

CONTRACT FOR PROFESSIONAL SERVICES

BY AND BETWEEN

THE FRANKLIN TOWNSHIP SEWERAGE AUTHORITY

AND

NW FINANCIAL GROUP, LLC

THIS CONTRACT, dated as of February 1, 2025, by and between the FRANKLIN TOWNSHIP SEWERAGE AUTHORITY (“Client”) with its principal offices located at 70 Commerce Drive, Somerset, NJ 08873 and NW FINANCIAL GROUP, LLC with offices located at 522 Broad Street, Bloomfield, New Jersey 07003 (“Financial Advisors or NW Financial”).

WITNESSETH:

WHEREAS, Client wishes to engage the Financial Advisors as Consultants for the purposes hereinafter described in Paragraph 1 hereof; and

WHEREAS, the Financial Advisors agree to provide professional financial advisory services related to the Client’s financial operations and other related activities as set forth in the aforesaid scope of services; and

WHEREAS, the Financial Advisors are qualified and experienced in the area of financial advisory services.

NOW THEREFORE, the parties hereto, each intending to be legally bound herein, do mutually agree as follows:

1. SCOPE OF SERVICES:

Financial Advisory – financial assistance and analysis on Client matters including developing financial strategies for optimal use of the Client’s financial resources, review and analysis of bond refunding opportunities, project loan refinancing reviews, and such other financial analysis as the Client may require.

Bond and Note Sales – proposing a financing structure, development of bond sizing models, review and evaluation of feasibility studies, rating agency and bond insurer strategies and negotiations, developing presentations, assistance with negotiated sales and general assistance in connection with any bond issue.

Cash-flow Modeling/Forecasting: NW would evaluate the Client’s cash-flow needs for its budget on a monthly and if necessary, weekly basis. This would help to identify seasonal trends for revenues and expenses.

For the Client, NW Financial will provide a detailed cash flow analysis designed to provide financial information needed to provide long term financial and technical planning. The information will allow the Client to examine Client policies regarding 1) the scheduling for the issuance of debt for purposes of providing capital investment for pump stations, meters, piping and other projects and 2) a determination of the financial options available.

Capital Projects: The Client's current and future capital projects would be examined along with impact of the funding for these projects on the Client's budget.

Debt Issuances: NW Financial would model the Client's outstanding debt; examine the impact of future debt issuances on the Client's budget. The use of the Infrastructure Bank would be examined. NW Financial would also evaluate the use of other financing structures to determine the most cost-effective means of issuing debt and to mitigate impact of the debt structure on the taxpayers.

Rating Strategies: Once an overall financial plan has been developed, NW Financial would assist the Client in presenting the plan to the rating agencies in connection with its future debt issuances.

2. PERSONNEL:

- a) Financial Advisors represent that they have or will secure at their own expense, all personnel required in performing the services under this Contract.
- b) Personnel shall not be employees of the Client.
- c) All of the services required by the Financial Advisors will be performed under the direct supervision of a Principal of NW Financial Group, LLC acceptable to the client
- d) None of the work or services covered by this Contract shall be subcontracted without the prior written approval of the Client.

3. TIME OF PERFORMANCE: It is understood and agreed by and between the parties hereto, that this Contract shall begin effective February 1, 2025, and continuing through January 31, 2026*, during which time the Financial Advisors agree to perform their services in such sequence as to assure their expeditious completion in light of the purpose of this Contract.

*(OR "and continue through the issuance and final completion of bonds and/or notes in connection with the proposed referendum,)

4. COMPENSATION:

- a) Except with respect to matters that are performed related to the issuance of bonds or notes, as provided herein, the Client agrees to pay Financial Advisors for financial advisory services provided on the basis of hourly time charges as specified in Schedule A.

- b) With respect to any financing or proposed financing to be undertaken by the Client, the Client may request that the Financial Advisors perform such financial advisory services on the basis of a fixed fee. Such fixed fee shall be as specified in Schedule A or otherwise mutually acceptable to the Client and the Financial Advisors and shall be agreed-to prior to the provision of financial advisory services with respect to such proposed financing.

5. SERVICE AND DOCUMENT APPROVALS: All services rendered and documents prepared by the Financial Advisors shall strictly conform to all laws, statutes and ordinances and the applicable rules and regulations, methods and procedures of all governmental boards, bureaus, offices and commissions and other agencies in effect when the services are rendered and the documents are prepared.

All of the services required of the Financial Advisors by the Client shall be performed to the satisfaction of and with the approval of the Client, which approval shall not be unnecessarily withheld.

6. TERMINATION: The Client reserves the right to terminate this Contract, at its sole discretion, by giving at least sixty (60) days prior written notice to the Financial Advisors of such termination and specifying the effective date therefore. Upon any termination of the Contract, the Financial Advisors shall be paid in full for all services rendered to the Client in accordance with the terms of this Contract as of the date of termination.

- a) Upon payment for all services rendered to the Client as of the date of termination, all finished or unfinished documents, data, studies, agreements and/or reports prepared or obtained by the Financial Advisors under this Contract, shall be promptly delivered to the Client.
- b) Any outstanding payments due to the Financial Advisor shall be made prior to the date of termination.

7. ASSIGNMENT: This Contract shall not be assigned or assignable, either by action of the Financial Advisors or by law unless prior approval in writing is obtained from the Client.

8. ERRORS AND OMISSIONS: The Client reserves the right to deny payment of the part of any fee which is based on an increase in costs in the preparation of documents or services resulting from an error or omission of the Financial Advisors.

9. LITIGATION: In the event the Client becomes involved in any litigation with third parties concerning or relating in any way to the Financial Advisors services, whether such litigation occurs during or after the term of this agreement, the Financial Advisors agree, at no additional fees other than the hourly rates called for in this agreement to make its members and employees available to the Client to consult, assist and cooperate in any such litigation to the extent such consultation, assistance and cooperation may be required by the Client.

10. FIRM HISTORY: The Financial Advisors represent that no corporation, partnership, individual or association, officer, director, employee, manager, parent, subsidiary, affiliate or principal shareholder of said Financial Advisors, has been adjudicated in violation of any state or federal anti-trust or other similar statute within the preceding five years, or previously adjudged in contempt of any court order enforcing any such law, or has an operating history which shows a recurring pattern of flagrant and consistent violation of prohibited or illegal acts.


11. AUTHORITY REPRESENTATIONS AND WARRANTIES: The Client represents and warrants that this Contract has been duly authorized by its board membership, and when executed by its Executive Director, Chairman or Vice Chairman shall be valid and binding upon the Client and shall be in full force and effect.

12. GOVERNING LAW: This Contract shall be governed by the laws of the State of New Jersey.

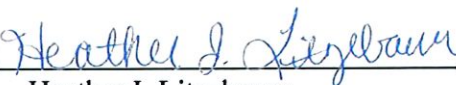
13. SEVERABILITY: A waiver or breach of any term condition or covenant by either party shall not constitute a waiver or breach of any other term condition or covenant. If any court of competent jurisdiction declares a provision of the Contract to be invalid, illegal or otherwise unenforceable, the remaining provisions of the contract shall remain in full force and effect.

IN WITNESS WHEREOF, the Client has caused these presents to be duly executed and the Financial Advisors have caused these presents to be duly executed, as of the day and year first above written.

Franklin Township Sewerage Authority

By: 
Name: Teresa Ford
Title: Chairwoman

NW Financial Group, LLC

By: 
Heather I. Litzebauer
Managing Director

Schedule A Compensation

For financial advisory services rendered in connection with the sale of bonds and notes, NW Financial proposes to be compensated based on the following schedule:

1. Notes:

For the issuance of notes, NW Financial proposes to be compensated \$1/note with a minimum of \$7,500 based upon the par amount. This amount shall be payable at the closing of the proposed note issuance. NW Financial will not invoice unless the note issuance is finalized and closed.

2. Bonds:

For the issuance of bonds, NW Financial proposes to be compensated \$1/bond with a minimum of \$7,500 based upon the par amount. This amount shall be payable at the closing of the proposed bond issuance. NW Financial will not invoice unless the bond issuance is finalized and closed.

3. Continuing Disclosure Services:

If the client requests continuing disclosure services, NW can provide at the hourly rates noted below.

4. NJIB:

- a) For an NJIB bond financing, NW Financial proposes to be compensated a flat fee of \$8,500, regardless of par amount size.
- b) For an NJIB note sale, NW Financial proposes to be compensated a flat fee of \$3,500, regardless of par amount size.

5. Consulting:

For financial consulting services not related to the issuance of bonds and notes, NW Financial proposes that compensation be based upon the hourly rates established below.

<u>Position</u>	<u>Hourly Rate (\$/hour)</u>
Principal	\$225
Managing Director	\$205
Senior Vice President	\$195
Vice President	\$190
Associate	\$185

**CERTIFICATE IN CONNECTION
WITH RULE G-42 OF THE
MUNICIPAL SECURITIES RULEMAKING BOARD**

We are writing this to provide you, the Franklin Township Sewerage Authority (the “Issuer”), with certain disclosures relating to financial consulting and cash flow modeling (the “Project”), as required by Municipal Securities Rulemaking Board (“MSRB”) Rule G-42 in accordance with MSRB Notice 2016-03 (January 13, 2016), which became effective June 23, 2016 for transactions that price on or after such date. The Issuer has engaged NW Financial Group, LLC (the “Municipal Advisor”) to serve as a municipal advisor in connection with the issuance of the Project.

The undersigned, a duly authorized representative of the Municipal Advisor, HEREBY CERTIFIES, in accordance with Rule G-42 of the Municipal Securities Rulemaking Board, and in connection with the issuance of the Project, that:

- (i) There are no known material conflicts of interest known to the Municipal Advisor in connection with the Scope of Services
- (ii) The Municipal Advisor shall deal fairly with all persons and shall not engage in any deceptive, dishonest, or unfair practice
- (iii) There are no legal or disciplinary events that are material to the Issuer’s evaluation of the Municipal Advisor, or the integrity of the Municipal Advisor’s management or advisory personnel disclosed, or that should be disclosed, on any Form MA or Form MA-I filed with the SEC
- (iv) The Municipal Advisor has not made any material legal or disciplinary event disclosures on Form MA, or any Form MA-I filed with the SEC
- (v) To the extent that Municipal Advisor fees for the Project are based on the par amount of bonds and/or notes issued, as per its contract or proposal with the Issuer, it may create a conflict of interest.
- (vi) As required by MSRB Rule G-42, this letter may be supplemented or amended, from time to time as needed, to reflect changed circumstances resulting in new conflicts of interest or changes in conflicts of interest described above, or to provide updated information with regard to any legal or disciplinary events of the Municipal Advisor. The Municipal Advisor will provide the Issuer with any such supplement or amendment as it becomes available throughout the term of the Agreement.
- (vii) NW Capital Markets Inc. (“NW Capital”), an affiliate company of NW Financial Group, LLC, is a broker/dealer which from time to time underwrites municipal bonds for a variety of issuers. However, at this time, NW Capital does not have any pending transactions which would be conflicts of interest for the Issuer.

If you have any questions or concerns about these disclosures, please make those questions or concerns known immediately to the undersigned. In addition, you should consult with your legal advisors, as applicable, to the extent you deem appropriate. It is our understanding that you have the authority to bind the Issuer by contract with us, and that you are not a party to any conflict of interest relating to the subject transaction. If our understanding is incorrect, please notify the undersigned immediately.

We are required to seek your acknowledgement that you have received this letter. Accordingly, please sign and return the enclosed copy of the letter. Depending on the structure of the transaction that the Issuer decides to pursue, or if additional potential or actual material conflicts are identified, we may be required to send you additional disclosures. At that time, we also will seek your acknowledgement of receipt of any such additional disclosures.

IN WITNESS WHEREOF, I have hereunto set my hand this 1st February 2025.

NW Financial Group, LLC

By: Heather I. Litzbauer
Heather I. Litzbauer
Managing Director

Acknowledged as of the date hereof:

THE FRANKLIN TOWNSHIP SEWERAGE AUTHORITY

By: Teresa Ford
Name: TERESA FORD
Title: Chairwoman

BUSINESS ENTITY DISCLOSURE CERTIFICATION
FOR NON-FAIR AND OPEN CONTRACTS
 Required Pursuant To N.J.S.A. 19:44A-20.8
<FRANKLIN TOWNSHIP SEWERAGE AUTHORITY >

Part I – Vendor Affirmation

The undersigned, being authorized and knowledgeable of the circumstances, does hereby certify that the *NW Financial Group, LLC* has not made and will not make any reportable contributions pursuant to N.J.S.A. 19:44A-1 et seq. that, pursuant to P.L. 2004, c. 19 would bar the award of this contract in the one year period preceding (*date of award scheduled for approval of the contract by the governing body*) to any of the following named candidate committee, joint candidates committee; or political party committee representing the elected officials of the *<name of entity of elected officials>* as defined pursuant to N.J.S.A. 19:44A-3(p), (q) and (r).

Part II – Ownership Disclosure Certification

I certify that the list below contains the names and home addresses of all owners holding 10% or more of the issued and outstanding stock of the undersigned.

Check the box that represents the type of business entity:

- Partnership
 Corporation
 Sole Proprietorship
 Subchapter S Corporation
 Limited Partnership
 Limited Liability Corporation
 Limited Liability Partnership

Name of Stock or Shareholder	Home Address

Part 3 – Signature and Attestation:

The undersigned is fully aware that if I have misrepresented in whole or part this affirmation and certification, I and/or the business entity, will be liable for any penalty permitted under law.

Name of Business Entity: NW Financial Group, LLC

Signature of Affiant: Heather I. Litzebauer

Title: Managing Director

Printed Name of Affiant : Heather I. Litzebauer

Date: 1/13/2025

Subscribed and sworn before me this 13 day of January, 2025.

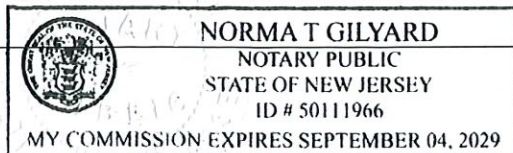
My Commission expires: 9/4/2029

Norma T. Gilyard

(Witnessed or attested by)

Norma T. Gilyard, Notary

(Seal)



BUSINESS ENTITY DISCLOSURE CERTIFICATION
FOR NON-FAIR AND OPEN CONTRACTS
Required Pursuant To N.J.S.A. 19:44A-20.8
<**FRANKLIN TOWNSHIP SEWERAGE AUTHORITY**>

The following is statutory text related to the terms and citations used in the Business Entity Disclosure Certification form.

“Local Unit Pay-To-Play Law” (P.L. 2004, c.19, as amended by P.L. 2005, c.51)

19:44A-20.6 Certain contributions deemed as contributions by business entity.

5. When a business entity is a natural person, a contribution by that person's spouse or child, residing therewith, shall be deemed to be a contribution by the business entity. When a business entity is other than a natural person, a contribution by any person or other business entity having an interest therein shall be deemed to be a contribution by the business entity.

19:44A-20.7 Definitions relative to certain campaign contributions.

6. As used in sections 2 through 12 of this act:

“business entity” means any natural or legal person, business corporation, professional services corporation, limited liability company, partnership, limited partnership, business trust, association or any other legal commercial entity organized under the laws of this State or of any other state or foreign jurisdiction;

“interest” means the ownership or control of more than 10% of the profits or assets of a business entity or 10% of the stock in the case of a business entity that is a corporation for profit, as appropriate;

Temporary and Executing

12. Nothing contained in this act shall be construed as affecting the eligibility of any business entity to perform a public contract because that entity made a contribution to any committee during the one-year period immediately preceding the effective date of this act.

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**The New Jersey Campaign Contributions and Expenditures Reporting Act (N.J.S.A. 19:44A-1 et seq.)**

**19:44A-3 Definitions.** In pertinent part...

p. The term "political party committee" means the State committee of a political party, as organized pursuant to R.S.19:5-4, any county committee of a political party, as organized pursuant to R.S.19:5-3, or any municipal committee of a political party, as organized pursuant to R.S.19:5-2.

q. The term "candidate committee" means a committee established pursuant to subsection a. of section 9 of P.L.1973, c.83 (C.19:44A-9) for the purpose of receiving contributions and making expenditures.

r. the term "joint candidates committee" means a committee established pursuant to subsection a. of section 9 of P.L.1973, c.83 (C.19:44A-9) by at least two candidates for the same elective public offices in the same election in a legislative district, county, municipality or school district, but not more candidates than the total number of the same elective public offices to be filled in that election, for the purpose of receiving contributions and making expenditures. For the purpose of this subsection: ...; the offices of member of the board of chosen freeholders and county executive shall be deemed to be the same elective public offices in a county; and the offices of mayor and member of the municipal governing body shall be deemed to be the same elective public offices in a municipality.

**19:44A-8 and 16 Contributions, expenditures, reports, requirements.**

*While the provisions of this section are too extensive to reprint here, the following is deemed to be the pertinent part affecting amounts of contributions:*

“The \$300 limit established in this subsection shall remain as stated in this subsection without further adjustment by the commission in the manner prescribed by section 22 of P.L.1993, c.65 (C.19:44A-7.2)

**DISCLOSURE OF PROHIBITED INVESTMENT ACTIVITIES IN IRAN, RUSSIA AND BELARUS**

P.L. 2022, c. 3, N.J.S.A. 52:32-55 et seq., N.J.S.A. 40A:11-2.1, N.J.S.A. 18A:18A-49.4

**PART 1**

**COMPLETE PART 1 BY CHECKING ONE OF THE TWO BOXES BELOW**

Pursuant to law, any person or entity that is a successful bidder or proposer, or otherwise proposes to enter into or renew a contract, for goods or services must complete the certification below prior to contract award to attest, under penalty of perjury, that neither the person or entity, nor any parent entity, subsidiary, or affiliate, is identified on the Department of Treasury's Russia-Belarus list or Chapter 25 list as a person or entity engaging in prohibited activities in Russia, Belarus or Iran. Before a contract for goods or services can be amended or extended, a person or entity must certify that neither the person or entity, nor any parent entity, subsidiary, or affiliate, is identified on the Department of Treasury's Russia-Belarus list. Both lists are found on Treasury's website at the following web addresses: <https://www.nj.gov/treasury/administration/pdf/RussiaBelarusEntityList.pdf> [www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf](http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf).

As applicable to the type of contract, the above-referenced lists must be reviewed prior to completing the below certification. A person or entity unable to make the certification must provide a detailed, accurate, and precise description of the activities of the person or entity, or of a parent entity, subsidiary, or affiliate, engaging in prohibited activities in Russia or Belarus and/or investment activities in Iran. The person or entity must cease engaging in any prohibited activities and provide an updated certification before the contract can be entered into.

If a vendor or contractor is found to be in violation of law, action may be taken as appropriate and as may be 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.

**CONTRACT AWARDS AND RENEWALS/CONTRACT AMENDMENTS AND EXTENSIONS**

I certify, pursuant to law, that neither the person or entity listed above, nor any parent entity, subsidiary, or affiliate appears on the N.J. Department of Treasury's lists of entities engaged in prohibited activities in Russia or Belarus pursuant to P.L. 2022, c. 3 or in investment 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.  
*(Skip Part 2 and sign and complete the Certification below.)*

**IF UNABLE TO CERTIFY**

I am unable to certify as above because the person or entity and/or a parent entity, subsidiary, or affiliate is listed on the Department's Russia-Belarus list and/or Chapter 25 Iran list. I will provide a detailed, accurate, and precise description of the activities as directed in Part 2 below, and sign and complete the Certification below. Failure to provide such will prevent the award of the contract to the person or entity, and appropriate penalties, fines, and/or sanctions will be assessed as provided by law.

**PART 2**

**PLEASE PROVIDE FURTHER INFORMATION RELATED TO PROHIBITED ACTIVITIES IN RUSSIA OR BELARUS AND/OR INVESTMENT ACTIVITIES IN IRAN.** You must provide a detailed, accurate, and precise description of the activities of the person or entity, or of a parent entity, subsidiary, or affiliate, engaging in prohibited activities in Russia or Belarus and/or investment activities in Iran in the space below and, if needed, on additional sheets provided by you.

**CERTIFICATION**

I, being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments there, to the best of my knowledge, are true and complete. I attest that I am authorized to execute this certification on behalf of the above-referenced person or entity. I acknowledge that the Franklin Township Sewerage Authority is relying on the information contained herein and hereby acknowledge that I am under a continuing obligation from the date of this certification through the completion of any contracts with the Franklin Township Sewerage Authority to notify the Franklin Township Sewerage Authority in writing of any changes to the answers of information contained herein. I acknowledge that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification. 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 agreement(s) with the Franklin Township Sewerage Authority and that the Franklin Township Sewerage Authority at its option may declare any contract(s) resulting from this certification void and unenforceable.

Heather I. Litzebauer

*Printed Name of Authorized Agent*

Managing Director

*Title*

NW Financial Group, LLC

*Company Name/Person/Entity*

*Heather I. Litzebauer*

*Signature of Authorized Agent*

1/13/25

*Date*



## STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE

**Taxpayer Name:** NW FINANCIAL GROUP, L.L.C.

**Trade Name:**

**Address:** 522 BROAD STREET  
BLOOMFIELD, NJ 07003

**Certificate Number:** 0084838

**Effective Date:** June 26, 1996

**Date of Issuance:** October 18, 2023

**For Office Use Only:**

20231018162851755

Certification **45453**

**CERTIFICATE OF EMPLOYEE INFORMATION REPORT RENEWAL**

This is to certify that the contractor listed below has submitted an Employee Information Report pursuant to N.J.A.C. 17:27-1.1 et. seq. and the State Treasurer has approved said report. This approval will remain in effect for the period of **15-Sep-2024** to **15-Sep-2031**

**NW FINANCIAL GROUP, LLC  
522 BROAD ST  
BLOOMFIELD**

**NJ 07003**



*Elizabeth Maher Muoio*  
**ELIZABETH MAHER MUOIO**  
State Treasurer



NWFINAN-01

RKOPACKA

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
7/26/2024

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

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

|                                                                                                        |                                                  |                                      |
|--------------------------------------------------------------------------------------------------------|--------------------------------------------------|--------------------------------------|
| <b>PRODUCER</b><br>Otterstedt Insurance Agency Inc.<br>540 Sylvan Avenue<br>Englewood Cliffs, NJ 07632 | <b>CONTACT NAME:</b> Ron Kopacka, CIC            |                                      |
|                                                                                                        | <b>PHONE (A/C, No, Ext):</b> (201) 227-1523 1203 | <b>FAX (A/C, No):</b> (201) 227-1523 |
| <b>E-MAIL ADDRESS:</b> RKopacka@Otterstedt.com                                                         |                                                  |                                      |
| <b>INSURER(S) AFFORDING COVERAGE</b>                                                                   |                                                  | <b>NAIC #</b>                        |
| <b>INSURER A :</b> Sentinel Insurance Company, Ltd.                                                    |                                                  | <b>11000</b>                         |
| <b>INSURER B :</b> Hartford                                                                            |                                                  | <b>00914</b>                         |
| <b>INSURER C :</b> North American Capacity Insurance Company                                           |                                                  | <b>25038</b>                         |
| <b>INSURER D :</b> Great American                                                                      |                                                  | <b>16691</b>                         |
| <b>INSURER E :</b>                                                                                     |                                                  |                                      |
| <b>INSURER F :</b>                                                                                     |                                                  |                                      |

**INSURED**

NW Financial Group, LLC  
 522 Broad Street  
 Bloomfield, NJ 07003

### COVERAGES

**CERTIFICATE NUMBER:**

**REVISION NUMBER:**

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

| INSR LTR | TYPE OF INSURANCE                                                                                                                                                                                                                                                                                                   | ADDL INSD | SUBR WVD | POLICY NUMBER            | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS                                                                                                                                                                                                                                                                     |
|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|--------------------------|-------------------------|-------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A        | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC<br>OTHER: |           |          | 13SBAAB5679              | 6/1/2024                | 6/1/2025                | EACH OCCURRENCE \$ 1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000<br>MED EXP (Any one person) \$ 10,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 2,000,000<br>PRODUCTS - COMP/OP AGG \$ 2,000,000<br>HNOA Liability \$ 1,000,000 |
| A        | AUTOMOBILE LIABILITY<br><input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY                                                                                |           |          | 13SBAAB5679              | 6/1/2024                | 6/1/2025                | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$<br>\$                                                                                                            |
| A        | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR<br><input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE<br>DED <input checked="" type="checkbox"/> RETENTION \$ 10,000                                                                             |           |          | 13SBAAB5679              | 6/1/2024                | 6/1/2025                | EACH OCCURRENCE \$ 4,000,000<br>AGGREGATE \$ 4,000,000<br>\$                                                                                                                                                                                                               |
| B        | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY<br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NJ) <input checked="" type="checkbox"/> N<br>If yes, describe under DESCRIPTION OF OPERATIONS below                                                                                        |           | N/A      | 13WBCBN0099              | 6/1/2024                | 6/1/2025                | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. DISEASE - POLICY LIMIT \$ 1,000,000                                                                  |
| C        | Cyber Liability                                                                                                                                                                                                                                                                                                     |           |          | C-4LXL-086422-CYBER-2024 | 4/7/2024                | 4/7/2025                | See Attached                                                                                                                                                                                                                                                               |
| D        | Crime                                                                                                                                                                                                                                                                                                               |           |          | FS E696387 03 00         | 4/7/2024                | 4/7/2025                | See Attached                                                                                                                                                                                                                                                               |

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

### CERTIFICATE HOLDER

### CANCELLATION

Franklin Township Sewerage Authority  
 70 Commerce Drive  
 Somerset, NJ 08873

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



NWFINAN-01

RKOPACKA

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
7/26/2024

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

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

|                                                                                                 |                                                  |                                      |
|-------------------------------------------------------------------------------------------------|--------------------------------------------------|--------------------------------------|
| PRODUCER<br>Otterstedt Insurance Agency Inc.<br>540 Sylvan Avenue<br>Englewood Cliffs, NJ 07632 | CONTACT NAME: <b>Ron Kopacka, CIC</b>            |                                      |
|                                                                                                 | PHONE (A/C, No, Ext): <b>(201) 227-1523 1203</b> | FAX (A/C, No): <b>(201) 227-1523</b> |
| E-MAIL ADDRESS: <b>RKopacka@Otterstedt.com</b>                                                  |                                                  |                                      |
| INSURER(S) AFFORDING COVERAGE                                                                   |                                                  | NAIC #                               |
| INSURER A : <b>Sentinel Insurance Company, Ltd.</b>                                             |                                                  | <b>11000</b>                         |
| INSURER B : <b>Hartford</b>                                                                     |                                                  | <b>00914</b>                         |
| INSURER C : <b>North American Capacity Insurance Company</b>                                    |                                                  | <b>25038</b>                         |
| INSURER D : <b>Great American</b>                                                               |                                                  | <b>16691</b>                         |
| INSURER E :                                                                                     |                                                  |                                      |
| INSURER F :                                                                                     |                                                  |                                      |

|                                                                                    |                     |                  |
|------------------------------------------------------------------------------------|---------------------|------------------|
| INSURED<br><br>NW Financial Group, LLC<br>522 Broad Street<br>Bloomfield, NJ 07003 | CERTIFICATE NUMBER: | REVISION NUMBER: |
|------------------------------------------------------------------------------------|---------------------|------------------|

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

| INSR LTR | TYPE OF INSURANCE                                                                                                                                                                                                                                                                                                   | ADDL INSD | SUBR WVD | POLICY NUMBER            | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS                                                                                                                                                                                                                                                                     |
|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|--------------------------|-------------------------|-------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A        | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC<br>OTHER: |           |          | 13SBAAB5679              | 6/1/2024                | 6/1/2025                | EACH OCCURRENCE \$ 1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000<br>MED EXP (Any one person) \$ 10,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 2,000,000<br>PRODUCTS - COMP/OP AGG \$ 2,000,000<br>HNOA Liability \$ 1,000,000 |
| A        | AUTOMOBILE LIABILITY<br><input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY                                                                                |           |          | 13SBAAB5679              | 6/1/2024                | 6/1/2025                | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$<br>\$                                                                                                            |
| A        | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR<br><input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE<br><input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000                                                    |           |          | 13SBAAB5679              | 6/1/2024                | 6/1/2025                | EACH OCCURRENCE \$ 4,000,000<br>AGGREGATE \$ 4,000,000<br>\$                                                                                                                                                                                                               |
| B        | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY<br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input checked="" type="checkbox"/> Y/N <input checked="" type="checkbox"/> N<br>If yes, describe under DESCRIPTION OF OPERATIONS below                                                |           | N/A      | 13WBCBN0099              | 6/1/2024                | 6/1/2025                | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. DISEASE - POLICY LIMIT \$ 1,000,000                                                                  |
| C        | Cyber Liability                                                                                                                                                                                                                                                                                                     |           |          | C-4LXL-086422-CYBER-2024 | 4/7/2024                | 4/7/2025                | See Attached                                                                                                                                                                                                                                                               |
| D        | Crime                                                                                                                                                                                                                                                                                                               |           |          | FS E696387 03 00         | 4/7/2024                | 4/7/2025                | See Attached                                                                                                                                                                                                                                                               |

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

|                                                                                                           |                                                                                                                                                                                                                         |
|-----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CERTIFICATE HOLDER<br><br>Franklin Township Sewerage Authority<br>70 Commerce Drive<br>Somerset, NJ 08873 | CANCELLATION<br><br>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.<br><br>AUTHORIZED REPRESENTATIVE<br> |
|-----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|