

SCHEDULE 00 45 13 – B
EXPERIENCE STATEMENT(S)

Water Storage Tank Designer/Manufacturer	
ITEM:	DESCRIPTION / ITEM MET:
Name of Company:	Please see attached Qualifications Statement & Reference documents.
Water Storage Tank Designer/Manufacturer: Minimum of (5) water storage tanks designed and construction of a similar size and capacity.	
Project Reference	
Project Reference	
Project Reference	
Project Reference	
Project Reference	
Design Engineer / Project Manager: The above stated personnel must have a minimum of (5) – years of continuous experience involving work of similar size, capacity, and configuration.	
Design Engineer, PE (Name/Years' Experience)	
Project Manager (Name/Years' Experience)	
Refer to SECTION 33 16 19 ELEVATED SPHEROID STEEL WATER STORAGE TANKS for additional qualification requirements.	

QUALIFICATIONS STATEMENT

THE INFORMATION SUPPLIED IN THIS DOCUMENT IS CONFIDENTIAL TO THE EXTENT
PERMITTED BY LAWS AND REGULATIONS

1. SUBMITTED BY:

Official Name of Firm: Maquire Iron, Inc.

Address: P.O. Box 1446

Sioux Falls, South Dakota 57101

P: 605-334-9749 F: 605-334-9752

2. SUBMITTED TO:

3. SUBMITTED FOR:

Owner: _____

Project Name: _____

TYPE OF WORK: Water Storage Tank Construction and
Rehabilitation

4. CONTRACTOR'S CONTACT INFORMATION

Contact Person:	<u>Kal Tucker</u>	<u>and/or</u>	<u>Chad Beckstrom</u>
Title:	<u>Director of Estimating</u>		<u>Estimating Assistant</u>
Phone:	<u>406-579-8821 - Cell</u>		<u>605-951-6378 - Cell</u>
Email:	<u>tuckerk@maguirewater.com</u>		<u>beckstromc@maguirewater.com</u>

5. **AFFILIATED COMPANIES:**

Name: N/A

Address: _____

6. **TYPE OF ORGANIZATION:**

☐ **SOLE PROPRIETORSHIP**

Name of Owner: N/A

Doing Business As: _____

Date of Organization: _____

☐ **PARTNERSHIP**

Date of Organization: N/A

Type of Partnership: _____

Name of General Partner(s): _____

☒ **CORPORATION**

State of Organization: South Dakota

Date of Organization: 01/28/1966

Executive Officers:

- President: Gene Jones, Jr.

- Vice President(s): Troy Werdel

Dan Englesman

- Treasurer: Diep Doan

- Secretary: Scott Jones

EICDC' C-451, Qualifications Statement

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☐ LIMITED LIABILITY COMPANY

State of Organization: N/A

Date of Organization: _____

Members: _____

☐ JOINT VENTURE

Sate of Organization: N/A

Date of Organization: _____

Form of Organization: _____

Joint Venture Managing Partner

- Name: _____

- Address: _____

Joint Venture Managing Partner

- Name: _____

- Address: _____

Joint Venture Managing Partner

- Name: _____

- Address: _____

7. LICENSING

Jurisdiction: Maguire is licensed in many states accross the
Type of License: US. Will provide as necessary
License Number: _____
Jurisdiction: _____
Type of License: _____
License Number: _____

8. CERTIFICATIONS

CERTIFIED BY:

Disadvantage Business Enterprise: N/A
Minority Business Enterprise: _____
Woman Owned Enterprise: _____
Small Business Enterprise: _____
Other (_____): _____

9. BONDING INFORMATION

Bonding Company: The Cininnati Insurance Company
Address: P.O. Box 145496
Cincinnati, OH 45250-5496
Bonding Agent: Kraus-Anderson Insurance Agency, Inc.
Address: 420 Gateway Blvd., Burnsville MN 55337
952-707-8200
Contact Name: Mary Jo Dingwall
Phone: 952-426-6281
Aggregate Bonding Capacity: \$85,000,000.00
Available Bonding Capacity as of date of this submittal: \$85,000,000.00

10. FINANCIAL INFORMATION

Financial Institution: First International Bank & Trust
Address: 601 S. Minnesota Ave
Sioux Falls, SD 57104
Account Manager: Jason Appel
Phone: 605-607-5410

INCLUDE AS AN ATTACHMENT AN AUDITED BALANCE SHEET FOR EACH OF THE
LAST 3 YEARS

11. CONSTRUCTION EXPERIENCE:

Current Experience:

List on **Schedule A** all uncompleted projects currently under contract (If Joint Venture list each participant's projects separately).

Previous Experience:

List on **Schedule B** all projects completed within the last 5 Years (If Joint Venture list each participant's projects separately).

Has firm listed in Section 1 ever failed to complete a construction contract awarded to it?

☐ YES ☒ NO

If YES, attach as an Attachment details including Project Owner's contact information.

Has any Corporate Officer, Partner, Joint Venture participant or Proprietor ever failed to complete a construction contract awarded to them in their name or when acting as a principal of another entity?

☐ YES ☒ NO

If YES, attach as an Attachment details including Project Owner's contact information.

Are there any judgments, claims, disputes or litigation pending or outstanding involving the firm listed in Section 1 or any of its officers (or any of its partners if a partnership or any of the individual entities if a joint venture)?

☐ YES ☒ NO

If YES, attach as an Attachment details including Project Owner's contact information.

12. SAFETY PROGRAM:

Name of Contractor's Safety Officer: Mark Schlosseer

Include the following as attachments:

Provide as an Attachment Contractor's (and Contractor's proposed Subcontractors and Suppliers furnishing or performing Work having a value in excess of 10 percent of the total amount of the Bid) OSHA No. 500- Log & Summary of Occupational Injuries & Illnesses for the past 5 years.

Provide as an Attachment Contractor's (and Contractor's proposed Subcontractors and Suppliers furnishing or performing Work having a value in excess of 10 percent of the total amount of the Bid) list of all OSHA Citations & Notifications of Penalty (monetary or other) received within the last 5 years (indicate disposition as applicable) - IF NONE SO STATE.

None

Provide as an Attachment Contractor's (and Contractor's proposed Subcontractors and Suppliers furnishing or performing Work having a value in excess of 10 percent of the total amount of the Bid) list of all safety citations or violations under any state all received within the last 5 years (Indicate disposition as applicable) - IF NONE SO STATE.

None

Provide the following for the firm listed in Section V (and for each proposed Subcontractor furnishing or performing Work having a value in excess of 10 percent of the total amount of the Bid) the following (attach additional sheets as necessary):

Workers' compensation Experience Modification Rate (EMR) for the last 5 years:

YEAR	<u>2024</u>	EMR	<u>.92</u>
YEAR	<u>2023</u>	EMR	<u>1.09</u>
YEAR	<u>2022</u>	EMR	<u>.1.28</u>
YEAR	<u>2021</u>	EMR	<u>1.25</u>
YEAR	<u>2020</u>	EMR	<u>1.18</u>

Total Recordable Frequency Rate (TRFR) for the last 5 years:

YEAR	<u>2024</u>	TRFR	<u>2.89</u>
YEAR	<u>2023</u>	TRFR	<u>3.04</u>
YEAR	<u>2022</u>	TRFR	<u>3.0</u>
YEAR	<u>2021</u>	TRFR	<u>8.2</u>
YEAR	<u>2020</u>	TRFR	<u>3.7</u>

Total number of man-hours worked for the last 5 Years:

YEAR	<u>2024</u>	TOTAL NUMBER OF MAN-HOURS	<u>432,433</u>
YEAR	<u>2023</u>	TOTAL NUMBER OF MAN-HOURS	<u>394,390</u>
YEAR	<u>2022</u>	TOTAL NUMBER OF MAN-HOURS	<u>287,919</u>
YEAR	<u>2021</u>	TOTAL NUMBER OF MAN-HOURS	<u>171,218</u>
YEAR	<u>2020</u>	TOTAL NUMBER OF MAN-HOURS	<u>163,381</u>

Provide Contractor's (and Contractor's proposed Subcontractors and Suppliers furnishing or performing Work having a value in excess of 10 percent of the total amount of the Bid) Days Away From Work, Days of Restricted Work Activity or Job Transfer (DART) incidence rate for the particular industry or type of Work to be performed by Contractor and each of Contractor's proposed Subcontractors and Suppliers) for the last 5 years:

YEAR	<u>2024</u>	DART	<u>.92</u>
YEAR	<u>2023</u>	DART	<u>1.01</u>
YEAR	<u>2022</u>	DART	<u>0.69</u>
YEAR	<u>2021</u>	DART	<u>2.3</u>
YEAR	<u>2020</u>	DART	<u>1.2</u>

13. EQUIPMENT:

MAJOR EQUIPMENT:

List on Schedule C all pieces of major equipment available for use on Owner's Project.

I HEREBY CERTIFY THAT THE INFORMATION SUBMITTED HERewith, INCLUDING ANY ATTACHMENTS, IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

NAME OF ORGANIZATION: Maguire Iron, Inc.

BY: Gene Jones, Jr.

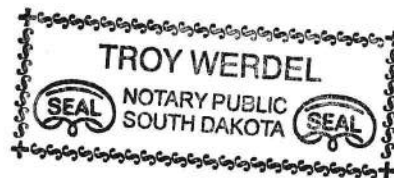
TITLE: CEO

DATED: 6-24-25

NOTARY ATTEST: Troy Werdel

SUBSCRIBED AND SWORN TO BEFORE ME

THIS 24 DAY OF June, 2025



NOTARY PUBLIC - STATE OF SOUTH DAKOTA

MY COMMISSION EXPIRES: 8-29-2025

REQUIRED ATTACHMENTS

1. Schedule A (Current Experience).
2. Schedule B (Previous Experience).
3. Schedule C (Major Equipment).
4. Audited balance sheet for each of the last 3 years for firm named in Section 1.
5. Evidence of authority for individuals listed in Section 7 to bind organization to an agreement.
6. Resumes of officers and key individuals (including Safety Officer) of firm named in Section 1.
7. Required safety program submittals listed in Section 13.
8. Additional items as pertinent.

Schedule A—Current Projects

Name of Organization		Maguire Iron, Inc.		Project Name		Phase II Elevated Storage Tank	
Project Owner		Village of Downs, IL					
General Description of Project				Construction of a 150,000 gallon Pedosphere Tank			
Project Cost		\$1,342,000.00		Date Project		2024	
Key Project Personnel		Project Manager		Project Superintendent		Safety Manager	
Name		Chris TeKrony		Taylor Golden		Mark Schlosser	
Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference)							
		Name		Title/Position		Organization	
Owner		Mike James		Mayor		Village of Downs	
Designer		Matt Tosh		P.E.		Brown and Roberts, Inc.	
Construction Manager		Matt Tosh				618-252-8111	
						mayor@villageofdowns.org	
						mtosh@brownandroberts.com	
Project Owner		Crooks, SD - City of		Project Name		Water Storage Improvements	
General Description of Project		Construction of a 300,000-gallon water tower, including tank and accessories, foundation, underground piping to 10' beyond tank foundation, process piping, electrical work, controls, and miscellaneous appurtenant work.					
Project Cost		\$1,895,000.00		Date Project		2024	
Key Project Personnel		Project Manager		Project Superintendent		Safety Manager	
Name		Corey Sanders		Jake Junker		Mark Schlosser	
Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference)							
		Name		Title/Position		Organization	
Owner		Tobias Schantz		City Administrator		City of Crooks	
Designer		Jacob Morris		Professional Engineer		DGR	
Construction Manager		Jacob Morris				605-759-5472	
						tschantz@crookssd.org	
						jacob.morris@dgr.com	
Project Owner		Cut and Shoot, TX - City of		Project Name		THE CITY OF CUT AND SHOOT WATER PLANT NO. 3	
General Description of Project		The work consists of all necessary items to expand an existing water plant for the construction of a fully operational 250,000 Gallon elevated storage tank.		250,000 GALLON ELEVATED STORAGE TANK ADDITION			
Project Cost		\$1,662,801.00		Date Project		2024	
Key Project Personnel		Project Manager		Project Superintendent		Safety Manager	
Name		John Overwise		Erica Bowers		Mark Schlosser	
Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference)							
		Name		Title/Position		Organization	
Owner		Lang Thompson		Water System Expert		City of Cut and Shoot	
Designer		Jonathan White		Vice President		L2 Engineering	
Construction Manager		Jonathan White				936-647-0420	
						tractorman@consolidated.net	
						jwhite@i2engineering.com	

Schedule B—Previous Experience with Similar Projects

Name of Organization	Maguire Iron, Inc.			
Project Owner	City of Cheboygan, Michigan	Dept of Public Works	Project Name	Water System Improvements/Division A - Elevated Storage Tank
General Description of Project	Design, fabrication, and construction of a single pedestal welded steel elevated 400,000-gallon water storage tank, including the design and construction of the foundation and accessories. Additional work also includes site work, water main, and associated electrical and instrumentation			
Project Cost	\$1,816,300.00	Project Superintendent	Date Project	2023
Key Project Personnel	Project Manager	Taylor Golden	Safety Manager	Quality Control Manager
Name	Chris TeKrony		Mark Schlosser	Jason Bolkema
Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference)				
	Name	Title/Position	Organization	Telephone
Owner	Jason Karmol	City	City of Cheboygan	231-627-1582
Designer	Randy Wilcox	P.E.	Hubbell, Roth & Clark, Inc.	616-292-2666
Construction Manager				randyw@hrcengr.com
Project Owner				
General Description of Project	Village of Lisbon, OH	Project Name	Lisbon Water Tank and North End Pressure Improvements - Part 1	
Project Cost	\$2,725,000.00	Date Project	2023	
Key Project Personnel	Project Manager	Project Superintendent	Safety Manager	Quality Control Manager
Name	Chris TeKrony	Tyler Wheeler	Mark Schlosser	Jason Bolkema
Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference)				
	Name	Title/Position	Organization	Telephone
Owner	Peter Wilson	Mayor	Village of Lisbon	330-424-5503
Designer	Jon Vollnogle	P.E.	Howells & Baird, Inc.	330-332-4834
Construction Manager				jon@howbaird.com
Project Owner				
General Description of Project	Huguley Water, Sewer, & Fire Protection Authority	Project Name	Cusseta Industrial Park 250,000 Gallon Elevated Water Tank	
Project Cost	\$1,711,500.00	Date Project	2023-2024	
Key Project Personnel	Project Manager	Project Superintendent	Safety Manager	Quality Control Manager
Name	Cory Timmerman	Greg Bowers	Mark Schlosser	Jason Bolkema
Reference Contact Information (listing names indicates approval to contacting the names individuals as a reference)				
	Name	Title/Position	Organization	Telephone
Owner	Scott Windsor	General Manager	HWS&FPA	334-576-2126
Designer	Jeremy Lewis	P.E.	GMC	334-271-3200
Construction Manager	Jae Gray	RPR	GMC	334-271-3200

Schedule C—Key Individuals

Project Manager			
Name of individual		Cory Timmerman	
Years of experience as project manager		7 years	
Years of experience with this organization		10 years	
Number of similar projects as project manager		200	
Number of similar projects in other positions		50	
Current Project Assignments			
Name of assignment		Percent of time used for this project	Estimated project completion date
Agency Village, SD		15	2025
Oneida, WI		10	2026
Mentone, TX		10	2026
Reference Contact Information (listing names indicates approval to contact named individuals as a reference)			
Name	Ryan Glessner	Name	Don Bigsby
Title/Position	P.E.	Title/Position	P.E.
Organization	Professional Engineering Consultants	Organization	Chamlin & Associates, Inc.
Telephone	318-262-2691	Telephone	815-223-3344
Email		Email	
Project	Neodesha, KS	Project	Depue, IL
Candidate's role on project	Project Manager	Candidate's role on project	Project Manager
Project Superintendent			
Name of individual		Greg Bowers	
Years of experience as project superintendent		25	
Years of experience with this organization		10	
Number of similar projects as project superintendent		70	
Number of similar projects in other positions		20	
Current Project Assignments			
Name of assignment		Percent of time used for this project	Estimated project completion date
Port Bienville, MS		100	2025
Cusetta, AL		0	Completed
Hammond, LA			
Reference Contact Information (listing names indicates approval to contact named individuals as a reference)			
Name	Ron Legner	Name	Mark Hill
Title/Position	P.E.	Title/Position	P.E.
Organization	Chastain & Associates, LLC	Organization	Freeman-Millican, Inc.
Telephone	217-422-8544	Telephone	214-503-0555
Email		Email	
Project	Oreana, IL	Project	Alvord, TX
Candidate's role on project	Superintendent	Candidate's role on project	Superintendent

Safety Manager			
Name of individual		Dave Humble	
Years of experience as project manager		30	
Years of experience with this organization		15	
Number of similar projects as project manager		100	
Number of similar projects in other positions		100	
Current Project Assignments		10	
Name of assignment		Percent of time used for this project	Estimated project completion date
Pecos, TX		10	2025
Denton, TX		10	2025
Indian Hills, TX		15	2025
Reference Contact Information (listing names indicates approval to contact named individuals as a reference)			
Name	Dalton Warren	Name	Kent Riker, PE
Title/Position	Project Engineer	Title/Position	Owner, President, Founder
Organization	Dunham Engineering	Organization	Provenance Engineering
Telephone	979-690-6555	Telephone	817-785-7172
Email	dalton.warren@hmttank.com	Email	kriker@provenanceengineering.com
Project	Port Bolivar, TX	Project	Stephenville, TX
Candidate's role on project	Safety Manager	Candidate's role on project	Safety Manager
Quality Control Manager			
Name of individual		Shad Erickson	
Years of experience as project superintendent		7	
Years of experience with this organization		25	
Number of similar projects as project superintendent		100	
Number of similar projects in other positions		200	
Current Project Assignments			
Name of assignment		Percent of time used for this project	Estimated project completion date
Rolling Forks, MS		15	2025
Kiln, MS		15	2025
Perkinston, MS		15	2025
Reference Contact Information (listing names indicates approval to contact named individuals as a reference)			
Name	Kevin Newman	Name	Aaron Miller
Title/Position	PE	Title/Position	PE
Organization	HDR Engineering	Organization	DGR Engineering
Telephone	605-977-7740	Telephone	712-472-2531
Email		Email	
Project	Tea, SD	Project	Langford, SD
Candidate's role on project	Superindent/QC Manager	Candidate's role on project	Superintendent/QC Manager

SCHEDULE C - LIST OF MAJOR EQUIPMENT AVAILABLE

[illegible]

OSHA's Form 300 (Rev. 01/2004)

Log of Work-Related Injuries and Illnesses

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.



Year 2020

U.S. Department of Labor
Occupational Safety and Health Administration

You must record information about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an injury and illness incident report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

Establishment name

Maguire Iron, Inc.

Form approved OMB no. 1218-0176

Identify the person			Describe the case			Classify the case			Enter the number of days the injured or ill worker was:		Check the "injury" column or choose one type of illness:						
(A) Case No.	(B) Employee's Name	(C) Job Title (e.g., Welder)	(D) Date of injury or onset of illness (mo./day)	(E) Where the event occurred (e.g., Loading dock north end)	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g. Second degree burns on right forearm from acetylene torch)	(G) Days away from work	(H) Job transfer or restriction	(I) Job transfer or restriction	(J) Other recordable cases	(K) Away From Work (days)	(L) On job transfer or restriction (days)	(1) Injury	(2) Skin Disorder	(3) Respiratory Condition	(4) Poisoning	(5) Hearing Loss	(6) All other illnesses
Iron 1		Painter	4/27/2020	Perry, OK	Got stuck crawling through small opening into water tower, resulting in Muscle Strain in right shoulder blade.				X			X					
Iron 2		Painter	5/27/2020	Brimfield, IL	Fell from water tower, resulting in multiple injuries	X				180		X					
Iron 3		Painter	8/31/2020	Shosone, ID	Slipped on catwalk on water tower, resulting in chipped tooth on antenna support.				X			X					
Page totals						0	1	0	2	180	0	3	0	0	0	0	0

Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.

Be sure to transfer these totals to the Summary page (Form 300A) before you post it.

Log of Work-Related Injuries and Illnesses

U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

Maquire Iron, Inc.

City
Sioux Falls

Classify the case

⑤

01/01/2013 12:00:00

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Page totals

Injury
Skin Disorder
Respiratory Condition
Poisoning
Hearing Loss
All other illnesses

OSHA's Form 300A (Rev. 01/2004)
Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0."

Employees former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	1	3	0
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work

25 137
(K) (L)

Injury and Illness Types

Total number of...

(1) Injury	(4) Poisoning	(5) Hearing Loss	(6) All Other Illnesses
4	0	0	0
(2) Skin Disorder			
(3) Respiratory Condition	0		0

Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment Information

Your establishment name Maguire Tank, Inc.

Street 1610 N Minnesota Avenue

City Sioux Falls

State South Dakota

Zip 57104

Industry description (e.g., Manufacture of motor truck trailers)
Manufacturing and construction of water towers

Standard Industrial Classification (SIC), if known (e.g., SIC 3715)

3 4 4 3

OR North American Industrial Classification (NAICS), if known (e.g., 336212)

3 3 2 4 2 0

Employment Information

Annual average number of employees

95

Total hours worked by all employees last year

166,100

Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Company executive

Phone

1/13/2023
Date

OSHA's Form 300A (Rev. 01/2004)
Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0."

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Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of cases other recordable
0	1	0	3
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work

48 (K) 197 (L)

Injury and Illness Types

Total number of...

(1) Injury	(2) Skin Disorder	(3) Respiratory Condition	(4) Poisoning	(5) Hearing Loss	(6) All Other illnesses
6	0	0	0	0	0

Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment Information

Your establishment name Maguire Tank, Inc.

Street 1810 N Minnesota Avenue

City Sioux Falls

State

South Dakota

Zip 57104

Industry description (e.g., Manufacture of motor truck trailers)
Manufacturing and construction of water towers

Standard Industrial Classification (SIC), if known (e.g., SIC 3715)

OR North American Industrial Classification (NAICS), if known (e.g., 336212)

Employment Information

Annual average number of employees

113

Total hours worked by all employees last year

179,974

Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

CFO

Title

1/5/24

Phone

OSHA's Form 300A (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

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Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	1	2	1
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
3	47
(K)	(L)

Injury and Illness Types

Total number of...	(1) Injury	(2) Skin Disorder	(3) Respiratory Condition	(4) Poisoning	(5) Hearing Loss	(6) All Other Illnesses
(M)	4	0	0	0	0	0

Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment Information

Your establishment name Mayguro Tank, Inc.

Street 1610 N Minnesota Avenue

City Sioux Falls State South Dakota Zip 57104

Industry description (e.g., Manufacture of motor truck trailers)
Manufacturing and construction of water towers.

Standard Industrial Classification (SIC), if known (e.g., SIC 3715)
3 4 4 3

OR North American Industrial Classification (NAICS), if known (e.g., 336212)
3 3 2 4 2 0

Employment Information

Annual average number of employees 131
Total hours worked by all employees last year 250,200

Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

[Signature]
Company/Executive

605-334-9749 Phone
CEO Title
2/3/25 Date



**A
WORKPLACE ACCIDENT
AND
INJURY REDUCTION
(AWAIR)
PROGRAM**

Maguire Iron Inc.

Table of Contents

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Appendix:

- A. Health & Safety Policy Statement (see: Employee Manual)
- B. Safety Meetings (see: Employee Manual)
- C. Safety Meeting Toolbox - (form)
- D. Employee Safety Orientation (see: PowerPoint Presentation or Outline).
- E. Weekly Safety Audit - (Job-site & Plant Safety Checklist - form)
- F. Hazard Report Form (see: Safety Hazard - Identification & Reporting - process)
- G. Performance Evaluation Review - (form)
- H. Occupational Accident/Incident report form
- I. OSHA 300A Summary of Injury/Illnesses (form completed by Safety Director)
- J. How "We" Solve Problems (grievance process)
- K. Corrective Discipline Form (see: Counseling Memo)

Introduction

Maguire Iron Inc. has established an AWAIR program to comply with the Minnesota Occupational Safety and Health Administration (MN/OSHA)'s "A Workplace Accident and Injury Reduction" (AWAIR) standard.

Compliance is required in reference to our "Standard Industrial Classification" (SIC) code: 1629 (Classification: Heavy Construction) & the "National American Industrial Classification Standard" (NAICS) # 23493 (Classification: Industrial Nonbuilding Structure Construction) and in accordance to accident or injury rates specified in the standard - which pertains to Construction.

Maguire's Manufacturing Plant is classified as SIC # 3442 (Classification: Heavy Gauge Tanks) NAICS #33242 (Classification: Metal Tank (Heavy Gauge) Manufacturing) and is also subject to compliance with this MN/OSHA standard.

This program is shall be modified to adapt to specific conditions and policies as needed. In addition, Maguire Iron Inc. is responsible for the implementation, enforcement and updating of the AWAIR program. The program is to be reviewed and updated annually.

A Workplace Accident and Injury Reduction (AWAIR) Overview

On January 1, 1991, Minnesota adopted an amendment to Minnesota OSHA Statutes that requires employers to develop and use a formal workplace accident and injury reduction program. Employers engaged in certain specified SIC (Standard Industrial Classification) codes are required by legislation to develop and implement a written safety and health program with specific actions designed to reduce the incidence of workplace accidents and injuries.

"WORKPLACE ACCIDENT AND INJURY REDUCTION" - (AWAIR) ACT

Minnesota Statute 182.653

Sub. d. 8 WORK PLACE PROGRAMS. An employer covered by this section must establish a written workplace accident and injury reduction program that promotes safe and healthful working conditions and is based on clearly stated goals and objectives for meeting those goals. The program must describe the following:

- 1) How managers, supervisors, and employees are responsible for implementing the program and how continued participation of management will be established, measured, and maintained;
- 2) The methods used to identify, analyze, and control new or existing hazards, conditions, and operations;
- 3) How the plan will be communicated to all affected employees so that they are informed of work-related hazards, conditions, and operations;
- 4) How workplace accidents will be investigated and corrective action implemented; and
- 5) How safe work practices and rules will be enforced.

An employer must conduct and document a review of the workplace accident and injury reduction program at least annually and document how procedures set forth in the program are met.

HEALTH AND SAFETY RESPONSIBILITIES

President (including Vice Presidents for Tank and Iron) – is responsible for ensuring:

1. An effective policy for health and safety is prepared and maintained.
2. Company safety policies are reviewed at least once every two years (or sooner should a policy or program be revised).
3. Company policy is effectively communicated.
4. Ensuring that responsibilities for managing health and safety are established and that these responsibilities are effectively communicated.
5. Ensuring adequate resources are provided, so that the policy can be effectively carried out.
6. Ensuring that a safety program is established and adhered to.
7. Ensuring the health, safety and welfare of all employees, and all those others who are affected by the operations of the company.

Director of Human Resources – is responsible for:

1. Having an effective health and safety policy is prepared and presented to the President for approval.
2. Ensuring policy is reviewed every two years and recommendations are made to the President for approval.
3. Communicating effectively throughout the workforce.
4. Ensuring that Safety Director, Production Manager and Job-site Foremen know and accept their responsibilities for the implementation and maintenance of the health and safety policy, and are trained to play their part.
5. Ensuring that a safety program is developed and submitted to the President for approval.
6. Ensuring that the safety program is monitored and that reports of progress in achieving the program are presented to the President on a consistent basis.
7. Ensuring the adequacy of safety training for employees.
8. Ensuring that reports are generated to show losses incurred from workplace accidents, illness and other occupational related sickness.

Safety Director - is responsible for:

1. Advising the company and its management on safety related issues.
2. Generating the safety program, and presenting it to the Safety Director.
3. Providing support for management in achieving compliance with the safety program.
4. Identifying safety and health related issues for attention within the company.
5. Providing safety and health expertise on safety and health issues.
6. Providing a safety and health resource within the company.
7. Providing training on safety and health issues.
8. Guiding and stimulating the safety and health meetings.
9. The safety, health and security coordinator is responsible for liaising with safety and health agencies, such as: Federal and State Occupational Safety and Health Administration (OSHA), Department of Labor and Industry (DLI), Department of Health (MDH), Fire, Life & Safety Codes, etc.

Plant Manager – is responsible for:

1. Day to day health and safety of the plant.
2. Ensuring the observance of all rules and systems which are in place to support the health and safety policy.
3. Ensuring that the safety goals and objectives are promulgated throughout the production and subordinates.
4. The plant manager is responsible for ensuring that all persons are trained to carry out the work that they are assigned to.
5. The plant manager is responsible for ensuring that employees under their control have adequate safety training.
6. The plant manager is responsible for ensuring that all specified accidents and incidents are investigated.
7. The plant manager is responsible for ensuring that all corrective actions to eliminate hazards in the workplace are taken.
8. The plant manager is responsible for ensuring that all relevant information is provided to the executive.

All Job-Site Foremen (Supervisors) and the Manufacturing Plant Manager are:

1. Responsible for ensuring the health and safety of all those who work or visit their area of authority.
2. Responsible for ensuring the adherence to all safety rules.
3. Responsible for ensuring that they set the example for safety compliance.
4. Responsible for ensuring that all hazard reports receive immediate attention and that corrective actions are taken as soon as possible.
5. Responsible for ensuring that all specified accidents and incidents are investigated as soon as possible, and that all corrective actions to prevent a recurrence are taken as soon as possible.
6. Responsible for ensuring that regular safety inspections of their area are carried out, and that all corrective actions are taken as soon as possible.
7. Responsible for ensuring that all relevant safety and health information is presented to the Safety Director as required.

Field Safety Coordinator (as assigned) – is responsible for:

1. Advising the company management on safety related issues.
2. Providing support for management in achieving compliance to the safety program.
3. Identifying safety and health related issues for attention within the company.
4. Providing safety and health expertise on job-site safety and health issues.
5. Assisting with safety and health resources within the company.
6. Providing training on safety and health issues as assigned.
7. Guiding and stimulating safety and health toolbox meetings as assigned.
8. Liaising with the Safety Director.

All Employees – are responsible for:

1. Evaluate and monitor potential hazards, and report hazards detected to their immediate supervisor.
2. Complying with all safety rules - at all times.
3. Keeping the workplace clean and tidy.
4. Participating with the company on safety and health issues.
5. Attending and taking part in all safety training provided.
6. Consistently monitor and maintain Personal Protective Equipment (as assigned to each employee) in order to ensure full protection for each PPE is designed to do.

Hazard Analysis

Accidents in the workplace occur due to a variety of contributing factors. Some of these causes include the following examples.

Human

- Lack of employee training.
- Negligence or recklessness.
- Stress, fatigue.
- Negative attitude.
- Unsafe work practices.

Property/Facility

- Slippery or cluttered walking surfaces
- Inadequate lighting.
- Power sources and electrical service not locked-out.
- Lack of machine guarding.
- Lack of warning signs or labels.
- Lack of handrails.

Operations

- Hazardous materials
- Tool/work-station design.
- Manual lifting.
- Lack of defensive driving training (forklift, bus drivers)
- Confined spaces.
- Lockout/Tagout (control of energized equipment)
- Poor housekeeping
- Lack of standard (safe) operating procedures.
- Lack of equipment maintenance.

Maguire Iron Inc. uses various methods to identify new or existing hazards, conditions or operations. Means of identifying hazards include the following:

- Visual walk-through inspections (see checklist)
- Employee input (by means of: open door policy, toolbox meetings and safety concerns. Employee(s) can also provide input directly with the Safety Director, besides the immediate Foreman (Supervisor).
- Monitor employee absenteeism (monitored by Safety Director and Accounting Administrative Assistant for work related health and safety related issues, follow-up and resolution).
- Re-occurring injuries or accidents (review re-occurring cases with employees and management through toolbox meetings and provide recommendations for resolution of such cases, either through PPE, Administrative or Engineering Controls).
- Review of work practices/procedures (observation of such practices/procedures are presented and discussed at safety meetings for resolutions).
- OSHA 300/300A - Log and Summary of Occupational Injuries and Illnesses, and are reviewed at safety toolbox meetings.
- Insurance data. (Injury cases, trends and resolutions are discussed with Maguire Workers' Comp. Carrier.
- Evaluation of information presented to President, Vice President (Tank and Iron divisions), Job-site Plant Manager, Job-site Foremen and subordinates.

Hazards are evaluated relative to their potential consequences and probability. Once evaluated, hazards are then prioritized and according to various jobs or functions with the greatest potential for injury. A commonly used procedure in identifying and evaluating hazards is the Job Hazard Analysis. This procedure is based on the following steps:

Step 1: Survey the workplace to identify jobs most hazardous (or highest injury rate) relative to standards and work practices.

Step 2: Analyze those hazards identified by outlining the process flow or procedures involved in the task. This will identify specific hazards associated with various steps in the overall task.

Step 3: Establish safe procedures or corrections to each step where hazards have been identified.

Actual control or corrective measures for hazards identified and analyzed typically involve one of, or combination of, the following:

- Engineering controls
- Administrative controls
- Personal Protective Equipment (PPE)

Engineering Controls

The preferred control measures by OSHA, where feasible, are engineering controls. The intent is to eliminate or reduce the hazard by controlling the hazard itself. The following are examples of engineering controls:

- Re-design of an operation or piece of equipment (for example, adding a machine guard).
- Isolating the hazard from the worker (for example, construction of a guardrail or barrier, power or electrical source lock-out).
- Automated lift device.

Administrative Controls

The following are examples of administrative controls:

- Employee training and education.
- Establishing work practices or standard operating procedures.
- Housekeeping activities.
- Buddy system (no one works alone concept).
- Labeling or warning placards.
- Security to restrict access.

Personal Protective Equipment - (PPE)

PPE is used in situations where engineering or administrative controls are not feasible or fully effective. The following are examples of PPE controls we currently have in-place.

- Protective clothing (safety shoes, safety glasses, safety goggles, gloves, bump caps, aprons, etc.).
- Respirators (half face & air supplied full face)
- Ear Plugs

In all cases, Maguire's AWAIR program defines specific goals and objectives to correct or control identified hazards as warranted to reduce if not eliminate a potential risk for injury or illness. In addition, periodic job hazard analysis may be conducted to identify any modifications to a certain operation or task, as well as to identifying potential hazards.

Communication

Maguire's written program specifies how the overall program is communicated to effected employees to assure their knowledge of the hazards present and control measures involved. Employees with known hazards associated with their respective job functions receive training on the AWAIR program. Components of the training program include the following topics:

- Employee Safety Training (see: PowerPoint Presentation)
- Safety and Health policies (see: Employee Information Manual and reference with Foreman's Safety Manual).
- Staff responsibilities (see section on: Health & Safety Responsibilities).
- Applicable OSHA standards.
- Review of standard operating procedures or safe work practices (info. provided through Shop Floor Instructions, Operating Procedures & Instructions (OPI), Tool Box Meetings, and Maguire's safety policies and programs.
- Review of control measures (Engineering, Administrative and PPE).
- Reporting procedures (for: injuries, near miss conditions, and potential hazards).
- Accident, Incident and Near Miss Investigation procedures (active participants include Managers, Job-site Foremen (Supervisors) Safety Director (sub-ordinates as warranted)).

Training is provided to all new employees prior to commencement of any work with identified hazards. Training is provided annually thereafter to review safe work practices and any new hazards identified. Maguire retains all training records through the Human Resources (H.R.) dept. for three years (minimum). Attendance forms are used to document training of employees.

In addition to the training program, Maguire uses one or more of the following forms of communication to maximize the effectiveness of the AWAIR program:

- Updates, articles or notices (examples: e-mail and post safety notices and alerts, Employee Information Bulletin Boards, Pay period Envelop Stuffers, Memos, Open Door Policy, Records of toolbox safety meetings, Voice Mail, and correspondences.
- Training sessions, including safety orientation of new hires.
- Make available to each employee, a copy of Maguire's safety policies (as addressed in Employee Information Manual).
- PowerPoint presentation, is used to provide AWAIR training to employees.
- Minn. & Federal OSHA health and safety (employee rights) requirements is posted in the plant employee lunch room and at all job-sites.
- Maguire Iron Inc. encourages input from employees through various means as mentioned above, and is responsive towards resolving safety and health issues and concerns as they arise.
- Toolbox (Labor/Management meetings) are conducted weekly (at a minimum). There may be specific projects or tasks which may require additional meetings as necessary.

Investigation and Correcting Accidents

Investigations of all accidents, including near mishaps are conducted as soon as possible, after the event or first report of injury. Investigations are conducted by employees who are authorized and trained to do so. They include, but not limited to the following:

- President
- Vice president (Tank Division)
- Vice President (Iron Division)
- Plant Manager
- Job-Site Foreman
- Safety Director
- Safety Coordinator (Job-site as assigned)
- Joint (Labor/Management) task force (when applicable)

Purpose of conducting investigations is to determine the cause to prevent its re-occurrence through corrective actions. In all cases, administering first aid or medical care to the injured is the first priority. Maguire Iron Inc. has an "Emergency Responder" at the plant and job-sites who are trained in First Aid/CPR (minimum) to handle emergency situations.

In order to investigate, it is imperative that every employee promptly report any accident or near mishap, without employee fear, embarrassment or concern for repercussions associated with reporting accidents. Maguire Iron Inc. is required to report, within 8 hours to OSHA, any fatal accident or one which results in the hospitalization of 3 or more employees.

Investigation of any accident shall be thorough and objective in nature. Again, the principle goal of any investigation is to identify the causal factors (asking the traditional - who, what, why, where, when and how). Results from the investigation are used to make adjustments and recommending control measures to prevent re-occurrence. All injuries or illnesses are recorded on the OSHA 300 Log and Summarized on the OSHA 300A form (signed by the President) and posted on employee information bulletin boards. An Accident/Incident Investigation & Corrective Action form is used to identify and abate all hazards presented.

Enforcement

Maguire Iron Inc. has implemented the following monitoring and enforcement activities to promote active participation and compliance with the AWAIR program:

- Review and update the AWAIR plan annually.
- Conduct periodic facility and jobsite audits to review safe work practices (see: Jobsite Checklist).
- Hold employees accountable by incorporating their responsibilities within Maguire's performance evaluation and reviews).
- Review the level of effectiveness afforded by control measures in-place (review past injury data).

- Implement the building of positive reinforcement of the program through employee incentives or rewards (examples may include: safety bingo, best safety suggestion, safety recognition award, etc.).
- Measure the success of the program through available statistics (such as: OSHA 300 Log), Facility Audits, Workers Comp. Carrier's Loss Control Analysis, and analysis of compliance with Federal, State and Local regulatory occupational safety and health standards and rules.
- Maintain communication channels (see: Safety Accountabilities and use of Maguire's open door policy).



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

02/19/2024

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

Boen & Associates, Inc.
7119 S Lyncrest Place
PO Box 89010
Sioux Falls

SD 57109-9010

CONTACT NAME: Linda Evans**PHONE (A/C, No, Ext):** (605) 336-0425**FAX (A/C, No):** (605) 336-8187**E-MAIL ADDRESS:** lindae@boenassociates.com**INSURER(S) AFFORDING COVERAGE****INSURER A:** United Fire & Casualty Company**NAIC #**

13021

INSURER B: Acuity Insurance Company

14184

INSURER C: Travelers Property Casualty Company of America

25674

INSURER D: QBE Insurance Corporation**INSURER E:****INSURER F:****INSURED**

Maguire Iron, Inc. & Maguire Tank, Inc.
PO Box 1446

Sioux Falls

SD 57101

COVERAGES**CERTIFICATE NUMBER:** 24-25 Master**REVISION NUMBER:**

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			60426094	02/01/2024	02/01/2025	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input checked="" type="checkbox"/> Contractual Liability						MEO EXP (Any one person) \$ 5,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY \$ 1,000,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						GENERAL AGGREGATE \$ 2,000,000
	OTHER:						PRODUCTS - COMP/OP AGG \$ 2,000,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY			ZU0492	02/01/2024	02/01/2025	COMBINEO SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> OWNED AUTOS ONLY	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS ONLY	<input type="checkbox"/> NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident) \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB			ZUP-15R95368-24-NF	02/01/2024	02/01/2025	Uninsured motorist BI \$ 1,000,000
	<input checked="" type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> OCCUR					EACH OCCURRENCE \$ 8,000,000
	<input type="checkbox"/> RETENTION \$ 10,000	<input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$ 8,000,000
D	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			QWC3001368	02/01/2024	02/01/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N	N/A				E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000

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

CERTIFICATE HOLDER

To Whom it May Concern

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



March 27, 2024

Maguire Water
1610 N. Minnesota Avenue
Sioux Falls, SD 57104

To whom It May Concern:

First International Bank & Trust has held a deposit and lending relationship with Maguire (Maguire Iron, Inc. and Maguire Tank, Inc.). We are honored to be able to work with the Maguire Companies and our existing lines of credit provide interim operating capital to the company. There is currently significant excess capacity available to the company.

We feel it is important to reiterate that Maguire handles its financial obligations with utmost importance. The company(s) communicates very well, provides skilled and accurate forecasting, and handles their accounts in a more than satisfactory manner. We are pleased to be associated with the Maguire and would recommend their services and the integrity and professionalism of their team to anyone working on projects in their industry.

Should you have specific questions, I encourage you to reach out to me any time by phone at 605-607-5410.

Sincerely,



Jason Appel
Community President



**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.) Maguire Iron, 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. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input checked="" 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) _____	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) _____ <i>(Applies to accounts maintained outside the United States.)</i>
	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. PO Box 1446	Requester's name and address (optional)
6 City, state, and ZIP code Sioux Falls, SD 57101-1446		
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.

Social security number								
			-					
or								
Employer identification number								
4	6	-	0	2	5	6	4	2 5

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:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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 	Date 7-8-2024
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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



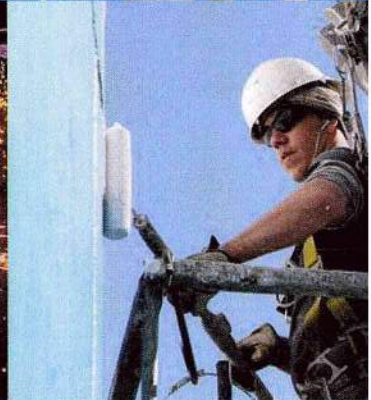
MAGUIRE

WATER TANK EXPERTS

CONSTRUCTION | MAINTENANCE

(605) 334-9749 | info@maguirewater.com

MAGUIREWATER.COM



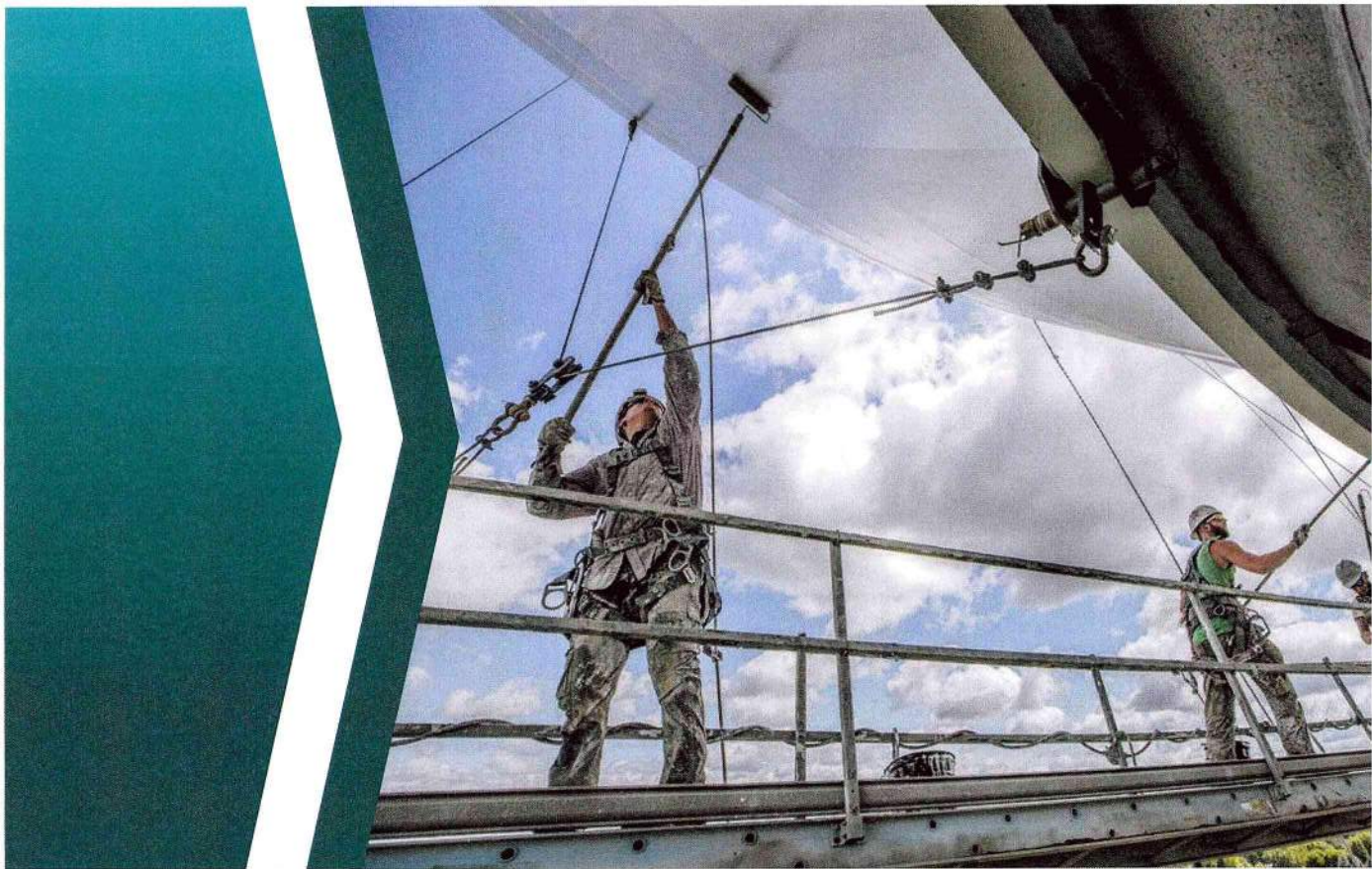


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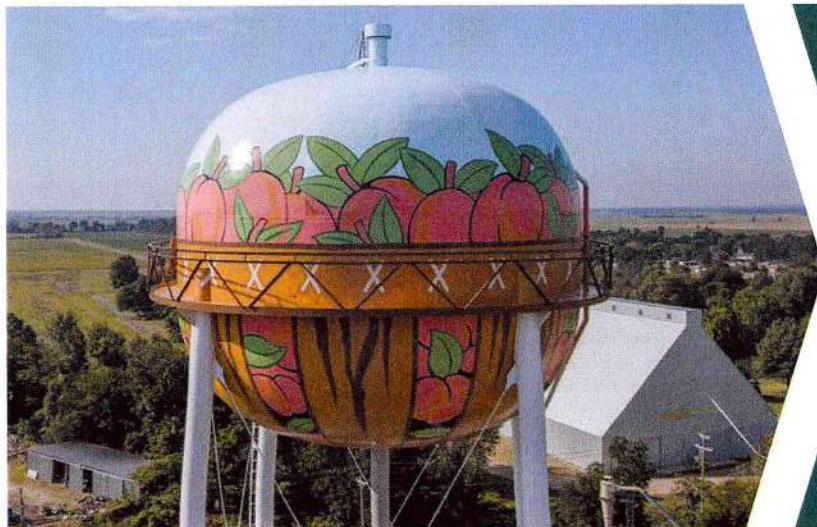
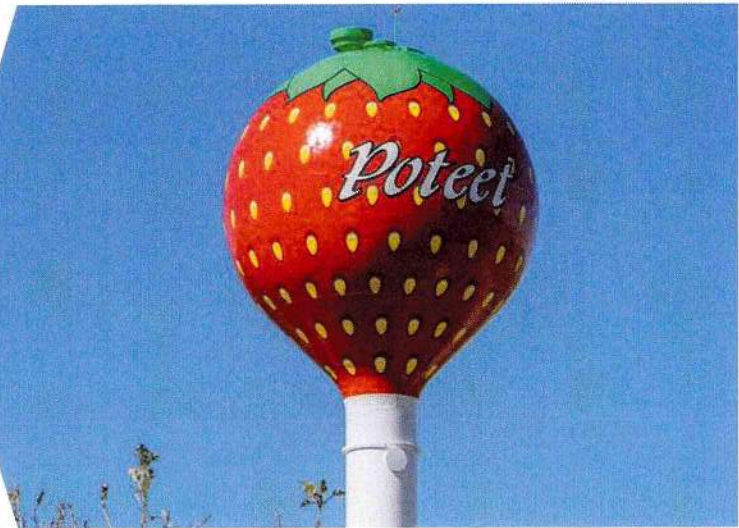


TEA, SOUTH DAKOTA

750,000 GAL
SPHEROID TANK

POTEET, TEXAS

100,000 GAL
SPHEROID TANK



CAMPBELL, MISSOURI

250,000 GAL
MULTI-LEG TANK



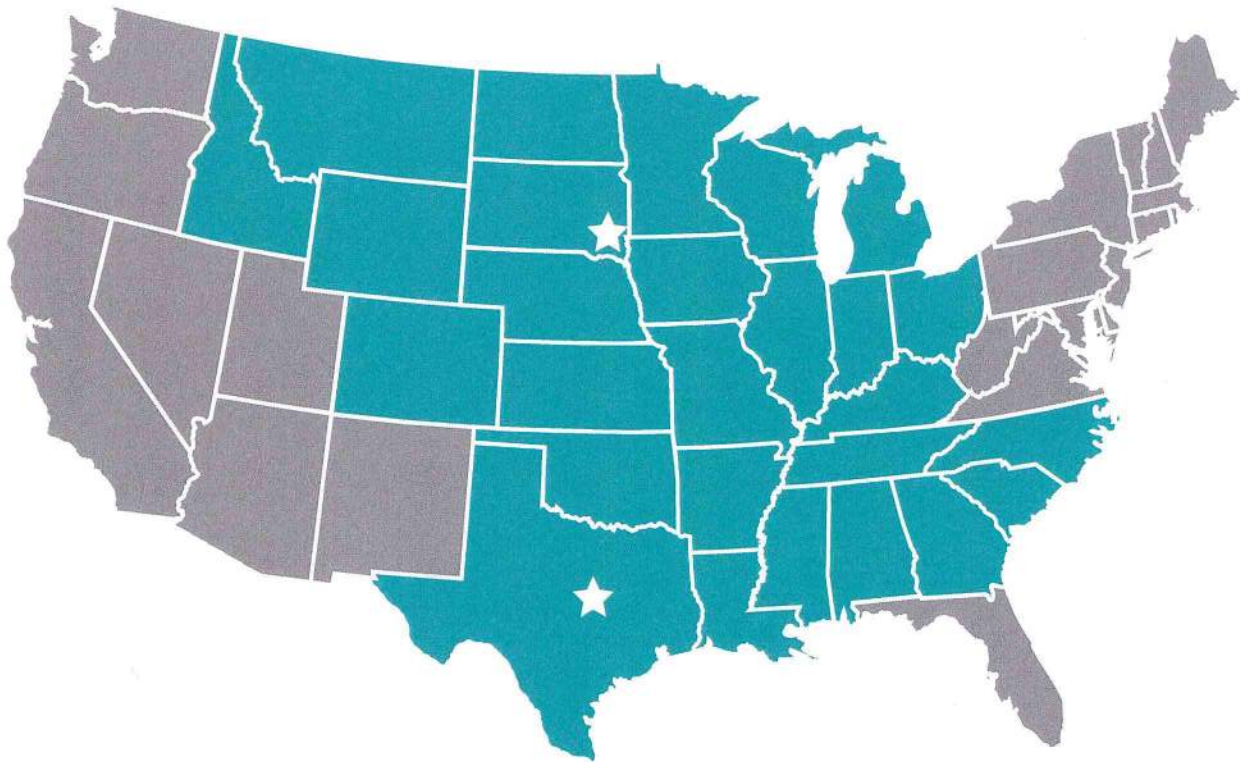
OUR STORY

At Maguire we believe in helping to store and protect quality water. We do this by being the best water tank company for our customers and employees.

Maguire is a family-owned and operated company with corporate headquarters in Sioux Falls, South Dakota, and a center of operations in Waco, Texas. We have been an industry leader in the water storage tank industry since 1915 when Ed Maguire began providing painting and repair solutions for customers in the Upper Midwest.

Today, Maguire offers a full spectrum of water storage tank solutions from new tank construction to tank maintenance and maintenance plans. This makes us one of the only turn-key providers of water storage tank solutions in the country. Our services include; new water storage tanks, steel repairs, full-service maintenance plans, contract for service plans, washout inspection plans, exterior and interior painting, inspections, cleanings, repairs, coatings, water quality, and emergency services.

Our staff of full-time water professionals includes steel fabricators, welders, erectors, steel workers, painters, AMPP certified inspectors, salespeople, engineers, repair specialists, service technicians, and support staff. Our range of operational capabilities includes 33 states.



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MAGUIREWATER.COM

MAGUIRE FACILITIES

Sioux Falls, South Dakota

A 70,000-square foot facility that includes an ASME Certified fabrication shop.
2001 E Robur Dr., Sioux Falls, SD 57104

Crawford, Texas

A 5,100-square foot shop facility and staging area.
5368 Cedar Rock Parkway, Crawford, TX 76638

VISION

TO STORE AND PROTECT QUALITY WATER.

MISSION

TO BE THE BEST WATER TANK COMPANY FOR OUR CUSTOMERS AND EMPLOYEES.

CORE VALUES

- STRIVE FOR EXCELLENCE
- COMMIT TO SAFETY
- BUILD ON INTEGRITY
- SERVE WITH PASSION
- GROW THE FAMILY



We are uncompromising in the health and safety of our employees, subcontractors, customers, and communities we work in. Safety is the responsibility of everyone.



Weekly toolbox safety meetings are held as an opportunity for management to communicate with employees on how they can do their jobs safer and better. Maguire holds safety meetings to discuss and remediate potential hazards, suggestions, and other safety issues or ideas, including items noted during shop and Jobsite (field) inspections as they arise to make Maguire a safe place to work.

Maguire knows that information presented and discussed at a safety meeting serves a purpose,

"To prevent employees and co-workers from being injured"

We understand that accidents can happen for a variety of reasons. For example, unsafe acts typically account for 90% of all accidents (according to some experts). Maguire Annual Safety meetings and Toolbox Safety meetings provide an open dialog on how to perform our daily work activities safely. Having an open dialog and feedback, for example, has resulted in the development of numerous Standard Operating Procedures (SOPs) that we have in-place.

To assist in providing a safe and healthy work environment for employees, customers, and visitors, the Company has established a workplace safety program. This program is a top priority for the Company. The Safety Department has responsibility for implementing, administering, monitoring and evaluating the safety program. Its success depends on the alertness and personal commitment of all.

SAFETY MANUALS COVER

In conclusion, Maguire has several written comprehensive safety programs, including "A Workplace Accident and Injury Reduction (AWAIR) program to reduce the incidence of workplace accidents and injuries. It clearly states our company's initiative and commitment to ensure a safe and healthy workplace. The program identifies everyone's safety responsibilities and accountability (from top management down). Actual control or corrective measures for potential hazards identified and analyzed typically involve one of, or combination of the following: Engineering Controls, Administrative Controls, and Personal Protective Equipment (PPE).

Another element of Maguire's AWAIR program relates to monitoring and measuring adherence to safe work practices, procedures, safety policies, and programs at job sites. Maguire uses a Safety Accountability System. It's a process to evaluate, identify, and measure compliance of various safety items noted during on-site safety inspections with the foreman. It is also used to evaluate "Safe" and "Unsafe" work practices, working conditions (such as housekeeping), employee's adherence to Maguire's safety rules, and other safety topics identified during onsite inspections.

ENVIRONMENTAL, HEALTH, & SAFETY MANUAL

(PROGRAMS)

Table of Contents

- Abrasive Blasting
- Aerial Lifts
- Asbestos Awareness
- AWAIR
- Bloodborne Pathogens
- Cadmium Hexavalent Chromium Safety
- Compressed Air
- Compressed Gas Cylinders
- Confined Space
- Electrical Safety Awareness
- Fall Protection
- Fire Protection Extinguishers
- First Aid
- Forklift Industrial Trucks
- Hand & Power Tools
- HAZCOM (Hazard Communication)
- HAZWOPER Emergency Response
- Hot Work, Welding and Cutting
- Ladder Safety
- Lead Awareness
- Lockout Tagout
- Mobile Cranes
- Noise Awareness
- Overhead Cranes
- PPE
- Respiratory Protection
- Rigging Material Handling
- Scaffolds
- Signaling Cranes
- Spill Prevention Response
- Subcontractor Management Plan
- Waste Management
- Work Performed Near Overhead Lines

FOREMAN'S SAFETY MANUAL

Safety & Health Programs

- Workplace Accident & Injury Reduction Program (AWAIR)
- Employee Right-To-Know (Hazard Communication)
- Hazardous Chemicals
- Harmful Physical Agents (Heat Stress, Noise, Compressed Gas, Radiation)
- Infectious Agents (Bloodborne Pathogens)
- Compressed Gas Cylinders (see: Employee Right-To-Know physical hazard)
- Confined Space
- Fire Protection
- Emergency Preparedness & Action Plan (Evacuation, Rescue, Fire, Tornado, Spills)
- Heat Stress (see Employee Right-To-Know – physical hazard)
- Fall Protection
- Lift Trucks & Powered Equipment (Material Handling)
- Personal Protective Equipment - PPE
- Lockout/Tagout (Hazardous Energy Control Plan for: Authorized/Affected Employees)
- Material Handling (Cranes, Hoists, Rigging)
- Personal Protective Equipment
- Respiratory Protection
- Spill Reporting & Prevention (forth coming)
- Welding, Cutting, Grinding & Brazing

General Safety Policies

- Electrical Safety
- Fire protection
- Hand Tools (Powered & Non-Powered)
- Materials Handling (Cranes, Hoists, Rigging)
- Machine Guarding
- OSHA On-site Inspection

Environmental Policies

- Hazardous Waste (when applicable)
- Spill Reporting & Prevention (when applicable)

Forms

- Weekly Toolbox Safety Meetings Attendance - (also weekly topics provided by safety director)
- Weekly Safety Meetings - (as topics apply)
- Weather Conditions Weekly Checklist
- Job-site Inspection – Iron & Tank Divisions)
- Body Harness Examination Checklist
- Hazard Identification/Emergency Correspondence/Rescue Plan
- Spider Climber Inspection (Iron Division - Tank Division when applicable)
- Occupational Incident/Accident Report
- Incident/Accident Investigation & Corrective Action Report
- Training Acknowledgment (Does employee know - by topic)
- Safety Accountabilities



OUR TEAM



FAMILY OWNERSHIP

GENE JONES JR. | CEO

SCOTT JONES | PRESIDENT

OPERATIONS

DIEP DOAN | CHIEF FINANCIAL OFFICER

STACY WRIGHTSMAN | CHIEF CULTURE OFFICER

TROY WERDEL | SENIOR VICE-PRESIDENT TANK MAINTENANCE

DAN ENGLERMAN | SENIOR VICE-PRESIDENT TANK CONSTRUCTION

BRIAN COOPER | VICE PRESIDENT OF BUSINESS DEVELOPMENT

NATHAN FOSSELL | DIRECTOR OF OPERATIONS

PROJECT MANAGERS

CONSTRUCTION

COREY SANDERS

CORY TIMMERMAN

CHRIS TEKRONY

JOHN OVERWISE

RAFAEL BAYLAN

MAINTENANCE

CURTIS HEMMER

DAVE HUMBLE

DALLAS HOFEMAN

JEFF PRUETT

TYSON ROSENBOOM

SAFETY

ADAM ANGERHOFER | DIRECTORY OF SAFETY

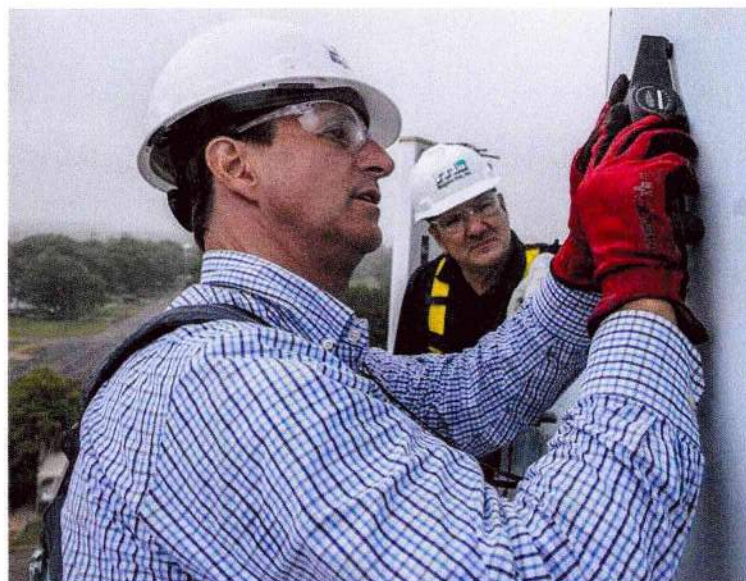
SALES

JAMIE MAYS | SOUTHERN REGIONAL SALES MANAGER

JACK POWELL | NORTHERN REGIONAL SALES MANAGER

ENGINEERING

DAN DRAKE, P.E. | LEAD ENGINEER




AMPP™

CERTIFIED EMPLOYEES

Maguire has many team members with certifications from the Association for Materials Protection and Performance. This ensures the quality of our workmanship is at its highest level for our customers.



AMPP SENIOR CERTIFIED COATINGS INSPECTOR – LEVEL 3

David Humble	Director of Field Crews	#22067
Jamie Mays	Director of Sales	#6754

AMPP CERTIFIED COATINGS INSPECTOR – LEVEL 2

Darin Clarke	Field Representative	#63235
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AMPP BASIC COATING INSPECTOR – LEVEL 1

Jake Dugger	Field Representative	#81132
Jack Powell	Field Representative	#64128
Jason Wipf	Field Foreman	#50716
Jim McLaughlin	Field Safety Inspector	#78443
Haskell Parada	Field Safety Inspector	#59085
Curtis Sonen	Fabrication Paint	#11500903

WATER TANK SUSTAINABILITY

At Maguire, we believe in water tank sustainability. Our approach is an ongoing process, not an end goal. We partner with you to build a framework toward a sustainable future for your water tank by developing a long-term action plan. This planned partnership establishes goals, objectives, timelines, and metrics to ensure your water tank stays in like-new condition and regulatory compliance.



TARGET

Maguire will build a customized long-term plan that prioritizes the scopes of work to bring your water storage tank back to like-new condition while allowing for budgetary considerations inside of your Capital Improvement Plan.



IDENTIFY

A trained Maguire Water Tank Expert will assess and inspect your water storage tank in the following categories, as identified by the American Water Works Association, (Coatings, Safety, Sanitary, Structural, Security) to determine current conditions.



IMPLEMENT

Maguire will execute the work that needs to be completed on your water storage tank based upon your Capital Improvement Plan.




TRACK

Maguire will provide inspection reports at determined intervals based upon your Capital Improvement Plan to monitor your water storage tank and keep you in regulatory compliance.

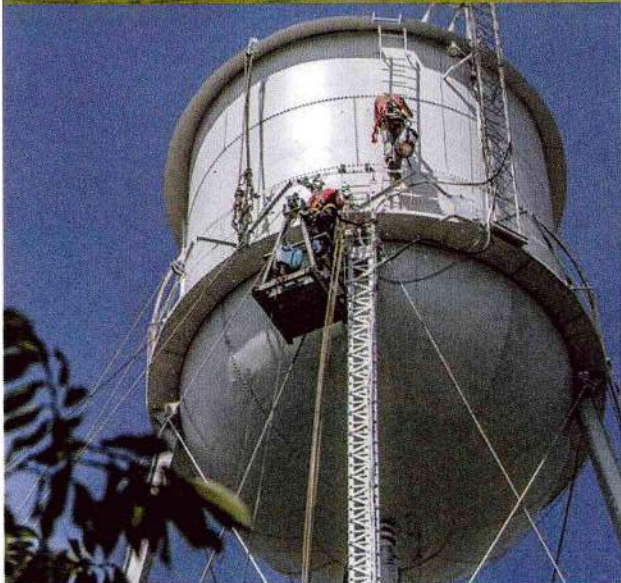
PARTNER WITH A PROFESSIONAL



OUR CAPABILITIES



For over 100 years, Maguire has been the industry leader in the fabrication, construction, and maintenance of water storage tanks and towers. We are the only company in the industry that builds new water tanks and maintains them. Since every water storage tank has different needs, we have designed our Maguire Maintenance Plans to provide our customers with a customizable comprehensive solution for all of their water storage tank maintenance needs. These plans can extend the service life of your tank, help you budget for on-going maintenance, provide services for state compliance, OHSA and AWWA compliance, and give infrastructure owners long-term peace of mind.





MAINTENANCE DIVISION

- Company Paint Crews
- Company Repair/Washout Crews
- Company Steel Crews
- On-Call Emergency Crews All Year Long!
- In-House Engineering Department
- Project Management Division
- Operationally Scalable to Whatever Size Project You Have!
- Ability to use vetted and approved subcontractor network
- In-House fabrication of tank parts, segments and structural members

INDIVIDUAL SERVICES

INSPECTIONS

- Full physical inspection (drained tank)
- Remote operated vehicle inspections (non-drained tank)
- N.A.C.E. Certified Coatings Inspectors
- Full structural analysis
- Comprehensive report

CLEANING

- Interior chemical clean
- Exterior pressure wash

REPAIR

- Tank roofs, sidewalls, and bottoms
- Riser pipes
- Frost jackets
- Frost free vents
- Ladders
- Manways
- Handrails
- Fall protection devices
- OSHA approved upgrades

COATING

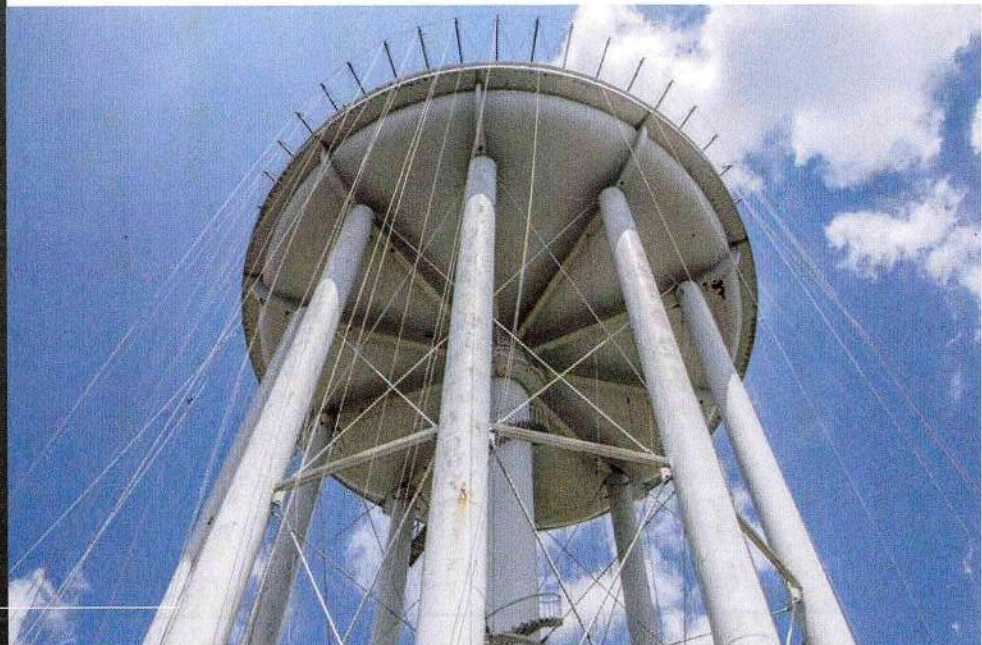
- Exterior overcoats
- Exterior/Interior sandblasting and recoating
- Exterior/Interior low-dust sandblasting and recoating
- Exterior self-contained sandblasting and recoating
- Full exterior containment
- Lead and metal abatement
- Elastomeric and polyurea (100% solids)
- Custom logo application

WATER QUALITY

- Active mixing systems
- Passive mixing systems
- Chemical cleaning
- Vent screens
- Hatch lids

EMERGENCY SERVICES

- Tank thawing
- Repair of damaged parts
- Leak repair



MAINTENANCE PLANS

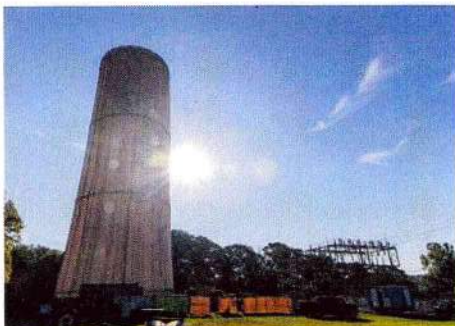
SERVICES PROVIDED	FULL SERVICE	CONTRACT SERVICE	INSPECTION WASHOUT
Planned approach to tank maintenance	✓	✓	✓
Yearly tank inspection with written report	✓	✓	✓
Biennial tank cleanout with written report	✓	✓	✓
Ability to spread tank maintenance cost	✓	✓	—
Extends tank service life	✓	✓	—
N.A.C.E. inspection on all tank renovations	✓	✓	—
Customizable tank maintenance plan	✓	✓	—
Fixed tank paint cost	✓	✓	—
Defined term and defined scope	—	✓	—
Complete shift of tank maintenance risk	✓	—	—
Worry-free tank maintenance	✓	—	—
Single source responsibility with a full service tank company	✓	—	—
Eliminates unplanned tank expenditures	✓	—	—
Set tank budget figures	✓	—	—
Emergency tank repairs	✓	—	—
Extended warranty for life of tank coating system	✓	—	—
GASB 34 compliance	✓	—	—

SUMMARY OF COVERAGE

MAINTENANCE PLANS

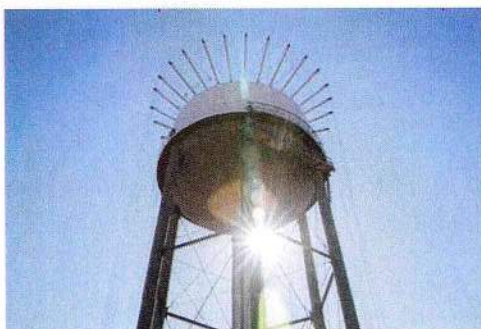
FEATURES

- Maintenance and upkeep of the tank from the date the agreement is signed
- Planning and evaluation of any short-term and long-term maintenance needs
- Tank related engineering costs
- Exterior cleaning and painting
- Interior cleaning and painting
- Exterior and interior repairs
- Future exterior renovations
- Future interior renovations
- Maintain existing logos, lettering and artwork
- Assure that the tank structurally sound and in watertight condition
- Furnish and install a lockable anti-climb deterrent to minimize opportunity for vandalism and reduce tank owner liability
- Annually inspect the tank with detailed report
- Biennially complete interior washout inspection and disinfection service
- Emergency service as needed per the terms of the agreement
- Maintain the tank in good working order and sanitary condition so the tank will not depreciate in value



BENEFITS

- Fully integrated professional service organization working as a partner
- Transfer risk from tank owner to Maguire Iron
- Guaranteed protection of your water storage tank
- Extended tank life
- Attractive tank appearances
- Emergency repair services
- Spread capital upfront renovation cost over multiple years
- Predictable cost through annual fee
- Future renovations
- Work performed not limited to 1 year warranty
- Lifetime warranty as long as contract in place
- One Year automatically renewable contract does not term out
- No change orders
- GASB 34 compliant
- Health and safety regulatory compliance
- Dependable storage to sustain high quality water





CONSTRUCTION

CONSTRUCTION DIVISION

- Company Erection Crews
- In-House Engineering Department
- 70,000 Square Foot Fabrication Facility
- Project Management Division
- Operationally Scalable to Whatever Size Project You Have!!
- Over 30 new water towers constructed per year with over 5 million gallons of new storage created
- Fabrication of tank parts, segments and structural members



MAGUIRE

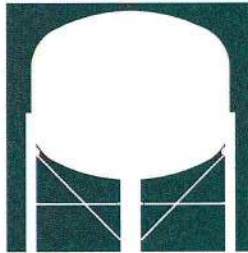
MAGUIRE TANK STYLES



SPHEROID

Capacities

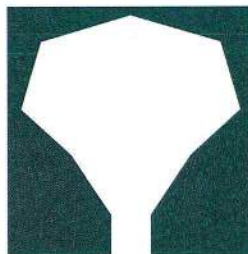
50,000 gal - 1,500,000 gal



MULTI-COLUMN

Capacities

Double Ellipsoidal: 50,000 gal - 200,000 gal
TORO: 250,000 gal - 1,000,000 gal



HYDRO CONE

Capacities

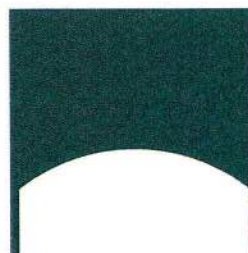
30,000 gal - 200,000 gal



STANDPIPE

Capacities

20,000 gal - 500,000 gal



GROUND STORAGE

Capacities

20,000 gal - 5,000,000 gal

DESIGN & ENGINEERING

Maguire's new tanks team has decades of experience designing and engineering many styles and sizes of water storage tanks. With an in-house engineer and draftsman we use the latest and most advanced CAD technology to design each tank to our customers strict specifications.

FABRICATION

Maguire's steel fabrication facility is located in Sioux Falls, South Dakota and uses only the best American steel in all fabrication! The Sioux Falls facility is over 46,000 square feet and employs over 30 of the finest skilled steel fabricators. This ensures the best product for our customers.

CONSTRUCTION

Maguire field crews are some of the best in the water tank storage industry. Our field steel erection crews build the single pedestal, multi-column, hydro cone, ground storage, and standpipe tanks. Our crews have erected over 1,000 water storage tanks throughout the United States.



PROJECT MANAGEMENT

With the size and scope of water storage tank projects that Maguire handles across the country, we have assembled a high-quality team of project managers and coordinators to personally handle every project from start to finish. Our project management team is experienced in all facets of the construction process. This experience and knowledge ensure a single point of contact for communication on each project. Maguire prides itself on handling all details of a project in a timely and professional manner.

TANK PARTS

Maguire has always believed in manufacturing high-quality tank parts. We use them on every new water storage tank we build. This philosophy has led us to begin manufacturing and selling water storage tank parts for existing tanks across the country. Our tank parts meet all OSHA (state) regulations and are made from high-quality American made steel in our Sioux Falls facility by a team of experienced metal fabricators. This process allows us to maintain superior quality with competitive pricing and timely delivery.

COATINGS

One of the things that set Maguire apart from the competition is we have over 100 years of experience painting all sizes and styles of water tanks. We believe that choosing the best coating system for your tank is paramount to protecting your investment long-term. That is why at Maguire we only use the highest quality interior and exterior coating systems and apply them according to the American Water Works Association (AWWA). If you are looking for a tank that makes a statement we can work with you to design a paint scheme that will get noticed. We can help you design a specialized logo or graphics to advertise your community or business.

OUR CUSTOMERS

MAINTENANCE DIVISION

LEE COUNTY WATER ASSOCIATION

500MG Multi-Leg Exterior & Interior Blast
City of Moro, AR
Smith & Weiland
Ken Weiland - (870) 338-6550
Contract - \$324,250 | Completion - 2022

HUTCHINSON, KS

500MG Sphere Full Renovation
City of Hutchinson Engineers
Jessica Lowe - (620) 694-2645
Contract - \$242,500 | Completion - 2022

GRAND STRAND WATER & SEWER, SC

3 Tanks: 100,000 Multi-Leg Exterior Paint with Containment
125,000 Multi-Leg Interior Paint
150,000 Multi-Leg Exterior Paint with Containment
Mike Navetta, Water Manager - (843) 443-8200
Contract - \$792,725 | Completion - 2020

PORT BOLIVAR, TX

1.0MG Ground Storage Tank Full Renovation
Dalton Warren, E.I.T.,
Dalton.Warren@hmttank.com
Project Engineer - Dunham Engineering | HMT LLC
Phone: (979) 690-6555 Mobile: (979) 807-4339
Contract - \$321,400 | Completion - 2021

BRENHAM, TX

300MG Sphere Full Containment/Exterior & Interior Blast
Strand Associates, Inc.
Kelly Hajek, P.E. - (979) 836-7937 ext. 6223
Contract - \$229,750 | Completion - 2022

STEPHENVILLE, TX

750MG Full Renovation
Kent Riker, PE,
kriker@provenanceengineering.com
President | Founder | Servant Leader
(817) 785-7172
Contract - \$284,500 | Completion - 2023

HAYDEN WATER ASSOCIATION, IN

125,000 Multi-Leg Exterior & Interior Painting & Repair
Curry and Associates
Bob Curry, Engineer - (317) 745-6995
Contract - \$143,050 | Completion - 2020

CONSTRUCTION DIVISION

NEODESHA, KS

200MG Gallon Sphere
City of Neodesha, KS
Professional Engineering Consultants
(316) 262-2691
Contract - \$1,180,450 | Completion - 2021

DEPUE, IL

75,000 Gallon Sphere
Village of DePue, IL
Chamlin & Associates, Inc.
(815) 223-3344
Contract - \$1,107,320 | Completion - 2022

LANGFORD, SD

50,000 Sphere
Town of Langford
DGR Engineering
(712) 472-2531
Contract - \$1,287,491 | Completion - 2021

TEA, SD

750,000 Gallon Sphere
City of Tea, SD
HDR Engineering
(605) 977-7740
Contract - \$1,818,428 | Completion - 2021

OREANA, IL

150,000 Gallon Sphere
Village of Oreana, IL
Chastain & Associates, LLC
(217) 422-8544
Contract - \$1,295,965 | Completion - 2022

NASH COUNTY, NC

250,000 Sphere
Nash County, NC
The Wooten Company
(417) 883-8365
Contract - \$1,257,559 | Completion - 2020

ALVORD, TX

150,000 Gallon Sphere
City of Alvord, TX
Freeman-Millican, Inc.
(214) 503-0555
Contract - \$959,700 | Completion - 2022

BROOKINGS, SD

500,000 Sphere
City of Brookings
Brookings Municipal Utilities
(605) 692-6325
Contract - \$1,367,323 | Completion - 2020



WHAT OUR CUSTOMERS SAY

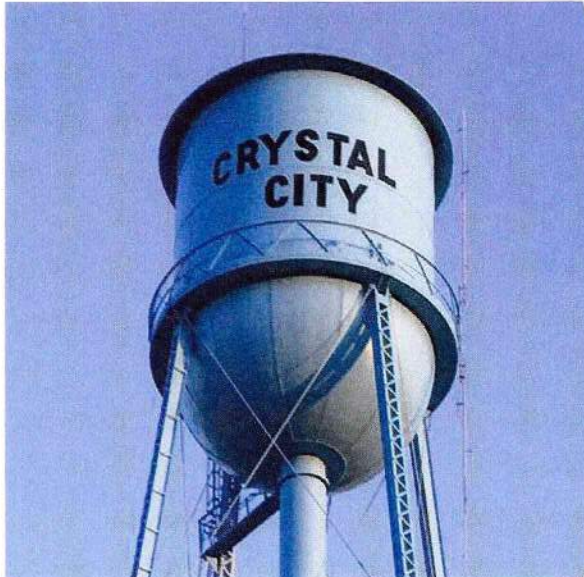


CRYSTAL CITY, MISSOURI

MAGUIRE DID AN AMAZING JOB ON OUR WATER TOWER! THE CREW DID AMAZING WORK AND THE JOB WENT FLAWLESSLY. THE CITY COUNCIL LOVED THE WORK THAT WAS DONE. I WANT TO HIRE MAGUIRE IRON FOR OUR FUTURE JOBS.

Larry Lark

Water Department Superintendent



IRA, TEXAS



THE MAGUIRE CREW THAT CONSTRUCTED THE TANK WAS VERY PROFICIENT AND WORKED HARD. THE FIRST DAY THEY WERE ON SITE, THE FOREMAN CAME UP AND INTRODUCED HIMSELF. THEY WERE OUTSTANDING AND ANSWERED EVERY QUESTION I HAD. I WAS ALSO APPRECIATIVE FOR OUR PROJECT MANAGERS PROFESSIONALISM. GREAT JOB!

Lonnie Jones

IRA, TX WSC Operator



DEERWOOD, MINNESOTA

I WANTED TO COMPLIMENT YOUR CREW ON THEIR QUALITY OF WORKMANSHIP ON THE COMPONENTS I HAVE INSPECTED. THE WELDS AND CLEAN UP OF THE WELD AREAS LOOK GREAT AND I CAN TELL THAT THE CREW IS DOING A GREAT JOB OF PREPARATION BEFORE THEY HAVE ME PERFORM THE INSPECTIONS. THE BLASTING AND COATING HAVE ALSO BEEN DONE VERY WELL AND PRIDE IN WORKMANSHIP IS EVIDENT.

Jeff Joseph
SEH



THE MAGUIRE DIFFERENCE

Our foundation is built on family values.

We strive for excellence in everything we do.

We strive to be the best and safest water tank company for our customers who trust our integrity.

Trust our products and services.

Trust our word to deliver what we say.



MAGUIRE
WATER TANK EXPERTS

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MAGUIREWATER.COM

SCHEDULE 00 45 13 – A
SUBCONTRACTOR AND SUPPLIER LIST

Subcontractor and Supplier List	
SUBCONTRACTOR / SUPPLIER:	WORK PROVIDED / MATERIAL PROVIDED:
Isler Demolition, Inc.	Demolition
DFC Company	Fencing
Montana Helical Piers	Piling
COGI Foundations	Foundation
Colstrip Electrical, Inc	Electrical
WBI Energy	Cathodic Protection



TELEPHONE CONVERSATION RECORD

DATE: 7/8/25
TIME: 12:25 pm CT

PROJECT NO: WR23-00-047
PROJECT: Sidney Tank (Phase 2)

PERSON: Randy Wilcox
COMPANY: Hubbell, Roth, & Clark, Inc.

PHONE NUMBER: 616-292-2666
FAX NUMBER: _____

Maguire installed a 400,000 elevated spheroid tank in Cheboygan, MI. It was on time. There were a few minor changes. Quality was good. The project is now closed out. HRC hired a subconsultant (Dixon Engineering) for some of the design and Randy feels like they would also have good things to say.

CALL TAKEN BY: Dean Peterson

*To be filed with project.



TELEPHONE CONVERSATION RECORD

DATE: 7/9/25
TIME: 8:30 am CT

PROJECT NO: WR23-00-047
PROJECT: Sidney Tank (Phase 2)

PERSON: Jon Vollnogle
COMPANY: Howard & Baird, Inc.

PHONE NUMBER: 330-332-4834
FAX NUMBER: _____

Maguire installed a 500,000 elevated spheroid tank in Lisbon, OH. The tank is complete but not online yet - waiting for water main completion. Maguire used a local foundation contractor. All phases went smoothly. Paperwork and submittal process was good. Work was timely.

CALL TAKEN BY: Dean Peterson

*To be filed with project.



TELEPHONE CONVERSATION RECORD

DATE: 7/10/25
TIME: 4:15 pm CT

PROJECT NO: WR23-00-047
PROJECT: Sidney Tank (Phase 2)

PERSON: Matt Tosh
COMPANY: Brown & Roberts

PHONE NUMBER: 618-252-8111
FAX NUMBER: _____

Maguire installed a 150,000 elevated tank in Village of Downs, Illinois. The tank is complete, but they are waiting for the water phase to fill the tank. No issues. They did have trouble meeting the Illinois apprenticeship requirement. They met their time lines. No additive change orders. They were professional and responsive.

CALL TAKEN BY: Dean Peterson

*To be filed with project.



TELEPHONE CONVERSATION RECORD

DATE: 7/10/25
TIME: 10:40 am CT

PROJECT NO: WR23-00-047
PROJECT: Sidney Tank (Phase 2)

PERSON: Jae Gray
COMPANY: GMC Network

PHONE NUMBER: 334-271-3200
FAX NUMBER: _____

Maguire installed a 250,000 elevated tank in Cusseta?? Alabama. The tank is complete. Jae just finished the first annual inspection. Maguire did good work, good quality. A storm caused some paint chipping and Maguire was responsive in their repair efforts. The project was done on time. He will recommend Maguire for the next tank they do.

CALL TAKEN BY: Dean Peterson

*To be filed with project.



TELEPHONE CONVERSATION RECORD

DATE: 7/10/25
TIME: 4:30 pm CT

PROJECT NO: WR23-00-047
PROJECT: Sidney Tank (Phase 2)

PERSON: Jonathan White
COMPANY: L2 Engineering

PHONE NUMBER: 936-647-0420
FAX NUMBER: _____

Maguire installed a 250,000-gallon multi-column tank in Cut and Shoot Texas. Jonathan had a hard time with their PM (John Overwise). There were delays and poor communication. Change orders were needed, but the mark up was high. Quality was good, but he had to baby sit. They exceeded the completion time by quite a bit. Jonathan would probably use Maguire again, but would put in stricter LD's next time.

CALL TAKEN BY: Dean Peterson

*To be filed with project.



TELEPHONE CONVERSATION RECORD

DATE: 7/11/25
TIME: 9:30 am CT

PROJECT NO: WR23-00-047
PROJECT: Sidney Tank (Phase 2)

PERSON: Kal Tucker
COMPANY: Maguire

PHONE NUMBER: 406-579-8821 (c)
FAX NUMBER: _____

I asked Kal if there were any opportunities for negotiation on contingencies. He said that is something they could consider. He will send me an email with their LD's broken out and a list of value engineering possibilities if the client is interested.

I asked if there was any chance they would start on foundation work this year. He will have to check with his team and include that answer in the email.

CALL TAKEN BY: Dean Peterson

*To be filed with project.