

APPENDIX E — LICENSING CERTIFICATION FORM

Alliance for Innovation — Pest Control Services RFP

This form must be completed and submitted with the Offeror's proposal. By signing below, the authorized representative of the Offeror certifies that the company holds active, valid pest control operator licenses in each state identified below where services will be provided under any resulting Master Agreement. Offerors must attach copies of all applicable licenses to this form.

SECTION 1: COMPANY INFORMATION

Legal Company Name	FINALLY Pest Control
DBA (if applicable)	See ABOVE
Principal Address	9783 E. 116 th # 10 Fishers, IN 46037
Federal Tax ID (EIN)	47-4581860
Primary Contact Name & Title	MARCUS RICHARDSON President/owner
Phone / Email	(317) 747-1742 m.richardson@finallypestcontrol.com

SECTION 2: STATE LICENSING INVENTORY

List each state in which the Offeror holds an active pest control operator license and will provide services under this contract. Add rows as needed. Attach a copy of each license certificate to this form.

State	License Number	License Type / Category	Expiration Date	Issuing State Agency
INDIANA	256182	7A/7B	12/31/2026	Office of Indiana ^{STATE} Climatist

Additional rows may be added as needed. Attach copies of all license certificates.

SECTION 3: PENDING OR APPLIED-FOR LICENSES

If the Offeror has applied for but not yet received a required license in any state, identify those states below and provide the expected issuance date. Note: Licenses must be active prior to providing services in any state.

State	Expected Issuance Date	Application Status / Notes
GEORGIA	2027	Pending / Expired
KENTUCKY	2028	STARTED

State	Expected Issuance Date	Application Status / Notes
OHIO	2027	STARTED

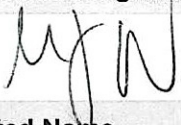
SECTION 4: LICENSE MAINTENANCE AND NOTIFICATION COMMITMENT

By submitting this form, the Offeror commits to the following obligations for the duration of any resulting contract:

- Maintain active, valid pest control operator licenses in every state where services are delivered.
- Notify AFI and the affected Participating Public Agency (PPA) in writing within five (5) business days if any license lapses, is suspended, revoked, or otherwise becomes invalid.
- Provide updated license copies to AFI upon renewal or upon request, within ten (10) business days.
- Immediately cease services in any state where the required license is no longer active until licensure is reinstated.
- Ensure that all subcontractors providing services under this contract also hold active pest control operator licenses in all applicable states.

SECTION 5: CERTIFICATION AND AUTHORIZED SIGNATURE

The undersigned authorized representative certifies, under penalty of perjury, that the information provided in this form is true, complete, and accurate; that the company holds all licenses listed above and that each is currently active and in good standing; and that the company understands that failure to maintain required licensing constitutes grounds for contract termination under the Master Agreement.

Authorized Signature	Date
	5/7/2026
Printed Name	Title
Matthew Richardson	Owner
Company Name (Legal)	
FINACLY Pest Control	

Submission Instructions: Submit this completed and signed form, together with copies of all referenced license certificates, as part of your proposal package. This form must be included at the time of proposal submission. Questions regarding licensing requirements should be directed to the AFI procurement contact identified in the RFP.

OFFICE OF INDIANA STATE CHEMIST

**Purdue University
175 S. University St.
West Lafayette, Indiana 47907-2063**

VALID CATEGORIES

7A, 7B

ØØD4L4

**FINALLY PEST CONTROL
9783 E 116TH ST STE 10
FISHERS IN 46037**

COMMERCIAL PESTICIDE BUSINESS LICENSE

This authorizes the company listed hereon to engage in for-hire pesticide use business in the categories listed on this form. It is valid in these categories only as long as applicator(s) currently licensed with this business hold valid certification(s) as listed.

LICENSE NUMBER: 256182

EXPIRATION DATE: 12/31/2026



State Chemist & Seed Commissioner



Georgia Department of Agriculture

Gary W. Black, Commissioner

19 Martin Luther King Jr. Drive, SW • Atlanta, Georgia 30334-4201

Agricultural Inputs • Pesticide Section • Phone: (404)656-4958 • Fax: (404) 657-8378

Finally Pest Control
1600 E. Washington St.
PO Box 29416
Indianapolis, IN 46229

The enclosed Georgia Contractors License is valid through 12/31/2020.

We have updated our website. Visit www.kellysolutions.com/GA/Contractors to take a look at the new layout. There are a number of useful tools to help you manage your license, including being able to update your user information online. You can renew your license by making a secure payment by credit card, and you can find applicator recertification courses. If you have questions, check out the FAQs section. We hope you enjoy these new user-friendly features.

If you have questions or concerns regarding your Contractor License, please contact: Georgia Department of Agriculture - Pesticide Section, (404) 656-4958.

(Fold or cut on line to display)

Georgia Department of Agriculture

Gary W. Black, Commissioner
Pesticide Division

19 M.L.K. Jr. Drive, SW, Room 410
Atlanta, GA 30334

Tele: (404) 656-4958 Fax: (404) 657-8378
agr.georgia.gov/pesticides.aspx

PESTICIDE CONTRACTOR LICENSE

Expiration Date:

12/31/2020

License Number:

101148

Finally Pest Control
1600 E. Washington St.
Indianapolis IN 46229

Categories:
35;



This License Must Be Posted At All Times In A Prominent Location.