



**MAGوبا, LLC – A Certified Minority Business**  
1073 GRASSMEADE WAY. SNELLVILLE, GEORGIA 30078

Magoba, LLC  
1073 Grassmeade Way  
Snellville, Ga 30078

The City of Dalton – Finance Department  
300 West Waugh Street  
Dalton, GA, 30720  
Attn: Michael Hendricks

Subject: Submission of Bid for **ASBESTOS ABATEMENT PROJECT - JOHN DAVIS RECREATION CENTER**

Dear Mr. Hendricks

I am writing to formally submit my bid for the project **ASBESTOS ABATEMENT PROJECT - JOHN DAVIS RECREATION CENTER** as advertised by The City of Dalton. As an experienced asbestos abatement contractor with a proven track record of delivering high-quality remediation projects, I am confident that my proposal will meet your requirements and expectations.

I have carefully reviewed the project details provided in the Bid Packet document and the Limited Asbestos Survey Report and attend the Pre-bid meeting. Please find enclosed my comprehensive bid proposal, which includes the following key elements:

- Checklist for Bid Documents
- Request for Sealed Bids
- Instructions/Scope of Work
- Bid Form
- Mandatory Price Form
- E-Verify Affidavit
- Exhibit A: City of Dalton Vendor Package
- Exhibit A: ACM Diagrammatic Drawing
- Business Licenses

Thank you for considering our bid. I look forward to the opportunity to work with The City of Dalton. If you have any questions or concerns, please do not hesitate to reach out to us.

Sincerely,

Martin Gomez

President / CEO

*Committed to Excellence!*



(404) 271-8239



(678) 623-3435




magoba15@yahoo.com

**The City of Dalton**  
**Parks and Recreation Department**  
**REQUEST FOR SEALED BIDS– advertised on 4/27/2022**

*Sealed Envelope shall be marked with the following information:*

**“ASBESTOS ABATEMENT PROJECT - JOHN DAVIS RECREATION CENTER”**

<b>SCHEDULE OF EVENTS</b>	
Mandatory Conference and site visit – <b>904 Civic Dr. Dalton, GA, 30736</b> If the contractor is not able to attend the mandatory meeting, they can request a separate meeting date with Michael Hendricks.	<b>2:00 PM</b> <b>May 3, 2023</b>
Deadline for requests for clarifications and questions. Any possible exceptions to the bid specification and/or terms and conditions should be addressed during this phase. These requests will be answered in an addendum and must be emailed to: <a href="mailto:mhendricks@daltonga.gov">mhendricks@daltonga.gov</a>	<b>3:00 PM</b> <b>May 5, 2023</b>
Sealed competitive bids will be accepted until the due date and time. Any late submittals received will not be considered. Bids must be submitted to The City of Dalton Finance Department located at 300 West Waugh Street, Dalton, Georgia, 30720.	<b>3:00 PM</b> <b>May 11, 2023</b>
<b>THIS FORM MUST BE SIGNED AND SUBMITTED TO BE CONSIDERED FOR AWARD</b>	
<b>COMPANY NAME:</b> MAGOBAL LLC	<b>DATE:</b> 5/11/2023
<b>MAILING ADDRESS:</b> 1073 GRASSMEADE WAY	<b>PHONE:</b> (404) 271-8239
<b>CITY:</b> SNELLVILLE	<b>FAX:</b> (678) 623-3435
<b>STATE:</b> GEORGIA	<b>ZIP:</b> 30078
<b>EMAIL:</b> marlyn@magoballc.com / magoba15@yahoo.com	<b>SSN OR FEDERAL TAX ID:</b> 46- 3330993
<b>PRINTED NAME:</b> MARTIN GOMEZ	<b>TITLE OF AUTHORIZED REPRESENTATIVE:</b> OWNER
<b>PRINTED NAME:</b> MARTIN GOMEZ	<b>AUTHORIZED SIGNATURE:</b> 

\*The posting of additional addenda may be required, and it is the responsibility of the Offeror to ensure that they review the City’s website for any additional addenda and that they submit an acknowledgment of all applicable addenda (on the included form) with their solicitation. Offerors should not expect to be individually notified by the City of Dalton.

## **INSTRUCTIONS / SCOPE OF WORK**

**“ASBESTOS ABATEMENT PROJECT - JOHN DAVIS RECREATION CENTER”  
THE CITY OF DALTON, GEORGIA**

## **INSTRUCTIONS / SCOPE OF WORK**

**NAME OF PROJECT: ASBESTOS ABATEMENT PROJECT - JOHN DAVIS RECREATION CENTER**

**NAME OF OWNER: THE CITY OF DALTON, GEORGIA**

The City, through its Parks and Recreation Department, is seeking qualified professionals to perform asbestos abatement services for the John Davis Recreation Center located at 904 Civic Drive, Dalton, GA, 30720.

### **SITE INVESTIGATION**

By submitting a bid, the Contractor acknowledges that he has investigated and satisfied himself as to:

- the conditions affecting the work, including, but not limited to, physical conditions of the site which may bear upon site access, handling and storage of tools and materials, access to water, electric or other utilities, or otherwise affect the performance of required activities;
- the character and quantity of all surfaces and subsurface materials or obstacles to be encountered in so far as this information is reasonably ascertainable from an inspection of the site, exploratory work done by the
- Owner or designated consultants, and information presented in the specification included with this contract;
- the environmental condition, including the presence, location, and condition of asbestos-containing materials (ACM), at the site.
- Any failure by the Contractor to acquaint himself with available information will not relieve him from the responsibility for estimating properly the difficulty or cost of successfully performing the work.
- Under no circumstances shall the Contractor rely on the material quantities indicated in this document as the total basis for the bid price. All quantities indicated herein are approximate and intended to alert the Contractor to the general scope of the project. Scheduled quantities refer only to ACM the Contractor may expect to encounter. No increase in contract cost will be considered due to the Contractor's failure to physically verify all quantities of the ACM specified by this document for removal.
- The Contractor shall include in their bid price the total estimated square footage of ACM anticipated submitted on the attached bid form.
- The Contractor shall include in their bid price the total fee to abate and dispose of the ACM listed in the Limited Asbestos Survey Report found on the City's Website - <https://www.daltonga.gov/rfps>.
- The Owner is not responsible for any conclusions or interpretations made by the Contractor based on the information made available by the Owner.

- No bids will be accepted from any Contractor who has not inspected the job site either in person or through a qualified designated representative.

## SCOPE OF WORK

This bid document covers the abatement of asbestos-containing material from the John Davis Recreation Center. The building is located at 904 Civic Drive, Dalton, GA, 30720. A description of the areas to be abated is included in the Limited Asbestos Survey Report found on the City's Website -<https://www.daltonga.gov/rfps>.

Asbestos removal shall be conducted according to applicable Federal, State, and local rules/regulations.

- The abatement shall be coordinated with the Owner's representative and the site contact.
- The asbestos abatement Contractor will furnish all labor, supervision, materials, services, insurance, equipment, lighting, emergency lighting, power, and water necessary for the total removal of the areas of ACM listed in the Limited Asbestos Survey Report found on the City's Website - <https://www.daltonga.gov/rfps>.
- The asbestos abatement Contractor shall submit an Asbestos Removal Notification to the EPD or State NESHAP Agency immediately upon receipt of a Notice-to-Proceed from the Owner.
- The abatement work shall be completed 30 days from the date affixed in the notice to proceed, as per agreement with the Owner.
- The asbestos abatement Contractor is responsible for demarcating the asbestos abatement areas and limiting access to authorized individuals only.

Before submitting, the Contractor shall be responsible for reviewing the BID and Specifications and visiting the work location. Each Contractor shall fully inform themselves as to all existing conditions and limitations under which the work is to be performed and shall include in the Bid a total sum to cover all costs of materials and labor to perform the work as set forth in the BID and Specifications.

The Contractor, in undertaking the work under this contract, shall have visited the site and take into consideration all conditions that might affect his work. No consideration will be given to any claim based on a lack of knowledge of existing conditions, except where the Contract Documents make definite provisions for adjustment of cost or extension of time due to existing conditions that cannot be readily ascertained (unforeseen conditions).

**Installer's Qualifications:** The Contractor's Bid shall include the qualifications of its installer. Include a minimum of three similar installations. Provide three Owner references. The Bid shall also include the

installer's certifications from the manufacturer and professional associations. **The contractor must be on Georgia EPD's certified abatement contractors list.**

**Warranty:** The Contractor's Bid shall include the proposed manufacturer's warranty along with any information/pricing on available extended warranties. Include a detailed description of the Owner's responsibilities or obligations throughout the warranty period. The Bid shall include the history of warranty issues and or recalls and how these have been addressed.

**Lump Sum Price:** On the attached Bid form, provide the lump sum price and prices per area of request. The pricing for any additional warranties/maintenance programs shall be offered under a separate form within the Contractor's Bid.

**Contractor Schedule:** Contractors should provide a timeline of proposed work to begin and end.

**Form of Agreement:** The successful proposer will enter into a contract with the City of Dalton and for the project.

## **BID FORM**

**“ASBESTOS ABATEMENT PROJECT - JOHN DAVIS RECREATION CENTER”  
THE CITY OF DALTON, GEORGIA**

## BID FORM

### EXHIBIT "A"

**NAME OF PROJECT: ASBESTOS ABATEMENT PROJECT - JOHN DAVIS RECREATION CENTER**

**NAME OF OWNER: THE CITY OF DALTON, GEORGIA**

**NAME OF PROPOSED CONTRACTOR: MAGوبا, LLC (The "Contractor")**

THE CITY OF DALTON (the "City"), pursuant to the provisions of O.C.G.A. § 36-91-1, *et. seq.*, herein seeks competitive Bids from Contractors for the construction of the: **"ASBESTOS ABATEMENT PROJECT - JOHN DAVIS RECREATION CENTER"** at 904 Civic Drive, Dalton, GA, 30720. This Bid is submitted in response to the City's Request for Bids dated **4/27/2023**.

This Bids is for the full and complete requested services of the Project in conformity with all requirements of the BID. The submission of this Bid constitutes a representation by the Contractor that it has carefully read the "Instructions/Scope of Work".

The contractor submits herewith its duly executed affidavit in accordance with the applicable Federal work authorization program. The contractor acknowledges that upon execution of any contract with the City, said affidavit shall be deemed a public record to the extent provided by Georgia law.

The Contractor further acknowledges that the Contract Documents provide no incentive provisions for early Completion of the Work.

### Base Bid

The Contractor proposes to properly and meet safety standards in conformity with all requirements of the BID and furnish all necessary labor, material, and equipment for such construction, and, furthermore, to fully, completely, and strictly perform all obligations of the Contractor as set forth in the Contract Documents, for the lump sum contract price of: SIXTEEN THOUSAND, FOUR HUNDRED SEVENTY-FIVE.

The contractor must include a price sheet that is included at the end of the document with their submitted package. Bidders will be required to provide performance and payment bonds for 100% of the bid amount, if over \$100,000.


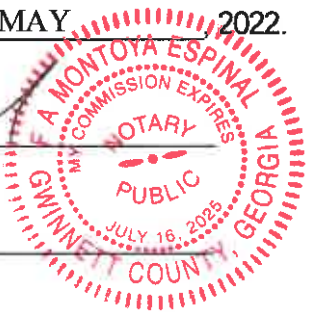
Said lump sum contract price is allocated, in its entirety, to the following elements of the work:

Attached hereto, and incorporated herein as part of this Bid, Contractor submits the contractor's qualifications and Bid. The contractor acknowledges that the City may rely upon the truthfulness and accuracy of the responses set forth therein. In addition, Contractor has submitted herewith as part of this Bid such documentation and information as the Contractor deems appropriate to establish that it is a responsible and responsive Contractor and that its Bid is the most advantageous to the City. The contractor acknowledges that the City may rely upon the truthfulness and accuracy of such documentation and information.

The Contractor proposes and agrees to commence actual construction (i.e., physical work) on-site with adequate management, labor, materials, and equipment within ten (10) days after receipt of the Notice to Proceed and prosecute the Work diligently and faithfully to completion within the required Contract Time. Prior to commencing such Work, and prior to the issuance of the Notice to Proceed, the Contractor shall furnish to the City duly executed Payment and Performance Bonds complying with all requirements of the Contract Documents along with Certificates of Insurance demonstrating that all required coverages are in place.

The contractor submits herewith its executed Bid Bond in accordance with the requirements of the City as set forth in the Instruction/Scope of Work.

The contractor herein acknowledges that this Bid shall constitute an offer by the Contractor to contract with the City for services of the Project in conformity with all requirements of the Contract Documents for the lump sum contract price as set forth hereinabove. Said offer by Contractor is irrevocable and subject to acceptance by the City until the expiration of sixty (60) days following the date set forth in the Request for Bids for receipt of Bids by the City.

<b>[CONTRACTOR]</b>	
By: _____ <i>[Signature]</i> _____	[SEAL] 
Witness: _____ <i>[Signature]</i> _____	[SEAL]
Sworn and subscribed to before me this <u>11</u> day of <u>MAY</u> , 2022.	
NOTARY PUBLIC: _____ <i>[Signature]</i> _____	
Commission Expirations: <u>July 16, 2025</u>	

## **MANDATORY PRICE FORM**

**“ASBESTOS ABATEMENT PROJECT - JOHN DAVIS RECREATION CENTER”  
THE CITY OF DALTON, GEORGIA**

**Mandatory Price Form**

ASBESTOS ABATEMENT PROJECT  
JOHN DAVIS RECREATION CENTER  
904 CIVIC DRIVE, DALTON, GA, 30736

**BID FORM**

A Bid Submitted By:

MAGOBA, LLC

(Company Name)

SNELLVILLE, GEORGIA

(City, State)

TO: THE CITY OF DALTON FINANCE DEPARTMENT. 300 WEST WAUGH ST, DALTON, GA 30720

I have received Bidding Documents dated 04/27/2023 & on the above reference project. I have examined the Bidding Documents, and submitted the following bid:

In submitting this bid, I agree:

1. To hold my bid open for 60 days after the receipt of bids.
2. To enter into and execute an "Owner-Contractor Agreement", based upon this bid, if this bid is accepted by the Owner.
3. To perform all work required by the Contract Documents.
4. To complete all work no later than 30 days from notice to proceed.
5. The Owner reserves the right to waive any informality and irregularity in the best interest of the Owner.
6. Bids must be received no later than 3 p.m., May 11, 2023. Faxed bids will be accepted.

I agree to perform the above in consideration of the amount hereinafter scheduled.

**BASE BID:**

Area	Description	Material Location	Estimated Quantity
A	Black Adhesive Under Tile	The bottom layer of all Floor Tile – Lobby and Hall Ways on the Main Floor	1,327 SF
B	Black Adhesive Under Tile	Front Large Multipurpose Room (Hill Side Room)	1,680 SF
C	Black Adhesive Under Tile	Handicap Restroom	50 SF
D	Black Adhesive Under Tile	Kitchen	80 SF
E	Black Adhesive Under Tile	Art room	530 SF
F	Black Adhesive Under Tile	Art Room Closet	90 SF
G	Black Adhesive	Exercise Room under Stairwell	520 SF
H	Black Adhesive	Office near Exercise Room	260 SF
I	Yellow Linoleum	Middle Closet in Gym	90 SF
J	Black Adhesive	All Flooring Upstairs	1,970 SF

\*\*\* Refer to Appendix – A for a diagram of ACM locations.

\*\*\* Quantities listed above are estimates to be used for inspection purposes only and should be field-verified.

Removal, handling, and disposal of asbestos-containing material as outlined in the Scope of Work and as indicated on the attached drawing.

**LUMP SUM:**

Numbers: \$ 16,475 \_\_\_\_\_

Words: \$ SIXTEEN THOUSAND, FOUR HUNDRED SEVENTY-FIVE \_\_\_\_\_

- All prices are inclusive of all required and appropriate materials, labor, equipment, tools, transportation, services, licenses, fees, permits, etc., required by said documents to complete all divisions of the work.

The bid amount shall be shown in both figures and words. In case of discrepancy, the amount shown in words shall govern. The undersigned hereby agrees to hold the bid amounts for sixty (60) days following the bid date. The undersigned hereby agrees to commence work within ten (10) days of the date defined by the Notice to Proceed and to complete within the Contractor's submitted schedule unless extended in writing by the Owner.

Signed: MARTIN GOMEZ  \_\_\_\_\_ OWNER  
(Name) (Title)

Date: 5/11/2023 \_\_\_\_\_

**Checklist for Bid Documents**

**Failure to include all required documents will result in Bid being removed for consideration for award.**

X **Solicitation Form (Page 1 of this Document)**

X **Completed City Vendor Packet**

X **Vendor Affidavit and Agreement**

X **Price Form**

X **Checklist for Documents/Addenda Acknowledgement (this page)**

X **References of Past Similar Jobs (this page)**

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**Addenda Acknowledgement**

**Failure to acknowledge any addenda will result in a non-responsive bid.**

The vendor has examined and carefully studied the Bid and the following Addenda, the receipt of all of which is hereby acknowledged:

**Addendum No.** N/A **Dated:** N/A

**Addendum No.** N/A **Dated:** N/A

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**References of Similar Jobs:**

**Name:** Forest Park MS. Clayton County Public Schools **Email/Phone:** christy.crawford@clayton.k12.ga.us / (770) 473-2805 Ext. 160117  
Christy Crawford, Director of Construction

**Name:** Old Riverdale ES. Clayton County Public Schools **Email/Phone:** christy.crawford@clayton.k12.ga.us / (770) 473-2805 Ext. 160117  
Christy Crawford, Director of Construction

**Name:** Sharp Middle School. Covington, GA 30014 Newton County Board of **Email/Phone:** james.cds@att.net / 770-757-7149  
Education. GC: COMPLETE DEMOLITION: James Morehead

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**This affirms that all documents are included with the bidder's bid package.**

**Company's Name:**

MAGOBA, LLC **Date:** 5/11/2023

**Authorized Representative's Name:** MARTIN GOMEZ

**Authorized Representative's Signature:** 

## **VENDOR AFFIDAVIT AND AGREEMENT (E-VERIFY)**

**“ASBESTOS ABATEMENT PROJECT - JOHN DAVIS RECREATION CENTER”  
THE CITY OF DALTON, GEORGIA**

STATE OF GEORGIA  
WHITFIELD COUNTY  
CITY OF DALTON

VENDOR AFFIDAVIT AND AGREEMENT (E-Verify)

COMES NOW before me, the undersigned officer duly authorized to administer oaths, the undersigned contractor, who, after being duly sworn, states as follows:

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91 and Georgia Department of Labor Rule 300-10-1-.02, stating affirmatively that the individual, firm, or corporation which is contracting with the City of Dalton, Georgia has registered with and is participating in a federal work authorization program and will continue using the program throughout the contract period in accordance with the applicability provisions and deadlines established in O.C.G.A. § 13-10-91 and Georgia Department of Labor Rule 300-10-1-.02.

The undersigned contractor further agrees that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to the contract with the City of Dalton, Georgia of which this affidavit is a part, the undersigned contractor will secure from such subcontractor(s) similar verification of compliance with O.C.G.A. § 13-10-91 and Georgia Department of Labor Rule 300-10-1-.02 through the subcontractor's execution of the subcontractor affidavit required by Georgia Department of Labor Rule 300-10-1-.02 or a substantially similar subcontractor affidavit. The undersigned contractor further agrees to maintain records of such compliance and provide a copy of each such verification to the City of Dalton, Georgia at the time the subcontractor(s) is retained to perform such service.

FURTHER AFFIANT SAYETH NOT.

*Martin Gomez*  
BY: Authorized Officer or Agent  
MAGOBIA ENVIRONMENTAL, LLC  
Contractor Name

Date

02/18/2014

Authorization Date for EEV Program

756435

Employment Eligibility (EEV) #

OWNER  
Title of Authorized Officer or Agent of Contractor  
MARTIN GOMEZ

Printed Name of Authorized Officer or

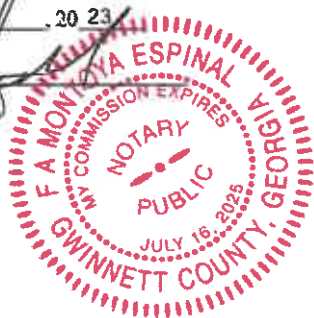
Agent Sworn to and subscribed before me

This 11th day of MAY, 20 23

Notary Public

My Commission Expires:

July 16, 2025  
\*MUST BE NOTARIZED



\*Any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603. As of the effective date of O.C.G.A. § 13-10-91, the applicable federal work authorization program is the "EEV Basic Pilot Program" operated by the U.S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in conjunction with the Social Security Administration.

# **EXHIBIT A: CITY OF DALTON – VENDOR APPLICATION**

**“ASBESTOS ABATEMENT PROJECT - JOHN DAVIS RECREATION CENTER”  
THE CITY OF DALTON, GEORGIA**

"EXHIBIT A"

FINANCE DEPARTMENT  
P.O. BOX 1205  
DALTON, GEORGIA 30722  
PHONE: (706) 278-6006  
FAX: (706) 277-4640



Dear City of Dalton, DWRSWMA, Nob North Golf Course, & Senior Center Vendors:

Thank you for your interest in becoming an approved vendor with the City of Dalton. We are providing this vendor packet in order to place your company on the approved active vendor list for the City. The requested information allows us to comply with all applicable laws and regulations governing the City of Dalton. Although there is a lot of information enclosed in this packet, it is our intention to make this process as easy as possible.

Please complete all documents as listed on the enclosed return documentation checklist and mail your packet to the Finance Department at the following address:

City of Dalton  
Attn: Accounts Payable  
P.O. Box 1205  
Dalton, GA 30722

In addition, please find attached a copy of the W-9 and ST-5 exemption form for the City of Dalton. Please retain this information for your records.

Should you have further questions, please do not hesitate to contact our Finance Department at (706) 278-6006, or via email to [vendor@daltonga.gov](mailto:vendor@daltonga.gov).

Thank you for your interest in doing business with the City of Dalton.

### Return Documentation Checklist:

#### REQUIRED FROM ALL VENDORS:

- ☒ 1. Completed vendor application.
- ☒ 2. Completed W-9 Form, only remit the first page of the four page document.
- 3. If you are providing **labor or services** to the City of Dalton, it is **Mandatory** to complete either option a or b.
  - ☒ a. If you have an employee other than yourself, and you are providing labor or services to the City of Dalton, (Pursuant to O.C.G.A. §13-10-91 (b)(1)), a Vendor affidavit and Agreement (E-Verify) must be submitted. If you are unsure if you are required to fill out this form, please contact the Finance office (706-278-6006) and we will advise you.

### **OR**

- ☐ b. If you have no employees other than yourself, and you are providing labor or services to the City of Dalton, please provide a copy of State issued identification card/driver's license from an approved state as provided on the Attorney General's website. Subcontractors and sub-subcontractors are also required to follow these requirements.
- ☒ 4. Copy of your company's most recent insurance certificate(s). This certificate must be kept current. If service is performed on City of Dalton property, additional insurance requirements apply. See attached explanation of insurance requirements.
- ☒ 5. Completed Workers' Compensation Affidavit.
- ☒ 6. Information Security Affidavit.

#### OPTIONAL FORM

- ☒ Completed ACH Payment Approval Form. (Please complete optional form to receive vendor payments through automated fund transfer.)

**\*\*If any required forms are returned incomplete, an active vendor status will not be granted and subsequent payments may be delayed. Please remember that documents requiring notary verification must be notarized to be considered complete.**

FINANCE DEPARTMENT  
P.O. BOX 1205  
DALTON, GEORGIA 30722  
PHONE: (706) 278-6006  
FAX: (706) 277-4640



FOR CITY USE ONLY

<input type="checkbox"/> Initial Application		<input type="checkbox"/> Revision	
Vendor ID			
Month	Day	Year	
Initial Below when complete Packet Completion verified _____			

## VENDOR APPLICATION

Contract Number _____	
Project Name <u>John Davis Recreation Center</u>	
Company/Individual Name: <u>MAGOBA, LLC</u>	
Doing Business As: _____	
Physical Address: <u>1073 GRASSMEADE WAY.</u>	
City: <u>SNELLVILLE</u>	State: <u>GA</u> Zip Code: <u>30078</u>
Remittance Address for payments: <u>1073 GRASSMEADE WAY</u>	
City: <u>SNELLVILLE</u>	State: <u>GA</u> Zip Code: <u>30078</u>
Principal line of business, please briefly describe any services or products provided: <u>ASBESTOS ABATEMENT, SELECTIVE INTERIOR DEMOLITION</u>	
Phone Number: <u>404-271-8239</u>	Fax Number: <u>678-623-3435</u>
E-Mail Address: <u>magoba15@yahoo.com / marlyn@magoballc.com</u>	
Vendor Contact/Representative: <u>MARTIN GOMEZ</u>	
Organized as: <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation Date: <u>8/19/2013</u> State: <u>GA</u>	
Federal Tax ID Number (if company): <u>4 6 - 3 3 3 0 9 9 3</u>	
Social Security Number (if individual): _____	
DUNS Number: <u>0 4 2 8 4 1 4 4 7</u>	
Special Status: <input checked="" type="checkbox"/> DBE-Disadvantaged Business Enterprises (Please submit copy of certificate) <input checked="" type="checkbox"/> MBE-Minority Owned (Please submit copy of certificate) <input type="checkbox"/> WBE-Women Business Enterprises (Please submit copy of certificate)	

# Request for Taxpayer Identification Number and Certification

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

► Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above <b>MAGOBA, LLC</b>	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► <b>S</b> <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ►	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
	5 Address (number, street, and apt. or suite no.) See instructions. <b>1073 GRASSMEADE WAY</b>	Requester's name and address (optional) <b>City of Dalton</b> <b>P.O. Box 1205</b> <b>Dalton, GA 30722</b>
	6 City, state, and ZIP code <b>SNELLVILLE, GA 30078</b>	
	7 List account number(s) here (optional)	

## 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.

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

Social security number								
			-					
or								
Employer identification number								
4	6		-	3	3	3	0	9 9 3

## 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 ►

*Makun*

Date ► 5/3/2023

## 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](http://www.irs.gov/FormW9).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

STATE OF GEORGIA  
WHITFIELD COUNTY  
CITY OF DALTON

VENDOR AFFIDAVIT AND AGREEMENT (E-Verify)

COMES NOW before me, the undersigned officer duly authorized to administer oaths, the undersigned contractor, who, after being duly sworn, states as follows:

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91 and Georgia Department of Labor Rule 300-10-1-.02, stating affirmatively that the individual, firm, or corporation which is contracting with the City of Dalton, Georgia has registered with and is participating in a federal work authorization program and will continue using the program throughout the contract period in accordance with the applicability provisions and deadlines established in O.C.G.A. § 13-10-91 and Georgia Department of Labor Rule 300-10-1-.02.

The undersigned contractor further agrees that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to the contract with the City of Dalton, Georgia of which this affidavit is a part, the undersigned contractor will secure from such subcontractor(s) similar verification of compliance with O.C.G.A. § 13-10-91 and Georgia Department of Labor Rule 300-10-1-.02 through the subcontractor's execution of the subcontractor affidavit required by Georgia Department of Labor Rule 300-10-1-.08 or a substantially similar subcontractor affidavit. The undersigned contractor further agrees to maintain records of such compliance and provide a copy of each such verification to the City of Dalton, Georgia at the time the subcontractor(s) is retained to perform such service.

FURTHER AFFIANT SAYETH NOT.

M. Mathew  
BY: Authorized Officer or Agent  
Magoba Environmental, LLC

5/3/2023  
Date

02/18/2014

Authorization Date for EEV Program  
756435

Contractor Name  
PRESIDENT / OWNER

Employment Eligibility (EEV) #

Title of Authorized Officer or Agent of Contractor  
MARTIN GOMEZ

Printed Name of Authorized Officer or Agent

Sworn to and subscribed before me

This 3rd day of May, 2023

Fernando Montoya  
Notary Public

My Commission Expires: July 16, 2025



\*MUST BE NOTARIZED

\*Any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603. As of the effective date of O.C.G.A. § 13-10-91, the applicable federal work authorization program is the "EEV/Basic Pilot Program" operated by the U.S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in conjunction with the Social Security Administration.

# STATE OF GEORGIA

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

## **CERTIFICATE OF AMENDMENT** **NAME CHANGE**

I, Brian P. Kemp, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

**MAGOPA ENVIRONMENTAL, LLC**  
a Domestic Limited Liability Company

has filed articles/certificate of amendment in the Office of the Secretary of State on 03/08/2017 changing its name to

**MAGOPA, LLC**  
a Domestic Limited Liability Company

and has paid the required fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said articles/ certificate of amendment.

WITNESS my hand and official seal in the City of Atlanta  
and the State of Georgia on 03/13/2017



Brian P. Kemp  
Secretary of State

# STATE OF GEORGIA

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

## CERTIFICATE OF ORGANIZATION

I, **Brian P. Kemp**, The Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

**MAGOPA ENVIRONMENTAL, LLC**  
a Domestic Limited Liability Company

is hereby issued a CERTIFICATE OF ORGANIZATION under the laws of the State of Georgia on **August 19, 2013** by the filing of all documents in the Office of the Secretary of State and by the paying of all fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on September 18, 2013



*B. P. Kemp*

Brian P. Kemp  
Secretary of State

**FINANCE DEPARTMENT**

P.O. BOX 1205  
DALTON, GEORGIA 30722  
PHONE: 706-278-6006  
FAX: 706-277-4640



**Insurance Requirements**

**General Liability Coverage** - Before commencing any work for the City of Dalton, you must furnish a valid *General Liability Certificate of Insurance* with a minimum limit of \$1,000,000 per occurrence for bodily injury and property damage. **The City of Dalton, GA must be shown as an additional insured.**

**Workers Compensation** – Please complete the Workers' Compensation Insurance Affidavit to determine if any exemption to Workers' Compensation Insurance is applicable. However, if no exemption is met, a valid Worker's Compensation Certificate of Insurance must be submitted evidencing:

- Workers' Compensation Statutory Limits
- Employer's Liability:
  - Bodily Injury by Accident - \$100,000 each accident
  - Bodily Injury by Disease - \$500,000 policy limit
  - Bodily Injury by Disease - \$100,000 each employee

**Auto Liability Certificate of Insurance** (if autos used in the performance of work):

- Minimum \$1,000,000 limit per occurrence for bodily injury and property damage. Comprehensive form covering all owned and non-owned and hired vehicles.

**Professional Services Insurance-Errors & Omissions** - Including consultants, counselors, engineers, attorneys, accountants, etc.

- Minimum \$1,000,000 per claim

**Additional Insurance Requirements based on type of service:**

Type of Service	Additional Insurance Requirements
<b>Asbestos Abatement</b>	<b>Contractor's Pollution Liability (w/ 1 year extended reporting period)</b> <ul style="list-style-type: none"> <li>○ Each Occurrence \$3,000,000</li> </ul>
<b>Building Remodeling &amp; Construction:</b>  (This includes all aspects of building work, including, but not limited to: ducts, electrical, HVAC, painting, plumbing, roofing, etc. <u><b>*The City of Dalton must be listed as an additional insured on contracts of this type*</b></u> )	For Renovations: Property Coverage or Builders Risk Policy – equal to or greater than the existing building value  For New Construction: Property Coverage or Builders Risk Policy – equal to or greater than the total cost of construction per contract  For Mixed Renovation and New Construction: Property Coverage or Builders Risk Policy – equal to or greater than the existing building value being renovated plus the total cost of new construction per contract  <b>If hazardous substances are involved:</b> <b>Contractor's Pollution Liability w/ 1 year extended reporting period)</b> <ul style="list-style-type: none"> <li>○ Each Occurrence \$1,000,000</li> <li>○ Aggregate \$2,000,000</li> </ul>
<b>Landscaping &amp; Lawn Care:</b> (If herbicide, fungicide, pesticide or other chemical application is involved)	<b>Environmental Impairment Liability (w/ 1 year extended reporting period)</b> <ul style="list-style-type: none"> <li>○ Each Occurrence \$1,000,000</li> <li>○ Aggregate \$2,000,000</li> </ul>
<b>Pest Control</b>	<b>Environmental Impairment Liability (w/ 1 year extended reporting period)</b> <ul style="list-style-type: none"> <li>○ Each Occurrence \$1,000,000</li> <li>○ Aggregate \$2,000,000</li> </ul>
<b>Refuse Transportation &amp; Disposal</b>	<b>Contractor's Pollution Liability (w/ 1 year extended reporting period)</b> <ul style="list-style-type: none"> <li>○ Each Occurrence \$1,000,000</li> <li>○ Aggregate \$2,000,000</li> </ul>
<b>Transportation – this applies primarily to the transport of people</b>	<b>Automobile Liability – seating capacity of 15 or less</b> <ul style="list-style-type: none"> <li>○ Combined Single Limit \$3,000,000</li> </ul> <b>Automobile Liability – seating capacity greater than 15</b> <ul style="list-style-type: none"> <li>○ Combined Single Limit \$5,000,000</li> </ul>

## WORKERS' COMPENSATION INSURANCE AFFIDAVIT

Vendor/Contractor Name: MAGOPA, LLC Vendor Number: \_\_\_\_\_

Address: 1073 GRASSMEADE WAY. SNELLVILLE, GA 30078

Contact: MARTIN GOMEZ

Phone No.: 404-271-8239

Vendor/Contractor is: (check the appropriate box)

1. ☒ An employer that employs two or more persons, part-time or full-time.
2. ☐ A sole proprietor with no employees\*
3. ☐ A sole proprietor with two employees who has filed a Form WC-10 with contractor's insurance company making election to be included as an employee for workers' compensation purposes.
4. ☐ A partnership of less than three partners and no employees.
5. ☐ A partnership with less than three employees but whose combined total of employees and partners includes three or more persons and the partners have filed a Form WC-10 with contractor's insurance company making election to be included as an employee for workers' compensation purposes.
6. ☐ A corporation or limited liability company with less than three employees but whose combined total of employees, officers and/or members includes three or more persons.

If box Nos. 1, 3, 5, or 6 was checked above, please fill out the following insurance information:

Workers Compensation Insurance Company

Name: LM/Liberty Mutual

Workers Compensation Insurance Policy No. WC5-33S-B22X55-012

Expiration Date 10/11/2023

If self-insured, SBWC ID# \_\_\_\_\_

By executing this affidavit, the undersigned verifies that the information supplied above is true and correct.

Sworn to this 3rd day of MAY 20 23.

Subscribed and sworn before me on this 3rd day of MAY

Signature: Martin Gomez

Name: MARTIN GOMEZ

Title: PRESIDENT / OWNER

Notary Public

\* "Employee" shall include every person, including minors, working full-time or part-time under a contract of hire, written or implied.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/11/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	<b>Talbert Insurance Services</b> 3473 Satellite Blvd, Suite 114 Duluth, GA 30096	CONTACT NAME: Samantha Kintz PHONE (A/C, No, Ext): (770)497-9400 E-MAIL: skintz@talbertservices.com ADDRESS:	FAX (A/C, No): (770)813-8535
INSURED	<b>MAGOPA LLC</b> 4524 Otha Way NW Lilburn, GA 30047-3538	INSURER(S) AFFORDING COVERAGE	NAIC #
		INSURER A: Evanston Insurance Company	
		INSURER B: Auto Owners Insurance	18988
		INSURER C: LM/Liberty Mutual	
		INSURER D: Homeland Insurance Company of New York	
		INSURER E:	
		INSURER F:	

COVERAGES CERTIFICATE NUMBER: 00009104-3797554 REVISION NUMBER: 261

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y		TGCXC-N	10/01/2022	10/01/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 50,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> HIRED PHYSICAL <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY <input checked="" type="checkbox"/> umbi-pd 250k			5119356800	05/03/2023	05/03/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ comp collision \$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	N/A	WC5-33S-B22X55-012	10/11/2022	10/11/2023	<input checked="" type="checkbox"/> PER STATUTE E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	POLLUTION LIABILITY			EV20220399-02 POLLUTION	05/08/2023	05/08/2024	5,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

The City of Dalton, GA is an Additional Insured in regards to General Liability Coverage

Workers Comp: MARTIN GOMEZ  
States Covered:  
GA,AL,NC,,TN,SC

## CERTIFICATE HOLDER

CITY OF DALTON  
PO BOX 1205  
DALTON GA 30722

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

(SJK)

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STATE OF GEORGIA

WHITFIELD COUNTY

CITY OF DALTON

Information Security Affidavit

I understand that as a vendor with the City of Dalton, there is a possibility that the employee of MAGوبا, LLC (vendor) may be exposed to confidential information including, but not limited to social security numbers, credit card numbers, checking account information, and/or personal health information of customers or employees.

In consideration of the active vendor status with the City of Dalton, and as an integral part of the terms and conditions of the continued active status, I hereby pledge as a representative of my company to safeguard the integrity of this information and agree that MAGوبا, LLC (vendor) will not at any time disclose any information to any person(s) within or outside the City of Dalton except as may be required in the performance of the duties my company has been hired for.

MAGوبا, LLC (vendor) will not reproduce any confidential information or take any confidential information outside the office without authorization from the City.

MAGوبا, LLC (vendor) also agrees to notify the City if any of its employees witness another individual divulging such confidential information for any purpose other than the performance of his/her duties.

Any vendor in violation of any part of this policy will be subject to vendor status termination, up to and including any necessary legal action.

MAGوبا, LLC

Vendor Name (Please Print)

5/3/2023

Date

*M. M. M.*  
Vendor Signature

FOR CITY USE ONLY

Vendor #: \_\_\_\_\_

Setup Date: \_\_\_\_\_

Initials: \_\_\_\_\_

## City of Dalton ACH Payment Approval Form

Dear City of Dalton Vendor or Contractor:

The City of Dalton has a program that allows vendors the option of receiving payments for goods and/or services by electronic funds transfers (EFT) through the Automated Clearing House Network (ACH) in the NACHA CCD Format. If the City of Dalton sets you up for EFT processing, payments will be deposited directly to your account, as opposed to mailing you a check. If you give us your e-mail address, a payment notice will be sent out each time an ACH transfer is executed. We anticipate that this alternate method payment will introduce collection/payment efficiencies for both your institution and ours.

This form is a request for you to authorize us to pay by EFT. By completing this form and providing an authorized signature, you (1) authorize the City of Dalton to make payments for goods and/or services by EFT, (2) certify that your company has selected the designated depository financial institution, and (3) direct that all such electronic funds transfers be made as provided below. If you have questions about this form, please contact the Finance Department at 706-278-6006.

Depository Institution Name: <b>BANK OF AMERICA</b>			
Depository Institution Address: <b>10950 MEDLOCK BRIDGE RD. DULUTH, GA 30097</b>			
Routing Number: <b>061000052</b>	Account Number: <b>334044015089</b>	Checking <input checked="" type="checkbox"/>	Savings <input type="checkbox"/>
E-mail address for Payment Notification: <b>magoba15@yahoo.com</b>			

The below named company acknowledges and agrees that the terms and conditions of all agreements with the City of Dalton concerning the method of payment for goods and/or services shall be amended to allow for ACH payments as described above.

The below named company will give thirty (30) days written notice to the City of Dalton of any changes in depository financial institution or other payment instructions. When properly executed, this Authorization will become effective fifteen (15) days after its receipt by the City of Dalton.

Company Name: <b>MAGOPA, LLC</b>	Contact Person Name: <b>MARTIN GOMEZ</b>
Contact Person Phone Number: <b>404-271-8239</b>	Contact Person E-mail Address: <b>magoba15@yahoo.com</b>

X *[Signature]*  
Authorized Signature and Title

5/3/2023  
Date



Please return completed form to Attn: Accounts Payable at the address below or by fax to (706) 277-4640.

City of Dalton  
Attn: Accounts Payable  
P.O. Box 1205  
Dalton, GA 30722-1205

## **BUSINESS LICENSE AND MBE/DBE CERTIFICATIONS**

**“ASBESTOS ABATEMENT PROJECT - JOHN DAVIS RECREATION CENTER”  
THE CITY OF DALTON, GEORGIA**



# GEORGIA

DEPARTMENT OF NATURAL RESOURCES

## ENVIRONMENTAL PROTECTION DIVISION

### License To Conduct Regulated Asbestos Activities in Georgia Lead-Based Paint and Asbestos Program Certification, Accreditation, & Licensing Unit

Richard E. Dunn, Director  
4244 International Parkway, Suite 104  
Atlanta, Georgia 30354

#### MAGOB, LLC

Having satisfied the requirements of The Georgia Asbestos Safety Act, O.C.G.A. 12-12-1, et seq and the Rules for Asbestos Removal and Encapsulation, Chapter 391-3-14, Is Hereby Licensed as an **ASBESTOS CONTRACTOR FIRM**

To Remove and Encapsulate Friable Asbestos Containing Materials

Within the State of Georgia. This Certificate May Be Subject To Revocation, Suspension, Modification Or Amendment By The Director For Cause Including Evidence Of Noncompliance; Or For Any Misrepresentation Made In The Application, Supporting Data Entered Therein Or Attached Thereto; Or Any Subsequent Submittals Or Supporting Data; Or Any Alterations Affecting The Ability To Perform Duties Properly.

Company Owner/President

Martin Gomez

Company Mailing Address

3099 Breckinridge, Ste 208 B

Duluth, GA 30096

Phone: 6784784532

Fax: 678-6233435

Company License Number

ASBRN-329835

Principal Agent's Name

Martin Gomez

Agent's Date of Birth

08/11/1969

Agent's Height

5'5"

Agent's Weight

182

*The Company License and the Agent's Authorization are interconnected, and the issue and expiration dates run concurrently. The issue and expiration dates shown below apply to both the Company License and the Agent's Authorization. If the agent ceases his authorization to serve, a replacement agent must be submitted immediately for approval consideration.*

ISSUE DATE

6/7/2022

EXPIRATION DATE

6/7/2025

Jennifer Vogel, Program Manager  
Lead-Based Paint and Asbestos Program  
(404) 363-7026

ISSUED BY

Shelli Lockwood

GEORGIA DEPARTMENT OF ADMINISTRATIVE SERVICES  
CUSTOMER FOCUSED, PERFORMANCE DRIVEN

# Minority Business Enterprise

Certification for

MAGOBBA, LLC



*The company is hereby certified as: Minority Business Enterprise and Minority Subcontractor*

Certification Date: 07/29/19  
(Must file annual Affidavit with GDOT)  
Certification Number: 190826-000371

*David Eason*

Deputy Commissioner, State Purchasing Division



Russell R. McIlhenny, P.E., Commissioner  
One Georgia Center  
600 West Peachtree Street, NW  
Atlanta, GA 30308  
(404) 631-1000 Main Office

July 9, 2020

Amended

Martin Gomez, CEO  
MAGIBA, LLC  
1119 Fort Marcy Park  
Lawrenceville, GA 30044

**ANNIVERSARY DATE: Annually on July 29th**

Martin Gomez:

Congratulations! The Georgia Department of Transportation has reviewed your Georgia Uniform Certification Disadvantaged Business Enterprise (DBE) application. Our evaluation of the information submitted with your request for certification indicates that your firm has met the criteria outlined in Federal Regulations 49 CFR, Part 23 and 26.

DBE Certification will be continuous; however, it is contingent upon the firm maintaining its eligibility annually through this office. You will receive an Annual Affidavit for Continuing Eligibility (AACE) and request for Personal Financial Statement (PFS) approximately thirty days prior to your firm's certification anniversary date. **The Annual Affidavit for Continuing Eligibility document must be completed, signed and returned to our office before your anniversary date in order to continue your firm's eligibility as a DBE.**

Your firm will be listed in Georgia's UCP DBE Directory which can be accessed through the Department's website: [www.dot.ga.gov](http://www.dot.ga.gov). Prime contractors and consultants can verify your firm's DBE certification status and identify the work area(s) for which the firm is DBE eligible through this Directory.

**Your Vendor ID Code is: 16339**

Your firm has been certified to provide the following services as outlined in the North American Industry Classification System (NAICS):


838910 Site Preparation Contractors  
852910 Remediation Services

**It is your obligation to notify GUCP of any changes in ownership and/or control of your company.** If at any time during the year there is a change in ownership and/or control of your firm, you are required to notify this office of such change in writing by sworn affidavit and with supporting documents within thirty (30) days. Changes also include but are not limited to officers, directors, management, key personnel, scope of work performed, daily operations, ongoing business relationships with other firms or individuals, or the physical location of your firm.

Failure to do so will be deemed a failure, on your part, to cooperate and will result in immediate actions to remove DBE certification in accordance with **49 CFR Part 26, Section 26.83 (j)** of the Federal DOT Regulation.

Questions and concerns should be directed to this office by mail or telephone. Our telephone number is (404) 631-1972. Our fax number is (404) 631-1943.

Sincerely,

  
\_\_\_\_\_  
Kimberly A. King, EEO Director

KAK/CNB

Business Name	Vendor Number	Contact	Fax	Phone	Address 1	Address 2	City	State	Zip Code	Email	Certification Type	Certification Entity	NAICS
MAGوبا, LLC	00000000016339	Mr. MARTIN GOMEZ	(678)623-3435	(678)623-3435	4645 VALAIS CT.	UNIT 99	JOHNS CREEK	GA	30022	margohe15@yahoo.com	Disadvantaged Business Enterprise (DBE)	GDOT	23891, 56291

Business Name is equal to **MAGوبا, LLC**