BIDDER SUMMARY SHEET

ITB #24-054

2024 I&I Sanitary Sewer Rehabilitation

Business Name: <u>In</u>	Insituform Technologies USA, LLC					
Street Address:58	580 Goddard Avenue					
City, State, Zip: Cl	Chesterfield, MO 63005					
Contact Name: Pa	Patrizia H. Sordillo					
Title: Contracting &	Attesting Officer	- -				
Phone: 636-530-28	863	Fax: 636-530-8	701			
E-Mail address: ps	sordillo@azuria.com					
Price Proposal GRAND TOTAL BID PRICE \$ 731,613,65						
	<u>AUTHORIZATION</u>	& SIGNATURE				
Name of Authorized	d Signee: Patrizia H. Sordillo					
Signature of Authori	rized Signee:					
Title: Contracting & /	Attesting Officer	Date:	June 28, 2024			



Bidders shall complete this Certificate of Compliance. Failure to comply with all submission requirements may result in a determination that the Bidder is not responsible.

The undersigned Patrizia H. Sordillo
(Enter Name of Person Making Certification)
as Contracting & Attesting Officer (Enter Title of Person Making Certification)
and on behalf of Insituform Technologies USA, LLC (Enter Name of Business Organization)
certifies that Bidder is:
1) A BUSINESS ORGANIZATION: Yes [X] No []
Federal Employer I.D. #: 43-1319597 (or Social Security # if a sole proprietor or individual)
The form of business organization of the Bidder is (check one):
Sole Proprietor Independent Contractor (Individual) Partnership X LLC Corporation (State of Incorporation) (Date of Incorporation)
2) STATUS OF OWNERSHIP
Illinois Public Act 102-0265, approved August 2021, requires the Village of Orland Park to collect "Statu of Ownership" information. This information is collected for reporting purposes only. Please check th following that applies to the ownership of your business and include any certifications for the categorie checked with the proposal. Business ownership categories are as defined in the Business Enterprise for Minorities, Women, and Persons with Disabilities Act, 30 ILCS 575/0.01 et seq.
Minority-Owned [] Small Business [] (SBA standards) Women-Owned [] Prefer not to disclose [] Veteran-Owned [] Not Applicable [X] Disabled-Owned []
How are you certifying? Certificates Attached [] Self-Certifying []

STATUS OF OWNERSHIP FOR SUBCONTRACTORS

This information is collected for reporting purposes only. Please check the following that applies to the ownership of subcontractors.

Minority-Owned [] Small Business [] (SBA standards)
Women-Owned [] Prefer not to disclose []
Veteran-Owned [] Not Applicable [X]

3) AUTHORIZED TO DO BUSINESS IN ILLINOIS: Yes [X] No []

The Bidder is authorized to do business in the State of Illinois.

4) ELIGIBILE TO ENTER INTO PUBLIC CONTRACTS: Yes [X] No []

The Bidder is eligible to enter into public contracts, and is not barred from contracting with any unit of state or local government as a result of a violation of either Section 33E-3, or 33E-4 of the Illinois Criminal Code, or of any similar offense of "bid-rigging" or "bid-rotating" of any state or of the United States.

5) SEXUAL HARASSMENT POLICY COMPLIANT: Yes [X] No []

Please be advised that Public Act 87-1257, effective July 1, 1993, 775 ILCS 5/2-105 (A) has been amended to provide that every party to a public contract must have a written sexual harassment policy in place in full compliance with 775 ILCS 5/2-105 (A) (4) and includes, at a minimum, the following information:

(I) the illegality of sexual harassment; (II) the definition of sexual harassment under State law; (III) a description of sexual harassment, utilizing examples; (IV) the vendor's internal complaint process including penalties; (V) the legal recourse, investigative and complaint process available through the Department of Human Rights (the "Department") and the Human Rights Commission (the "Commission"); (VI) directions on how to contact the Department and Commission; and (VII) protection against retaliation as provided by Section 6-101 of the Act. (Illinois Human Rights Act). (emphasis added). Pursuant to 775 ILCS 5/1-103 (M) (2002), a "public contract" includes "...every contract to which the State, any of its political subdivisions or any municipal corporation is a party."

6) EQUAL EMPLOYMENT OPPORTUNITY COMPLIANT: Yes [X] No []

During the performance of this Project, Bidder agrees to comply with the "Illinois Human Rights Act", 775 ILCS Title 5 and the Rules and Regulations of the Illinois Department of Human Rights published at 44 Illinois Administrative Code Section 750, et seq.

The Bidder shall:

(I) not discriminate against any employee or applicant for employment because of race, color, religion, sex, marital status, national origin or ancestry, age, or physical or mental handicap unrelated to ability, or an unfavorable discharge from military service; (II) examine all job classifications to determine if minority persons or women are underutilized and will take appropriate affirmative action to rectify any such underutilization; (III) ensure all solicitations or advertisements for employees placed by it or on its behalf, it will state that all applicants will be afforded equal opportunity without discrimination because of race, color, religion, sex, marital status, national origin or ancestry, age, or physical or mental

handicap unrelated to ability, or an unfavorable discharge from military service; (IV) send to each labor organization or representative of workers with which it has or is bound by a collective bargaining or other agreement or understanding, a notice advising such labor organization or representative of the Vendor's obligations under the Illinois Human Rights Act and Department's Rules and Regulations for Public Contract; (V) submit reports as required by the Department's Rules and Regulations for Public Contracts, furnish all relevant information as may from time to time be requested by the Department or the contracting agency, and in all respects comply with the Illinois Human Rights Act and Department's Rules and Regulations for Public Contracts; (VI) permit access to all relevant books, records, accounts and work sites by personnel of the contracting agency and Department for purposes of investigation to ascertain compliance with the Illinois Human Rights Act and Department's Rules and Regulations for Public Contracts; and (VII) include verbatim or by reference the provisions of this Equal Employment Opportunity Clause in every subcontract it awards under which any portion of this Agreement obligations are undertaken or assumed, so that such provisions will be binding upon such subcontractor.

In the same manner as the other provisions of this Agreement, the Bidder will be liable for compliance with applicable provisions of this clause by such subcontractors; and further it will promptly notify the contracting agency and the Department in the event any subcontractor fails or refuses to comply therewith. In addition, the Bidder will not utilize any subcontractor declared by the Illinois Human Rights Department to be ineligible for contracts or subcontracts with the State of Illinois or any of its political subdivisions or municipal corporations.

"Subcontract" means any agreement, arrangement or understanding, written or otherwise, between the Bidder and any person under which any portion of the Bidder's obligations under one or more public contracts is performed, undertaken or assumed; the term "subcontract", however, shall not include any agreement, arrangement or understanding in which the parties stand in the relationship of an employer and an employee, or between a Bidder or other organization and its customers.

In the event of the Bidder's noncompliance with any provision of this Equal Employment Opportunity Clause, the Illinois Human Right Act, or the Rules and Regulations for Public Contracts of the Department of Human Rights the Bidder may be declared non-responsible and therefore ineligible for future contracts or subcontracts with the State of Illinois or any of its political subdivisions or municipal corporations, and this agreement may be canceled or avoided in whole or in part, and such other sanctions or penalties may be imposed or remedies involved as provided by statute or regulation.

7) PREVAILING WAGE COMPLIANCE: Yes [X] No []

In the manner and to the extent required by law, this bid is subject to the Illinois Prevailing Wage Act and to all laws governing the payment of wages to laborers, workers and mechanics of a Bidder or any subcontractor of a Bidder bound to this agreement who is performing services covered by this contract. If awarded the Contract, per 820 ILCS 130 et seq. as amended, Bidder shall pay not less than the prevailing hourly rate of wages, the generally prevailing rate of hourly wages for legal holiday and overtime work, and the prevailing hourly rate for welfare and other benefits as determined by the Illinois Department of Labor or the Village and as set forth in the schedule of prevailing wages for this contract to all laborers, workers and mechanics performing work under this contract (available at https://www2.illinois.gov/idol/Laws-Rules/CONMED/Pages/Rates.aspx).

The undersigned Bidder further stipulates and certifies that it has maintained a satisfactory record of Prevailing Wage Act compliance with no significant Prevailing Wage Act violations for the past three (3) years.

Certified Payroll. The Illinois Prevailing Wage Act requires any contractor and each subcontractor who participates in public works to file with the Illinois Department of Labor (IDOL) certified payroll for those calendar months during which work on a public works project has occurred. The Act requires certified payroll to be filed with IDOL no later than the 15th day of each calendar month for the immediately

preceding month through the Illinois Prevailing Wage Portal—an electronic database IDOL has established for collecting and retaining certified payroll. The Portal may be accessed using this link: https://www2.illinois.gov/idol/Laws-Rules/CONMED/Pages/certifiedtranscriptofpayroll.aspx. Village reserves the right to withhold payment due to Contractor until Contractor and its subcontractors display compliance with this provision of the Act.

8)	PARTICIPATION IN APPRENTICESHIP AND TRAINING PROGRAM:	Yes [X]	No	
u,	ARTICIPATION			

Bidder participates in apprenticeship and training programs applicable to the work to be performed on the project, which are approved by and registered with the United States Department of Labor's Office of Apprenticeship.

Name of A&T Program: Insituform is a signatury to Labor's Local 2 and Operators Local 150
Brief Description of Program: Programs are through the local union hall

9) TAX COMPLIANT: Yes [X] No []

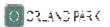
Bidder is current in the payment of any tax administered by the Illinois Department of Revenue, or if it is not: (a) it is contesting its liability for the tax or the amount of tax in accordance with procedures established by the appropriate Revenue Act; or (b) it has entered into an agreement with the Department of Revenue for payment of all taxes due and is currently in compliance with that agreement.

AUTHORIZATION & SIGNATURE:

I certify that I am authorized to execute this Certificate of Compliance on behalf of the Bidder set forth on the Bidder Summary Sheet, that I have personal knowledge of all the information set forth herein and that all statements, representations, that the bid is genuine and not collusive, and information provided in or with this Certificate are true and accurate

The undersigned, having become familiar wit furnish all of the labor, materials, necess transportation services necessary to perform required for the Project.

e.
h the Project specified in this bid, proposes to provide and sary tools, expendable equipment and all utility and and complete in a workmanlike manner all of the work
ACKNOWLEDGED AND AGREED TO: Signature of Authorized Officer
Patrizia H. Sordillo Name of Authorized Officer
Contracting & Attesting Officer Title
<u>June 28, 2024</u> Date
5



Unit Price Sheet - AMENDED

ITB #24-054

2024 I&I Sanitary Sewer Rehabilitation

Proposer agrees to furnish to the VILLAGE all necessary materials, equipment, labor, etc. to complete the PROJECT in accordance with provisions, instructions, and specifications of the VILLAGE for the prices as follows:

ITEM	DESCRIPTION	UNIT	QTY	UNIT PRICE	Cost
1	PRE-CONSTRUCTION SEWER CLEANING AND TELEVISING	LF	7,700	\$6.19	\$ 47,663.00
2	HEAVY CLEANING	LF	50	\$10.61	\$ 530.50 -
3	POINT REPAIR PEBBLE 1, 8" DIA, 14' LENGTH, 13' DEPTH, GRASS, SIDEWALK AND DRIVEWAY RESTORATION	LSUM	1	\$34,620.49	34,620.49
4	POINT REPAIR PEBBLE 2, 8" DIA, 15' LENGTH, 16' DEPTH, GRASS AND SIDEWALK RESTORATION	LSUM	1	\$35,983.59	\$ 35,983.59
5	POINT REPAIR PEBBLE 3, 8" DIA, 24' LENGTH, 18' DEPTH, GRASS, SIDEWALK AND DRIVEWAY RESTORATION	LSUM	1	\$42,224.51	\$ - 42,224.51
6	POINT REPAIR PEBBLE 4, 8" DIA, 20' LENGTH, 19' DEPTH, GRASS AND SIDEWALK RESTORATION	LSUM	1	\$41,320.82	\$ 41,320.82
7	ADDITIONAL 8" PVC SANITARY SEWER, ASTM 3034 SDR 26	LF	100	\$581.52	\$ 58,152.00
8	ADDITIONAL 6" PVC SANITARY LATERAL, ASTM 3034 SDR 26	LF	50	\$500.10	\$ \$25,005.00 ⁻
	ADDITIONAL SERVICE CONNECTION REPAIR (WITHIN TRENCH)	EACH	4	\$744.35	\$ 2,977.40
10	ADJUST WATER SERVICE LINES WITHIN TRENCH	LF	20	\$46.52	\$ 930.40 -
11	P.C.C SIDEWALK REMOVAL AND REPLACEMENT	Sf	540	\$23.26	\$ 12,560.40 -
	P.C.C DRIVEWAY PAVEMENT REMOVAL AND REPLACEMENT	SY	37	\$157.01	\$ 5,809.37
13	FULL DEPTH PATCHING, ASPHALT	SY	17	\$232.61	\$ 3,954.37 -
14	COMBINATION CONCRETE CURB AND GUTTER REMOVAL AND REPLACEMENT	LF	107	\$94.20	\$ 10,079.40 ⁻
15	DYE TESTING OF EXISTING SERVICES	EACH	7	\$2,139.00	\$ 14,973.00 -
16	LATERAL LAUNCH SERVICES	EACH	2	\$636.71	\$ 1,273.42 -
	CUT PROTRUDING TAPS	EACH	1	\$159.17	\$ 159.17 -
	CUT PROTRUDING TAPS WIITH SCHWALM ROBOT	EACH	11	\$931.52	\$ 931.52 -
19	AIR TEST AND GROUT MAINLINE JOINTS, 8"	EACH	15	\$1780.92	\$ 26,713.80 -
	AIR TEST AND GROUT MAINLINE JOINTS, 10"	EACH	1	\$1,760.46	\$ 1,760.46 -
	AIR TEST AND GROUT MAINLINE JOINTS, 18"	EACH	2	\$1,760.46	\$ \$3,520.91 -
	CURED-IN-PLACE SEWER LINER, 8" DIAMETER	FOOT	5,070	\$29.99	\$ 152,049.30 -
	CURED-IN-PLACE SEWER LINER, 10" DIAMETER	FOOT	325	\$37.59	\$ 12,216.75 -
	CURED-IN-PLACE SEWER LINER, 24" DIAMETER	FOOT	280	\$119.10	\$ 33,348.00 -
	CURED-IN-PLACE SHORT LINER, 8" DIAMETER	EACH	2	\$9,851.03	\$ 19,702.06 -
26	INTERNAL SERVICE LATERAL REINSTATEMENT	EACH	92	\$95.14	\$ 8,752.88 -
27	CLEANOUT INSTALLATION	EACH	1	\$9,723.09	\$ 9,723.09 -
	ROOT CUTTING FROM CLEANOUT	EACH	1	\$1,535.23	\$ 1,535.23 -
	LATERAL CLEANING AND TELEVISING	EACH	1	\$5,757.12	\$ 5,757.12 -
	LATERAL TELEVISING (PUSH CAMERA)	LF	10	\$54.67	\$ 546.70 -
	CIPP LATERAL LINER INSTALLATION, 8"x6", 5-FOOT SHORTY	EACH	1	\$13,049.42	\$ - 13,049.42
32	ADDITIONAL LATERAL LINER 6"	LF	10	\$83.16	\$ 831.60 -
	AIR TEST AND GROUT SERVICE CONNECTION, 5-FOOT	EACH	95	\$997.00	\$ 94,715.00
34	PROJECT MANAGEMENT	HR	8	\$1,030.37	\$ \$8,242.96 -
		*GF	RAND TOT	AL BID PRICE	\$ 731,613.65 -

*Please enter Total Cost on Bidder Summary Sheet

Proposer: Patrizia H. Sordillo

Firm Name: Insituform Technologies USA, LLC

Signed:

Title: Consulting & Attesting Officer

Dated: June 28, 2024



INSURANCE REQUIREMENTS

Please sign and provide a policy Specimen Certificate of Insurance showing current coverages.

If awarded the contract, all <u>Required Policy Endorsements</u> noted in the left column in **red bold** type MUST be provided.

Standard Insurance Requirements	Please provide the following coverage if box is checked.
WORKERS' COMPENSATION & EMPLOYER LIABILITY	LIABILITY UMBRELLA (Follow Form Policy)
Full Statutory Limits - Employers Liability	▼ \$1,000,000 – Each Occurrence
\$500,000 – Each Accident	\$1,000,000 - Aggregate
\$500,000 - Each Employee	33 3
\$500,000 – Policy Limit	☐ \$2,000,000 – Each Occurrence
Waiver of Subrogation in favor of the Village of Orland	\$2,000,000 – Aggregate
Park	. , , , , , , , , , , , , , , , , , , ,
. =	Other:
AUTOMOBILE LIABILITY (ISO Form CA 0001)	EXCESS MUST COVER: General Liability,
\$1,000,000 - Combined Single Limit Per Occurrence	Automobile Liability, Employers' Liability
Bodily Injury & Property Damage. Applicable for All	
Company Vehicles.	PROFESSIONAL LIABILITY
	\$1,000,000 Limit – Claims Made Form, Indicate
GENERAL LIABILITY (Occurrence basis) (ISO Form CG 0001)	Retroactive Date
\$1,000,000 - Combined Single Limit Per Occurrence	_
Bodily Injury & Property Damage	\$2,000,000 Limit – Claims Made Form, Indicate
\$2,000,000 – General Aggregate Limit	Retroactive Date
\$1,000,000 – Personal & Advertising Injury	
\$2,000,000 – Products/Completed Operations	Other:
Aggregate	Deductible not-to-exceed \$50,000 without prior
	written approval
ADDITIONAL INSURED ENDORSEMENTS:	D DIM DEDG BIGN
(Not applicable for Goods Only Purchases)	BUILDERS RISK Completed Property Full Replacement Cost Limits –
 ISO CG 20 10 or CG 20 26 (or Equivalent) 	Structures under construction
Commercial General Liability Coverage	Siluctures under construction
Commercial General Elability Coverage	☐ ENVIRONMENTAL IMPAIRMENT/POLLUTION
• CG 20 01 Primary & Non-Contributory (or	LIABILITY
Equivalent) The Village must be named as the	\$1,000,000 Limit for bodily injury, property
Primary Non-Contributory which makes the Village a	damage and remediation costs resulting from a
priority and collects off the policy prior to any other	pollution incident at, on or mitigating beyond the
claimants.	job site
	1
Blanket General Liability Waiver of Subrogation -	CYBER LIABILITY
Village of Orland Park A provision that prohibits an	\$1,000,000 Limit per Data Breach for liability,
insurer from pursing a third party to recover	notification, response, credit monitoring service
damages for covered loses.	costs, and software/property damage
	The second applicable in the light period of the second of
	CG 20 37 ADDITIONAL INSURED – Completed
	Operations (Provide only if box is checked)

Any insurance policies providing the coverages required of the Consultant, excluding Professional Liability, shall be specifically endorsed to identify "The Village of Orland Park, and their respective officers, trustees, directors, officials, employees, volunteers and agents as Additional Insureds on a primary/non-contributory basis with respect to all claims arising out of operations by or on behalf of the named insured." The required additional Insured coverage shall be provided on the Insurance Service Office (ISO) CG 20 10 or CG 20 26 endorsements or an endorsement at least as broad as the above noted endorsements as determined by the Village of Orland Park. Any Village of Orland Park insurance coverage shall be deemed to be on an excess or contingent basis as confirmed by the required (ISO) CG 20 01 Additional Insured Primary & Non- Contributory Endorsement. The policies shall also contain a Waiver of Subrogation in favor of the Additional Insureds in regard to General Liability and Workers' Compensation coverage. The certificate of insurance shall also state this information on its face. Any insurance company providing coverage must hold an A-, VII rating according to Best's Key Rating Guide. Each insurance policy required shall have the Village of Orland Park expressly endorsed onto the policy as a Cancellation Notice Recipient. Should any of the policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions. Permitting the contractor, or any subcontractor, to proceed with any work prior to our receipt of the foregoing certificate and endorsements shall not be a waiver of the contractor's obligation to provide all the above insurance.

Consultant agrees that prior to any commencement of work to furnish evidence of Insurance coverage providing for at minimum the coverages, endorsements and limits described above directly to the Village of Orland Park, 14700 S. Ravinia Avenue, Orland Park, IL 60462. Failure to provide this evidence in the time frame specified and prior to beginning of work may result in the termination of the Village's relationship with the contractor.

ACCEPTED & AGREED THIS 28th DAY OF June	, 20_24_
Signature	Authorized to execute agreements for:
Patrizia H. Sordillo, Contracting & Attesting Officer Printed Name & Title	Insituform Technologies USA, LLC Name of Company



CERTIFICATE OF LIABILITY INSURANCE

7/1/2024

DATE (MM/DD/YYYY) 6/27/2023

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

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

PRODUCER Lockton Companies	CONTACT NAME:				
Three City Place Drive, Suite 900	PHONE (A/C, No, Ext): FAX (A/C, No):				
St. Louis MO 63141-7081 (314) 432-0500	E-MAIL ADDRESS:				
(314) 432-0300	INSURER(S) AFFORDING COVERAGE	NAIC#			
	INSURER A: XL Insurance America, Inc.	24554			
INSURED Instructions Trackmalaging LICA LLC	INSURER B: ACE American Insurance Company	22667			
Instuform Technologies USA, LLC 580 Goddard Avenue	INSURER C: Starr Indemnity & Liability Company	38318			
Chesterfield MO 63005	INSURER D: AGCS Marine Insurance Company	22837			
	INSURER E:				
	INSURER F:				

COVERAGES INSTE02 CERTIFICATE NUMBER: 16609281 REVISION NUMBER: XXXXXXX

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.

ISR TR		ADDL :		POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LiMiT	s
A		Y	Y	CGD300084908 BROAD FORM PD/CONTRACTU	7/1/2023	7/1/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 2,000,000 \$ 1,000,000
A	X Independt Contractor			BROAD TORWIT DICONTILIES			MED EXP (Any one person)	\$ 10,000
Ì	X XCU						PERSONAL & ADV INJURY	\$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 4,000,000
	POLICY X PRO- X LOC						PRODUCTS - COMP/OP AGG	\$ 4,000,000 \$
3	OTHER: AUTOMOBILE LIABILITY	Y	Y	ISA H10816166	7/1/2023	7/1/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ 5,000,000
-	X ANY AUTO	-					BODILY INJURY (Per person)	\$ XXXXXXX
Ì	OWNED SCHEDULED						BODILY INJURY (Per accident)	\$ XXXXXXX
İ	HIRED NON-OWNED						PROPERTY DAMAGE (Per accident)	\$ XXXXXXX
ł	AUTOS ONLY AUTOS ONLY							\$ XXXXXXX
~	UMBRELLA LIAB X OCCUR	Y	Y	1000095154231	7/1/2023	7/1/2024	EACH OCCURRENCE	\$ 10,000,000
	X EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$ 10,000,000
İ	DED RETENTION \$							\$ XXXXXXX
	WORKERS COMPENSATION		Y	WLR C53501047 (AOS)	7/1/2023	7/1/2024	X PER OTH- STATUTE ER	
5	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE 7 / N			(EXCLUDING MONOPOLISTIC)		E.L. EACH ACCIDENT	\$ 1,000,000
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A					E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
Э	INSTALLATION FLOATER	Y	Y	MXI93050922	7/1/2023	7/1/2024	SEE ATTACHED LIMITS DEDUCTIBLES: VARIOU POLICY SCHEDULE	US PER

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
ADDITIONAL INSURED APPLIES TO GENERAL LIABILITY, AUTOMOBILE LIABILITY, EXCESS LIABILITY, AND INSTALLATION FLOATER AS REQUIRED BY WRITTEN CONTRACT, BUT ONLY WITH RESPECT TO LIABILITY ARISING OUT OF THE NAMED INSURED'S OPERATIONS. WAIVER OF SUBROGATION APPLIES UNDER GENERAL LIABILITY, AUTOMOBILE LIABILITY, EXCESS LIABILITY, WORKERS COMPENSATION WHERE PERMISSIBLE BY LAW, AND INSTALLATION FLOATER AS REQUIRED BY WRITTEN CONTRACT.

CERTIFICATE HOLDER	CANCELLATION See Attachments			
16609281 FOR INFORMATIONAL PURPOSES ONLY	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			

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Miscellaneous Attachment: M522191 Master ID: 1348057, Certificate ID: 16609281

Installation Floater, No Co-Insurance, Replacement Cost, Special Perils Form including Flood & EQ

Limits:

\$10,000,000 any one installation site \$10,000,000 any one loss, disaster, or casualty

Sublimits (including but not limited to:) \$1,000,000 In Transit \$1,000,000 Temporary Storage \$1,000,000 Soft Costs (Delay of Use)/\$1,000,000 Aggregate \$2,000,000 Rigging (\$500,000 temporary storage/\$500,000 transit)



FOR INFORMATIONAL PURPOSES ONLY

IMPORTANT NOTICE

To whom it may concern:

In our continued effort to provide timely certificate delivery, Lockton Companies is transitioning to paperless delivery of Certificates of Insurance going forward.

To ensure future renewals of this certificate, we need your email address. Please contact us via one of the methods below, referencing **Certificate ID 16609281**

•Email: stl-edelivery@lockton.com •Phone: (866) 728-5657 (toll-free)

If we do not receive your email address via one of the above methods prior to the client's next renewal, we will assume you no longer need the certificate.

If you received this certificate through an internet link where the current certificate is viewable, we have your email and no further action is needed.

The above inbox is for collecting email addresses for renewal electronic certificate delivery ONLY. You will not receive a response from this inbox.

Thank you for your cooperation.

Lockton Companies

REFERENCES

Provide three (3) references for which your organization has performed similar work.

Bidde	r's Name: _Insituform T	Technologies USA, LLC
		(Enter Name of Business Organization)
1.	ORGANIZATION	See Attachment
	ADDRESS	
	PHONE NUMBER	
	CONTACT PERSON	
	YEAR OF PROJECT	
2.	ORGANIZATION	
	ADDRESS	
	PHONE NUMBER	
	CONTACT PERSON	
	YEAR OF PROJECT	
		,
3.	ORGANIZATION	
	ADDRESS	
	PHONE NUMBER	
	CONTACT PERSON	
	YEAR OF PROJECT	



Diameter Linear Feet	292.00	132.00	3,124.00	2,782.00	2,420.00	1,389.00	1,477.00	655.00	622.00	893.00	303.00	250,00	207.00	459.00	265.00	455.00	81,354.00	4,214.00	3,047.00	984.00	674.00	515.00	936.00	280.00	22.00	375.00	53,724.00	475.00
Diameter	ω	10	12	15	18	21	24	27	30	36	42	48	22	09	72	9	89	10	12	15	18	21	24	27	30	36	∞	6
Revenue	3 2,117,316.68															5,142,089.00 4,192,478.17											0 2,834,993.80	
Original Contract Value	2,791,373.00															5,142,089.0											4,611,861.00	
Business Unit Role	Prime															Prime											Prime	
Completed/Closed Date	5/2/2019															5/9/2019											9/26/2019	
Bid Date	4/10/2019															3/13/2019	_										8/13/2019	-
Owner Account Information	Owner Account	Name: Metropolitan St. Louis Sewer	District(MSD)-Saint Louis, MO	Address: 2350	Market Sueet Phone: +1(314)	768-6200										Owner Account	Name; Metropolitan St. Louis Sewer	District(MSD)-Saint Louis, MO	Address: 2350	Market Street Phone: +1(314)	768-6200							Name: Metropolitan St. Louis Sewer
Customer Account Information	Customer Account	Name: Metropolitan St.	Louis Sewer District(MSD)-	Saint Louis, MO	Market Street	Phone: +1(314) 768-6200										Customer Account	Name: Metropolitan St.	Louis Sewer District(MSD)-	Saint Louis, MO	Market Street	Phone: +1(314) 768-6200						Customer Account	Name: Metropolitan St.
Project Manager	Reeves,	Willis M														Reeves,	Wills										Reeves,	N SIIIIS
Project Name	MSD13043-	015121796COUNTY														MSD12029-	UISIZI/S/COUNIY										MSD12027-	015121809COOIN13
JDE Job Number	102588															102594											102646	

8,187.00 8,099.00 2,460.00 1,271.00 150.00 1,602.00 96.00 148.00	17,486.00 759.00 2,374.00 161.00 79.00 343.00 480.00 665.00	27,060.00 629.00 1,431.00 448.00 520.00	48,083.00 2,032.00 1,084.00
10 12 15 18 21 24 27 30	Prime 1,641,518.00 1,177,042.55 8 10 12 12 12 15 15 18 18 18 18 24 33 33	Prime 1,996,741.00 1,146,929.58 8 10 10 10 15 15 21 30	Prime 2,647,713.00 1,902,224.54 8 10 10
	9/17/2019 11/11/2019	3/3/2023 3/3/2023	1/21/2020 3/5/2020
District(MSD)-Saint Louis, MO Address: 2350 Market Street Phone: +1(314) 768-6200	Owner Account Name: Metropolitan St. Louis Sewer District(MSD)-Saint Louis, MO Address: 2350 Market Street Phone: +1(314) 768-6200	Owner Account Name: Johnson County Unified Wastewater Districts, -Olathe, KS Address: 11811 S Sunset Dr Ste 2500 Phone: +1(913) 715-8500	Owner Account Name: Metropolitan St. Louis Sewer District(MSD)-Saint Louis, MO Address: 2350 Market Street
Louis Sewer District(MSD)- Saint Louis, MO Address: 2350 Market Street Phone: +1(314) 768-6200	Customer Account Name: Metropolitan St. Louis Sewer District(MSD)- Saint Louis, MO Address: 2350 Market Street Phone: +1(314) 768-6200	n Customer Account Name: Johnson County Unified Wastewater Districts, -Olathe, KS Address: 11811 S Sunset Dr Ste 2500 Phone: +1(913) 715-8500	Customer Account Name: Metropolitan St. Louis Sewer District(MSD)- Saint Louis, MO Address: 2350 Market Street
	MSD12030-015121815,COCT B Reeves, Willis M	JOHNSON COUNTY B OF Smith, Brian CC,AUTH6 S	MSD12033-015121861,COCT A Reeves, Willis M
	102660	10266406	102677

	490.00	21,607.00	926.00	1,868.00	302.00	889.00	147.00	280.00	837.00	1,190.00	3,396.00	1,270.00	1,272.00	677.00	399.00	320.00	602,00	332.00	113.00	77,896.00	2,051.00	344.00	212.00	49,518.00	1,824.00	1,045.00	506.00
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	1,125,644.00 963,308.85							881,365.18												2,435,420.00 2,353,801.30			2,074,115.00 1,622,503.90				
	1,125,644.0							862,202.00												2,435,420.			2,074,115.				
	Prime							Prime												Prime			Prime				
	4/29/2020							4/29/2020												4/4/2023			12/18/2020				
	3/17/2020 4/29/2020							3/17/2020												6/28/2022			9/18/2020	_			
Phone: +1(314) 768-6200	Owner Account	St. Louis Sewer	District(MSD)-Saint Louis, MO	Address: 2350	Phone: +1(314)	768-6200		Owner Account	St. Louis Sewer	District(MSD)-Saint Louis, MO	Address: 2350 Market Street	Phone: +1(314)	768-6200							Owner Account	Springfield, MO	Address: 840 N Boonville Ave Phone: +1(417) 864-1000	_	St. Louis Sewer	District(MSD)-Saint Louis, MO	Address: 2350	ואיסו אבר סוובבר
Phone: +1(314) 768-6200	Customer Account	Metropolitan St.	Louis Sewer District(MSD)-	Saint Louis, MO	Market Street	Phone: +1(314) 768-6200		Customer Account	Metropolitan St.	Louis Sewer District(MSD)-	Saint Louis, MO	Market Street	Phone: +1(314) 768-6200							Customer Account	Springfield, MO	Address: 840 N Boonville Ave Phone: +1(417) 864-1000	Customer Account	Metropolitan St.	Louis Sewer District(MSD)-	Saint Louis, MO	Market Street
	Reeves,							/ Reeves,												Smith, Brian	n		Reeves,				
	MSD12021-0151CONT R COLINTY							MSD12021-0151CONT B, CITY												SPRINGFIELD MO,BATCH	ONDENS.		MSD13014-	K 18000000000000000000000000000000000000			
	102702							10270201												10270703			102772				

	52,225.00	1,345.00	1,858.00	759.00	1,521.00	499.00	136.00	1,427.00	109.00	854.00	127.00	375.00	587.00	206.00	164.00	222,00	89.00	94.00	3,008.00	905.00	2,631.00	520.00	867.00	175.00	303.00	16.00
	œ	10	12	15	18	30	10	12	15	18	21	24	12	15	18	21	24	10	12	15	18	21	24	27	30	36
	3,515,395.00 2,982,845.45						309,061.69						120,733.62					609,361.38								
	3,515,395.00						589,468.00						146,410.00					1,670,786.00 609,361.38								
	Prime						Prime						Prime					Prime								
	12/16/2020						12/21/2020						12/21/2020					4/5/2021								
	10/22/2020 12/16/2020	_					9/15/2020	-					9/15/2020 12/21/2020	-				2/18/2021	c							
Phone: +1(314) 768-6200	Owner Account	St. Louis Sewer	District(MSD)-Saint Louis, MO	Address: 2350	Phone: +1(314)	768-6200		ivame: Metropolitan St. Louis Sewer	District(MSD)-Saint Louis, MO	Address: 2350	Phone: +1(314)	/68-6200	Owner Account	Name: Metropolitan St. Louis Sewer	District(MSD)-Saint Louis, MO	Address: 2350	Maket 3tfeet Phone: +1(314) 768-6200		Name: Metropolitan St. Louis Sewer	District(MSD)-Saint Louis, MO	Address: 2350	Phone: +1(314)	768-6200			
Phone: +1(314) 768-6200	Customer Account	Metropolitan St.	Louis Sewer District(MSD)-	Saint Louis, MO	Market Street	Phone: +1(314) 768-6200	Customer Account	Name: Metropolitan St.	Louis Sewer District(MSD)-	Saint Louis, MO	Market Street	Phone: +1(314) 768-6200	Customer Account	Metropolitan St.	Louis Sewer District(MSD)-	Saint Louis, MO	Market Street Phone: +1(314) 768-6200	Customer Account	Name: Metropolitan St.	Louis Sewer District(MSD)-	Saint Louis, MO	Market Street	Phone: +1(314) 768-6200			
	Reeves,						Reeves,	NA IIIIS INI					Reeves,	N SIIIIN				Reeves,	NAIIIIS IAI							
	MSD12509-01512021,CONTR R	2					MSD13411-	0151COUNTY,CZ1947					MSD13411-0151CITY,C21947					MSD13126-	UISICOUNIY,CZZUI8							
	102774						102775						10277501					102796								

130.00	13.00 9,856.00	4,440.00	9,021.00	1,814.00	2,957.00	313.00	288.00	1,157.00	133.00	806.00	2,837.00	513.00	42,608.10	1,085.00	46.00	219.00	550.00	9,827.00	2,807.00	1,545.00	3,276.00
12	9 8	10	12	15	18	21	24	27	30	33	36	48	8 2	10	12	15	24	19 12	15	18	21
12,304.50	3,207,005.00 2,553,955.89												2,172,822.00 1,503,620.27					1,705,236.00 1,304,173.19			
78,092.00	3,207,005.00												2,172,822.0					1,705,236.0			
Prime	Prime												Prime					Prime			
4/5/2021	9/15/2021												12/20/2021					4/21/2022			
2/18/2021	8/12/2021												9/24/2021	c				2/9/2022	_		
Owner Account Name: Metropolitan St. Louis Sewer District(MSD)-Saint Louis, MO Address: 2350 Market Street Phone: +1(314) 768-6200	Owner Account Name: Metropolitan St. Louis Sewer	District(MSD)-Saint	Address: 2350	Market Street Phone: +1(314)	768-6200								_	Name: Metropolitan St. Louis Sewer	District(MSD)-Saint	Address: 2350	Market Street Phone: +1(314) 768-6200	-	Name: Metropolitan St. Louis Sewer	District(MSD)-Saint	Address: 2350
Customer Account Name: Metropolitan St. Louis Sewer District(MSD)- Saint Louis, MO Address: 2350 Market Street Phone: +1(314) 768-6200	Customer Account Name: Metropolitan St.	Louis Sewer	Saint Louis, MO	Address: 2350 Market Street	Phone: +1(314) 768-6200								Customer Account	Name: Metropolitan St.	Louis Sewer	Saint Louis, MO	Address: 2350 Market Street Phone: +1(314) 768-6200	Customer Account	Name: Metropolitan St.	Louis Sewer	Saint Louis, MO
Reeves, Willis M	Reeves, Willis M												Reeves,	Willis M				Reeves,	Willis M		
MSD13126-0151CITV,C22018	MSD12590- 0151CONT,A,C22044												MSD13016-	0151CONT,A,C22057				MSD13127-	0151CONT,A,C22146		
10279601	102860												102864					102911			

656.00	139.00	117.00	105.00	17,115.00	1,893.00	2,044.00	675.00	249.00	681.00	30.00	00:066	3,287.00	665.00	42,007.00	1,750.00	2,555.00	1,885.00	520.00	248.00	213.00	187.00	9,358.00	377.00
24	27	30	42	8	10	12	15	18	21	24	27	30	36	80	10	12	15	18	24	ω	89	6	12
				2,242,176.00 2,065,833.14										2,401,459.00 1,738,580.87						83,469.30	329,027.72		
				2,242,176.00										2,401,459.00						128,250.00	379,026.00		
				Prime										gns						Prime	gns		
				4/21/2022										5/27/2022						6/15/2022	8/25/2022		
				2/17/2022										4/26/2022						3/31/2022	4/7/2022	÷	
Market Street	768-6200			Owner Account	Name: Metropolitan St. Louis Sewer	District(MSD)-Saint	Address: 2350	Market Street Phone: +1(314)	768-6200					Owner Account	Name: City of Kansas City, MO-	KCMO Water and Pollution	Address: 4800 E	osra st Phone: +1(816)	513-2297	Owner Account Name: Afton Chemical Corporation - Sauget, IL, USA (Sauget Plant) Address: 501 Monsanto Ave Sauget II 62201 Phone: +1(618) 583-1000	Owner Account	MN	Address: 4801 W 50th St
Address: 2350	Phone: +1(314)	768-6200		Customer Account	Name: Metropolitan St.	Louis Sewer	Saint Louis, MO	Address: 2350 Market Street	Phone: +1(314) 768-6200					Customer Account	Name: Havens Construction-	Liberty, MO Address: 9400	Liberty Dr	Pnone: + 1(816) 781-4769		Customer Account Name: Afton Chemical Corporation - Sauget, It, USA (Sauget Plant) Address: 501 Monsanto Ave Sauget II 62201 Phone: +1(618) 583-1000	Customer Account	Asphalt	Corporation- Chaska, MN
				Reeves,	Willis M									Smith, Brian	S		•			Reeves, Willis M	Reeves, Willis M		
				MSD13031-01512022,CONTR	œ									HAVENS CONSTR,KC MO 1569 Smith, Brian						AFTON CHEMICAL CORP,SAUGET IL	GMH ASPHALT CORP, EDINA MN		
				102912										102934						102942	102982		

	3,081.00	8,556.00	12,216.00	4,307.00	4,451.00	2,930.00	11,833.00	1,132.00	2,170.00	368.00	1,095.00	367.00	353.00	3,736.00	1,741.00	226.00	228.00	42,852.00	313.00	786.00
	2 10	15	18	21	24	27	30	4 24	36	œ	10	12	72	24	30	33	36	8 8	10	12
	6,145,637.32							2,144,087.1		126,098.57				831,886.38				2,064,695.7		
	5,997,923.00 6,145,637.32							2,374,402.00 2,144,087.14		111,624.00				857,490.00				2,992,458.00 2,064,695.78		
	Prime							Sub		Sub				Sub				Prime		
	8/29/2022							9/8/2022		9/13/2022				9/16/2022				11/16/2022		
	7/29/2022							6/10/2022		4/6/2022				3/24/2022				9/7/2022	-	
Phone: +1(612) 927-8861	Owner Account	Name: Village of Bethalto, IL	Address: 203 Oak St Phone: +1(618)	377-8013				Owner Account	Name: Department of Transportation - State of North Dakota-Bismarck, ND Address: 300 Airport Rd Phone: +1(701) 328-6904	Owner Account	Name: City of Sauk Rapids, MN	Address: 360 Summit Ave N	Phone: +1(320) 253-7780	_	Name: City of Mount Vernon, IL	Address: 1100 Main St	242-6853	_	Name: Metropolitan St. Louis Sewer	District(MSD)-Saint Louis, MO Address: 2350
Address: 9180 Laketown Rd Phone: +1(952) 442-5288	¥	Name: Village of Bethalto, IL	Address: 203 Oak St	Phone: +1(618)	3/7-8013			Customer Account	Name: Dakota Underground Company, Inc- Fargo, ND Address: 4001 15th Ave N Phone: +1(701) 282-9753	Customer Account	Name: C & L Excavating-St	Joseph, MN Address: 7939	Ridgewood Rd Phone: +1(320) 363-1221	Customer Account	Name: Haier Plumbing-	Okawville, IL Address: 301 N	Elkton St Phone: +1(618) 243-5908	Customer Account	Name: Metropolitan St.	Louis Sewer District(MSD)- Saint Louis, MO
	Reeves,	Wills M						Reeves,	M M M	Reeves,	Willis M			Reeves,	Willis M			Reeves,	Willis M	
	BETHALTO IL, SANITSEWER	SNING						DAKOTA UNDERGROUND	COFARGO ND	C L EXCAVATING, SAUK	RAPIDSMIN			HAIER PLUMBINGHEAT,MT	VERNON			MSD12433-01512022,CT	22194	
	102983							102986		102991				102993				102996		

	10,346.00	1,215.00	575.00	17,792.00	2,097.00	1,808.00	1,384.00	359.00	1,207.00	799.00	576.00	437.00	381.00	512.00	100.00	67.00	359.00	43,141.00	2,380.00	797.00	1,460.00	2,135.00	583.00	432.00
	∞	10	12	80	10	12	15	30	36	15	18	24	30	36	42	48	9	8	10	12	72	18	21	24
	644,515.33			2,637,771.00 1,793,559.97						557,426.63							4,225,619.00 2,080,891.15							
	820,959.00			2,637,771.00						395,557.00							4,225,619.00							
	Prime			Prime						Sub							Prime							
	12/1/2022			2/9/2023						2/24/2023							12/27/2022 2/23/2023							
	11/17/2022 12/1/2022			1/31/2023	a)					12/1/2022								U.B.	+-					
Market Street Phone: +1(314) 768-6200	Owner Account	Campbell, MO	Address: 302 W Grand Ave Phone: +1(573) 246-2575	Owner Account	Name: City of Cape Girardeau, MO	Address: 219 N Kingshighway St	Phone: +1(573)	334-9151		_	Name: City of Shawnee, KS	Address: 11110	Phone: +1(913)	631-2500			_	Name: Metropolitan St. Louis Sewer	District(MSD)-Saint	Address: 2350	Market Street Phone: +1(314)	768-6200		
Address: 2350 Market Street Phone: +1(314) 768-6200	Customer Account	Campbell, MO	Address: 302 W Grand Ave Phone: +1(573) 246-2575	Customer Account	Name: City of Cape Girardeau,	MO Address: 219 N	Kingshighway St	Phone: +1(5/3) 334-9151			Name: Wiedemann Inc	Construction Co	Address: PO Box	245 Phone: +1(816)	322-1125		Customer Account	Name: Metropolitan St.	Louis Sewer	Saint Louis, MO	Address: 2350 Market Street	Phone: +1(314) 768-6200		
	. Reeves,	M SIIIA		Reeves,	Willis M					Smith, Brian	S						Reeves,	Willis M						
	CAMPBELL MO,CT2,OWNER19- Reeves,			CAPE GIRARDEAU	MO,PROJECT6260					WIEDENMANN,	INC2023SHAWNEE KS						MSD12586-01512023,CT	22219						
	103005			103020						103021							103023							

2,089.00

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1,415.00 1,046.00 353.00 4,039.00	49,942.00 3,068.00 2,184.00 99.00 2,177.00	219.00	577.00	275.00 868.00 244.00 402.00	2,178.00
8 10 12 15	8 10 12 15 24	8 24	ω	8 10 15 15	50
372,977.21	1,862,538.68	114,739.63	38,507.54	132,767.20	250,221.86
423,052.00	4,859,344.00	130,341.00	32,751.00	140,519.00	292,244.00
Prime	Prime	Sub	Sub	Prime	Sub
4/28/2023	5/2/2023	4/27/2023	4/27/2023	5/8/2023	6/6/2023
3/27/2023	2/16/2023	2/2/2023	3/16/2023	4/19/2023	2/8/2023
Owner Account Name: City of Spooner, WI Address: 515 N Summit St Phone: +1(715)	Owner Account Name: Metropolitan St. Louis Sewer District(MSD)-Saint Louis, MO Address: 2350 Market Street Phone: +1(314) 768-6200	Owner Account Name: City of West Fargo, ND Address: 800 Fourth Ave E Ste 1 Phone: +1(701) 433-5400	Owner Account Name: City of Henning, MN Address: 612 Front St Phone: +1(218) 583-2402	Owner Account Name: City of Moorhead, MN Address: 500 Center Ave Phone: +1(218) 299-5390	Owner Account Name: Unified Government of Wyandotte County- City of Kansas City, KS Address: 701 N 7th St
Customer Account Name: City of Spooner, WI Address: 515 N Summit St Phone: +1(715) 635-8769	Customer Account Name: Metropolitan St. Louis Sewer District(MSD)- Saint Louis, MO Address: 2350 Market Street Phone: +1(314) 768-6200	Customer Account Name: CC Steel, LLC Address: 1841 43rd St N Phone: +1(612) 964-6351	Customer Account Name: Northdale Construction Company Inc Albertville, MN Address: 9760 71st St NE Phone: +1(763) 428-4868	Customer Account Name: City of Moorhead, MN Address: 500 Center Ave Phone: +1(218) 299-5390	Customer Account Name: Rodriguez Mechanical Inc- Kansas City, KS Address: 541 S 11th St Kansas City Ks 66105
Reeves, Willis M	Reeves, Willis M	Reeves, Willis M	Reeves, Willis M	Reeves, Willis M	Smith, Brian S
SPOONER WI ,2023 SANIT REHAB	MSD13124-01512023,F C22239	CC STEEL, WEST FARGO ND	NORTHDALE CONSTR, HENNING MN	MOGRHEAD MN,2023,PROJ22-06-02	RODRIGUEZ MECHANICAL CONT,KCK
103034	103036	103038	103040	103042	103045

	922.00 643.00	716.00 2,083.00 336.00 156.00 1,409.00	7,707.00	2,353.00	5,968.00 2,358.00 402.00 17.00	3,552.00
	9 &	6 8 8 10 12 15	ω	8 10	8 10 12 16	ω
	97,146.96	224,245.01	515,357.09	146,286.08	312,043.21	126,261.54
	138,490.00	255,729,00	662,561.00	233,865.00	321,322.00	165,986.00
	Sub	Prime	Prime	Prime	qns	Prime
	5/22/2023	5/22/2023	8/24/2023	6/8/2023	6/6/2023	6/30/2023
	3/3/2023	5/16/2023	5/19/2023	5/10/2023	2/21/2023	5/25/2023
Phone: +1(913) 573-5700	Owner Account Name: City of Napoleon, ND Address: 225 Lake Ave E Phone: +1(701) 754-2266	Owner Account Name: City of Red Wing, MN Address: 229 Tyler Rd Phone: +1(612) 388-6734	Owner Account Name: American Water - Missouri America Water- Saint Louis, MO Address: 727 Craig Rd Phone: +1(314) 991-3404	Owner Account Name: City of Owatonna, MN Address: 540 W Hills Cir W Phone: +1(507) 444-4300	Owner Account Name: City of Valley Falls, KS Address: 421 Mary St B Phone: +1(785) 945-6612	Owner Account Name: City of Vadnais Heights, MN Address: 687 County Rd F E
Phone: +1(913) 281-1814	Customer Account Name: Gladen Construction Inc- LaPorte, MN Address: 40739 US Hwy 71 Phone: +1(218) 224-2337	Customer Account Name: City of Red Wing, MN Address: 229 Tyler Rd Phone: +1(612) 388-6734	Customer Account Name: American Water - Missouri America Water- Saint Louis, MO Address: 727 Craig Rd Phone: +1(314) 991-3404	Customer Account Name: City of Owatonna, MN Address: 540 W Hills Cir W Phone: +1(507) 444-4300	Customer Account Name: Havens Construction- Liberty, MO Address: 9400 Liberty Dr Phone: +1(816) 781-4769	Customer Account Name: City of Vadnais Heights, MN Address: 687 County Rd F E
	Reeves, Willis M	Reeves, Willis M	Reeves, Willis M	Reeves, Willis M	S Smith, Brian S	Reeves, Willis M
	GLADEN CONSTRUCT,NAPOLEON ND	RED WING MN,2023 SEWER LINING	MISSOURI-AMERICAN WATER,ARNOLD	OWATONNA MN,2023 PROJ23010	HAVENS CONST,VALLEY FALLS KS	VADNAIS HEIGHTS MN,VADNA 17246
	103046	103047	103048	103049	103050	103057

	563.00	871.00			1,954.00	713.00			1,378.00	692.00			4,000.00	3,744.00	668.00	2,517.00	584.00	2,904.00	128.00	327.00	236.00	53,103.00	2,382.00	3,354.00	123.00
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	88,994.68				84,008.51				84,479.46				662,999.06				299,035.82					5,740,724.00 2,293,750.95			
	98,738.00				109,202.00				99,847.00				877,776.00				388,879.00					5,740,724.0			
	qns				Prime				Sub				Prime				Prime					Prime			
	7/11/2023				7/11/2023				7/25/2023				7/17/2023				7/21/2023					7/21/2023			
	6/2/2023				6/14/2023	T J			6/20/2023	_			6/6/2023				6/29/2023					5/23/2023			
Phone: +1(612) 429-5343	Owner Account	Norwood Young	Address: 10 First Ave NE	Phone: +1(952) 467-1830	Owner Account	Bear Lake, MN Address: 4701 Hwv	61 N Phone: +1(612)	429-8563	_	Name: City of Green Bay, WI	Address: 100 N Jefferson St	Phone: +1(920) 448-3100	-	Name: City of Mounds View, MN	Address: 2466 Bronson Dr	Phone: +1(612) 784-3055	-	Name: City of Carlton, MN	Address: 228 Chesnut Ave	Phone: +1(218)	384-4229		Springfield, MO	Address: 840 N Boonville Ave	
Phone: +1(612) 429-5343	Customer Account	Sons -Hamburg,	Address: 831 Park Ave	Phone: +1	Customer Account	Marne: City of White Bear Lake, MN	Address: 4701 Hwy 61 N	Phone: +1(612) 429-8563	Customer Account	Name: Advance Construction-	Green Bay, WI Address: 2141	Woodale Ave Phone: +1(920)	Customer Account	Name: City of Mounds View, MN	Address: 2466 Bronson Dr	Phone: +1(612) 784-3055	Customer Account	Name: City of Carlton, MIN	Address: 228 Chesput Ave	Phone: +1(218)	384-4229		Springfield, MO	Address: 840 N Boonville Ave	
	Reeves,	VVIIIIS IVI			Reeves,	WIIIIS IVI			Reeves,	Willis M			Reeves,	Willis M			Reeves,	WIIIs M				Smith, Brian	n		
	WM MUELLER SONS,NYA	MERGER S			WHITE BEAR LAKE, PROJECT23-	ò			ADVANCE	CONSTRUCTION, GREEN BAY			MOUNDS VIEW MN, PROJ	2023-C03			CARLTON MN,2023 CIPP	LINING				SPRINGFIELD MO, GROUP 6,	2023		
	103058				103059				103060				103061				103062					103063			

805.00	305.00	584.00	192.00	257.00	2,655.00	224.00	3,550.00	2,061.00	103.00	6,428.00	1,286.00	1,002.00	408.00	164.00	1,706.00	3,312.00
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					215,597.52	273,395.76				464,214.88				212,748.93		280,721.60
					276,067.00	460,398.00				499,412.00				242,934.00		790,218.00
					Prime	Sub				Sub				Prime		Prime
					7/25/2023	8/29/2023				8/9/2023				8/17/2023		8/21/2023
					6/29/2023	8/8/2023				7/11/2023	-			5/23/2023		7/25/2023
Phone: +1(417)	864-1000				Customer Account Owner Account Name: City of Name: City of Wisconsin Rapids, Wisconsin Rapids, WI Address: 2540 First Address: 2540 First St S St S Phone: +1(715) Phone: +1(715) 421-8209	Owner Account	Name: City of Sioux Falls, SD	Address: 224 W 9th	26 Phone: +1(605) 367-8600		Name: City of Green Bay, WI	Address: 100 N Jefferson St	Phone: +1(920) 448-3100		Name: City or Buffalo, MN Address: 212 Central Ave Phone: +1(612) 682-1181	Owner Account Name: Rock Creek Public Sewer District-Arnold, MO Address: 4133 W Outer Rd Phone: +1(636) 464-3305
Phone: +1(417)	864-1000				Customer Account Name: City of Wisconsin Rapids, Wl Address: 2540 First St S Phone: +1(715) 421-8209	Customer Account	Name: H & W Contracting, LLC-	Sioux Falls, SD Address: 4612 W	12th St Phone: +1(605) 339-8834	Customer Account	Name: Vinton Construction Co-	Manitowoc, WI Address: 2705 N	Rapids Rd Phone: +1(920) 682-0375	Customer Account	Name: City of Buffalo, MN Address: 212 Central Ave Phone: +1(612) 682-1181	Customer Account Name: Rock Creek Public Sewer District-Arnold, MO Address: 4133 W Outer Rd Phone: +1(636)
					Reeves, Willis M	S Reeves,	Willis M			Reeves,	Willis M			Reeves,	Wills M	Reeves, Willis M
					WISCONSIN RAPIDS WI,2023 PROJ	HWCONTRACTINGSIOUXFALLS Reeves,				VINTON CONSTRUCTION -	GREEN BAY			BUFFALO MN,2023,CITY	PJZ202-8	ROCK CREEK PUB SWR DST,PHASE 9
					103064	103066				103067				103069		103071

72,028.00	3,569.00	2,543.00	842.00	1,330.00	416.00	449.00	1,777.00	399.00	387.00	647.00	164.00	520.00	00.659	322.00	323.00	2,880.00	938.00	1,081.00	883.00	126.00	351.00	175.00	37.00	326.00	305.00			2,442.00
80	10	12	15	18	24	30	36	20	21	24	25	30	33	36	39	8	10	12	15	18	21	24	30	27	53			ω
3,185,102.50								2,708,766.00 1,268,406.41								425,399.47								245,578.53				81,452.44
5,658,166.00								2,708,766.00								477,793.00								321,699.00				83,338.00
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6/27/2023								6/28/2023								3/7/2023								9/7/2023		£		9/6/2023
Owner Account	Name: City of Springfield, MO-	Utilities Address: 301 F	Central	Phone: +1(417) 831-8376				Owner Account	Name: City of Minneapolis, MN	Address: 4300 Marshall St NE	Phone: +1(612)	6/3-2405					Name: City of Kansas City, MO-	KCMO Water and	Address: 4800 E	63rd St Phone: +1(816)	513-2297				Name: City of Topeka, KS	Address: 215 SE 7th St	Phone: +1(785) 368-3851	Owner Account Name: City of
Customer Account	Name: City of Springfield, MO-	Utilities Address: 301 F	Central	Pnone: + I (4 i /) 831-8376				Customer Account	Name: City of Minneapolis, MN	Address: 4300 Marshall St NF	Phone: +1(612)	673-2405				Customer Account	Name: Havens Construction-	Liberty, MO	Liberty Dr	Phone: +1(816) 781-4769						Address: PO Box 36	Phone: +1(785) 862-7711	Customer Account Name: Havens
Smith, Brian	л							Reeves,	Willis M							Smith, Brian	v							Smith, Brian	v			Smith, Brian S
D MO,GROUP	5,BAICH 4							MINNEAPOLIS MN,2023	LARGE DIAM							HAVENS CONSTR,KC	MO,OUTF 0054							EMCON INC, TOPEKA KS				HAVENS CONSTR, EDGERTON KS
103072								103075								103077								103082				103083

	199.00	1,787.00	1,397.00	357.00	80.00	144.00	278.00	246.00	148.00	691.00	974.00	919.00	1,592.00
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	52,013.68	95,449.78	290,058.22							26,914.95			78,945.88
	80,673.00	94,782.00	500,419.00							220,803.00			98,358.00
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	11/20/2023	12/7/2023	1/25/2024							1/22/2024			3/8/2024
	10/24/2023 11/20/2023	8/9/2023	12/1/2023							1/5/2024			1/30/2024
Edgerton, KS Address: 404 E Nelson St Phone: +1(913) 893-6231	Owner Account Name: City of Saint Charles, MO Address: 200 N 2nd St Phone: +1(636)	Owner Account Name: Shawnee County KS Address: 707 Southeast Quincy Street Phone: +1(785) 251-4040	Owner Account	Name: City of Shawnee, KS	Address: 11110 Johnson Dr	Phone: +1(913)	b31-2500					Address: 232 Main St Phone: +1(660) 529-2271	Owner Account Name: Canterbury Park Developments, LLC Address: 1100 Canterbury Road Phone: 6126695862
Construction- Liberty, MO Address: 9400 Liberty Dr Phone: +1(816)	Customer Account Name: City of Saint Charles, MO Address: 200 N 2nd St Phone: +1(636) 949-3200	Customer Account Name: Havens Construction- Liberty, MO Address: 9400 Liberty Dr Phone: +1(816) 781-4769		Name: Infrastructure	Solutions, LLC- Lenexa KS	Address: 16000	College Blvd Phane: +1(913)	577-8894		-		Address: 232 Main St Phone: +1(660) 529-2271	Customer Account Name: Canterbury Park Developments, LLC Address: 1100 Canterbury Road
	Reeves, Willis M	Smith, Brian S	Smith, Brian	v						Smith, Brian	S		Reeves, Willis M
	ST CHARLES MO,BOSCHERT CREEK	HAVENS CONST, SHAWNEE CO KS	INFRASTRUCTURE SOL,	SHAWNEE KS						SLATER MO,2024 CIPP	PROJECT		CANTERBURY PARK ENTERTAINMENT
	103084	103086	103087							103088			103094

	250.00	341.00	951.00	156.00	153.00	7,764.00	8,355.00	138.00	765.00	262.00
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	2,291.50				16,084.52	130,461.83	15,288.47		401,975.00	760,894.31
	442,797.00				21,000.00	263,807.00	2,466,974.00 15,288.47		336,600,00	799,100.00
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	3/12/2024				3/13/2024	3/15/2024	3/21/2024		11/10/2021	8/24/2022
	2/15/2024				1/30/2024	2/29/2024	11/7/2023		7/30/2021	1/21/2022
	Owner Account	Shakopee, MN	Address: 129 Holmes St S	Phone: +1(952) 233-9300	Owner Account Name: City of Lenexa, KS Address: 12350 W 87th Pkwy Phone: +1(913)	Owner Account Name: City of Union, MO Address: 500 E Locust Phone: +1(636) 583-3522	Owner Account	Name: City of Kansas City, MO- KCMO Water and Pollution Address: 4800 E 63rd St Phone: +1(816) 513-2297	Owner Account Name: Department of Transportation - State of Illinois, IL- District 1 Region (all)Springfield,IL- CO120NAR Address: 2300 S Dirkson Pkwy Phone: +1(847) 705-4131	Owner Account Name: Department of Transportation -
Phone: 6126695862	Customer Account	Shakopee, MN	Address: 129 Holmes St S	Phone: +1(952) 233-9300	Customer Account Name: Rodriguez Mechanical Inc- Kansas City, KS Address: 541 S 111th St Kansas City Ks 66105 Phone: +1(913) 281-1814	Customer Account Name: City of Union, MO Address: 500 E Locust Phone: +1(636) 583-3522	Customer Account	Name: Havens Construction- Liberty, MO Address: 9400 Liberty Dr Phone: +1(816) 781-4769	Customer Account Name: R W Dunteman Co- Addison, IL Address: 600 S Lombard Rd Phone: +1(630) 953-1500	Customer Account Name: D Construction, Inc-
	Reeves,	N CHILA			S S	Reeves, Willis M	Smith, Brian	n	Andrade, Lindsay Dionne	Andrade, Lindsay Dionne
	SHAKOPEE MN,PROJ SEWER-				RODRIGUEZ MECHANICAL LENEXA KS	UNION MO,FY2024 SANITREHAB	HAVENS CONSTR,KC		RW DUNTEMAN, IDOT CT61H0Z	D CONSTRUCTION,IDOT149
	103095				103096	103099	103100		121859	121896

	140.00 676.00 140.00	1,285.00	556.00	7,074.00	698.00	1,523.00
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	93,772.97	307,556.88	3,169.08	654,389.90	127,445.90	104,719.66
	130,903.00	144,827.00	41,277.00	669,150.00	109,910.00	128,752.00
	Sub	Prime	Sub	Prime	Prime	Sub
	4/27/2023	2/16/2023	5/1/2023	6/14/2023	9/1/2023	9/19/2023
	3/7/2023	9/30/2022	4/27/2023	5/18/2023	6/1/2023	8/8/2023
State of Illinois, IL- District 1 Region (all)Springfield,IL- CO120NAR Address: 2300 S Dirkson Pkwy Phone: +1(847)	Owner Account Name: Village of Glen Ellyn, IL Address: 30 S Lambert Rd Phone: +1(630) 469-6756	Owner Account Name: American Water - Illinois American Water- Belleville, IL Address: 100 N Water Works Dr Phone: +1(618) 239-3256	Owner Account Name: City of West Chicago, IL-Public Works Address: 1400 W Hawthorne Ln Phone: +1(555) 555-5555	Owner Account Name: Caseyville Township, IL Address: 10001 Bunkum Rd Phone: +1	Owner Account Name: Village of Clay City, IL Address: 318 Walnut St SE Phone: +1	Owner Account Name: Village of River Grove, IL Address: 2621
Coal City, IL Address: 1488 S Broadway Ave Phone: +1(815) 634-2555	Customer Account Name: A Lamp Co- Schaumburg, IL Address: 800 W Irving Park Phone: +1(847) 891-6000	Customer Account Name: American Water - Illinois American Water- Belleville, IL Address: 100 N Water Works Dr Phone: +1(618) 239-3256	Customer Account Name: Integral Construction Inc Romeoville, IL Address: 320 Rocbaar Dr Phone: +1(844)	Customer Account Name: Caseyville Township, IL Address: 10001 Bunkum Rd Phone: +1	Customer Account Name: Village of Clay City, IL Address: 318 Walnut St SE Phone: +1	Customer Account Name: Suburban General Construction, Inc
	Andrade, Lindsay Dionne	Reeves, Willis M	Andrade, Lindsay Dionne	Reeves, Willis M	Reeves, Willis M	Andrade, Lindsay Dionne
	A LAMP CONCRETE,GLEN ELLYN IL	ILLINOIS AMERICAN WT,GRANITE C	INTEGRAL CONSTR,WCHICAGO IL	CASEYVILLE TOWNSHIP IL,IGDPY22	CLAY CITV, IL-6TH - 8TH ST SE	SUBURBAN GEN CONSRIVER GROVE
	121903	121904	121911	121919	121921	121923

	674.00	431.00	790.00	908.00 2,724.00 3,752.00 864.00	1,158.00
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	228,998.96	105,000.79	62,973.52	412,737.55	37,558.65
	254,811.00	115,275.00	4,628,116.00	506,176.00	46,165.00
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	10/12/2023	11/2/2023	2/26/2024	1/3/2024	2/2/2024
	9/12/2023 10/12/2023	8/15/2023	12/12/2023 2/26/2024	11/9/2023 1/3/2024	11/15/2023 2/2/2024
453-8000	Owner Account Name: Village of Romeoville, IL Address: 13 Montrose Phone: +1(815) 886-7200	Owner Account Name: Metropolitan Water Reclamation District of Greater Chicago (MWRDGC)- Chicago, IL-East Erie Address: 100 E Erie St Phone: +1(312) 751-3132	Owner Account Name: US Army Corps of Engineers(USACE) - St. Louis, MO Address: 1222 Spruce St Phone: +1(314) 331-8506	Owner Account Name: City of Edwardsville, IL Address: 118 Hillsboro Ave Phone: +1(618) 692-7535	Owner Account Name: City of Genoa, IL Address: 113 N Genoa St Phone: +1(815)
Phone: +1(708) 354-0544	Customer Account Name: Village of Romeoville, IL Address: 13 Montrose Phone: +1(815) 886-7200	Customer Account Name: Anchor Mechanical Inc. Address: 255 North California Avenue Phone: 3124926994	Customer Account Name: US Army Corps of Engineers(USACE) - St. Louis, MO Address: 1222 Spruce St Phone: +1(314) 331-8506	Customer Account Name: City of Edwardsville, IL Address: 118 Hillsboro Ave Phone: +1(618) 692-7535	Customer Account Name: City of Genoa, IL Address: 113 N Genoa St Phone: +1(815)
	Andrade, Lindsay Dionne	Andrade, Lindsay Dionne	Reeves, Willis M	Reeves, Willis M	Andrade, Lindsay Dionne
	ROMEOVILLE IL, 2023 PROJECT	ANCHOR MECHANICAL, HINSDALE IL	ARMY CORPS ENG,CAHOKIA HEIGHTS	EDWARDSVILLE IL,2023 SEWLINE	GENOA, IL, SANITARY SEWER 2023
	121925	121926	121927	121928	121929

Thatcher Ave Phone: +1(708)

Address: 1019 E 31st St

03818594

LLC-45.5

-	Purpose(s) for which the Company is Organized and Proposes to Conduct Business in Illinois:		
	Any act or activity for which limited liability companies may be organized, under the Limited Liability Company Act of		
	Delaware and permitted under the Illinois Limited Liability Act.		
	The Limited Liability Company: (check one)		
	Joe Burgess 17988 Edison Ave., Chesterfield, MO 63005		
	David F. Morris 17988 Edison Ave., Chesterfield, MO 63005		
	David Martin 17988 Edison Ave., Chesterfield, MO 63005		
	b. 🗀 has management vested in the members(s) (List names and addresses.)		
1			
	e Limited Liability Company: (check one) Digits managed by the manager(s) (List names and addresses.) Burgess 17988 Edison Ave., Chesterfield, MO 63005 avid F. Morris 17988 Edison Ave., Chesterfield, MO 63005 avid Martin 17988 Edison Ave., Chesterfield, MO 63005 Tighas management vested in the members(s) (List names and addresses.) Digital management vested in the members(s) (List names and addresses.) Digital management vested in the members of the Limited Liability Company for service of process under sumstances set forth in subsection (b) of Section 1-50 of the Illinois Limited Liability Company Act. Digital management vested in the limited Liability Company for service of process under sumstances set forth in subsection (b) of Section 1-50 of the Illinois Limited Liability Company Act. Digital management vested in the members of the Illinois Limited Liability Company Act. Digital management vested in the members of the Illinois Limited Liability Company Act. Digital management vested in the members of perior, having authority to sign hereto, that this application for admission to transact		
2.	The Illinois Secretary of State is hereby appointed the agent of the Limited Liability Company for service of process under circumstances set forth in subsection (b) of Section 1-50 of the Illinois Limited Liability Company Act. This application is accompanied by a Certificate of Good Standing or Existence, duly authenticated within the last 60 days, by the officer of the state or county wherein the LLC is formed.		
2.	circumstances set forth in subsection (b) of Section 1-50 of the Illinois Limited Liability Company Act. This application is accompanied by a Certificate of Good Standing or Existence, duly authenticated within the last 60		
2.	This application is accompanied by a Certificate of Good Standing or Existence, duly authenticated within the last 60 days, by the officer of the state or county wherein the LLC is formed. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application for admission to transact		
2.	This application is accompanied by a Certificate of Good Standing or Existence, duly authenticated within the last 60 days, by the officer of the state or county wherein the LLC is formed. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application for admission to transact pushness is to the best of my knowledge and belief, true, correct and complete.		
2.	This application is accompanied by a Certificate of Good Standing or Existence, duly authenticated within the last 60 days, by the officer of the state or county wherein the LLC is formed. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application for admission to transact pushness is to the best of my knowledge and belief, true, correct and complete.		
2.	This application is accompanied by a Certificate of Good Standing or Existence, duly authenticated within the last 60 days, by the officer of the state or county wherein the LLC is formed. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application for admission to transact pushness is to the best of my knowledge and belief, true, correct and complete. Dated: January 9 2012 Month, Day, Year		
2.	This application is accompanied by a Certificate of Good Standing or Existence, duly authenticated within the last 60 days, by the officer of the state or county wherein the LLC is formed. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application for admission to transact business is to the best of my knowledge and belief, true, correct and complete. Dated: January 9 2012 Month, Day, Year David F. Morris, Manager		



OFFICE OF THE SECRETARY OF STATE

IESSE WHITE • Secretary of State

JANUARY 20, 2012

0381859-4

ILLINOIS CORPORATION SERVICE C 801 ADLAI STEVENSON DRIVE SPRINGFIELD, IL 62703-4261

RE INSITUFORM TECHNOLOGIES USA, LLC

DEAR SIR OR MADAM:

IT HAS BEEN OUR PLEASURE TO APPROVE YOUR REQUEST TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS. ENCLOSED PLEASE FIND THE APPROVED APPLICATION FOR ADMISSION.

PLEASE NOTE! THE LIMITED LIABILITY COMPANY MUST FILE AN ANNUAL REPORT PRIOR TO THE FIRST DAY OF THIS MONTH OF QUALIFICATION NEXT YEAR. FAILURE TO TIMELY FILE WILL RESULT IN A \$300 PENALTY AND/OR REVOCATION. A PRE-PRINTED ANNUAL REPORT WILL BE MAILED TO THE REGISTERED AGENT AT THE ADDRESS ON OUR RECORDS APPROXIMATELY 45 DAYS BEFORE THE DUE DATE.

MANY OF OUR SERVICES ARE AVAILABLE AT OUR CONTINUOUSLY UPDATED WEBSITE. VISIT WWW.CYBERDRIVEILLINOIS.COM TO VIEW THE STATUS OF THIS COMPANY, PURCHASE A CERTIFICATE OF GOOD STANDING, OR EVEN FILE THE ANNUAL REPORT REFERRED TO IN THE EARLIER PARAGRAPH.

SINCERELY YOURS,

JESSE WHITE

SECRETARY OF STATE

DEPARTMENT OF BUSINESS SERVICES

see White

LIMITED LIABILITY DIVISION

(217) 524-8008

Form **LLC-45.5** June 2010

Secretary of State
Department of Business Services
Limited Liability Division
501 S. Second St., Rm. 351

Limited Liability Division 501 S. Second St., Rm. 351 Springfield, IL 62756 217-524-8008

www.cyberdriveillinois.com

Payment must be made by certified check, cashier's check, Illinois attorney's check, C.P.A.'s check or money order payable to Secretary of State.

Illinois Limited Liability Company Act

Application for Admission to Transact Business

SUBMIT IN DUPLICATE

Type or Print Clearly.

This space for use by Secretary of State.

Filing Fee: \$500

Penalty: \$ --

Approved:



FILE #: 03818594

This space for use by Secretary of State,

FILED

JAN 2 0 2012

JESSE WHITE SECRETARY OF STATE

1.	Limited Liability Co	mpany Name: <u>INSITUFORM TECH</u>	NOLOGIES USA, LLC			-
2.	Assumed Name:	This item is only applicable if the comp. LC 1.20 must be completed and submit	any name in item 1 is not avail ted with this application.)	lable for use in	illinois, in which case form	ā
3.	Jurisdiction of Orga	anization: Delaware				-
4.	Date of Organization	on: _12/22/1983				-
5.	Period of Duration:	Perpetual (Enter Perpetual unless there is a Date or	Dissolution provided in the agree	eement, in whic	h case enter that date.)	-
6.	Address of the Offi Business: (P.O. Bo	ce required to be maintained in the jur ox alone or c/o is unacceptable.)	isdiction of its organization o	r, if not require	ed, of the Principal Place of	
	17988 Edison A	ve	Street		Suite #	=
	Number		Olicer			
	Chesterfield, MC	63005			ZIP Code	_
		City,State	15		Zii Booo	
7.	Registered Agent:	Illinois Corporation Service Comp First Name	Middle Name		Last Name	40
	(P.O. Box alone or c/o	801 Adlai Stevenson Drive Number	Street		Suite #	_
	is unacceptable.)	Springfield City	Sangamon County	Illinois	62703 Zip Code	_
	If applicable Date	on which Company first conducted bu	siness in Illinois: Upon Filir	ng		=0

(continued on back)

03818594

LLC-45.5

€.	Purpose(s) for which the Company is Organized and Proposes to Conduct Business in Illinois:
	Any act or activity for which limited liability companies may be organized, under the Limited Liability Company Act of
	Delaware and permitted under the Illinois Limited Liability Act.
0.	The Limited Liability Company: (check опе)
	a. 口Xis managed by the manager(s) (List names and addresses.)
	Joe Burgess 17988 Edison Ave., Chesterfield, MO 63005
	David F. Morris 17988 Edison Ave., Chesterfield, MO 63005
	David Martin 17988 Edison Ave., Chesterfield, MO 63005
	b. □□ has management vested in the members(s) (L ist names and addresses.)
	The Illinois Secretary of State is hereby appointed the agent of the Limited Liability Company for service of process under circumstances set forth in subsection (b) of Section 1-50 of the Illinois Limited Liability Company Act.
2.	This application is accompanied by a Certificate of Good Standing or Existence, duly authenticated within the last 60 days, by the officer of the state or county wherein the LLC is formed.
3,	The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application for admission to transact business is to the best of my knowledge and belief, true, correct and complete.
	business is to the bost of my knowledge and belief, way, and a
	Dated: January 7 . 2012 Month, Day, Year
	-142 20
	Signature
	David F. Morris, Manager Name and Title (type or print)
	passing ming time folia at Lines,
	remine and the fall of themp
	If applicant is signing for a Company or other Entity, state Name of Company and indicate whether it is a member or manager of the LLC.

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND

CORRECT COPY OF THE CERTIFICATE OF CONVERSION OF A DELAWARE

CORPORATION UNDER THE NAME OF "INSITUFORM TECHNOLOGIES USA,

INC." TO A DELAWARE LIMITED LIABILITY COMPANY, CHANGING ITS NAME

FROM "INSITUFORM TECHNOLOGIES USA, INC." TO "INSITUFORM

TECHNOLOGIES USA, LLC", FILED IN THIS OFFICE ON THE THIRTIETH

DAY OF DECEMBER, A.D. 2011, AT 11:35 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF CONVERSION IS THE THIRTY-FIRST DAY OF DECEMBER, A.D. 2011, AT 11:58 O'CLOCK P.M.

2024080 8100V

111355550

AUTHENT CATION: 9264916

DATE: 12-30-11

You may verify this certificate online at corp.delaware.gov/authver.shtml

Delaware

PAGE 2

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND

CORRECT COPY OF CERTIFICATE OF FORMATION OF "INSITUFORM

TECHNOLOGIES USA, LLC" FILED IN THIS OFFICE ON THE THIRTIETH DAY

OF DECEMber, A.D. 2011, AT 11:35 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF FORMATION IS THE THIRTY-FIRST DAY OF DECEMBER, A.D. 2011, AT 11:58 O'CLOCK P.M.

2024080 8100V

111355550

Jeffrey W. Bullock, Secretary of State

AUTHENT CATION: 9264916

DATE: 12-30-11

You may verify this certificate online at corp.delaware.gov/authver.shtml

INSITUFORM TECHNOLOGIES USA, LLC

PRESIDENT APPOINTMENT OF CONTRACTING AND ATTESTING OFFICERS

The undersigned, being the President of Insituform Technologies USA, LLC, a Delaware Limited Liability Company (the "Company"), and pursuant to the authority set forth in the Limited Liability Company Operating Agreement of the Company, hereby determines that:

- 1. Christlanda Adkins, Janet Hass, Diane Partridge, Whittney Schulte, Ursula Youngblood and Patrizia Sordillo are appointed as Contracting and Attesting Officers of the Company, each with the authority, individually and in the absence of the others, subject to the control of the Board of Managers of the Company, to: (i) certify and attest to the signature of any officer of the Company; (ii) enter into and bind the Company to perform pipeline rehabilitation activities of the Company and all matters related thereto, including the maintenance of one or more offices and facilities of the Company; (iii) execute and to deliver documents on behalf of the Company; and (iv) take such other action as is or may be necessary and appropriate to carry out the project, activities and work of the Company.
- 2. Any person previously appointed or serving as a Contracting and Attesting Officer of the Company prior to the date hereof and who is not named above is hereby removed from any such appointment.

Dated: September 30, 2022

Burt M. Keating

President



Product/Manufacturer/Installer

Insituform Technologies USA, LLC has been repairing sewers and pressure pipes in the Midwest since 1983. The local area office is located at 1334 Enterprise Dr., Romeoville, IL 60446. Your local representative is Wesley Baker. He can be reached at 815-258-6630. The corporate headquarters is located at 580 Goddard Avenue, Chesterfield, Missouri. The telephone number is 636-530-8000 and the fax number is 636-530-8701.

Insituform Technologies® USA, LLC (ITUSA) is directly affiliated with Insituform Technologies®, LLC (IT). As such, ITUSA has all of the same technology, engineering, research and development and manufacturing tools at its disposal and can provide the services to your city that make Insituform® the leading provider of trenchless solutions for your underground infrastructure. ITUSA can meet all of your bonding, insurance and financial requirements.

Since Insituform's founding in 1971, Insituform Technologies®, LLC has been a pioneer in the growing field of trenchless technology. Our flagship Insituform® Process has been used to reconstruct more than 53 million feet of underground pipe infrastructure throughout the world. Recent tests of our very first installation in London have proven that the Insituform® process is a durable, long-term solution to the problems of deteriorating sewers.

Insituform Technologies USA, LLC's Federal Tax ID # is 43-1319597.



OFFICE OF THE SECRETARY OF STATE

IESSE WHITE • Secretary of State

JANUARY 20, 2012

0381859-4

ILLINOIS CORPORATION SERVICE C 801 ADLAI STEVENSON DRIVE SPRINGFIELD, IL 62703-4261

RE INSITUFORM TECHNOLOGIES USA, LLC

DEAR SIR OR MADAM:

IT HAS BEEN OUR PLEASURE TO APPROVE YOUR REQUEST TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS. ENCLOSED PLEASE FIND THE APPROVED APPLICATION FOR ADMISSION.

PLEASE NOTE! THE LIMITED LIABILITY COMPANY MUST FILE AN ANNUAL REPORT PRIOR TO THE FIRST DAY OF THIS MONTH OF QUALIFICATION NEXT YEAR. FAILURE TO TIMELY FILE WILL RESULT IN A \$300 PENALTY AND/OR REVOCATION. A PRE-PRINTED ANNUAL REPORT WILL BE MAILED TO THE REGISTERED AGENT AT THE ADDRESS ON OUR RECORDS APPROXIMATELY 45 DAYS BEFORE THE DUE DATE.

MANY OF OUR SERVICES ARE AVAILABLE AT OUR CONTINUOUSLY UPDATED WEBSITE. VISIT WWW.CYBERDRIVEILLINOIS.COM TO VIEW THE STATUS OF THIS COMPANY, PURCHASE A CERTIFICATE OF GOOD STANDING, OR EVEN FILE THE ANNUAL REPORT REFERRED TO IN THE EARLIER PARAGRAPH.

SINCERELY YOURS,

JESSE WHITE

SECRETARY OF STATE

DEPARTMENT OF BUSINESS SERVICES

see White

LIMITED LIABILITY DIVISION

(217) 524-8008

Form June 2010

Secretary of State

Department of Business Services Limited Liability Division 501 S. Second St., Rm. 351 Springfield, IL 62756 217-524-8008

www.cyberdriveillnois.com

Payment must be made by certified check, cashier's check, lilinois attorney's check, C.P.A.'s check or money order payable to Secretary of State.

Illinois Limited Liability Company Act **Application for Admission to Transact Business**

SUBMIT IN DUPLICATE

Type or Print Clearly.

This space for use by Secretary of State.

Filing Fee: \$500

Penalty: \$ -

Approved:



This space for use by Secretary of State.

FILED

JAN 2 0 2012

JESSE WHITE SECRETARY OF STATE

1.	Limited Liability Company Name	e: INSITUFORM TECHNO	OLOGIES USA, LLC			
2.	Assumed Name; (This item is o	only applicable if the company t be completed and submitted	name in item 1 is not avai with this application.)	liable for use in Illi	nols, in which case form	
3.	Jurisdiction of Organization: De	elaware				
4.	Date of Organization: 12/22/1	983				
5.	Period of Duration: Perpetual (Enter Perpe	dual unless there is a Date of Dis	ssolution provided in the agr	reement, in which ca	ase enter that date.)	
6.	Address of the Office required t Business: (P.O. Box alone or c/		ction of its organization o	or, if not required,	of the Principal Place of	
	17988 Edison Ave. Number		Street		Suite #	
	Chesterfield, MO 63005					
	Chesterneid, WO 03003	City,State			ZiP Code	
_	D. C. Brando Care	-ordina Condo Company	_			
7.	Registered Agent: Illinois Con	First Name	Middle Name		Last Name	
	Registered Office: 801 Adlai S	Stevenson Drive	Street		Suite #	
	(P.O. Box alone or c/o is unacceptable.)	Number	Speci	arie I		
	Springfield		Sangamon County	Illinois	62703 Zip Code	
		City			Zip Coud	
8.	If applicable, Date on which Co	mpany first conducted busine	ess in Illinois: Upon Filir	ng		

(continued on back)