

ORIGINAL**SIGNATURE PAGE**

Company Name: LaBella Associates, D.P.C., Corp. _____
(PRINT)

Preparer's Name: Girish Mehta, PE, LSRP _____
(PRINT)

Signature: Girish Mehta _____
(DATE)

Address: 220 Davidson Avenue, Suite 307 _____
Somerset, NJ 08873 _____

Telephone No.: (908) 417-6505 _____

Fax No.: 585-454-3066 _____

E-Mail Address: gmehta@labellapc.com _____
*****(This should be the email where Contracts would be sent)*****

Contact Person: Girish Mehta, PE, LSRP _____

FEIN:  _____
(Federal Employee ID)

BRC:  _____
(Business Registration Certificate)

*****PLEASE COMPLETE AND SUBMIT WITH YOUR RFPQ RESPONSE*****

(Revised 2/2017)