the Business Entity nor, to the best of my knowledge, any of its officers, directors, or partners or any of its employees directly involved in obtaining contracts with the State, or any county, bi-county or multi-county agency or subdivision of the State have been found civilly liable under a State or federal antitrust statute as provided in §16-203 of the State Finance and Procurement Article.
5. Except as described in Paragraph 7 below, neither I nor the Business Entity nor, to the best of my knowledge, any of its officers, directors, or partners or any of its employees who will provide, directly or indirectly, supplies, services, architectural services, construction related services, leases of real property, or construction have been debarred or suspended under this subtitle.
6. Except as described in Paragraph 7 below, neither I nor the Business Entity nor, to

the best of my knowledge, information and belief, any officer, director, partner, member or associate thereof; nor any of its employees directly involved in obtaining contracts with the Town, has been convicted of false pretenses, attempted false pretenses or conspiracy to commit false pretenses under the laws of any state or federal government, based upon acts committed after July 1, 1981.

7. State "none" below or, as appropriate, list any suspension, debarment, conviction, plea or admission described in Paragraph 2 - 6 above, with the circumstances, date, court, official or administrative body, the individuals involved and their position with the firm, and the sentence or disposition, if any.

none

I acknowledge that this affidavit is to be furnished, where appropriate, to the Town of Bladensburg under Section 16-311 of the State of Maryland Finance and Procurement Article of the Annotated Code of Maryland. I acknowledge that, if the representations set forth in this affidavit are not true and correct, the Town of Bladensburg may terminate any contract awarded and take any other appropriate actions. I further acknowledge that I am executing this affidavit in compliance with Section 16-309 of the State Finance and Procurement Article of the Annotated Code of Maryland, which ordains that any person convicted of bribery (upon acts committed after July 1, 1977) in furtherance of obtaining a contract from the State or any subdivision of the State of Maryland shall be disqualified from entering into a contract with the Town.

I further affirm that the business entity is properly registered to do business in the State of Maryland, or is not required to be registered.

I do solemnly declare and affirm under the penalties of perjury that the contents of the affidavit are true and correct.

March 2, 2026

Date



Signature

Rebekah K. Gallant

Printed Name

TO BE SUBMITTED WITH BID

TOWN OF BLADENSBURG

NOTE: The information requested on this form may be submitted in a separate document as long as all requested information is provided and numbered according to this form.

1. Name of Bidder: WMG Historic Restoration, LLC
 (Individual/Firm/Corporation)

Business Address: 157 Bridgeton Pike, Suite 200-315
 Mullica Hill, NJ 08062

Telephone Number: 609) 202-4418

E-mail address: michael@wmgrestoration.com

2. Is the business incorporated? Yes No

Non-Corporation Business

3. If response to item #2 above is No, list the name and business and residence address of each individual having a 10% or greater financial interest in the business.

<u>Name</u>	<u>Business Address</u>	<u>Residence Address</u>

Corporate Business Entities - Please answer items 4 and 5

4. List the names of all officers of the corporation, their business and residence addresses and the date on which they assumed their respective offices.

<u>Name</u>	<u>Office</u>	<u>Residence and Business Address</u>	<u>Date Office Assumed</u>
Rebekah Gallant	Owner	66 Burlington Rd. Monroeville, NJ 08343	April 30, 2016
Michael Gallant	Owner	66 Burlington Rd. Monroeville, NJ 08343	May 1, 2010

5. List the names of all members of the current Board of Directors, and their business and residence addresses.

<u>Name</u>	<u>Business Address</u>	<u>Residence Address</u>
<u>no</u>		

6. Please provide the following information concerning work that you have done within the last 5 years which is similar to the Bid work.

FOR WHOM PERFORMED	CONTRACT AMOUNT	DATE COMPLETED	CONTACT'S NAME/ TELEPHONE NUMBER
CRRNJ Terminal, Spartan Construction, NJ DPMC	\$1.2M	Sept 5, 2025	Lou Balmann 973-309-3512 GC
Hancock House, WJ Gross, NJ DPMC	\$250,000	October 30, 2025	Bill Gross 609-330-4026 GC
Ford Mansion, Wick House, National Park Service	\$350,000	August 2025	Besty Holland, 978-941-2200 NPS
Bringhurst Deshler Morris House, National Park Service	\$375,000	October 2023	Winston Clement, 267-582-9242 NPS
Grumblethorpe, Phila Society for Preservation of Landmarks	\$180,000	October 2025	Will Morris, 610-388-0111 Architect

7. Bidders will answer the following questions: (The word "you" refers to any individual, partnership, partner and/or corporation and its officers.)

a. Have you ever failed to complete any work awarded to you? no

If yes, state where and why:

b. Have you ever been affiliated with some other organization that failed to complete a contract? no

If yes, state name of individual and reason therefor. _____

c. With what other businesses are you affiliated? n/a

d. Please provide at least 3 references, including any Maryland governmental units or agencies for which you have worked on a similar project. Include the name and telephone number of your contact with each.

Bostwick House, Window Restoration 2024-2025, William Cawood 240.876.9172
Bringhurst Deshler Morris, First Bank, Second Bank: National Park Service, Independence National Park: Winston Clement
267-582-9242 CRRNJ Terminal, Hancock House- NJ DPMC, Larry Tutela, 609-633-7576

- e. Identify all sub successful bidders, materialmen, and suppliers that you intend to use in performing the work under the Contract, and specify the work each is expected to perform. n/a

Dated this 2 day of March, 2026.

WMG Historic Restoration, LLC

Name of Bidder

By: *Michael J. Gallant*

Michael J. Gallant

Printed Name:

Title: owner

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER WITH A MULTI-COLORED BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

NOT AN ELECTRICIAN'S OR PLUMBERS LICENSE

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE HOME IMPROVEMENT CONTRACTORS

WMG HISTORIC RESTORATION LLC
Michael Gallant
157 Bridgeton Pike
Suite 200-315
Mullica Hill NJ 08062

FOR PRACTICE IN NEW JERSEY AS A(N): Home Improvement Business Cont

New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE HOME IMPROVEMENT CONTRACTORS

WMG HISTORIC RESTORATION LLC
Home Improvement Business Cont

NOT AN ELECTRICIAN'S OR PLUMBERS LICENSE
03/26/2025 TO 03/31/2026
VALID
MICHAEL GALLANT SIGNATURE
Cari Zaris DIRECTOR
13VH05859100 License/Registration/Certificate #

03/26/2025 TO 03/31/2026
VALID

13VH05859100
LICENSE/REGISTRATION/CERTIFICATION #

PLEASE DETACH HERE
IF YOUR LICENSE/REGISTRATION/CERTIFICATE ID CARD IS LOST
PLEASE NOTIFY:
HOME IMPROVEMENT CONTRACTORS
PO BOX 45016
NEWARK, NJ 07101

Signature of Licensee/Registrant/Certificate Holder

DIRECTOR

PLEASE DETACH HERE

WMG HISTORIC RESTORATION LLC
YOUR LICENSE/REGISTRATION/CERTIFICATE NUMBER IS 13VH 05859100 . EXPIRATION DATE 2026
PLEASE USE IT IN ALL CORRESPONDENCE TO THE DIVISION OF CONSUMER AFFAIRS USE THIS SECTION TO REPORT ADDRESS CHANGES. YOU ARE REQUIRED TO REPORT ANY ADDRESS CHANGES IMMEDIATELY TO THE ADDRESS NOTED BELOW.

HOME IMPROVEMENT CONTRACTORS
PO BOX 45016
NEWARK, NJ 07101

PRINT YOUR NEW ADDRESS OF RECORD BELOW.
YOUR ADDRESS OF RECORD IS THE ADDRESS THAT WILL PRINT ON YOUR LICENSE/REGISTRATION/CERTIFICATE AND IT MAY BE MADE AVAILABLE TO THE PUBLIC.

PRINT YOUR NEW MAILING ADDRESS BELOW.
YOUR MAILING ADDRESS IS THE ADDRESS THAT WILL BE USED BY THE DIVISION OF CONSUMER AFFAIRS TO SEND YOU ALL CORRESPONDENCE.

HOME []
BUSINESS []

HOME []
BUSINESS []

TELEPHONE
INCLUDE AREA CODE

TELEPHONE
INCLUDE AREA CODE

If the law governing your profession requires the current license/registration/certificate to be displayed, it should be within reasonable proximity of your original license/registration/certificate at your principal office or place of business.



City of Philadelphia
Department of
Licenses & Inspections
P.O. Box 53310
Philadelphia, Pa. 19105

DISPLAY PROMINENTLY

If required by law

WMG HISTORIC RESTORATION LLC
157 BRIDGETON PIKE
SUITE 200-315
MULLICA HILL, NJ 08062
USA

3527 Contractor

WMG Historic Restoration LLC

THIS LICENSE IS GRANTED TO THE PERSON OR COMPANY FOR THE PURPOSE STATED ABOVE. IT IS SUBJECT TO IMMEDIATE CANCELLATION BY THIS DEPARTMENT FOR VIOLATIONS OF CITY ORDINANCES AND REGULATIONS.

LICENSE CODE	LICENSE NO.	COMMERCIAL ACTIVITY LIC.	EXPIRES ON	ISSUED ON
3527	47932	728495	2/20/2027	1/27/2026

LIMITS & CONDITIONS:

1. Contractors and subcontractors (including individuals and business entities) must have valid licenses. All subcontractors working under a permit must be submitted to the Department.
2. Contractors cannot sell or transfer their license or permit to another person.
3. Contractors must provide accurate information on any license or permit application with the Department.
4. Contractors must get all required permits for construction work and comply with approved permit documents.
5. Contractors must maintain information at each job site as required by the Philadelphia Code.
6. Contractors must display their Contractor License number on any advertisements, stationery, places of business, job sites, proposals, and vehicles displaying the business name.
7. Contractors must maintain complete financial and construction records (including plans) for each job performed for four years after completion of the job.
8. Contractors must follow all provisions of The Philadelphia Code.
9. Contractors must remain current on all City of Philadelphia taxes and fines. Failure to do so may result in the denial of permits and/or license renewals.

LICENSE

Please find attached your Home Improvement Contractor's Certificate suitable for framing along with a wallet card copy.

If you have any questions or have changes to the information you provided on your registration form, contact the Pennsylvania Office of Attorney General at 717-772-2425 or HIC@attorneygeneral.gov. For further information on the home improvement law visit www.attorneygeneral.gov.



M. M. A. H.
Michelle A. Henry, Attorney General

MICHAEL GALLANT
157 BRIDGETON PIKE
STE. 200-315
MULLICA HILL NJ 08062

This form acknowledges receipt of your \$50.00 application fee, required under Pennsylvania's Home Improvement Consumer Protection Act. Please keep this form for your records.

COMMONWEALTH OF PENNSYLVANIA
OFFICE OF ATTORNEY GENERAL

THIS IS TO CERTIFY THAT

WMG HISTORIC RESTORATION LLC
157 BRIDGETON PIKE
STE. 200-315
MULLICA HILL NJ 08062

HAS REGISTERED IN PENNSYLVANIA AS A HOME IMPROVEMENT CONTRACTOR
11/7/2026
VALID UNTIL
REGISTRATION NUMBER
PA066216

M. M. A. H.
MICHELLE A. HENRY, ATTORNEY GENERAL

SIGNATURE OF REGISTRATION CERTIFICATE HOLDER

Commonwealth of Pennsylvania

Office of Attorney General

THIS IS TO CERTIFY THAT

WMG HISTORIC RESTORATION LLC
157 BRIDGETON PIKE
STE. 200-315
MULLICA HILL NJ 08062

HAS REGISTERED IN PENNSYLVANIA AS A HOME IMPROVEMENT CONTRACTOR

11/7/2026
VALID UNTIL

PA066216
REGISTRATION NUMBER

Michael K. Gallant
SIGNATURE OF REGISTRATION CERTIFICATE HOLDER

M. M. A. H.
MICHELLE A. HENRY, ATTORNEY GENERAL

WBENC

WOMEN'S BUSINESS ENTERPRISE
NATIONAL COUNCIL

JOIN FORCES. SUCCEED TOGETHER.

hereby grants

National Women's Business Enterprise Certification

to

WMG HISTORIC RESTORATION, LLC

who has successfully met WBENC's standards as a Women's Business Enterprise (WBE).

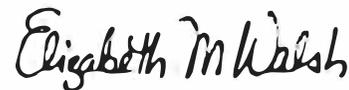
This certification affirms the business is woman-owned, operated and controlled and is valid through the date herein.

WBENC National WBE Certification was processed and validated by Women's Business Enterprise Center - East, a WBENC Regional Partner Organization.

Certification Granted: November 3, 2021

Expiration Date: November 3, 2026

WBENC National Certification Number: WBE2102905



Authorized by Elizabeth M. Walsh, President
Women's Business Enterprise Center - East

WBENC EAST
WOMEN'S BUSINESS ENTERPRISE CENTER

JOIN FORCES. SUCCEED TOGETHER.

NAICS: 238990
UNSPSC: 30171604



Great Lakes
Women's
Business
COUNCIL



WBENC METRO NY
WOMEN'S BUSINESS ENTERPRISE CENTER

WBENC METRO NW
WOMEN'S BUSINESS ENTERPRISE CENTER



WBENC FLORIDA
WOMEN'S BUSINESS ENTERPRISE CENTER

WBENC ORV
WOMEN'S BUSINESS ENTERPRISE CENTER

WBENC PACIFIC
WOMEN'S BUSINESS ENTERPRISE CENTER

WBENC
WOMEN'S BUSINESS ENTERPRISE CENTER

WBENC SOUTH
WOMEN'S BUSINESS ENTERPRISE CENTER

WBENC WEST
WOMEN'S BUSINESS ENTERPRISE CENTER

