CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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	Complete Nos. 1 - 4 and 6 if there are interested parties. Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.			OFFICE USE ONLY CERTIFICATION OF FILING		
1	Name of business entity filing form, and the city, state and country of the business entity's place of business.			Certificate Number: 2024-1151161		
	pterra Solutions, Inc			2024 1101101		
	Lexington, SC United States		Date	Filed:		
2	Name of governmental entity or state agency that is a party to the contract for which the form is			04/23/2024		
2	being filed.					
	Collin County			Date Acknowledged:		
3	Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.					
	2024-183					
	Herbicide Treatment of Roadside ROW & Encroachments					
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4					f interest	
	Name of Interested Party	City, State, Country (place of business		s) (check applicable)		
_				Controlling	Intermediary	

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5 Check only if there is NO Interested Party.						
6 UNSWORN DECLARATION						
	My name is, and my date of birth is					
	My address is				400	
	(street) (city) (state) (zip code) (country)					
	I declare under penalty of perjury that the foregoing is true and correct.					
	Executed in LX County, State of SC, on the Bday of Oppul, 2024					
	L D · D					
	Signature of authorized agent of contracting business entity (Declarant)					
_	(Dodaian)					