

Rapid Response Monitoring Services Incorporated

400 West Division Street, Syracuse, New York 13204

David Pida, Vice President and Chief Financial Officer

Date: December 2, 2021

Application Facts:

| | |
|-------------|---------------------|
| Industry | Service |
| NAICS | 561621 |
| Type of App | New |
| Location | Clark County |
| RDA | LVGEA, Chris Zunis |

Company Profile

Rapid Response Monitoring Services Incorporated (RRMS) is seeking to establish a new facility in Henderson, Nevada. This facility will be a state-of-the-art electronic security and data monitoring center. The interior renovation of the facility will be completed using as many local vendors and workers as possible. RRMS has been a leading provider of security and data monitoring services since 1992 and has monitoring facilities in Syracuse, New York as well as Corona, California. The services offered by RRMS include the monitoring of security, fire, video, GPS tracking systems and hosted monitoring. Our services are used by over 2,500 companies in the United States, Canada, Bermuda, Jamaica, Cayman and the US Virgin Islands. Currently the company monitors over 2,000,000 systems for customers located throughout the US, and an additional 50,000 international systems. RRMS is one of 21 monitoring facilities approved to monitor fire systems located in New York City. The company is committed to cultivating the future of the security industry through advancements in technology, protocols, and professional relationships. RRMS is also considering expansion of the Corona California facility. *Source: Rapid Response Monitoring Services Incorporated*

Tax Abatement Requirements:

| | <u>Statutory</u> | <u>Company Application</u> | <u>Meeting Requirements</u> |
|---------------------------------|---|----------------------------------|--|
| Job Creation | 50 | 118 | Yes |
| Average Wage | \$26.67 | \$22.75 | Yes <small>(For the purposes of receiving full abatements if county unemployment is over 7%)</small> |
| Equipment Capex (SU & MBT) | | \$1,006,170 | Yes |
| Equipment Capex (PP) | \$1,000,000 | | Yes |
| Additional Requirements: | | | |
| Health Insurance | 65% | 79% | Yes |
| Revenues generated outside NV | 51% | 90% | Yes |
| Business License | <input checked="" type="checkbox"/> Current | <input type="checkbox"/> Pending | <input type="checkbox"/> Will comply |

Total Tax Liability (without tax abatements)

Direct (company)

\$382,347

Total

\$7,322,089

Tax Abatements

Contract Terms

Estimated Tax Abatement

| | | |
|---|------------------|------------------|
| Sales Tax Abmt. | 2% for 2 years | \$64,143 |
| Modified Business Tax Abmt. | 50% for 4 years | \$134,079 |
| Personal Property Tax Abmt. | 50% for 10 years | \$14,961 |
| Total Estimated Tax Abatement over 10 yrs. | | \$213,183 |

Net New Tax Revenues

Direct

Indirect

Taxes after Abatements

Local Taxes

| | | | |
|----------|----------|-------------|-------------|
| Property | \$14,185 | \$3,534,875 | \$3,549,060 |
| Sales | \$0 | \$1,614,889 | \$1,614,889 |
| Lodging | \$0 | \$130,416 | \$130,416 |

State Taxes

| | | | |
|-------------------|-----------|-----------|-------------|
| Property | \$776 | \$205,677 | \$206,453 |
| Sales | \$20,123 | \$538,971 | \$559,094 |
| Modified Business | \$668,334 | \$338,761 | \$1,007,095 |
| Lodging | \$0 | \$41,899 | \$41,899 |

Total Estimated New Tax Revenue over 10 yrs.

\$7,108,906

Economic Impact over 10 yrs.

Direct

Construction

Total

| | | | |
|-------------------------|---------------|-----|---------------|
| Total Jobs Supported | 202 | 0 | 202 |
| Total Payroll Supported | \$86,930,665 | \$0 | \$86,930,665 |
| Total Economic Value | \$205,039,704 | \$0 | \$205,039,704 |

IMPORTANT TERMS & INFORMATION

Tax Abatements are reduction or discount of tax liability and companies do not receive any form of payment.

Total Estimated Tax Abatement is a tax reduction estimate. This estimated amount will be discounted from total tax liability.

Estimated New Tax Revenue is amount of tax revenues local and state government will collect after the abatement was given to applying company.

Economic Impact is economic effect or benefits that this company and it's operations will have on the community and state economy measured by total number of jobs, payroll and created output.



November 2nd, 2021

Mr. Michael Brown
Executive Director
Nevada Governor's Office of Economic Development
555 E. Washington Avenue, Suite 5400
Las Vegas, Nevada 89101

Dear Mr. Brown,

Rapid Response Monitoring Services, Inc. is applying to the State of Nevada for the Sales & Use Tax Abatement, the Modified Business Tax Abatement, and the Personal Property Tax Abatement. We request that Advanced Hemp, Inc. be placed on the agenda for the December 2nd, 2021 GOED Board meeting.

Rapid Response Monitoring Services, Inc. will create 118 new positions in the first 24 months of operations, with an average hourly wage of \$22.75. The company will make a capital investment of \$1,006,170.40

Rapid Response Monitoring Services, Inc. meets the three requirements for tax abatements. This application has the full support of the Las Vegas Global Economic Alliance.

Sincerely,

A handwritten signature in black ink that reads "Chris Zunis". The signature is written in a cursive, slightly slanted style.

Chris Zunis
VP Economic Development
Las Vegas Global Economic Alliance



October 7, 2021

Mr. Michael Brown
Executive Director Nevada Governor's Office of Economic Development
555 E. Washington Avenue, Suite 5400
Las Vegas, NY 89101

Dear Mr. Brown,

Rapid Response Monitoring Services, Inc, (RRMS) is applying to the State of Nevada requesting the sales and use tax, modified business tax and personal property tax abatements to assist with our expansion efforts with the creation of a Data and Security monitoring facility in the state of Nevada, We request that the application be placed on the agenda for the December 2, 2021 GOED Board Meeting.

RRMS is headquartered in Syracuse, New York has been a leading provider of data and security monitoring services nationwide since 1992. Our mission is to protect the lives and property ensuring the safety and welfare of personal and commercial property and the lives of over 2 million individuals and families nationwide. We are committed to cultivating the future of the data and security industry through advancements in technology, protocols and professional relationships, The commitment to our customers begins with the investment in a secure facility and state-of-the-art technology, Rapid began monitoring various sites located in Nevada in February 2013 and, we are looking to further this commitment to our customers on the West coast by opening this facility. By opening the Nevada facility (our 3rd location) we hope to increase and affirm our presence on the West coast, as we did in 2014 with the construction of our 2nd and fully redundant monitoring facility in Corona, California,

RRMS is exploring its options to expand operations in Southern Nevada, expecting to hire 118 employees over the next 24 months. These employees will make an average hourly wage of \$22.75 and be provided with a benefits package that includes 79% coverage of the employees' healthcare premium. We expect to recruit highly qualified candidates from within the state of Nevada, In addition, RRMS plans on making a capital investment of \$1.0 Million.

Recent strategic planning has the company focused on creating a presence in Nevada, A significant part of this consideration is the economic incentives offered by the state, The projected cost savings from the tax incentives provided by the Nevada Governor's Office of Economic Development will greatly enhance our ability to stimulate the growth and expansion of our business into Nevada.

Sincerely,

David Pida
Chief Financial Officer



CITY OF HENDERSON
240 Water Street
P.O. Box 95050
Henderson, NV 89009

October 12, 2021

Mr. Michael Brown
Executive Director
Nevada Governor's Office of Economic Development
555 E. Washington Avenue, Suite 5400
Las Vegas, NV 89101

Re: Letter of Support for Rapid Response Monitoring Services

Dear Director Brown:

I am pleased to provide this letter of support for Rapid Response Monitoring Services (RRMS) in their application for incentives from the Governor's Office of Economic Development (GOED). We are excited that Rapid Response Monitoring Services is expanding into the Henderson market and look forward to the company's continued success.

Within the first two years of their expansion, Rapid Response Monitoring Services will invest \$1.0 Million in capital expenditures and create 118 new, high-quality jobs at an average hourly wage of \$22.75 per hour.

The City of Henderson enthusiastically supports the development of Rapid Response Monitoring Services' operations in Henderson and looks forward to the positive economic impact that their business will provide to our community. We appreciate your assistance and favorable consideration of their application. Should you require additional information, please do not hesitate to contact me.

Sincerely,

Debra March
Mayor

cc: David Pida, Vice President & Chief Financial Officer, RRMS
Chris Zunis, Vice President of Economic Development, LVGEA

ECONOMIC DEVELOPMENT

Incentive Application

Company is an / a: (check one)

New location in Nevada

Expansion of a Nevada company

Company Name: Rapid Response Monitoring Services, Incorporated

Date of Application: October 6, 2021

Section 1 - Type of Incentives

Please check all that the company is applying for on this application:

- | | |
|---|--|
| <input checked="" type="checkbox"/> Sales & Use Tax Abatement | <input type="checkbox"/> Sales & Use Tax Deferral |
| <input checked="" type="checkbox"/> Modified Business Tax Abatement | <input type="checkbox"/> Recycling Real Property Tax Abatement |
| <input checked="" type="checkbox"/> Personal Property Tax Abatement | <input type="checkbox"/> Other: _____ |

Section 2 - Corporate Information

| | | | |
|--|--|-------------------------------------|---------------------------------------|
| COMPANY NAME (Legal name under which business will be transacted in Nevada) <u>Rapid Response Monitoring Services, Incorporated</u> | | | FEDERAL TAX ID # <u>16-1432416</u> |
| CORPORATE ADDRESS <u>400 West Division Street</u> | CITY / TOWN <u>Syracuse</u> | STATE / PROVINCE <u>New York</u> | ZIP <u>13204</u> |
| MAILING ADDRESS TO RECEIVE DOCUMENTS (If different from above) | CITY / TOWN | STATE / PROVINCE | ZIP |
| TELEPHONE NUMBER <u>(315) 422-7709</u> | WEBSITE <u>RRMS.COM</u> | | |
| COMPANY CONTACT NAME <u>David Pida</u> | COMPANY CONTACT TITLE <u>Vice President & Chief Financial Officer</u> | | |
| E-MAIL ADDRESS <u>DPIDA@RRMS.COM</u> | PREFERRED PHONE NUMBER <u>(315) 422-7709</u> | | |

Has your company ever applied and been approved for incentives available by the Governor's Office of Economic Development? Yes No

If Yes, list the program awarded, date of approval, and status of the accounts (attach separate sheet if necessary):

Section 3 - Program Requirements

Please check two of the boxes below; the company must meet at least two of the three program requirements:

- A capital investment of \$1,000,000 in eligible equipment in urban areas or \$250,000 in eligible equipment in rural areas are required. This criteria is applicable to businesses. In cases of expanding businesses, the capital investment must equal at least 20% of the value of the tangible property owned by the business.
- New businesses locating in urban areas require fifty (50) or more permanent, full-time employees on its payroll by the eighth calendar quarter following the quarter in which the abatement becomes effective. In rural areas, the requirement is ten (10) or more. For an expansion, the business must increase the number employees on its payroll by 10% more than its existing employees prior to expansion, or by 25 (urban) or 6 (rural) employees, whichever is greater.
- In both urban and rural areas, the average hourly wage that will be paid by the business to its new employees is at least 100% of the average statewide hourly wage.

Note: Criteria is different depending on whether the business is in a county where the population is 100,000 or more or a city where the population is 60,000 or more (i.e., "urban" area), or if the business is in a county where the population is less than 100,000 or a city where the population is less than 60,000 (i.e., "rural" area).

Section 4 - Nevada Facility

Type of Facility:

- | | |
|---|--|
| <input type="checkbox"/> Headquarters | <input checked="" type="checkbox"/> Service Provider |
| <input type="checkbox"/> Technology | <input type="checkbox"/> Distribution / Fulfillment |
| <input type="checkbox"/> Back Office Operations | <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Research & Development / Intellectual Property | <input type="checkbox"/> Other: _____ |

| | | | |
|--|--|-------------------------------|---------------------|
| PERCENTAGE OF REVENUE GENERATED BY THE NEW JOBS CONTAINED IN THIS APPLICATION FROM OUTSIDE NEVADA <u>90%</u> | EXPECTED DATE OF NEW / EXPANDED OPERATIONS (MONTH / YEAR) <u>Dec-2021</u> | | |
| NAICS CODE / SIC <u>561621</u> | INDUSTRY TYPE <u>Wholesale Alarm Monitoring Central Station</u> | | |
| DESCRIPTION OF COMPANY'S NEVADA OPERATIONS <u>Wholesale Alarm Monitoring Central Station</u> | | | |
| PROPOSED / ACTUAL NEVADA FACILITY ADDRESS <u>2495 Village View Drive</u> | CITY / TOWN <u>Henderson</u> | COUNTY <u>Clark County</u> | ZIP <u>89074</u> |
| WHAT OTHER STATES / REGIONS / CITIES ARE BEING CONSIDERED FOR YOUR COMPANY'S RELOCATION / EXPANSION / STARTUP? <u>Los Angeles, CA</u> | | | |

Section 5 - Complete Forms (see additional tabs at the bottom of this sheet for each form listed below)

Check the applicable box when form has been completed.

- 5 (A) Equipment List
- 5 (B) Employment Schedule
- 5 (C) Evaluation of Health Plan, with supporting documents to show the employer paid portion of plan meets the minimum of 65%.
- 5 (D) Company Information Form

Section 6 - Real Estate & Construction (Fill in either New Operations/Startup or Expansion, not both.)

| New Operations / Start Up - Plans Over the Next <u>Ten Years</u> | Expansions - Plans Over the Next <u>10 Years</u> |
|---|---|
| <p>Part 1. Are you currently/planning on leasing space in Nevada? _____</p> <p>If No, skip to Part 2. If Yes, continue below:</p> <p style="padding-left: 40px;">What year(s)? _____</p> <p style="padding-left: 40px;">How much space (sq. ft.)? _____</p> <p style="padding-left: 40px;">Annual lease cost of space: _____</p> <p>Do you plan on making building tenant improvements? _____</p> <p>If No, skip to Part 2. If Yes *, continue below:</p> <p style="padding-left: 40px;">When to make improvements (month, year)? _____</p> <hr style="border-top: 1px dashed black;"/> <p>Part 2. Are you currently/planning on buying an owner occupied facility in Nevada? _____</p> <p>If No, skip to Part 3. If Yes *, continue below:</p> <p style="padding-left: 40px;">Purchase date, if buying (month, year): _____</p> <p style="padding-left: 40px;">How much space (sq. ft.)? _____</p> <p>Do you plan on making building improvements? _____</p> <p>If No, skip to Part 3. If Yes *, continue below:</p> <p style="padding-left: 40px;">When to make improvements (month, year)? _____</p> <hr style="border-top: 1px dashed black;"/> <p>Part 3. Are you currently/planning on building a build-to-suit facility in Nevada? _____</p> <p>If Yes *, continue below:</p> <p style="padding-left: 40px;">When to break ground, if building (month, year)? _____</p> <p style="padding-left: 40px;">Estimated completion date, if building (month, year): _____</p> <p style="padding-left: 40px;">How much space (sq. ft.)? _____</p> | <p>Part 1. Are you currently leasing space in Nevada? _____</p> <p>If No, skip to Part 2. If Yes, continue below:</p> <p style="padding-left: 40px;">What year(s)? _____</p> <p style="padding-left: 40px;">How much space (sq. ft.)? _____</p> <p style="padding-left: 40px;">Annual lease cost at current space: _____</p> <p>Due to expansion, will you lease additional space? _____</p> <p>If No, skip to Part 3. If Yes, continue below:</p> <p style="padding-left: 40px;">Expanding at the current facility or a new facility? _____</p> <p style="padding-left: 80px;">What year(s)? _____</p> <p style="padding-left: 40px;">How much expanded space (sq. ft.)? _____</p> <p style="padding-left: 40px;">Annual lease cost of expanded space: _____</p> <p>Do you plan on making building tenant improvements? _____</p> <p>If No, skip to Part 3. If Yes *, continue below:</p> <p style="padding-left: 40px;">When to make improvements (month, year)? _____</p> <hr style="border-top: 1px dashed black;"/> <p>Part 2. Are you currently operating at an owner occupied building in Nevada? _____</p> <p>If No, skip to Part 3. If Yes, continue below:</p> <p style="padding-left: 40px;">How much space (sq. ft.)? _____</p> <p style="padding-left: 40px;">Current assessed value of real property? _____</p> <p>Due to expansion, will you be making building improvements? _____</p> <p>If No, skip to Part 3. If Yes *, continue below:</p> <p style="padding-left: 40px;">When to make improvements (month, year)? _____</p> <hr style="border-top: 1px dashed black;"/> <p>Part 3. Do you plan on building or buying a new facility in Nevada? _____</p> <p>If Yes *, continue below:</p> <p style="padding-left: 40px;">Purchase date, if buying (month, year): _____</p> <p style="padding-left: 40px;">When to break ground, if building (month, year)? _____</p> <p style="padding-left: 40px;">Estimated completion date, if building (month, year): _____</p> <p style="padding-left: 40px;">How much space (sq. ft.)? _____</p> |
| <p>* Please complete Section 7 - Capital Investment for New Operations / Startup.</p> | <p>* Please complete Section 7 - Capital Investment for Expansions below.</p> |

BRIEF DESCRIPTION OF CONSTRUCTION PROJECT AND ITS PROJECTED IMPACT ON THE LOCAL ECONOMY (Attach a separate sheet if necessary):

RRMS plans on creating a state of the art facility in Henderson. The construction work will be completed using as many local vendors and workers as possible, which should be a boost to the local economy.

Section 7 - Capital Investment (Fill in either New Operations/Startup or Expansion, not both.)

| New Operations / Start Up | Expansions |
|---|--|
| How much capital investment is planned? (Breakout below): | How much capital investment is planned? (Breakout below): |
| Building Purchase (if buying): _____ | Building Purchase (if buying): _____ |
| Building Costs (if building / making improvements): _____ | Building Costs (if building / making improvements): _____ |
| Land: _____ | Land: _____ |
| Equipment Cost: <u>\$1,006,170</u> | Equipment Cost: _____ |
| Total: <u>\$1,006,170</u> | Total: _____ |
| | Is the equipment purchase for replacement of existing equipment? _____ |
| | Current assessed value of personal property in NV: _____ |
| | (Must attach the most recent assessment from the County Assessor's Office.) |

Section 8 - Employment (Fill in either New Operations/Startup or Expansion, not both.)

| New Operations / Start Up | Expansions |
|--|--|
| How many full-time equivalent (FTE*) employees will be created by the end of the first eighth quarter of new operations?: <u>118</u> | How many full-time equivalent (FTE*) employees will be created by the end of the first eighth quarter of expanded operations?: _____ |
| Average hourly wage of these <u>new</u> employees: <u>\$22.75</u> | Average hourly wage of these <u>new</u> employees: _____ |
| | How many FTE employees prior to expansion?: _____ |
| | Average hourly wage of these <u>existing</u> employees: _____ |
| | Total number of employees after expansion: _____ |

* FTE represents a permanent employee who works an average of 30 hours per week or more, is eligible for health care coverage, and whose position is a "primary job" as set forth in NAC 360.474.

OTHER COMPENSATION (Check all that apply):

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> Overtime | <input checked="" type="checkbox"/> Merit increases | <input type="checkbox"/> Tuition assistance | <input checked="" type="checkbox"/> Bonus |
| <input checked="" type="checkbox"/> PTO / Sick / Vacation | <input type="checkbox"/> COLA adjustments | <input checked="" type="checkbox"/> Retirement Plan / Profit Sharing / 401(k) | <input type="checkbox"/> Other: _____ |

BRIEF DESCRIPTION OF ADDITIONAL COMPENSATION PROGRAMS AND ELIGIBILITY REQUIREMENTS (Attach a separate sheet if necessary):

Section 9 - Employee Health Insurance Benefit Program

Is health insurance for employees and is an option for dependents offered? Yes (**attach health plan and quote or invoice**) No

Package includes (check all that apply):

| | | | |
|---|--|-------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> Medical | <input checked="" type="checkbox"/> Vision | <input checked="" type="checkbox"/> | <input type="checkbox"/> Other: _____ |
|---|--|-------------------------------------|---------------------------------------|

Qualified after (check one):

| | | | |
|--|---|---|---|
| <input type="checkbox"/> Upon employment | <input type="checkbox"/> Three months after hire date | <input type="checkbox"/> Six months after hire date | <input checked="" type="checkbox"/> Other: <u>60 days after hire date</u> |
|--|---|---|---|

Health Insurance Costs:

| | | |
|--|--------------------|----------------------|
| Plan Type: <u>Self funded</u> | | |
| Employer Contribution (annual premium per employee): | \$ 7,005.70 | Company: <u>79%</u> |
| Employee Contribution (annual premium per employee) | \$ 1,886.30 | Employee: <u>21%</u> |
| Total Annual Premium: | \$ 8,892.00 | |

[SIGNATURE PAGE FOLLOWS]

Section 10 - Certification

Section 10 - Certification

I, the undersigned, hereby grant to the Governor's Office of Economic Development access to all pertinent and relevant records and documents of the aforementioned company. I understand this requirement is necessary to qualify and to monitor for compliance of all statutory and regulatory provisions pertaining to this application.

Being owner, member, partner, officer or employee with signatory authorization for the company, I do hereby declare that the facts herein stated are true and that all licensing and permitting requirements will be met prior to the commencement of operations. In addition, I and /or the company's legal counsel have reviewed the terms of the GOED Tax Abatement and Incentives Agreement, the company recognizes this agreement is generally not subject to change, and any material revisions have been discussed with GOED in advance of board approval.

David Pida

Name of person authorized for signature

CFO

Title

Signature

10.07.2021

Date

Nevada Governor's Office of Economic Development

555 E. Washington Ave., Ste 5400 • Las Vegas, Nevada 89101 • 702.486.2700 • (Fax) 702.486.2701 • www.diversifynevada.com

Site Selection Factors

Company Name: Rapid Response Monitoring Services, Incorporated

County: Clark

Section I - Site Selection Ratings

Directions: Please rate the select factors by importance to the company's business (1 = very low; 5 = very high). Attach this form to the Incentives Application.

| | | | |
|--------------------------------------|----------|---|----------|
| Availability of qualified workforce: | <u>5</u> | Transportation infrastructure: | <u>3</u> |
| Labor costs: | <u>4</u> | Transportation costs: | <u>3</u> |
| Real estate availability: | <u>5</u> | State and local tax structure: | <u>5</u> |
| Real estate costs: | <u>4</u> | State and local incentives: | <u>5</u> |
| Utility infrastructure: | <u>3</u> | Business permitting & regulatory structure: | <u>4</u> |
| Utility costs: | <u>4</u> | Access to higher education resources: | <u>4</u> |

Please summarize the importance of the abatement program to your decision (please include at least a paragraph summary):

The economic development incentives offered by the State of Nevada have been a significant factor in RRMS's decision to expand our operations into Nevada. The estimated cost savings from these tax incentives will allow our company to be able to hire a greater number of full time employees. Nevada's pro business environment will provide RRMS with a sustainable location for ongoing strategic growth.

5(B) Employment Schedule

Company Name: Rapid Response Monitoring Services, Incorporated

County: Clark

Section 1 - Full-Time Equivalent (FTE) Employees

Directions: Please provide an estimated list of full time employees [columns (a) through (d)] that will be hired and employed by the company by the end of the first eighth quarter of new / expanded operations. For example, if the effective date of new / expanded operations is April 1, 2015, the date would fall in Q2, 2015. The end of the first eighth quarter would be the last day of Q2, 2017 (i.e., June 30, 2017). Attach this form to the Incentives Application. A qualified employee must be employed at the site of a qualified project, scheduled to work an average minimum of 30 per week, if offered coverage under a plan of health insurance provided by his or her employer, is eligible for health care coverage, and whose position of a "primary job" as set forth in NAC 360.474.

Please use the Bureau of Labor Statistics Standard Occupational Classification System (SOC) link to populate section (b):
https://www.bls.gov/soc/2018/major_groups.htm#11-0000

| (a) New Hire Position Title/Description | (b) Position SOC Code | (c) Number of Positions | (d) Average Hourly Wage | (e) US Bureau of Labor Statistics Average Hourly Wage | (f) Average Weekly Hours | (g) Annual Wage per Position | (h) Total Annual Wages |
|--|--------------------------|----------------------------|----------------------------|--|-----------------------------|---------------------------------|---------------------------|
| General and Operations Managers | 11-1021 | 1 | \$42.40 | \$61.83 | 40 | \$88,196.47 | \$88,196.47 |
| Training and Development Managers | 11-3131 | 1 | \$34.45 | \$39.93 | 40 | \$71,662.50 | \$71,662.50 |
| Managers, All Other | 11-9199 | 10 | \$23.15 | \$43.93 | 40 | \$48,152.00 | \$481,520.00 |
| Human Resources Specialists | 13-1071 | 1 | \$39.76 | \$26.09 | 40 | \$82,692.79 | \$82,692.79 |
| Computer User Support Specialists | 15-1151 | 1 | \$34.45 | \$25.33 | 40 | \$71,662.50 | \$71,662.50 |
| Training and Development Specialists | 13-1151 | 3 | \$24.26 | \$28.89 | 40 | \$50,450.40 | \$151,351.20 |
| Receptionists and Information Clerks | 43-4171 | 1 | \$23.85 | \$15.00 | 40 | \$49,601.92 | \$49,601.92 |
| Customer Service Representatives | 43-4051 | 100 | \$22.05 | \$17.05 | 40 | \$45,864.00 | \$4,586,400.00 |
| TOTAL | | 118 | \$22.75 | \$20.33 | | | \$5,583,087.38 |

Section 2 - Employment Projections

Directions: Please estimate full-time job growth in Section 2, complete columns (b) and (c). These estimates are used for state economic impact and net tax revenue analysis that this agency is required to report. The company will not be required to reach these estimated levels of employment. Please enter the estimated new full time employees on a year by year basis (not cumulative)

| (a) Year | (b) Number of New FTE(s) | (c) Average Hourly Wage | (d) Payroll |
|-------------|-----------------------------|----------------------------|----------------|
| 3-Year | 10 | \$20.00 | \$416,000.00 |
| 4-Year | 10 | \$20.00 | \$416,000.00 |
| 5-Year | 10 | \$20.00 | \$416,000.00 |

* Column (e) determines if wage is commensurate to current wage ranges in the region the company plans to locate/is located. For these purposes the mean average hourly wage for the location has been used.

U = Unknown / data set for region is not currently available.

Source: US Bureau of Labor Statistics

5(C) Evaluation of Health Plans Offered by Companies

Company Name: Rapid Response Monitoring Services, Incorporated County: Clark

Total Number of Full-Time Employees: 118
 Average Hourly Wage per Employee \$22.75
 Average Annual Wage per Employee (implied) \$47,314.30

COST OF HELATH INSURANCE

Annual Health Insurance Premium Cost: \$8,892.00
 Percentage of Premium Covered by:
 Company 79%
 Employee 21%

HEALTH INSURANCE PLANS:

| Base Health Insurance Plan*: | Excelsus BCBS Comprehensive |
|------------------------------------|-----------------------------|
| Deductible - per employee | \$ 115 |
| Coinsurance | 0% / 0% |
| Out-of-Pocket Maximum per employee | \$ 4,000 |

| Additional Health Insurance Plan*: | Excelsus BCBS Wrap |
|------------------------------------|--------------------|
| Deductible - per employee | \$ 115 |
| Coinsurance | 0% / 0% |
| Out-of-Pocket Maximum per employee | \$ 4,000 |

| Additional Health Insurance Plan*: | |
|------------------------------------|---------|
| Deductible - per employee | \$ - |
| Coinsurance | 0% / 0% |
| Out-of-Pocket Maximum per employee | \$ - |

*Note: **Please list only "In Network" for deducatable and out of the pocket amounts .**

Generalized Criteria for Essential Health Benefits (EHB)

[following requirements outlined in the Affordable Care Act and US Code, including 42 USC Section 18022]

| | | |
|--|---------|-----|
| Covered employee's premium not to exceed 9.5% of annual wage | 5.1% | MMQ |
| Annual Out-of-Pocket Maximum not to exceed \$8,700 (2022) | \$4,000 | MMQ |

Minimum essential health benefits covered (Company offers PPO):

- (A) Ambulatory patient services
- (B) Emergency services
- (C) Hospitalization
- (D) Maternity and newborn care
- (E) Mental health/substance use disorder/behavioral health treatment
- (F) Prescription drugs
- (G) Rehabilitative and habilitative services and devices
- (H) Laboratory services
- (I) Preventive and wellness services and chronic disease management
- (J) Pediatric services, including oral and vision care

I, the undersigned, hereby declare to the Governor's Office of Economic Development that the facts herein stated are true, and that I have attached a qualified plan with information highlighting where our plan reflects meeting the 65% minimum threshold for the employee paid portion of the plan for GOED to independently confirm the same.

David Pida

Name of person authorized for signature

CFO

Title

[Signature]
Signature

10.07.2021

Date

5(D) Company Information

Company Name: Rapid Response Monitoring Services, Incorporated

County: Clark

Section 1 - Company Interest List

Directions: Please provide a detailed list of owners and/or members of the company. *The Governor's Office of Economic Development strives to maintain the highest standards of integrity, and it is vital that the public be confident of our commitment. Accordingly, any conflict or appearance of a conflict must be avoided. To maintain our integrity and credibility, the applicant is required to provide a detailed list of owners, members, equity holders and Board members of the company.*

| (a) Name | (b) Title |
|--------------------|------------------------------------|
| RUSSELL MACDONNELL | Chairman & Chief Executive Officer |
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Section 2 - Company Affiliates and/or Subsidiaries

Are there any subsidiary or affiliate companies sharing tax liability with the applicant company? No Yes

If Yes, continue below:

Directions: In order to include affiliates/subsidiaries, under the exemption letter, they must to be added to the Contract. Per standard practice GOED requires a corporate schematic to understand the exact relationships between the companies. Please populate the below table to show the exact relationships between the companies and include:

1. The names as they would read on the tax exemption letter.
2. Which entity(ies) will do the hiring?
3. Which entity(ies) will be purchasing the equipment?

| Name of Subsidiary or Affiliate Entity, Role and Legal Control Relationship |
|---|
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Please include any additional details below:

SECRETARY OF STATE



NEVADA STATE BUSINESS LICENSE RAPID RESPONSE MONITORING SERVICES, INC.

Nevada Business Identification # NV20131073243
Expiration Date: 02/28/2022

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.

License must be cancelled on or before its expiration date if business activity ceases. Failure to do so will result in late fees or penalties which, by law, cannot be waived.



Certificate Number: B202012161284577
You may verify this certificate
online at <http://www.nvsos.gov>

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 12/16/2020.

Barbara K. Cegavske

BARBARA K. CEGAVSKE
Secretary of State