

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? No
 Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: ____ _

7. How much is the claim? \$ 35,370.00. Does this amount include interest or other charges?
 No
 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.
Open Invoices for services performed at the Enviva Facility.

9. Is all or part of the claim secured? No
 Yes. The claim is secured by a lien on property.
Nature or property:
 Real estate: If the claim is secured by the debtor's principle residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
 Motor vehicle
 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) _____ %
 Fixed
 Variable

10. Is this claim based on a lease? No
 Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? No
 Yes. Identify the property: _____



12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

No

Yes. Check all that apply:

	Amount entitled to priority
<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 \$3,350* 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 \$15,150*) 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.	\$ _____

* Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or after the date of adjustment.

13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. 503(b)(9)?

No

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.

\$ 35,370.00

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) 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 06/04/2024
MM / DD / YYYY

/s/Michael D. Luter
Signature

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

Name Michael D. Luter
First name Middle name Last name

Title President

Company Arrowhead Environmental Services, LLC
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address _____

Contact phone _____ Email _____



KCC ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (888) 249-2695 | International (310) 751-2601

Debtor: 24-10453 - Enviva Inc.		
District: Eastern District of Virginia, Alexandria Division		
Creditor: Arrowhead Environmental Services, LLC c/o Superior Environmental Services, LLC Attn: Jeff Sweren 9996 Joseph James Drive Cincinnati, OH, 45246 Phone: 513-682-4275 Phone 2: Fax: Email: jsweren@sesinc.com	Has Supporting Documentation: Yes, supporting documentation successfully uploaded Related Document Statement:	
	Has Related Claim: No Related Claim Filed By:	
	Filing Party:	
Other Names Used with Debtor:	Amends Claim: Yes - 24-10453, May 29, 2024 Acquired Claim: No	
Basis of Claim: Open Invoices for services performed at the Enviva Facility.	Last 4 Digits: No	Uniform Claim Identifier:
Total Amount of Claim: 35,370.00	Includes Interest or Charges: No	
Has Priority Claim: No	Priority Under:	
Has Secured Claim: No Amount of 503(b)(9): Yes: 35,370.00 Based on Lease: No Subject to Right of Setoff: No	Nature of Secured Amount: Value of Property: Annual Interest Rate: Arrearage Amount: Basis for Perfection: Amount Unsecured:	
Submitted By: Michael D. Luter on 04-Jun-2024 3:11:10 p.m. Eastern Time Title: President Company: Arrowhead Environmental Services, LLC		

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
 requester. Do not
 send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See <i>Specific Instructions</i> on page 3.	<p>1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)</p> <p style="font-size: 1.2em;">Arrowhead Environmental Services, LLC</p>	
	<p>2 Business name/disregarded entity name, if different from above.</p>	
	<p>3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.</p> <p> <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input checked="" type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) <i>Note:</i> Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____ </p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____</p> <p style="text-align: right;"><i>(Applies to accounts maintained outside the United States.)</i></p>
	<p>3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/></p>	
	<p>5 Address (number, street, and apt. or suite no.). See instructions.</p> <p style="font-size: 1.2em;">P.O. Box 217</p>	<p>Requester's name and address (optional)</p>
	<p>6 City, state, and ZIP code</p> <p style="font-size: 1.2em;">Windsor, VA 23487</p>	
	<p>7 List account number(s) here (optional)</p>	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
or									
Employer identification number									
2	0	-	4	2	4	2	6	4	3

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person 	Date 4/18/2024
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Enviva : Type: Invoices Status: Open Delivery Method: Any Date: All

Date	Type	No.	Due date	Balance	P.O. Number	Amount	Status
03/25/2024	Invoice	AE16758	05/24/2024	2,625.00	AHOPON0019658-1	2,625.00	overdue
03/15/2024	Invoice	AE16732	05/14/2024	5,600.00	AHOPON0019774	5,600.00	overdue
03/08/2024	Invoice	AE16689	05/07/2024	5,600.00	AHOPON0019774-1	5,600.00	overdue
02/29/2024	Invoice	AE16662	04/29/2024	5,600.00	AHOPON0019694-1	5,600.00	overdue
02/23/2024	Invoice	AE16648	04/23/2024	5,600.00	AHOPON0019694-1	5,600.00	overdue
02/19/2024	Invoice	AE16617	04/19/2024	4,495.00	AHOPON0019733-2	4,495.00	overdue
02/01/2024	Invoice	AE16564	04/01/2024	5,850.00	AHOPON0019608-1	5,850.00	overdue
						35,370.00	

2643



ARROWHEAD ENVIRONMENTAL SERVICES
 PO BOX 217
 WINDSOR, VA 23487 US
 757-242-3173
 www.arrowheadenv.com

BILL TO

Enviva Pellets, LLC
 7272 Wisconsin Ave
 Suite 1800
 Bethesda, MD 20814

INVOICE AE16732

DATE 03/15/2024

DUE DATE 05/14/2024

P.O. NUMBER

AHOPON0019774

DATE	DESCRIPTION	AMOUNT
	Contact: Thomas Bentrup/Mike Leary	0.00
	Ahoskie, NC	0.00
	Work Order: 19970, 19979	0.00
	Vacuum various area around plant	5,600.00
	3/6/24 & 3/7/24	0.00

TOTAL DUE **\$5,600.00**



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 Suite 1800
 Bethesda, MD 20814

INVOICE AE16689

DATE 03/08/2024

DUE DATE 05/07/2024

P.O. NUMBER

AHOPON0019774-1

DATE	DESCRIPTION	AMOUNT
	Contact: Thomas Bentrup/Mike Leary	0.00
	Ahoskie, NC	0.00
	Work Order: 19244, 20877	0.00
	Vacuum various area around plant- 4 additional hours	6,720.00
	Adjustment for 4 additional hours	-1,120.00
	2/28/24 & 2/29/24	0.00

TOTAL DUE \$5,600.00

2643



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 Suite 1800
 Bethesda, MD 20814

INVOICE AE16662

DATE 02/29/2024

DUE DATE 04/29/2024

P.O. NUMBER
 AHOPON0019694-1

DATE	DESCRIPTION	AMOUNT
	Contact: Thomas Bentrup/Mike Leary	0.00
	Ahoskie, NC	0.00
	Work Order: 19235, 19236	0.00
	Line 2- Vacuum various area around plant- 4 additional hours	6,720.00
	Line 2- Adjustment for 4 additional hours	-1,120.00
	2/19/24 & 2/20/24	0.00

TOTAL DUE \$5,600.00

2643



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BILL TO

Enviva Pellets, LLC
 7272 Wisconsin Ave
 Suite 1800
 Bethesda, MD 20814

INVOICE AE16648

DATE 02/23/2024

DUE DATE 04/23/2024

P.O. NUMBER

AHOPON0019694-1

DATE	DESCRIPTION	AMOUNT
	Contact: Thomas Bentrup/Mike Leary	0.00
	Ahoskie, NC	0.00
	Work Order: 19230, 19231	0.00
	Line 1- Vacuum various area around plant- 2 additional hours	6,160.00
	Line 1- Adjustment for 2 additional hours	-560.00
	2/13/24 & 2/14/24	0.00

TOTAL DUE

\$5,600.00

2643



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BILL TO

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 7272 Wisconsin Ave
 Suite 1800
 Bethesda, MD 20814

INVOICE AE16617

DATE 02/19/2024

DUE DATE 04/19/2024

P.O. NUMBER

AHOPON0019733-2

DATE	DESCRIPTION	AMOUNT
	Contact: Michael Leary	0.00
	Work Order: 19228	0.00
	Line #1- Call in job to vacuum out water and rocks	4,495.00
2/9/24		0.00
	Enviva Ahoskie	0.00

TOTAL DUE

\$4,495.00

2643



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 WINDSOR, VA 23487 US
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 www.arrowheadenv.com

BILL TO

Enviva Pellets, LLC
 7272 Wisconsin Ave
 Suite 1800
 Bethesda, MD 20814

INVOICE AE16564

DATE 02/01/2024

DUE DATE 04/01/2024

P.O. NUMBER

AHOPON0019608-1

DATE	DESCRIPTION	AMOUNT
	Contact: Thomas Bentrup	0.00
	Ahoskie, NC	0.00
	Work Order: 19734	0.00
	Vacuuming and Blasting Work- Jan-2024 Outage Support	5,850.00
	1/24/24	0.00

TOTAL DUE **\$5,850.00**

2643



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BILL TO

Enviva Pellets, LLC
 7272 Wisconsin Ave
 Suite 1800
 Bethesda, MD 20814

INVOICE AE16758

DATE 03/25/2024

DUE DATE 05/24/2024

P.O. NUMBER

AHOPON0019658-1

DATE	DESCRIPTION	AMOUNT
	Contact: Vincent Anderson/Christopher Forehand	0.00
	Ahoskie, NC	0.00
	Work Order: 19247	0.00
	Line 2- Clean out Truck Load Out Area	2,625.00
	3/12/24	0.00

TOTAL DUE

\$2,625.00