STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE

DEPARTMENT OF TREASURY/ DIVISION OF REVENUE PO BOX 252 17 17 TRENTON NET 98646-0252

TAXPAYER NAME

KLBL, INC.

ADDRESS:

281 SQUANKUM RD/RT 547 FARMINGDAUE NJ. 02727 EFFECTIVE DATE:

12/02/04

TRADE NAME:

VIC GERARD GOLF CARS, INC.

SEQUENCE NUMBER:

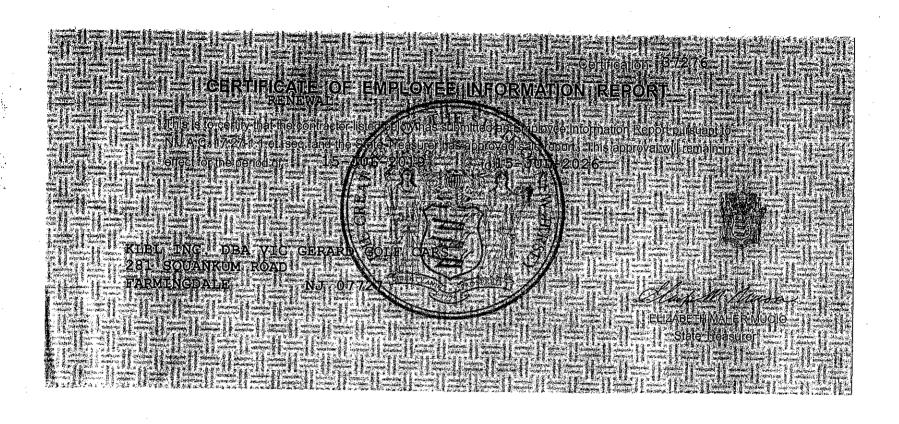
1145642

ISSUANCE DATE:

07/08/05

FORM-BRC(08-01)

This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.



Appendix A

(Revised: January, 2016)

EXHIBIT A

MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE N.J.S.A. 10:5-31 et seq. (P.L. 1975, C. 127) N.J.A.C. 17:27

GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will ensure that equal employment opportunity is afforded to such applicants in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such equal employment opportunity shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union of the contractor's commitments under this chapter and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A.10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to meet targeted county employment goals established in accordance with N.J.A.C.I7:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, and labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job related testing, as established by the statutes and court decisions of the State of New J erseyand as established by applicable Federal law and applicable Federal court decisions.

In conforming with the targeted employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New J ersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

- Letter of Federal Affirmative Action Plan Approval
- Certificate of Employee Information Report
- Employee Information Report Form AA-302 (electronically provided by the Division and distributed to the public agency through the Division's website at: http:// www.state.nj.us/treasury/contract_compliance/.

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Purchase & Property, CCAU, EEO Monitoring Program as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Purchase & Property, CCAU, EEO Monitoring Program for conducting a compliance investigation pursuant to N.J.AQ.47/27-1.1 et sea?

Company KLBLILP. alba VIC Go

- - - - - - - -

Signature

Date

39

Grounds Equipment Bld #ESCNJ 18/19-25

Bid Opening: 2/5/19 at 11:00 a.m.

Educational Services Commission of New Jersey Business Office

1660 Stelton Road Second Floor Piscataway, New Jersey 08854

Chapter 271 Political Contribution Disclosure Form

(Contracts that Exceed \$17,500.00) Ref. N.J.S.A. 19:44A-20.26

The undersigned, be	eing authorized and kno	owledgeable of the circumstances, Business En)	does hereby certify that this triangles that the following triangles the following
•	· · ·	ected official, political candidate o	r any political committee as
defined in N.J.S.A. 19	9:44-20.26 during the t	welve (12) months preceding this	award of contract:
		Reportable Contributions	
<u>Date of</u> <u>Contribution</u>	Amount of Contribution	Name of Recipient Elected Official/	Name of Contributor
		<u>Committee/Candidate</u>	
The Business Entity	may attach additional p	pages if needed.	
☑ No Reportable C	Contributions (Please c	heck (✓) if applicable.)	
		evand GAF (AV & (Business al candidate or any political comm	s Entity) made no reportable nittee as defined in N.J.S.A. 19:44-
Certification			
			1 200F CL + 274
I certify that the info	ormation provided abov	ve is in full compliance with Public	: law 2005 – Chapter 2/1.
Name of Authorized	Agent William	Lynch	
Signature	li thencell	Title Presid	dent
Business Entity KL	BL Inc Ma	Vic Geord Golf	Cars
	V		

STATEMENT OF OWNERSHIP DISCLOSURE

N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

This statement shall be completed, certified to, and included with all bid and proposal submissions. Failure to submit the required information is cause for automatic rejection of the bid or proposal.

Name of Organization: KLBL Crc, alba Vic Gerard Golf Cars	
Organization Address: 28 Sauch Kum Rose	
City, State, ZIP: Farm Ingolak, WS 5777	
Part I Check the box that represents the type of business organization:	
Sole Proprietorship (skip Parts II and III, execute certification in Part IV)	
Non-Profit Corporation (skip Parts II and III, execute certification in Part IV)	
For-Profit Corporation (any type) Limited Liability Company (LLC)	
Partnership Limited Partnership Limited Liability Partnership (LLP)	
Other (be specific):	
Part II Check the appropriate box	
The list below contains the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be. (COMPLETE THE LIST BELOW IN THIS SECTION) OR	
No one stockholder in the corporation owns 10 percent or more of its stock, of any class, or no individu partner in the partnership owns a 10 percent or greater interest therein, or no member in the limited liability company owns a 10 percent or greater interest therein, as the case may be. (SKIP TO PART IN	
(Please attach additional sheets if more space is needed):	
Name of Individual or Business Home Address (for Individuals) or Business Address Entity	
William Lynch 321 Washington Bld Sea Girt, NS 08750	

Part III DISCLOSURE OF 10% OR GREATER OWNERSHIP IN THE STOCKHOLDERS, PARTNERS OR LLC MEMBERS LISTED IN PART II

If a bidder has a direct or indirect parent entity which is publicly traded, and any person holds a 10 percent or greater beneficial interest in the publicly traded parent entity as of the last annual federal Security and Exchange Commission (SEC) or foreign equivalent filing, ownership disclosure can be met by providing links to the website(s) containing the last annual filing(s) with the federal Securities and Exchange Commission (or foreign equivalent) that contain the name and address of each person holding a 10% or greater beneficial interest in the publicly traded parent entity, along with the relevant page numbers of the filing(s) that contain the information on each such person. Attach additional sheets if more space is needed.

Website (URL) containing the last annual SEC (or foreign equivalent) filing	Page #'s		

Please list the names and addresses of each stockholder, partner or member owning a 10 percent or greater interest in any corresponding corporation, partnership and/or limited liability company (LLC) listed in Part II other than for any publicly traded parent entities referenced above. The disclosure shall be continued until names and addresses of every non-corporate stockholder, and individual partner, and member exceeding the 10 percent ownership criteria established pursuant to N.J.S.A. 52:25-24.2 has been listed. Attach additional sheets if more space is needed.

Stockholder/Partner/Member and	Home Address (for Individuals) or Business						
Corresponding Entity Listed in Part II	Address						
William Lynch/Resident/ 100%	321 Washington Blud Sea Girt No 08750						

Part IV Certification

I, being duly sworn upon my oath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I acknowledge: that I am authorized to execute this certification on behalf of the bidder/proposer; that the *ESCNJ and/or its members* is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the completion of any contracts with the *ESCNJ and/or its members* to notify the *ESCNJ and/or its members* in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the, permitting the *ESCNJ and/or its members* to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print):	William Lynon	Title: Pust	dent
Signature:	With them les	Date: 2	15/19

This statement shall be completed, certified to, and included with all bid and proposal submissions. Failure to submit the required information is cause for automatic rejection of the bid or proposal.

Educational Services Commission of New Jersey DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN PART 1: CERTIFICATION BIDDERS MUST COMPLETE PART 1 BY CHECKING EITHER BOX.

Part 1

FAILURE TO CHECK EITHER BOX WILL RENDER THE PROPOSAL NON-RESPONSIVE.

Pursuant to Public Law 2012, c. 25, any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract must complete the certification below to attest, under penalty of perjury, that neither the person or entity, nor any of its parents, subsidiaries, or affiliates, is identified on the Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran. The Chapter 25 list is found on the Division's website at http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf. Bidders must review this list prior to completing the below certification. Failure to complete the certification will render a bidder's proposal non-responsive. If the Director finds a person or entity to be in violation of law, s/he shall take action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

PLEASI	CHECK EITHER BOX;
	certify, pursuant to Public Law 2012, c. 25, that neither the person/entity listed above nor any of the entity's parents, subsidiaries, or affiliates is listed on the N.J. Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). I further certify that I am the person listed above, or I am an officer or representative of the entity listed above and am authorized to make this certification on its behalf. I will skip Part 2 and sign and complete the Certification below. OR I am unable to certify as above because I or the bidding entity and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below. Failure to provide such will result in the proposal being rendered as non-responsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.
Part 2	
You mus affiliates PROVID	PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN provide a detailed, accurate and precise description of the activities of the bidding person/entity, or one of its parents, subsidiaries or engaging in the investment activities in Iran outlined above by completing the boxes below. INFORMATION RELATIVE TO THE ABOVE QUESTIONS. PLEASE PROVIDE THOROUGH ANSWERS TO EACH QUESTION EED TO MAKE ADDITIONAL ENTRIES, USE ADDITIONAL PAGES
Name:	Relationship to
Descript	n of Activities: Bidder/Vendor:
Duration	of Engagement:Anticipated Cessation Date
Bidder/V	ndor
Contact	ame:Contact Phone Number:
best of n entity. I : acknowly Services informat certificat agreeme may deci Full Na: Title:	In the being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments thereto to the knowledge are true and complete. I attest that I am authorized to execute this certification on behalf of the below-referenced person or knowledge that the Educational Services Commission of New Jersey is relying on the information contained herein and thereby lege that I am under a continuing obligation from the date of this certification through the completion of contracts with the Educational Commission of New Jersey to notify the Educational Services Commission of New Jersey in writing of any changes to the answers of an contained herein. I acknowledge that I am aware that it is a criminal offense to make a false statement or misrepresentation in this on, and if I do so. I recognize that I am subject to criminal prosecution under the law and that it will also constitute a material breach of my s(s) with the Educational Services Commission of New Jersey and that the Educational Services Commission of New Jersey at its option re any contract(s) resulting from this certification void and unenforceable. Signature: Signature: Date: Signature: Signat
	Did Opening 2/5/10 at 11:00 a m

Educational Services Commission of New Jersey DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN **PART 1: CERTIFICATION** BIDDERS MUST COMPLETE PART 1 BY CHECKING EITHER BOX.

Part 1 FAILURE TO CHECK EITHER BOX WILL RENDER THE PROPOSAL NON-RESPONSIVE.

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to compl	tes, is identified on the Department of Treasiny's Chapter 25 has to the control of the Department of Treasiny's Chapter 25 has to the Division's website at http://www.state.nj.us/treasurry/purchase/pdf/Chapter25List.pdf . Bidders must review this list prior found on the Division's website at https://www.state.nj.us/treasurry/purchase/pdf/Chapter25List.pdf . Bidders must review this list prior found is proposed to the Division of t
PLEAS]	E CHECK EITHER BOX:
V	I certify, pursuant to Public Law 2012, c. 25, that neither the person/entity listed above nor any of the entity's parents, subsidiaries, or affiliates is listed on the N.J. Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). I further certify that I am the person listed above, or I am an officer or representative of the entity listed above and am authorized to make this certification on its behalf. I will skip Part 2 and sign and complete the Certification below.
	I am unable to certify as above because I or the bidding entity and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below. Failure to provide such will result in the proposal being rendered as non-responsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.
Part 2	
You mu engagin	E PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN Ist provide a detailed, accurate and precise description of the activities of the bidding person/entity, or one of its parents, subsidiaries or affiliates, g in the investment activities in Iran outlined above by completing the boxes below. DE INFORMATION RELATIVE TO THE ABOVE QUESTIONS, PLEASE PROVIDE THOROUGH ANSWERS TO EACH QUESTION. DEED TO MAKE ADDITIONAL ENTRIES, USE ADDITIONAL PAGES
Name:_	Relationship to Bidder/Vendor:
	ation of Activities:
Duratio	on of Engagement:Anticipated Cessation Date
Bidder	Vendor
Contac	t Name:Contact Phone Number:
Certific best of entity. acknow Comm herein. recogn Service may de Full N	cation: I, being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments thereto to the my knowledge are true and complete. I attest that I am authorized to execute this certification on behalf of the below-referenced person or I acknowledge that the Educational Services Commission of New Jersey is relying on the information contained herein and thereby ledge that I am under a continuing obligation from the date of this certification through the completion of contracts with the Educational Services ission of New Jersey to notify the Educational Services Commission of New Jersey in writing of any changes to the answers of information contains I acknowledge that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I ize that I am subject to criminal prosecution under the law and that it will also constitute a material breach of my agreements(s) with the Education es Commission of New Jersey and that the Educational Services Commission of New Jersey at its option eclare any contract(s) resulting from this certification void and unenforceable. Signature: Date: 12/1/2020
Bidde	or/Vendor:

Educational Services Commission of New Jersey DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN PART 1: CERTIFICATION BIDDERS MUST COMPLETE PART 1 BY CHECKING EITHER BOX.

Part 1

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APPENDIX A

AMERICANS WITH DISABILITIES ACT OF 1990 Equal Opportunity for Individuals with Disability

The contractor and the Educational Services Commission of New Jersey (hereafter "owner") do hereby agree that the provisions of Title 11 of the Americans With Disabilities Act of 1990 (the "Act") (42 U.S.C. S121 01 et seq.), which prohibits discrimination on the basis of disability by public entities in all services, programs, and activities provided or made available by public entities, and the rules and regulations promulgated pursuant there unto, are made a part of this contract. In providing any aid, benefit, or service on behalf of the owner pursuant to this contract, the contractor agrees that the performance shall be in strict compliance with the Act. In the event that the contractor, its agents, servants, employees, or subcontractors violate or are alleged to have violated the Act during the performance of this contract, the contractor shall defend the owner in any action or administrative proceeding commenced pursuant to this Act. The contractor shall indemnify, protect, and save harmless the owner, its agents, servants, and employees from and against any and all suits, claims, losses, demands, or damages, of whatever kind or nature arising out of or claimed to arise out of the alleged violation. The contractor shall, at its own expense, appear, defend, and pay any and all charges for legal services and any and all costs and other expenses arising from such action or administrative proceeding or incurred in connection therewith. In any and all complaints brought pursuant to the owner's grievance procedure, the contractor agrees to abide by any decision of the owner which is rendered pursuant to said grievance procedure. If any action or administrative proceeding results in an award of damages against the owner, or if the owner incurs any expense to cure a violation of the ADA which has been brought pursuant to its grievance procedure, the contractor shall satisfy and discharge the same at its own expense.

The owner shall, as soon as practicable after a claim has been made against it, give written notice thereof to the contractor along with full and complete particulars of the claim, If any action or administrative proceeding is brought against the owner or any of its agents, servants, and employees, the *owner shall* expeditiously forward or have forwarded to the contractor every demand, complaint, notice, summons, pleading, or other process received by the owner or its representatives.

It is expressly agreed and understood that any approval by the owner of the services provided by the contractor pursuant to this contract will not relieve the contractor of the obligation to comply with the Act and to defend, indemnify, protect, and save harmless the owner pursuant to this paragraph.

It is further agreed and understood that the owner assumes no obligation to indemnify or save harmless the contractor, its agents, servants, employees and subcontractors for any claim which may arise out of their performance of this Agreement. Furthermore, the contractor expressly understands and agrees that the provisions of this indemnification clause shall in no way limit the contractor's obligations assumed in this Agreement, nor shall they be construed to relieve the contractor from any liability, nor preclude the owner from taking any other actions available to it under any other provisions of the Agreement or otherwise at law.

Company KLBL Two allow Vic Gerard Got Coxs	Uilliam bunch
Signature Weeling Thyself Date	2/5/19

Form W-9 (Rev. December 2014) Department of the Treasu

Request for Taxpayer Identification Number and Certification

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

With the Least and Adjalon			_			_	-	-OTES	INCOME.	THE REAL PROPERTY.	-
Name (as shown on your income tax return). Name is required on this KLBL INC	line; do not leave this line blank.										×
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D/B/A VIC GERARD GOLF CARS 3 Check appropriate box for federal tex classification; check only one of high-member LLC individual/spie proprietor or Corporation 7 3 0 or single-member LLC in the tex classification (C-C corporation Note, for a single-member LLC that is disregarded, do not check Lither tex classification of the single-member owner. Other (see instructions)	the following seven boxes:	Trust/	stah	Inel	ructio	STK	on pa	晌			y to see
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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	80	ojal	security	NUM	bei		-			
backup withholding. For individuals, this is generally your social security resident alien, sole proprietor, or disregarded entity, see the Part I instru	rumber (SSNA However, for a		T	\square		Τ	Sec.	-[1	
entities, it is your employer identification number (EiN), if you do not have	re a number, see How to get a		1	Ш.	L	L	٦	L	1		L
TIN on page 3.		or		-		_		_			-
Note. If the account is in more than one name, see the instructions for it	ine 1 and the chart on page 4 fo	En	nplu	er Iden	Hica	HO!	hum	ibe	7		-
guidelines on whose number to enter.		2	0	- 2	4	1	1 5	1	1 8	4	
Part II Certification			1.		1_	1		_			-
Under penalties of perjury, I certify that:		-				-	-	-		-	-
The number shown on this form is my correct tempsyer identification.		mber t	o ha	ing teri	to m	بلم	and			E ×	
2. I am not subject to backup withholding because; (a), I am exempt from Service (IRS) that I am subject to backup withholding as a result of a no longer subject to backup withholding; and 2. I am a 11 S. elition or when 11 S. moreon (defined helps) and	n backup withhelding, or (b) i in fallure to report all interest or of	ridend:	Dee:	(c) the	ins 1	WIII	UOD)	(lec	me	thet	lam
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Sign Signature of U.S. person > William T william	W-Ov~ Date ▶	Š.		02/07	<u>.</u> 20	19					
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Future developments. Information about developments affecting Form W-9 (such	 Form 1099-Q (canceled del Form 1099-A (seguisition of 		onne	nt of sa	ured	pro	perty	À			
as legislation enacted after we release it) is at www.irs.gov/iw9.	Use Form W-9 only if you s								alien),	to	
Purpose of Form	provide your correct TRV.										
An inclividual or entity (Form W-9 requester) who is required to file an information return with the tRS must obtain your cowect taxpayer identification number (TIN) which may be your social security number (BSN), inclividual taxpayer identification number (TIN), adoption taxpayer identification number (ATIN), or employer	If you do not return Form M to beeing withholding. See M By signing the filled-unit for	mat is o n, you:	aciau	MALINE O	iaing:	r or	n page	\$ 2	•		
identification number (EIN), to report on an information return the amount peld to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:	Certify that the TiN you a to be issued, Certify that you are not a							ing	for a	לרדוטה	107
Form 1099-INT (Interest camed or paid)	O Otales assessed as from he	and on some sound	adulus 1	etion If u	rat I seri	15. fte	118.	9248	empt p	Eyee	, If
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Form 1089-B (stock or mutual fund sales and certain other transactions by trokers)		al ambada	-	this for	n 450 m	him	India	Bth	ng tha	t you	eres o
Come 1000 C frames on frame and potents American	4. Certify that PATCA codel exempt from the FATCA repo	ting, is	POMB	nt. See (West i	la F	ATOA	10	portin	gr or	
 Form 1999-8 (proceeds from real estate transactions) Form 1999-K (merchant card and third party network transactions) 	 Geriffy that FATCA code exempt from the FATCA report page 2 for further information. 	ting, to	POMB	ni. See (vi qir e Visat i	la F	ATOA	100	pomn	gr or	

XR1JSMULLEN

ACORD

CERTIFICATE OF LIABILITY INSURANCE

02/19/2019

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).

tills certificate does not	comer rights to the certificate noticer in hear						
PRODUCER		CONTACT Jennifer Smullen					
AssuredPartners of VA, LL 4909 Dickens Road, Suite 2		PHONE (A/C, No, Ext): (804) 354-9381 4581	FAX (A/C, No): (804) 359-9546				
Richmond, VA 23230		E-MAIL ADDRESS: jennifer.smullen@assuredpartners.com					
		INSURER(S) AFFORDING COVERAG	E NAIC#				
		INSURER A: American Fire & Casualty	24066				
INSURED		INSURER B: Ohio Security Insurance Co.	24082				
	nc. t/a Peebles Golf Cars Vic Gerard Golf Cars	INSURER C : Ohio Casualty Insurance Co	24074				
8615 Telegrap		INSURER D: West American Insurance Co	44393				
Glen Allen, VA		INSURER E:					
		INSURER F:					
COVERAGES	CERTIFICATE NUMBER:	REVISION N	UMBER:				

IN CE	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	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF	POLICY EXP (MM/DD/YYYY)	LIMIT	S		
Α	X COMMERCIAL GENERAL LIABILITY				400000000000000000000000000000000000000	(11111)	EACH OCCURRENCE	s 1,000,000		
Į.	CLAIMS-MADE X OCCUR	x		BKA57250078	05/16/2018	05/16/2019	DAMAGE TO RENTED PREMISES (Ea occurrence)	1,000,000		
9							MED EXP (Any one person)	s 15,000		
1							PERSONAL & ADV INJURY	\$ 1,000,000		
1	GEN'L AGGREGATE LIMIT APPLIES PER:					ì	GENERAL AGGREGATE	\$ 2,000,000		
	POLICY PRO- X LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000		
	X OTHER: \$0 Ded							\$		
В	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000		
	X ANY AUTO			BAS57250078	05/16/2018	05/16/2019	BODILY INJURY (Per person)	\$		
1 2	OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$		
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$		
								\$		
С	X UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	\$ 10,000,000		
	EXCESS LIAB CLAIMS-MADE			USO57250078	05/16/2018	05/16/2019	AGGREGATE	\$ 10,000,000		
	DED X RETENTION\$ 10,000							\$		
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						X PER OTH-			
	Y/N	N/A		XWA57250078	05/16/2018	05/16/2019	E.L. EACH ACCIDENT	\$ 1,000,000		
	(Mandatory in NH)	IN / A					E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000		
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	s 1,000,000		
D	Equipment Floater			BMW58523340	05/16/2018	05/16/2019		2,050,000		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RE: Bid #ESCNJ 18/19-25, Grounds EQUIPMENT Bid
Additional Insured: Educational Services Commission of New Jersey

CERTIFICATE HOLDER	CANCELLATION
Educational Services Commission of New Jersey 1660 Stelton Rd. Piscataway, NJ 08854	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
	Gennifer P. Smuller

XR1JSMULLEN

LOC#: 1

ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY ASSURED POLICY NUMBER SEE PAGE 1		NAMED INSURED KLBL South, Inc. t/a Peebles Golf Cars KLBL, Inc. t/a Vic Gerard Golf Cars 8615 Telegraph Rd. Glen Allen, VA 23060-4030	
CARRIER	NAIC CODE		
SEE PAGE 1	SEE P 1	EFFECTIVE DATE: SEE PAGE 1	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM, FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Forms Included

GL - Blanket Additional Insureds - Completed Operations

GL - Blanket Additional Insureds

GL - Primary & Non-Contributory
GL - Blanket Waiver of Subrogation
AL - Blanket Additional Insureds

AL - Blanket Waiver of Subrogation

ACCEPTANCE OF BID and CONTRACT AWARD "Grounds Equipment"

TO BE COMPLETED BY RESPONDENT

In compliance with the Request for Bid, the undersigned warrants that I/we have examined the Instructions to Respondents, and, being familiar with all of the conditions surrounding the proposed projects, hereby offer and agree to furnish all labor, materials, and supplies incurred in compliance with all terms, conditions, specifications and amendments in the Request for Bid and any written exceptions to the bid. Signature also certifies understanding and compliance with the certification requirements of the ESCNJ's Terms and Conditions and any special Terms and Conditions if applicable. The undersigned understands that his/her competence and responsibility and that of any proposed subcontractors, time of completion, as well as other factors of interest to the ESCNJ as stated in the evaluation section will be a consideration in making the award. Your bid for contracting services is hereby accepted. As contractor, you are now bound to sell the materials and services listed by the attached bid based upon the solicitation, including all terms, conditions, specifications, amendments as set forth in the Request for Bid. As contractor you are hereby cautioned not to commence any billable work or provide any material or service under this contract until contractor receives an executed purchase order from a Co-op member. The parties intend this contract to constitute the final and complete agreement between the ESCNJ and contractor, and no other agreements, oral or otherwise, regarding the subject matter of this contract, shall bind any of the parties hereto. No change or modification of this contract shall be valid unless it shall be in writing and signed by both parties to this contract. If any provision of this contract is deemed invalid or illegal by any appropriate court of law, the remainder of this contract shall not be affected thereby. The term of the agreement shall commence on award and continue for two years unless terminated, canceled or extended. By mutual written agreement, the contract may be extended as permitted by law

extended as permitted by law.	
Company Name KLBL-Line allela. Vic Gera	wd Golf Gov 3 Date 2/5/19
Company Address 28/ Squan Kum Rd	_ City Farm Ingolate State _ NT zip Code 07727
Contact Person William Lynd	Title President
Authorized Signature (ink only) With Huyn	Al Title Fresident
/	
ACCEPTANCE OF BID AND CONTRACT AWARD	BELOW TO BE COMPLETED ONLY BY ESCNJ

Awarding Agency: Educational Services Commission of New Jersey

Agency Executive:

Patrick M. Moran, SBA/BS

Awarded this ______ day of ______ day of ______ Contract Number #ESCNJ 18/19-25