

Fill in this information to identify the case:Debtor OTB Holding LLCUnited States Bankruptcy Court for the: Northern District of Georgia
(State)Case number 25-52415**Modified Official Form 410
Proof of Claim****12/24**

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.

Filers 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?	<u>Becmar Sprinkler Systems Inc</u> 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?	☒ No ☐ 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? <u>Becmar Sprinkler Systems Inc</u> <u>111 Erick Street</u> <u>Unit 112</u> <u>Crystal Lake, IL 60014, USA</u> Contact phone <u>815-356-1467</u> Contact email <u>jordan@becmarsprinkler.com</u> Uniform claim identifier (if you use one): _____	Where should payments to the creditor be sent? (if different) Contact phone _____ Contact email _____
4. Does this claim amend one already filed?	☒ No ☐ Yes. Claim number on court claims registry (if known) _____ Filed on _____ MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?	☒ No ☐ 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?	☒ 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? \$ <u>570.00</u>	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. <u>Services Performed</u>
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 <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i>. ☐ 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)?

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☒ No

☐ Yes. Check all that apply:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

Amount entitled to priority

\$ _____

☐ 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).

\$ _____

☐ 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).

\$ _____

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

\$ _____

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

\$ _____

☐ 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.

\$ _____

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)(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 03/21/2025
MM / DD / YYYY

/s/Jordan Dennis
Signature

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

Name Jordan Dennis
First name Middle name Last name

Title Vice President

Company Becmar Sprinkler Systems Inc
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address _____

Contact phone _____ Email _____



Verita (KCC) ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (888) 647-1744 | International (310) 751-2628

Debtor: 25-52415 - OTB Holding LLC District: Northern District of Georgia, Atlanta Division		
Creditor: Becmar Sprinkler Systems Inc 111 Erick Street Unit 112 Crystal Lake, IL, 60014 USA Phone: 815-356-1467 Phone 2: Fax: Email: jordan@becmarsprinkler.com	Has Supporting Documentation: Yes, supporting documentation successfully uploaded Related Document Statement:	
	Has Related Claim: No Related Claim Filed By:	
	Filing Party: Creditor	
Other Names Used with Debtor:	Amends Claim: No Acquired Claim: No	
Basis of Claim: Services Performed	Last 4 Digits: No	Uniform Claim Identifier:
Total Amount of Claim: 570.00	Includes Interest or Charges: No	
Has Priority Claim: No	Priority Under:	
Has Secured Claim: No Amount of 503(b)(9): No 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: Jordan Dennis on 21-Mar-2025 10:52:21 a.m. Eastern Time Title: Vice President Company: Becmar Sprinkler Systems Inc		

Date	Invoice #
11/13/2024	64319

Bill To

On The Border
2201 W. Royal Lane
Suite 170
Irving, TX 75063
Attn: Accounts Payable

Jobsite Location

On The Border
1512 S. Randall Road
Algonquin, IL 60102
000182@ontheborder.com

☐ Please check box if address is incorrect or has changed, and indicate change(s) on reverse side.

New e-mail address? Enter here: _____

Balance Due

\$250.00

PLEASE DETACH AND RETURN TOP PORTION WITH YOUR PAYMENT.

Becmar Sprinkler Systems, Inc.
PO Box 1948
Crystal Lake, IL 60039-1948

P.O. No.	Terms
	Upon Receipt

Description	Amount
Irrigation Service and Repair: planter box was damaged / removed head and capped line Labor: \$125.00 per man per hour (1 hour labor minimum & 1 hour drive)	250.00
Thank You For Your Business!	

Remit payment to: Becmar Sprinkler Systems Inc., PO Box 1948, Crystal Lake, IL 60014-1948
Email questions to: accounting@becmarsprinkler.com
We do not accept credit/debit cards at this time.

Total	\$250.00
Payments/Credits	\$0.00
Balance Due	\$250.00

BECMAR
Sprinkler Systems, Inc.

PO Box 1948
Crystal Lake, IL 60014-1948
Phone: 815-356-1467

Invoice

Date

Invoice #

10/17/2024

64088

Bill To

On The Border
2201 W. Royal Lane
Suite 170
Irving, TX 75063
Attn: Accounts Payable

Jobsite Location

On The Border
1512 S. Randall Road
Algonquin, IL 60102
000182@ontheborder.com

☐ Please check box if address is incorrect or has changed, and indicate change(s) on reverse side.

New e-mail address? Enter here: _____

Balance Due

\$320.00

PLEASE DETACH AND RETURN TOP PORTION WITH YOUR PAYMENT.

Becmar Sprinkler Systems, Inc.
PO Box 1948
Crystal Lake, IL 60039-1948

P.O. No.

Terms

Upon Receipt

Description	Amount
Winterization of Irrigation System *no damage found at winterization	320.00
Thank You For Your Business!	

Remit payment to: Becmar Sprinkler Systems Inc., PO Box 1948, Crystal Lake, IL 60014-1948
Email questions to: accounting@becmarsprinkler.com
We do not accept credit/debit cards at this time.

Total	\$320.00
Payments/Credits	\$0.00
Balance Due	\$320.00