

Fill in this information to identify the case:

Debtor United Site Services, Inc.

United States Bankruptcy Court for the: _____ District of New Jersey
(State)Case number 25-23630

Modified Official Form 410

Proof of Claim

04/25

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filets must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor?	City of Gastonia		
	Name of the current creditor (the person or entity to be paid for this claim)		
	Other names the creditor used with the debtor _____		
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____		
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent?		Where should payments to the creditor be sent? (if different)
	City of Gastonia Kim Hodge 181 S South Street PO BOX 1748 Gastonia, NC 28053, USA		City of Gastonia Kim Hodge PO BOX 1748 GASTONIA, NC 28053-1748, United States
	Contact phone <u>704-869-1056</u>	Contact phone <u>704-869-1056</u>	
	Contact email <u>kim.hodge@gastonianc.gov</u>	Contact email <u>kim.hodge@gastonianc.gov</u>	
	Uniform claim identifier (if you use one): _____		
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____/_____/_____		
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____		



Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>5950</u> ____
7. How much is the claim?	\$ <u>1284.88</u> . Does this amount include interest or other charges? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. <u>Utilities</u>
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature or property: <input type="checkbox"/> Real estate: If the claim is secured by the debtor's principle residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____
	 Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
	 Value of property: \$ _____ Amount of the claim that is secured: \$ _____ Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amount should match the amount in line 7.)
	 Amount necessary to cure any default as of the date of the petition: \$ _____
	 Annual Interest Rate (when case was filed) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____



<p>12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?</p> <p>A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.</p>	<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Check all that apply:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____ <input type="checkbox"/> Up to \$3,800* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____ <input type="checkbox"/> Wages, salaries, or commissions (up to \$17,150*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ _____ <input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____ <input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____ <input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(____) that applies. \$ _____
<p>* Amounts are subject to adjustment on 4/01/28 and every 3 years after that for cases begun on or after the date of adjustment.</p>	
<p>13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(9)?</p>	<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.</p> <p>\$ _____</p>

Part 3: Sign Below

**The person completing
this proof of claim must
sign and date it.
EBRP 2011(b)**

If you file this claim electronically, FRBP 5005(a)(3) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both.

18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- I am the creditor.
- I am the creditor's attorney or authorized agent.
- I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
- I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have reasonable belief that the information is true and correct.

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

Executed on date 02/12/2026
MM / DD / YYYY

/s/Kimberly Dockery Hodge
Signature

Print the name of the person who is completing and signing this claim:

Name Kimberly Dockery Hodge
First name Kimberly Middle name Dockery Last name Hodge

Company City of Gastonia

PO BOX 1748, GASTONIA, NC, 28053-1748, United States

Contact phone 7048691056 Email kim.hodge@gastonianc.gov



Verita (KCC) ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (877) 634-7164 | International (424) 236-7220

Debtor: 25-23630 - United Site Services, Inc.		
District: District of New Jersey, Trenton Division		
Creditor: City of Gastonia Kim Hodge 181 S South Street PO BOX 1748 Gastonia, NC, 28053 USA Phone: 704-869-1056 Phone 2: Fax: 704-854-6681 Email: kim.hodge@gastonianc.gov	Has Supporting Documentation: Yes, supporting documentation successfully uploaded	
	Related Document Statement:	
	Has Related Claim: No	
	Related Claim Filed By:	
	Filing Party:	
Disbursement/Notice Parties:		
City of Gastonia Kim Hodge PO BOX 1748 GASTONIA, NC, 28053-1748 United States Phone: 704-869-1056 Phone 2: Fax: 704-854-6681 E-mail: kim.hodge@gastonianc.gov		
DISBURSEMENT ADDRESS		
Other Names Used with Debtor:	Amends Claim: No Acquired Claim: No	
Basis of Claim: Utilities	Last 4 Digits: Yes - 5950	Uniform Claim Identifier:
Total Amount of Claim: 1284.88	Includes Interest or Charges: No	
Has Priority Claim: No	Priority Under:	
Has Secured Claim: No	Nature of Secured Amount: Value of Property:	
Amount of 503(b)(9): No	Annual Interest Rate:	
Based on Lease: No	Arrearage Amount:	
Subject to Right of Setoff: No	Basis for Perfection:	
	Amount Unsecured:	

Submitted By:

Kimberly Dockery Hodge on 12-Feb-2026 1:14:14 p.m. Pacific Time

Title:

Billing Technician

Company:

City of Gastonia

Optional Signature Address:

PO BOX 1748

GASTONIA, NC, 28053-1748

United States

Telephone Number:

7048691056

Email:

kim.hodge@gastonianc.gov



United Site Services

Customer Name 212 Bulb Ave
Service Address 10034756
Location Number
Date of Bill 22215950

Account Number

ACCOUNT ACTIVITY

Activity Since Last Bill
Last Bill Amount
Payments
Adjustments
Other Charges
Balance Forward

PAST DUE AMOUNTS ARE SUBJECT TO DISCONNECTION WITHOUT FURTHER NOTICE

CURRENT CHARGES

ELECTRIC	Description	Meter Number	Current Read	Prior Read	Usage	Demand	Amount
	METERED ELECTRIC CHARGES RENEWABLE ENERGY STANDARDS RIDER N.C. SALES TAX						
WATER/SEWER	METERED WATER CHARGES SEWER CHARGES						486.71 798.17
IRRIGATION	IRRIGATION CHARGES						
STORMWATER							

TOTAL CURRENT CHARGES

BUDGET BILLING CUSTOMER	YES	NO	SETTLE UP MONTH	BUDGET BILL AMOUNT	BALANCE BEFORE BILLING	BALANCE AFTER BILLING
	XX					

PLEASE READ ANY MESSAGE PRINTED HERE:

TRU's Wastewater System Annual Performance Report 2022-2023 is available at www.gastonianc.gov. Hard copies will be available at: Garland Municipal Business Center, Gastonia; Cramerton Town Hall, and Gaston County Main Library. If you would like to receive a copy via mail, please call 704-854-6668.

THIS BILL DOES NOT EXTEND TIME FOR PAYMENT OF ANY PREVIOUS BALANCE OR PAST DUE AMOUNT

WHEN PAYING BY MAIL, PLEASE INCLUDE BOTTOM PORTION OF BILL WITH YOUR PAYMENT

PAYMENTS RECEIVED AFTER 5:00 PM ON THE DUE DATE WILL BE CHARGED A LATE FEE OF \$5 OR 1.5%, WHICHEVER IS GREATER

Service Address 212 Bulb Ave

Account Number 22215950

Total Current Charges Due By 5:00pm On

Total Amount Due

\$1284.88

Greater of \$5 or 1.5% will be added after this date

Good Neighbor Contribution Included
(Complete information on reverse side)

And Subject to Disconnection On

Total Amount Paid

United Site Services
118 Flanders Rd
Westborough MA 01581-1035

293

Please Remit To:

City of Gastonia
PO Box 580068
Charlotte NC 28258-0068



BILLING INFORMATION

QUESTIONS CONCERNING YOUR BILL – If you have questions about your utility bill, please call 704-866-6716.

RATE SCHEDULES – If you would like a copy of your rate schedule, please visit the City's website at www.gastonianc.gov.

AUTOMATIC BANK DRAFTS - For information on this convenient payment option, call us at 704-866-6716 or visit our website at www.gastonianc.gov to complete an online application.

PAYMENT TERMS – This bill is due and payable upon receipt. If your bill reflects a past due amount or **BALANCE FORWARD**, this bill **DOES NOT EXTEND THE TIME FOR PAYMENT** for these amounts.

METER ACCESS - Please help us read your service meters by ensuring your meters are easily accessible. Cut back shrubs and avoid piling trash or parking cars over meters.

ONLINE CUSTOMER SELF SERVICE (CSS)

To sign up for electronic billing (Ebill), view account history, consumption graphs or submit requests for services or general inquiries, sign up for CSS by going to the Utility Service tab under Residents or Doing Business on the City's website at www.gastonianc.gov.

POSSIBLE ADDITIONAL CHARGES

RETURNED PAYMENT CHARGES - In accordance with North Carolina Law, a charge is made for each returned payment item, as outlined in the City's Consolidated Fee Schedule.

LATE PAYMENT CHARGE - A late payment charge, as outlined in the City's Consolidated Fee Schedule, will be added to your account if payment is received after 5:00 p.m. on the Due Date as shown on the bill.

ADMINISTRATION FEE – An administration fee, as outlined in the City's Consolidated Fee Schedule, will be added to your account if payment is received after 5:00 p.m. on the Disconnect Date as shown on the bill.

RECONNECTION CHARGES - If disconnected for non-payment you may be required to pay certain administrative and reconnection charges.

DEPOSITS - Depending on your credit worthiness, you may be required to pay a deposit before utility service is provided. Additionally, if disconnected for non-payment, a new deposit may be required before service is re-established.

METER TESTING CHARGES - In the event you request that a utility service meter be tested, and that test does not show that the meter was operating inaccurately, a charge may be added to your bill for the meter testing.

RE-READ CHARGES - In the event you request we re-read your utility service meter for accuracy and the re-read does not support that your meter was read incorrectly, a charge may be added to your bill for the meter testing.

METER TAMPERING

UTILITY THEFT IS A CRIME. When people steal utility service, they endanger lives and take money out of your pocket. The City of Gastonia must recover losses due to theft through the rates paid by its honest customers. If you see or know of meter tampering, or of individuals receiving benefit of stolen utility services, please call our Revenue Security Technician at 704-866-6722. Your cooperation can do more than just keep rates down; it could save someone's life.

STORMWATER SERVICE

The Stormwater Utility is concerned with minimizing pollution entering streams due to water runoff and managing the increase in runoff associated with a growing city. Property owners are charged a stormwater utility fee based on the amount of impervious surface on the property. This standard measurement is called an "Equivalent Residential Unit" or ERU, and is equal to 2,650 square feet of impervious surface. Call 704-869-1063 for information.

PAY ARRANGEMENT POLICY

A pay arrangement may be requested to extend the due date on your utility bill up to ten (10) days past the scheduled disconnect date. Customers are eligible for up to six (6) pay arrangements per calendar year as long as there are no more than two (2) terminated pay arrangements. Please note that all pay arrangements will be handled through the Automated Customer Service Line at 704-866-6716 except for those associated with leaks, high bills or other special circumstances which will be handled by appointment only.

PAYMENT OPTIONS FOR YOUR UTILITY BILL

Using one of the payment options listed below will ensure credit to your account on the same or next business day from the time the payment is processed. While there are other companies that accept utility payments, we cannot guarantee when your payment will be posted to your account if it is not received through an authorized payment agent for the City of Gastonia. Please verify processing times before making your payment if your account is past due or subject to disconnection.

Customers must have their account number and address information available to make a payment. Be aware: payment processors may charge a fee to utilize their service.

ALL PAYMENTS MADE AFTER 5:00 PM, ON WEEKENDS OR HOLIDAYS WILL BE POSTED TO YOUR ACCOUNT THE NEXT BUSINESS DAY.

GOOD NEIGHBOR CONTRIBUTIONS

One Time Good Neighbor Contribution Amount \$ Total Payment Enclosed \$