

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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**

Certificate Number:
2024-1210424

Date Filed:
09/05/2024

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
Aguaworks Pipe Supply
Brownsville, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
Hidalgo County

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.
24-0210
24-0210 Pipes and Related Miscellaneous Items

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Armando Blanco, and my date of birth is .

My address is 2907 N. Central Ave., Brownsville, TX, 78526 USA.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Cameron County, State of TX, on the 3rd day of September, 2024.
(month) (year)

Armando Blanco
Signature of authorized agent of contracting business entity
(Declarant)

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Aguaworks Pipe Supply
Brownsville, TX United States

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2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
Hidalgo County

Date Acknowledged:
09/10/2024

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24-0210 Pipes and Related Miscellaneous Items

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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 _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

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1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Rio Valley Pipe, LLC dba CAPA
 Palmview, TX United States

Certificate Number:
 2024-1210320

Date Filed:
 09/05/2024

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Hidalgo 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.

24-0210
 Pipes & Related Miscellaneous Items

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Isaac Jimenez and my date of birth is [REDACTED]

My address is 329 E Sam Houston Plan TX 78577 Hidalgo
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Hidalgo County, State of Texas, on the 5th day of September 2024.
(month) (year)

[Signature]
 Signature of authorized agent of contracting business entity
 (Declarant)

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2024-1210320

Date Filed:
09/05/2024

Date Acknowledged:
09/10/2024

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
Rio Valley Pipe, LLC dba CAPA
Palmview, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
Hidalgo County

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.
24-0210
Pipes & Related Miscellaneous Items

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
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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 _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)