

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:
2026-1513013

Date Filed:
09/08/2026

Date Acknowledged:

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

Big Truck Rental, LLC
Tampa, FL 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.

26-0538
Grapple Truck Purchase Pct, 1

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Heavy Rental Partners Holding Company LLC	Tampa, FL United States	X	
	Martin, Zach	Tampa, FL United States	X	
	Zukusky, Mike	Tampa, FL United States	X	
	Cowley, Kevin	Tampa, FL United States	X	
	Voss, Eric	Tampa, FL United States	X	
	Dols, Scott	Tampa, FL United States	X	

5 Check only if there is NO Interested Party.**6 UNSWORN DECLARATION**

Kevin Cowley

My name is _____, and my date of birth is _____.

My address is **Big Truck Rental, LLC 4221 West Boy Scout Blvd, Suite 400, Tampa, Florida 33607 United States**
 _____ (city) _____ (state) _____ (zip code) _____ (country)

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

Executed in **Hillsborough** County, State of **Florida**, on the **9th** day of **September**, 20**26**.
 (month) (year)

Signed by:

Kevin Cowley

Kevin Cowley CFO

9/9/2026

Signature of authorized agent of contracting business entity
(Declarant)

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26-0538
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	Voss, Eric	Tampa, FL United States	X	
	Dols, Scott	Tampa, FL United States	X	

5 Check only if there is NO Interested Party.

☐

6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(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)