

**TOWNSHIP OF VERONA
COUNTY OF ESSEX, STATE OF NEW JERSEY**

RESOLUTION No. 2026-073

A motion was made by Deputy McEvoy; seconded by Mayor Tamburro that the following resolution be adopted:

**AUTHORIZING A CONTRACT WITH ALL AMERICAN SEWER
SERVICE, INC.**

WHEREAS, there exists a need for drainage and sewer services on the sewer lines within the Township; and

WHEREAS, the Township of Verona has a need to acquire such services pursuant to *N.J.S.A. 19-44A-20.5*; and

WHEREAS, the Qualified Purchasing Agent has determined that the value of said services will exceed \$17,500.00; and

WHEREAS, this expenditure shall be charged to Budget Account No. 6-05-55-502-389 or any other account that may be deemed appropriate by the Chief Financial Officer or her designee, and the availability of funds pending approval of the 2026 Budget; and

WHEREAS, the Township Manager has recommended that All American Sewer Service, Inc., PO Box 605, Lodi, New Jersey 07664 be awarded a contract to provide services at the waste water treatment facility.

THEREFORE, BE IT RESOLVED by the Township Council of the Township of Verona, in the County of Essex, New Jersey that All American Sewer Service is hereby awarded a contract for providing sewer services not to exceed \$35,000 without further authorization of the Governing Body.


BE IT FURTHER RESOLVED that the Township Manager and the Municipal Clerk are hereby authorized to enter into an agreement for the aforementioned services a copy of which shall be available for public inspection in the Office of the Municipal Clerk.

ROLL CALL:

AYES: Holland, McGrath, Roman, McEvoy, Tamburro

NAYS:

THIS IS TO CERTIFY THAT THE FOREGOING IS A TRUE AND EXACT COPY OF A RESOLUTION ADOPTED BY THE TOWNSHIP COUNCIL OF THE TOWNSHIP OF VERONA AT A REGULAR MEETING HELD ON MARCH 23, 2026.


JENNIFER KIERNAN, RMC, CMC
MUNICIPAL CLERK



TOWNSHIP OF VERONA, COUNTY OF ESSEX, NEW JERSEY
VENDOR INFORMATION SHEET

COMPANY NAME: All American Sewer Service

ADDRESS: PO Box 605; Lodi NJ 07644

PHONE NUMBER: 973-773-9001

FAX NUMBER: 973-773-9075

FEDERAL I.D. NUMBER: 223747521

NAME OF PERSON PREPARING BID: Cheryl Foote

PHONE NUMBER: 973-773-9001 EXT. _____

CONTACT PERSON FOR CORRESPONDENCE REGARDING THE PROPOSAL

NAME: Cheryl Foote

ADDRESS: PO Box 605; Lodi NJ 07644

PHONE: 973-773-9001 FAX NUMBER: 973-773-9075

E-MAIL ADDRESS: c.foote@allamericansewerservice.com

PROJECT COORDINATOR

COMPANY NAME: All American Sewer Service

ADDRESS: PO Box 605; Lodi NJ 07644

PHONE NUMBER: 973-773-9001

CELL PHONE NUMBER: _____

FAX NUMBER: 973-773-9075

PERSON TO CONTACT: Chris / Mike F / Marianne

EMAIL ADDRESS: c.carpino@allamericansewerservice.com
m.nealon@ //

TOWNSHIP OF VERONA, COUNTY OF ESSEX, NEW JERSEY
BUSINESS ENTITY DISCLOSURE CERTIFICATION
FOR NON-FAIR AND OPEN CONTRACTS
N.J.S.A. 19:44A-20.8

Part I - Vendor Affirmation

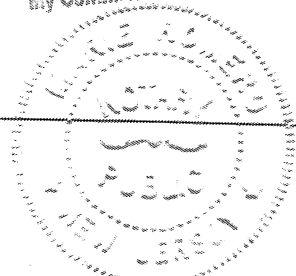
The undersigned, being authorized and knowledgeable of the circumstances, does hereby certify that All American Sewer Service (company name) has not made and will not make any reportable contributions pursuant to N.J.S.A. 19:44A-20.26 that would bar the award of this contract in the one year period preceding Jan 1, 2025 to any of the following named any candidate committee of a candidate for, or holder of, an elective office for the following public entities pursuant to N.J.S.A. 19:44A-20.26.

Verona Township Council:
Mayor Dr. Christopher Tamburro
Deputy Mayor Jack McEvoy
Councilman Alex Roman
Councilwoman Christine McGrath
Councilwoman Cynthia Holland

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: All American Sewer Service
Signature of Affiant: Cheryl Foote Title: Vice President
Printed Name of Affiant: Cheryl Foote Date: 2/3/26

Subscribed and sworn before me this <u>3</u> day of <u>February</u> , 2026.	(Notary Stamp/Seal)
<u>Marie Romero</u> Notary Public	MARIE ROMERO NOTARY PUBLIC OF NEW JERSEY ID # 2430626 My Commission Expires <u>2/29/28</u>
Commission Expires: <u>2/29/28</u>	

TOWNSHIP OF VERONA, COUNTY OF ESSEX, NEW JERSEY
C. 271 POLITICAL CONTRIBUTION DISCLOSURE FORM
 FOR NON-FAIR AND OPEN CONTRACTS
 N.J.S.A. 19:44A-20.26

*This form or its permitted facsimile must be submitted to the local unit
 No later than 10 days prior to the award of the contract.*

Part I - Vendor Information

Vendor Name:	All American Sewer Service		
Address:	PO Box 605		
City:	Lodi	State:	NJ
		Zip:	07044

The undersigned being authorized to certify, hereby certifies that the submission provided herein represents compliance with the provisions of N.J.S.A. 19:44A-20.26 and as represented by the Instructions accompanying this form.

<u>Cheryl Foote</u> Signature	<u>Cheryl Foote</u> Printed Name	<u>VP</u> Title
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Part II - Contribution Disclosure

Disclosure requirement: Pursuant to N.J.S.A. 19:44A-20.26 this disclosure must include all reportable political contributions (more than \$200 per election cycle) over the 12 months prior to submission to the committees of the government entities listed on the form provided by the local unit.

Check here if disclosure is provided in electronic form.

Contributor Name	Recipient Name	Date	Dollar Amount
N/A			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$

Check here if the information is continued on subsequent page(s)

**STATEMENT OF OWNERSHIP
OWNERSHIP DISCLOSURE CERTIFICATION FORM (CONTINUED)**

Required pursuant to N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

Sign and notarize the form below, and, if necessary, complete the list below. (Please attach additional sheets if more space is needed):

Name: Michael Foote

Home Address: 61 Miller St

Wallington NJ 07057

Name: Cheryl Foote

Home Address: 216 Goldfinch Dr

Upper Saddle River NJ
07458

Name: _____

Home Address: _____

Name: _____

Home Address: _____

Name: _____

Home Address: _____

Name: _____

Home Address: _____

Name: _____

Home Address: _____

Name: _____

Home Address: _____

Name: _____

Home Address: _____

Name: _____

Home Address: _____

Name: _____

Home Address: _____

Name: _____

Home Address: _____

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**STATEMENT OF OWNERSHIP
OWNERSHIP DISCLOSURE CERTIFICATION FORM (CONTINUED)**
Required pursuant to N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

PART III

Any Direct or Indirect Parent Entity Which is Publicly Traded:

"To comply with this section, a bidder with any direct or indirect parent entity which is publicly traded may submit the name and address of each publicly traded entity and the name and address of each person that holds a 10 percent or greater beneficial interest in the publicly traded entity as of the last annual filing with the federal Securities and Exchange Commission or the foreign equivalent, and, if there is any person that holds a 10 percent or greater beneficial interest, also shall submit links to the websites containing the last annual filings with the federal Securities and Exchange Commission or the foreign equivalent and the relevant page numbers of the filings that contain the information on each person that holds a 10 percent or greater beneficial interest."

Pages attached with name and address of each publicly traded entity as well as the name and address of each person that holds a 10 percent or greater beneficial interest.

OR

Submit here the links to the Websites (URLs) containing the last annual filings with the federal Securities and Exchange Commission or the foreign equivalent.

AND

Submit here the relevant page numbers of the filings containing the information on each person holding a 10 percent or greater beneficial interest.

Subscribed and sworn before me this
3 day of February, 2026.

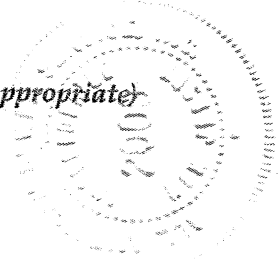
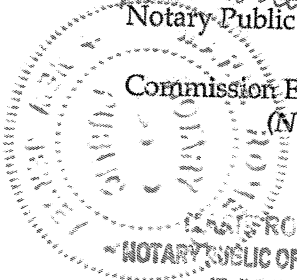
Marc Romero
Notary Public

Commission Expires: 2/29/28
(Notary Stamp/Seal)

Cheryl Foote
Affiant Signature

Cheryl Foote - Vice President
Affiant Name and Title

(Corporate Seal, if appropriate)



MARC ROMERO
NOTARY PUBLIC OF NEW JERSEY
ID # 2430626

END OF STATEMENT OF OWNERSHIP

My Commission Expires 2/29/28