BID2017-37 DELINQUENT TAX COLLECTIONS SERVICES FOR A PERIOD OF TWO (2) YEARS WITH THE OPTION TO EXTEND TWO (2) ONE (1) YEAR EXTENSION FOR THE CITY OF TRENTON, DEPARTMENT OF FINANCE, DIVISION OF TAX BID OPENING JUNE 13, 2017 AT 11:00AM

<table>
<thead>
<tr>
<th>NUMBER OF RESPONDENTS:</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF BIDDER</td>
<td>REVENUE SERVICES, LLC</td>
</tr>
<tr>
<td>ADDRESS</td>
<td>2751 DIXWELL AVENUE, 4TH FLOOR</td>
</tr>
<tr>
<td>CITY, STATE, ZIP</td>
<td>HAMDEN, CT 06518</td>
</tr>
<tr>
<td>CONTACT NAME</td>
<td>SALVAN ROSS, III</td>
</tr>
<tr>
<td>TELEPHONE</td>
<td>203-230-9932</td>
</tr>
<tr>
<td>FAX</td>
<td>203-230-2271</td>
</tr>
<tr>
<td>E-MAIL</td>
<td><a href="mailto:SAL.ROSS@REVENUSERV.COM">SAL.ROSS@REVENUSERV.COM</a></td>
</tr>
<tr>
<td>OWNERSHIP DISCLOSURE STATEMENT</td>
<td>INCLUDED</td>
</tr>
<tr>
<td>REQUIRED EVIDENCE</td>
<td>EEO/AFFIRMATIVE ACTION REGULATIONS QUESTIONAIRE</td>
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<tr>
<td>ACKNOWLEDGEMENT OF RECEIPT OF ADDENDA #1</td>
<td>INCLUDED</td>
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<tr>
<td>NJ BUSINESS REGISTRATION CERTIFICATE</td>
<td>INCLUDED</td>
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<tr>
<td>NON-COLLUSION AFFADAVIT</td>
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<tr>
<td>AFFIRMATIVE ACTION STATEMENT</td>
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<tr>
<td>AMERICANS WITH DISABILITIES ACT OF 1990 LANGUAGE</td>
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<td>DISCLOSURE OF INVESTED ACTIVITIES IN IRAN</td>
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<td>EIC</td>
<td>CERT.# 52294, EXP. 02/15/2021</td>
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<tr>
<td>ETHICS COMPLAINT DISCLOSURE</td>
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<td>CITY OF TRENTON RESIDENT EMPLOYMENT POLICY</td>
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<tr>
<td>60-DAY EXTENSION COMPLIANCE</td>
<td>YES</td>
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<tr>
<td>CERTIFICATE OF INSURANCE</td>
<td>REQUIRED FROM AWARDED VENDOR</td>
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<td>W-9</td>
<td>INCLUDED</td>
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<td>REFERENCES</td>
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<tr>
<td>EXCEPTIONS (IF ANY)</td>
<td>NONE</td>
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<tr>
<td>EMERGENCY SERVICES</td>
<td>YES SEE ATTACHED</td>
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<tr>
<td>STRUCTURE PERCENTAGE FEE</td>
<td>13.49%</td>
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<tr>
<td>FATAL FLAW</td>
<td>NONE</td>
</tr>
</tbody>
</table>
The form must be completed fully and contain an original signature of the bidder or its authorized agent.

PROPOSAL FORM

Delinquent Tax Collections Services  BID 2017-37
(Contract Title and Bid Number, if applicable)

To collect delinquent tax liens
(Description of goods/services being bid)

The undersigned proposes to furnish and deliver the above goods/services pursuant to the bid specification and made part hereof:

The Vendor must provide a proposed fee structure. The fee structure should be based on a percentage (%) of the amount of tax lien amounts collected.

% ___13.49___

Revenue Services, LLC  
Company Name  
26-1557241  
Federal I.D. # or Social Security #

2751 Dixwell Avenue, 4th Floor Hamden, Connecticut 06518  
Address  

Signature of Authorized Agent  
Salvan Ross, III  
Type or Print Name

Title: CEO

(203) 230-9932  
Telephone Number  
June 13, 2017  
Date

(203) 230-2271  
Fax Number  
sal.ross@revenueserv.com  
E-mail address
The form must be completed fully and contain an original signature of the bidder or its authorized agent.

PROPOSAL FORM

Bid #2107-37, DELINQUENT TAX COLLECTION SERVICES
(Contract Title and Bid Number, if applicable)

DELINQUENT TAX COLLECTION SERVICES
(Description of goods/services being bid)

The undersigned proposes to furnish and deliver the above goods/services pursuant to the bid specification and made part hereof:

The Vendor must provide a proposed fee structure. The fee structure should be based on a percentage (%) of the amount of tax lien amounts collected.

% FIFTEEN PERCENT (15.00%)

TaxServ Capital Services NJ, LLC 26-2468341
Company Name Federal I.D. # or Social Security #

1313 Dolley Madison Blvd, Suite LL-130, McLean, VA 22101-3926
Address

Signature of Authorized Agent Roger Blain Type or Print Name

Title: President

703-883-9100 x227 June 9, 2017
Telephone Number Date

703-883-0711 rblain@taxserv.com
Fax Number E-mail address
The form must be completed fully and contain an original signature of the bidder or its authorized agent.

**PROPOSAL FORM**

**Delinquent Tax Collections Services** Bid 3017-37  
(Contract Title and Bid Number, if applicable)

**Collections Services**  
(Description of goods/services being bid)

The undersigned proposes to furnish and deliver the above goods/services pursuant to the bid specification and made part hereof:

The Vendor must provide a proposed fee structure. The fee structure should be based on a percentage (%) of the amount of tax lien amounts collected.

% 30

**us collections west inc.**  
Company Name

**86-0554931**  
Federal I.D. # or Social Security #

**2330 W Peoria Avenue ste 116**  
Address

[Signature]  
Signature of Authorized Agent

[Handwritten name]  
Keith Johnson  
Type or Print Name

**Title: Marketing Specialist/Account Manager**

**480-525-8640**  
Telephone Number

**05/18/2017**  
Date

**602-445-9212**  
Fax Number

**KeithJohnson uscewest.com**  
E-mail address