

To Whom it may concern:

Subject:

An innovative approach to how the city will be responsible for making payments on personnel costs and/or supplies costs.

NGI Trenchless Pipe & Sewer Repair, Inc. appreciates the City's focus on transparency and fiscal accountability in project management. However, as an independent contractor, NGI invoices the city based on clearly defined project metrics—such as linear footage completed, type of service provided, or unit-based rates—as outlined in our bid proposal. This approach ensures consistent, performance-based billing while maintaining compliance with public procurement and fair competition standards.

Because NGI operates on a unit-price or performance-based structure rather than direct reimbursement for labor or supplies, it would not be appropriate or consistent with procurement best practices for the city to make payments directly tied to our internal personnel or materials costs.

As an alternative, NGI recommends an **invoice verification system** tied to measurable deliverables. This could include progress reports, field logs, or inspection documentation confirming completed work prior to invoicing. This method promotes transparency, accountability, and fiscal control for the city—without requiring access to proprietary labor or materials cost information.

STATE OF GEORGIA

Secretary of State
Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

Annual Registration

Electronically Filed

Secretary of State

Filing Date: 01/29/2025 12:10:29

BUSINESS INFORMATION

BUSINESS NAME : NGI Trenchless Pipe & Sewer Repair, Inc.
CONTROL NUMBER : 17048956
BUSINESS TYPE : Domestic Profit Corporation
ANNUAL REGISTRATION PERIOD : 2025

BUSINESS INFORMATION CURRENTLY ON FILE

PRINCIPAL OFFICE ADDRESS : 130 Prominence Point Pkwy, Ste. 130-142, Canton, GA, 30114, USA
REGISTERED AGENT NAME : Anthony Cammarata, Jr.
REGISTERED OFFICE ADDRESS : 131 East Main Street, Canton, GA, 30114, USA
REGISTERED OFFICE COUNTY : Cherokee

OFFICER	TITLE	ADDRESS
STEPHEN HYSON	CEO	130 Prominence Point Pkwy, Ste. 130-142, Canton, GA, 30114, USA
STEPHEN HYSON	CFO	130 Prominence Point Pkwy, Ste. 130-142, Canton, GA, 30114, USA
STEPHEN HYSON	Secretary	130 Prominence Point Pkwy, Ste. 130-142, Canton, GA, 30114, USA

UPDATES TO ABOVE BUSINESS INFORMATION

PRINCIPAL OFFICE ADDRESS : 130 Prominence Point Pkwy, Ste. 130-142, Canton, GA, 30114, USA
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REGISTERED OFFICE COUNTY : Cherokee

OFFICER	TITLE	ADDRESS
STEPHEN HYSON	CEO	130 Prominence Point Pkwy, Ste. 130-142, Canton, GA, 30114, USA
Terry Hess	CFO	130 Prominence Point Pkwy, Ste. 130-142, Canton, GA, 30114, USA
Austin D'Angelo	Secretary	130 Prominence Point Pkwy, Ste. 130-142, Canton, GA, 30114, USA

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE : Anthony Cammarata
AUTHORIZER TITLE : Authorized Person

E-VERIFY AFFIDAVIT

Complete as directed. Scan signed document and save pdf as PRP_550_#####_Everity

Applicant Agency*: <u>NGI Trenchless Pipe & Sewer Repair Inc.</u>	Proposal Username
	PRP_550_#####

*Legal name of agency/organization/institution as it appears on SAM or Registration screenshot.

SECURITY AND IMMIGRATION COMPLIANCE AFFIDAVIT Contractor Affidavit under O.C.G.A. § 13-10-91(b)(1)

By executing this affidavit, the undersigned Contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services on behalf of the Georgia Department of Human Services has registered with, is authorized to use and uses the Federal Work Authorization Program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

1605572

Federal Work Authorization User Identification Number
(This is a 4, 5, or 6-digit number, also known as eVerify Company ID. Not Tax ID or SS Number)

11-06-2020

Date of Authorization
(This is the date the Company ID was issued by the Federal eVerify system.)

NGI Trenchless Pipe & Sewer Repair, Inc.

Name of Contractor

Prevention and Community Support: PREP Program

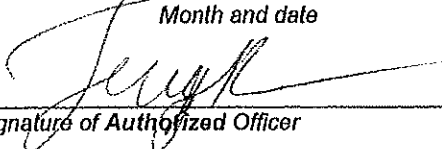
Name of Program

Georgia Department of Human Services

Name of Public Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on November 17th, 2025 in Woodstock, GA.
Month and date City


Signature of Authorized Officer

Perry Hess, CFO
Printed Name and Title of Authorized Officer

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE 17 DAY OF November, 2025


Signature of Notary Public

09/13/2027
Date Commission Expires

TRISTEN S CROW
NOTARY PUBLIC
Hull County
State of Georgia
My Comm. Expires Sept. 13, 2027

*Document MUST be signed by an individual identified on, and authorized by, Corporate Resolution (for Non-Profit) or Authorization (for a Public Entity).
** Record name and title of officer as it appears on GA SOS registration or name and title of individual as it appears on Authorization (for Public Entity).

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

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

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)	
		NGI Trenchless Pipe & Sewer Repair, Inc.	
	2	Business name/disregarded entity name, if different from above.	
	3a	Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
		<input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	
	3b	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions _____ <input type="checkbox"/>	
	5	Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)
6	City, state, and ZIP code		
7	List account number(s) here (optional)		
	130 Prominence Point Pkwy, Ste. 130-142		
	Canton, GA 30114		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number										
or										
Employer identification number										
8	2		-	1	5	0	8	8	3	9

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person *Terry Hess*

Date 1-21-2026

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they