

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

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

CP&Y, Inc. dba STV Infrastructure
Austin, TX United States

Certificate Number:
2024-1124390

Date Filed:
02/15/2024

Date Acknowledged:

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

Williamson 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.

24RFSQ11 Ronald Reagan Blvd C1
Professional engineering services

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Kelly, Greg	New York City, NY United States	X	
	Roohms, J.J.	Dallas, TX United States	X	
	Kohler, Chuck	New York City, NY United States	X	

5 Check only if there is NO Interested Party. ☐

6 UNSWORN DECLARATION

My name is Robin Handel, and my date of birth is [REDACTED].

My address is Stewart Creek Office Center II
5750 Genesis Court, Ste 200, Frisco, TX, 75034, USA
(street) (city) (state) (zip code) (country)

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

Executed in Collin County, State of Texas, on the 19th day of February, 2024.
(month) (year)



Signature of authorized agent of contracting business entity
(Declarant)

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Austin, TX United States

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2024-1124390

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03/07/2024

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Professional engineering services

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			Controlling	Intermediary
	Kelly, Greg	New York City, NY United States	X	
	Roohms, J.J.	Dallas, TX United States	X	
	Kohler, Chuck	New York City, NY 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 _____, _____, _____, _____, _____.
(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)