

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:
2025-1350882

Date Filed:
08/15/2025

Date Acknowledged:

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

Austin Underground, Inc.
Lago Vista, TX United States

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

City of Round Rock

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.

000000 - SH 29 Raw Water Line

Relocation of existing raw water line due to TxDOT conflict. - Change Order #3 Void Mitigation - Lower Bore Pit

4	Name of Interested Party	City, State, Country (place of business)	Nature of Interest (check applicable)	
			Controlling	Intermediary
	Vavro, Richard	Lago Vista, TX United States	X	

5 Check only if there is NO interested Party. ☐

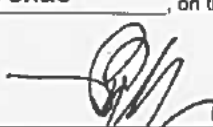
6 UNSWORN DECLARATION

My name is Richard Vavro and my date of birth is

My address is 18825 Packsaddle Road, Jonestown, Texas, 78645, USA
(city) (state) (zip code) (country)

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

Executed in Travis County, State of Texas, on the 15 day of August, 2025
(month) (year)


Signature of authorized agent of contracting business entity
(Declarant)

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Austin Underground, Inc.
Lago Vista, TX United States

Certificate Number:
2025-1350882

Date Filed:
08/15/2025

Date Acknowledged:
08/28/2025

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City of Round Rock

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4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Vavro, Richard	Lago Vista, TX 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)