

# TOWNSHIP OF MAPLE SHADE



Burlington County, New Jersey

## **REQUEST FOR PROPOSALS TOWNSHIP**

**PROFESSIONAL SERVICES FOR 2025**

**DUE JANUARY 22, 2025**

**TIME – 10:00 AM**

TOWNSHIP OF MAPLE SHADE COUNCIL

Heather Talarico, Mayor

John Zahradnick, Deputy Mayor

Charles Kauffman

Sandra Nunes

Andrew Simonsick, Sr.

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Submitted by:

## **NOTICE OF REQUEST FOR PROPOSALS**

**NOTICE IS HEREBY GIVEN** that the Township of Maple Shade is soliciting proposals through a non-fair and open process in accordance with N.J.S.A. 19:44A-20.4 et seq.

Sealed Request for Proposal responses will be received by the Township Clerk of the Township of Maple Shade by no later than January 22<sup>nd</sup>, 2025 at 10:00A.M. local prevailing time at the Maple Shade Municipal Building, 200 Stiles Avenue, Maple Shade, NJ 08052 for the below referenced 2025 professionals.

**Proposals, along with all required documents, shall be submitted in two ways: electronically in PDF format to [tmcveigh@mapleshade.com](mailto:tmcveigh@mapleshade.com) and by original hard copy. Electronic submissions must contain the position and RFP number in the subject of the email. Submission must also be made by original hard copy format via mail or in person to the Maple Shade Municipal Building. Hard copy versions shall be submitted in a sealed envelope CLEARLY addressed to the Township Clerk at the address above and must include the name and address of the applicant, position and RFP number. If mailed, submissions must be postmarked by January 17<sup>th</sup>, 2025 no later than 3pm. If the RFP is sent by overnight or express mail, the above designation *SHALL BE CLEARLY MARKED* on the outside of the courier company envelope.**

### **PROFESSIONAL SERVICES FOR 2025**

Township Attorney

The Applicant will designate a specific individual(s) to work with the Township of Maple Shade and provide resumes for both the individual and Principals of the Business Entity.

Request for Proposal documents and Instructions to Applicants may be obtained beginning on January 7<sup>th</sup>, 2025 via the Township of Maple Shade Website <https://mapleshade.com/rfp/>. Copies of the Request for Proposal are also available free of charge in a PDF format and may be requested by emailing [tmcveigh@mapleshade.com](mailto:tmcveigh@mapleshade.com). It is the Applicants responsibility to check the website regularly for possible addenda. Potential respondents are cautioned that they are responding at their own risk if a third party supplied the RFP documents, as they may or may not be complete. The Township is not responsible for third party supplied documents.

Applicants shall comply with the requirements of P.L. 1975, C127, and N.J.A.C. 17:27 et seq. **Any proposal received not complying with these requirements shall not be considered and returned to sender marked "Unresponsive".**

Andrea T. McVeigh, RMC  
Municipal Clerk



**PROPOSAL FORM**

The undersigned declares that they have read the included Instructions for Applicants, General Conditions, Scope of Work and other requirements of this Request for Proposal (RFP), and that they have determined the conditions of this RFP are acceptable and agrees, if their proposal is accepted, to furnish and deliver services per this Proposal Form, their attached schedule of fees and any other documentation that the Applicant has provided and in accordance with the requirements of this entire RFP document.

A separate RFP proposal shall be submitted for each position being applied for. Please indicate the Professional Service/Title for which you are submitting:

<b>PROFESSIONAL SERVICE</b>	<b>Please Check</b>	
Township Attorney	<input type="checkbox"/>	<input type="checkbox"/>

Please provide the name and address of submitting firm, individual or entity:

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*Company Name*

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*Address*

NOTE: In responding to these questions, you may attach additional sheets as necessary. Please be sure to CLEARLY reference all additional sheets or relevant attachments under the appropriate question or area. Material not clearly referenced will not be considered.

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1. Is your firm willing and able to perform the scope of services set forth in the General Conditions, Scope of Work and all other requirements of the RFP document for the above checked Professional Service/Title.

Yes       No

2. If the answer to question 1 is "No", then please explain any exceptions, clarifications or limitations to the scope of services that your firm is willing and able to provide?

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3. Please provide the names and roles of the individuals who will perform the services, descriptions of their education and experience, degrees, licenses and certifications relevant to those services including specific experience with the Client/Owner to whom this submission is being sent (or with similar Client/Owners).

List Attached

Name/Role

Name/Role

<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

4. Please discuss your (the firm's) record of success in providing the same or similar services to those being requested.

Attached

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5. Please provide references who can be contacted to substantiate the above noted experience or record of success for the same or similar service.

List Attached

Name/Relationship

Contact Number

<hr/>	<hr/>
<hr/>	<hr/>

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6. Please provide a list of your current municipal or public clients as well as past municipal clients.

List Attached

Entity

Address

_____	_____
_____	_____
_____	_____
_____	_____

7. Please describe your (the firm's) ability to provide the services in a timely fashion (including staffing, familiarity and location of key staff, availability and/or ownership of key resources). If appropriate, a description of technical process and equipment available to the organization and used in performing the task(s) within the scope of work may be provided.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8. Please disclose any conflicts of interest you have or reasonably anticipate having with respect to your firm's past, current or pending representation of clients or entities who are engaged in litigation or disputes with the Township of Maple Shade or its associated entities or who are appearing before or making application to its Committees, Boards or Agencies. If none, state "none."

Attached

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. Please provide a breakdown of costs for service (cost details), including the hourly rates for each individual who will be performing services and a schedule of costs for reimbursable expenses and/or a budgeted amount for reimbursable expenses.

If all or any part of the work proposed is to be performed for a lump sum or a flat fee (as opposed to an hourly or reimbursable basis) please provide the amount of that lump sum or flat fee as well as as well as specifically detailing the full scope of work to be included under the proposed lump sum or flat fee.

It is also permissible to provide alternative fee proposals (lump sum or hourly) for the same scope of work, but again, it is very important to clearly delineate what is included.

Fee Schedule Attached

Additional fee information:

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10. (OPTIONAL) ADDITIONAL MATERIAL. Please discuss any relevant or supplementary materials which may demonstrate your firm's qualification or capacity to perform the professional services listed or to illustrate why hiring your firm to perform these services would be in the best interest of the Authority.

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11. In completing and submitting this Proposal form the authorized representative of the submitting firm, individual or entity acknowledges that they have received, read and understand the following which are provided in this RFP document:

- The Notice of Request for Proposals for Professional Services, pertaining to the Professional Title/Service which is the subject of this submission
- The "Title/ Service Description and Minimum Requirements" pertaining to the above Professional Title/Service and any supplemental addendum.
- The General Conditions and Scope of Work pertaining to the above checked Professional Title/Service and any supplemental addendum.
- The Instructions for Applicants and Exhibits.

The undersigned agrees to provide the goods and services as required by the Scope of Work and pursuant to and in accordance with the Instructions for Applicants and all other requirements contained in this RFP document and their proposal submission.

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The undersigned also acknowledges that the Applicant shall comply with all state and federal laws and regulations as applicable to this RFP whether or not they are specified in this RFP document and that the information contained in and attached to this submission is true to the best of their knowledge and belief, with the understanding that it will be relied upon as such by the public entity to which it is being submitted.

The undersigned certifies that the information contained in and attached to this submission is true to the best of their knowledge and belief, with the understanding that it will be relied upon as such by the public entity to which it is being submitted.

The undersigned further certifies that they are executing this Proposal as an authorized representative of the firm, individual or entity named below with full authority to do so and that they have read and fully understands the Scope of Work, Instructions for Applicants and all other requirements contained in this RFP document.

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*Printed Name of Authorized Agent*

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*Signature of Authorized Agent*

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*Title*

---

*Date*

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*Legal Name of Corporation/Partnership/Proprietorship*

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*Federal I.D. # or Social Security #*

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*Address*

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*City, State, Zip Code*

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*Phone Number*

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*State in which Incorporated (if a Corporation)*

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*Fax Number*

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*E-mail address*

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**CHECK LIST OF REQUIRED DOCUMENTS**

**Initials required for all items checked below as acknowledgement of inclusion in the RFP submission**

Failure to complete and provide the following documents/pages, as checked, with your RFP submission **SHALL** result in your RFP being disqualified. These are **MANDATORY** requirements of this RFP package:

	<u>✓</u>	<u>Initials</u>
RFP Proposal Forms: ONE Original Hard copy on the proposal forms contained in this RFP package with supporting documentation (“P” and “Q” pages)	✓	_____
Resume(s): ONE Original Hard copy for each Applicant and Designated Individuals, with supporting documentation	✓	_____
Checklist of Required Documents, signed below	✓	_____
Acknowledgement of Addenda	✓	_____
EEO/Affirmative Action Certification	✓	_____
Equal Employment Opportunity	✓	_____
New Jersey Anti-Discrimination Provisions	✓	_____
Americans With Disabilities Act	✓	_____
Pay to Play Advisory	✓	_____
Statement of Ownership	✓	_____
Ownership Disclosure	✓	_____
Disclosure of Investment Activities in Iran	✓	_____
False Statement Penalties Certification	✓	_____
Affidavit of Non-Collusion	✓	_____
Responsible Applicant Certification	✓	_____

Failure to complete and include the following documents/pages, as checked, with your RFP submission **MAY** result in your RFP being disqualified or a request for clarification issued. These items are **REQUESTED** of this RFP package:

	<u>✓</u>	<u>Initials</u>
Responsible Applicant Checklist	✓	_____
Insurance Certification	✓	_____
Taxpayer Identification	✓	_____
Responsibility Acknowledgement	✓	_____
Documentation as requested in the Proposal Form, General Conditions and/or Scope of Work	✓	_____



**All items checked below shall be initialed as acknowledgement of these additional document requirements.**

Prior To Award of the contract the following documents, as checked, shall be submitted:

		<u>Initials</u>
Business Registration Certificate	✓	_____
EEO/Affirmative Action Certificate of Employee Information Report copy, AA302 or letter of approval	✓	_____

After Award of the contract the following documents, as checked, shall be submitted:

		<u>Initials</u>
Signed Contracts	✓	_____
Certificate of Insurance for the length of the contract, in accordance with the requirements	✓	_____

**EACH REQUIRED ITEM CHECKED ABOVE, MUST BE INITIALED IN THE SPACE PROVIDED AS ACKNOWLEDGEMENT OF THE DOCUMENTS THAT ARE INCLUDED AND THE DOCUMENTS TO BE PROVIDED BEFORE AND AFTER THE AWARD.**

***THIS CHECKLIST MUST BE SIGNED AND SUBMITTED WITH THE PROPOSAL PACKAGE.***

\_\_\_\_\_  
*Printed Name of Authorized Agent*

\_\_\_\_\_  
*Signature of Authorized Agent*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Company Name*

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**ACKNOWLEDGEMENT OF ADDENDA**

**Receipt of Changes to RFP Documents**

Pursuant to N.J.S.A. 40A:11-23.1a, the undersigned hereby acknowledges receipt of the following notices, revisions, or addenda to the RFP advertisement, specifications or RFP documents.

By indicating date of receipt, Applicant acknowledges the submitted RFP takes into account the provisions of the notice, revision or addendum. Note that the local unit's record of notice to Applicants shall take precedence and that failure to include provisions of changes in an RFP may be subject for rejection of the proposal.

**Note**

Clarifications issued in response to Q&A are *NOT* considered addenda as they do not substantially change the RFP documents, and are *NOT* required to be reported on this form.

<u>Addendum Number</u>	<u>How Received (mail, fax, pick-up, etc.)</u>	<u>Date Received</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_  
*Printed Name of Authorized Agent*

\_\_\_\_\_  
*Signature of Authorized Agent*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Company Name*

**EQUAL EMPLOYMENT OPPORTUNITY/AFFIRMATIVE ACTION**  
**COMPLIANCE CERTIFICATION**

**N.J.S.A. 10:5-31 et seq. and N.J.A.C. 17:27 et seq**

The undersigned certifies that the applicant, if awarded a contract, shall submit to the public agency, after notification of award but prior to execution of this contract, one of the following three documents as forms of evidence:

(a) A photocopy of a valid letter that the Contractor is operating under an existing Federally approved or sanctioned affirmative action program (good for one year from the date of the letter);

**OR**

(b) **A photocopy of a Certificate of Employee Information Report approval**, issued in accordance with N.J.A.C. 17:27-4;

**OR**

(c) A photocopy of an Employee Information Report (Form AA302) provided by the Division and distributed to the public agency to be completed by the Contractor in accordance with N.J.A.C. 17:27-4.

The successful vendor may obtain the Affirmative Action Employee Information Report (AA302) from the contracting unit during normal business hours.

The successful vendor(s) must submit the copies of the AA302 Report to the Division of Contract Compliance and Equal Employment Opportunity in Public Contracts (Division). The Public Agency copy is submitted to the public agency, and the vendor copy is retained by the vendor.

Goods, General Services and Professional Services Vendors must sign a contract containing the Mandatory Language as stated on the following Mandatory Equal Employment Opportunity Requirements page. If the vendor refuses to sign a contract containing the Mandatory EEO/AA Contract Language at the time the contract is submitted for signing by the Public Agency, the Public Agency shall reject the vendor's proposal as non-responsive. When such a rejection occurs, the same EEO/AA requirements shall apply to any other successful vendors selected by the Public Agency in accordance with contracting laws and procedures.

The undersigned certifies that that the applicant is aware of the commitment to comply with the requirements of N.J.S.A. 10:5-31 et.seq. and N.J.A.C. 17:27 et seq. as stated on the following Mandatory Equal Employment Opportunity Requirements page and agrees to furnish the required forms of evidence as required.

The undersigned further understands that this proposal shall be rejected as non-responsive if said applicant fails to comply with these requirements.

\_\_\_\_\_  
*Printed Name of Authorized Agent*

\_\_\_\_\_  
*Signature of Authorized Agent*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Company Name*

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(REVISED 4/10)

**MANDATORY EQUAL EMPLOYMENT OPPORTUNITY REQUIREMENTS**

**N.J.S.A. 10:5-31 et seq. (P.L. 1975, C. 127) and N.J.A.C. 17:27 et seq.**

**GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS**

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will ensure that equal employment opportunity is afforded to such applicants in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such equal employment opportunity shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union of the contractor's commitments under this chapter and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A.10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to meet targeted county employment goals established in accordance with N.J.A.C. 17:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, and labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job-related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

In conforming with the targeted employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award, but prior to execution of a goods and services contract, one of the following three documents:

- Letter of Federal Affirmative Action Plan Approval;
- Certificate of Employee Information Report; or
- Employee Information Report Form AA-302 (electronically provided by the Division and distributed to the public agency through the Division's website at: [http://www.state.nj.us/treasury/contract\\_compliance](http://www.state.nj.us/treasury/contract_compliance)).

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Purchase & Property, CCAU, EEO Monitoring Program as may be requested by the office from time to time in order to carry out the purposes of these regulations,. Public agencies shall furnish such information as may be requested by the Division of Purchase & Property, CCAU, EEO Monitoring Program for conducting compliance investigation pursuant to Sub-chapter 10 of the Administrative Code at N.J.A.C. 17:27.

**NEW JERSEY ANTI-DISCRIMINATION PROVISIONS**

**N.J.S.A. 10:2-1 et seq.**

Pursuant to N.J.S.A. 10:2-1, if awarded a contract, the contractor agrees that:

- a. In the hiring of persons for the performance of work under this contract or any subcontract hereunder, or for the procurement, manufacture, assembling or furnishing of any such materials, equipment, supplies or services to be acquired under this contract, no contractor, nor any person acting on behalf of such contractor or subcontractor, shall, by reason of race, creed, color, national origin, ancestry, marital status, gender identity or expression, affectional or sexual orientation or sex, discriminate against any person who is qualified and available to perform the work to which the employment relates;
- b. No contractor, subcontractor, nor any person on his behalf shall, in any manner, discriminate against or intimidate any employee engaged in the performance of work under this contract or any subcontract hereunder, or engaged in the procurement, manufacture, assembling or furnishing of any such materials, equipment, supplies or services to be acquired under such contract, on account of race, creed, color, national origin, ancestry, marital status, gender identity or expression, affectional or sexual orientation or sex;
- c. There may be deducted from the amount payable to the contractor by the contracting public agency, under this contract, a penalty of \$50.00 for each person for each calendar day during which such person is discriminated against or intimidated in violation of the provisions of the contract; and
- d. This contract may be canceled or terminated by the contracting public agency, and all money due or to become due hereunder may be forfeited, for any violation of this section of the contract occurring after notice to the contractor from the contracting public agency of any prior violation of this section of the contract. No provision in this section shall be construed to prevent a board of education from designating that a contract, subcontract or other means of procurement of goods, services, equipment or construction shall be awarded to a small business enterprise, minority business enterprise or a women's business enterprise pursuant to P.L.1985, c.490 (C.18A:18A-51 et seq.).

The undersigned therefore agrees not to discriminate in employment and agrees to abide by all anti-discrimination laws including but not limited to N.J.S.A. 10:2-1.

\_\_\_\_\_  
*Printed Name of Authorized Agent*

\_\_\_\_\_  
*Signature of Authorized Agent*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Company Name*

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**AMERICANS WITH DISABILITIES ACT OF 1990**  
**COMPLIANCE CERTIFICATION**

Discrimination on the basis of disability in contracting for the purchase of goods and services is prohibited. If awarded the contract, the contractor is required to comply with requirements related to the Americans with Disabilities Act as provided in this RFP Document. The contractor is obligated to comply with the Act and to hold the owner harmless for any violations committed under the contract.

In providing any aid, benefit, or service on behalf of the Owner pursuant to this contract, the contractor agrees that the performance shall be in strict compliance with the Act.

The undersigned certifies that that the applicant is aware of the commitment to comply with the requirements of the Americans with Disabilities Act of 1990 as stated on the following page.

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*Printed Name of Authorized Agent*

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*Signature of Authorized Agent*

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*Title*

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*Date*

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*Company Name*

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**AMERICANS WITH DISABILITIES ACT OF 1990**  
**Equal Opportunity for Individuals with Disabilities**

The contractor and the owner do hereby agree that the provisions of Title 11 of the Americans with Disabilities Act of 1990 (the "Act") (42 U.S.C. S121 01 et seq.), which prohibits discrimination on the basis of disability by public entities in all services, programs, and activities provided or made available by public entities, and the rules and regulations promulgated pursuant there unto, are made a part of this contract. In providing any aid, benefit, or service on behalf of the owner pursuant to this contract, the contractor agrees that the performance shall be in strict compliance with the Act. In the event that the contractor, its agents, servants, employees, or subcontractors violate or are alleged to have violated the Act during the performance of this contract, the contractor shall defend the owner in any action or administrative proceeding commenced pursuant to this Act. The contractor shall indemnify, protect, and save harmless the owner, its agents, servants, and employees from and against any and all suits, claims, losses, demands, or damages, of whatever kind or nature arising out of or claimed to arise out of the alleged violation. The contractor shall, at its own expense, appear, defend, and pay any and all charges for legal services and any and all costs and other expenses arising from such action or administrative proceeding or incurred in connection therewith. In any and all complaints brought pursuant to the owner's grievance procedure, the contractor agrees to abide by any decision of the owner which is rendered pursuant to said grievance procedure. If any action or administrative proceeding results in an award of damages against the owner, or if the owner incurs any expense to cure a violation of the ADA which has been brought pursuant to its grievance procedure, the contractor shall satisfy and discharge the same at its own expense.

The owner shall, as soon as practicable after a claim has been made against it, give written notice thereof to the contractor along with full and complete particulars of the claim, if any action or administrative proceeding is brought against the owner or any of its agents, servants, and employees, the owner shall expeditiously forward or have forwarded to the contractor every demand, complaint, notice, summons, pleading, or other process received by the owner or its representatives.

It is expressly agreed and understood that any approval by the owner of the services provided by the contractor pursuant to this contract will not relieve the contractor of the obligation to comply with the Act and to defend, indemnify, protect, and save harmless the owner pursuant to this paragraph. It is further agreed and understood that the owner assumes no obligation to indemnify or save harmless the contractor, its agents, servants, employees and subcontractors for any claim which may arise out of their performance of this Agreement. Furthermore, the contractor expressly understands and agrees that the provisions of this indemnification clause shall in no way limit the contractor's obligations assumed in this Agreement, nor shall they be construed to relieve the contractor from any liability, nor preclude the owner from taking any other actions available to it under any other provisions of the Agreement or otherwise at law.

**PAY TO PLAY ADVISORY**  
**Disclosure Requirement**  
**P.L. 2005, Chapter 271, Section 3 Reporting**  
**(N.J.S.A. 19:44A – 20.27)**

Any business entity that has received \$50,000 or more in contracts from government entities in a calendar year is required to file an annual disclosure report with ELEC.

The report will include certain contributions and contract information for the current calendar year.

At a minimum, a list of all business entities that file an annual disclosure report will be listed on ELEC's website at [www.elec.state.nj.us](http://www.elec.state.nj.us).

If you have any questions please contact ELEC at:  
1-888-313-ELEC (toll free in NJ) or  
609-292-8700

An analyst from ELEC's Special Programs Section will assist you.

**INITIALS:** \_\_\_\_\_

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**STATEMENT OF OWNERSHIP**

N.J.S.A. 52:25 24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

**This Statement Shall Be Included with All Bid and Proposal Submissions.  
Failure to submit this Statement is cause for automatic rejection of the bid or proposal.**

**N.J.S.A. 52:25-24.2: Submission of statement required for bidding on public contracts.**

"No corporation, partnership, or limited liability company shall be awarded any contract nor shall any agreement be entered into for the performance of any work or the furnishing of any materials or supplies, unless prior to the receipt of the bid or proposal, or accompanying the bid or proposal of said corporation, said partnership, or said limited liability company there is submitted a statement setting forth the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be.

If one or more such stockholder or partner or member is itself a corporation or partnership or limited liability company, the stockholders holding 10 percent or more of that corporation's stock, or the individual partners owning 10 percent or greater interest in that partnership, or the members owning 10 percent or greater interest in that limited liability company, as the case may be, shall also be listed. The disclosure shall be continued until names and addresses of every noncorporate stockholder, and individual partner, and member, exceeding the 10 percent ownership criteria established in this act, has been listed.

To comply with this section, a applicant with any direct or indirect parent entity which is publicly traded may submit the name and address of each publicly traded entity and the name and address of each person that holds a 10 percent or greater beneficial interest in the publicly traded entity as of the last annual filing with the federal Securities and Exchange Commission or the foreign equivalent, and, if there is any person that holds a 10 percent or greater beneficial interest, also shall submit links to the websites containing the last annual filings with the federal Securities and Exchange Commission or the foreign equivalent and the relevant page numbers of the filings that contain the information on each person that holds a 10 percent (10%) or greater beneficial interest."

\_\_\_\_\_  
*Printed Name of Authorized Agent*

\_\_\_\_\_  
*Signature of Authorized Agent*

Sworn and subscribed to before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
*Printed Name of Notary, ID# and  
Expiration Date*

\_\_\_\_\_  
*Signature of Notary*

**OWNERSHIP DISCLOSURE**

N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

**This statement shall be completed IN FULL, certified to, and included with all bid/proposal submissions.  
Failure to submit this required information is cause for automatic rejection of the bid/proposal.**

\_\_\_\_\_  
*Company Name*

\_\_\_\_\_  
*Company Address*

**Part I:**

Please Check the Box that represents the type of business organization:

- Sole Proprietorship\*\*                       Non-profit Corporation\*\*  
\*\* Skip Parts II and III and continue to Part IV Certification, sign and notarize where indicated

- For-profit Corporation (any type)               Limited Liability Company  
 Partnership                       Limited Partnership                       Limited Liability Partnership (LLP)

Other (be specific): \_\_\_\_\_

**Part II:**

- No one stockholder in the corporation owns 10 percent (10%) or more of its stock, of any class, or no individual partner in the partnership owns a 10 percent (10%) or greater interest therein, or that no member in the limited liability company owns a 10 percent (10%) or greater interest therein, as the case may be.

**OR**

- The list below contains the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be.

<u>Name of Individual or Business Entity</u>	<u>Home Address (for Individuals) or Business Address</u>
----------------------------------------------	-----------------------------------------------------------


*Continued on Additional Sheet (if necessary):* Yes  No

*Continue to next page*

**Part III:**

**Disclosure of 10% or Greater Ownership in the Stockholders, Partners or LLC Members Listed in Part II**

If a bidder/vendor/applicant has a direct or indirect parent entity which is publicly traded, and any person holds a 10 percent or greater beneficial interest in the publicly traded parent entity as of the last annual federal Security and Exchange Commission (SEC) or foreign equivalent filing, ownership disclosure can be met by providing links to the website(s) containing the last annual filing(s) with the federal Securities and Exchange Commission (or foreign equivalent) that contain the name and address of each person holding a 10% or greater beneficial interest in the publicly traded parent entity, along with the relevant page numbers of the filing(s) that contain the information on each such person. Attach additional sheets if more space is needed.

Website (URL) containing the last annual SEC (or foreign equivalent) filing

Page #'s

\_\_\_\_\_  
\_\_\_\_\_

**Please list** the names and addresses of each stockholder, partner or member owning a 10 percent or greater interest in any corresponding corporation, partnership and/or limited liability company (LLC) listed in Part II *other than for any publicly traded parent entities referenced above*. The disclosure shall be continued until names and addresses of every noncorporate stockholder, and individual partner, and member exceeding the 10 percent ownership criteria established pursuant to N.J.S.A. 52:25-24.2 has been listed.

Stockholder/Partner/Member and  
Corresponding Entity Listed in Part II

Home Address for Individuals or Business Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Continued on Additional Sheet (if necessary):* Yes  No

**Part IV: Certification**

I, being duly sworn upon my oath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I acknowledge that I am authorized to execute this certification on behalf of the bidder/vendor/applicant; that the Township of Maple Shade is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the completion of any contracts with the Township of Maple Shade to notify the Purchasing Agent, in writing, of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the Township of Maple Shade permitting them to declare any contract(s) resulting from this certification void and unenforceable.

\_\_\_\_\_  
*Printed Name of Authorized Agent*

\_\_\_\_\_  
*Signature of Authorized Agent*

***(Corporate Seal if a Corporation)***

Sworn and subscribed to before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
*Printed Name of Notary, ID# and  
Expiration Date*

\_\_\_\_\_  
*Signature of Notary*

**NEW JERSEY BUSINESS REGISTRATION REQUIREMENTS**

Pursuant to N.J.S.A. 52:32-44, Township of Maple Shade (“Contracting Agency”) is prohibited from entering into a contract with an entity unless the bidder/proposer/contractor, and each subcontractor that is required by law to be named in a bid/proposal/contract has a valid Business Registration Certificate on file with the Division of Revenue and Enterprise Services within the Department of the Treasury.

Prior to contract award or authorization, the contractor shall provide the Contracting Agency with its proof of business registration and that of any named subcontractor(s).

Subcontractors named in a bid or other proposal shall provide proof of business registration to the applicant, who in turn, shall provide it to the Contracting Agency prior to the time a contract, purchase order, or other contracting document is awarded or authorized.

During the course of contract performance:

1. the contractor shall not enter into a contract with a subcontractor unless the subcontractor first provides the contractor with a valid proof of business registration.
2. the contractor shall maintain and submit to the Contracting Agency a list of subcontractors and their addresses that may be updated from time to time.
3. the contractor and any subcontractor providing goods or performing services under the contract, and each of their affiliates, shall collect and remit to the Director of the Division of Taxation in the Department of the Treasury, the use tax due pursuant to the Sales and Use Tax Act, (N.J.S.A. 54:32B-1 et seq.) on all sales of tangible personal property delivered into the State. Any questions in this regard can be directed to the Division of Taxation at (609)292-6400. Form NJ-REG can be filed online at [www.state.nj.us/treasury/revenue/busregcert.shtml](http://www.state.nj.us/treasury/revenue/busregcert.shtml).

Before final payment is made under the contract, the contractor shall submit to the Contracting Agency a complete and accurate list of all subcontractors used and their addresses.

Pursuant to N.J.S.A. 54:49-4.1, a business organization that fails to provide a copy of a business registration as required, or that provides false business registration information, shall be liable for a penalty of \$25 for each day of violation, not to exceed \$50,000, for each proof of business registration not properly provided under a contract with a contracting agency.

The undersigned acknowledges these requirements and understands that this proposal shall be rejected as non-responsive if said Contractor fails to comply.

\_\_\_\_\_  
*Printed Name of Authorized Agent*

\_\_\_\_\_  
*Signature of Authorized Agent*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Company Name*

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**DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN**  
**N.J.S.A. 52:32-57**

**FAILURE TO CHECK ONE OF THE BOXES IN PART 1 WILL RENDER THE BID/RFP  
SUBMISSION NON-RESPONSIVE AND IS CAUSE FOR AUTOMATIC REJECTION.**

**BIDDERS/VENDORS SHALL COMPLETE PART 1 BY CHECKING EITHER BOX**

**PART 1**

Pursuant to Public Law 2012, c. 25 any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract must complete the certification below to attest, under penalty of perjury, that neither the person or entity, nor any of its parents, subsidiaries, or affiliates, is identified on the Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran. The Chapter 25 list is found on the Division's website at [www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf](http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf). Bidders/Vendors must review this list prior to completing the below certification. **Failure to complete the certification shall render a proposal non-responsive.** If the Township finds a person or entity to be in violation of law, s/he shall take action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

**PLEASE CHECK THE APPROPRIATE BOX:**

I certify, pursuant to Public Law 2012, c. 25, that neither the Vendor/Bidder listed below nor any of its parents, subsidiaries, affiliates is listed on the N.J. Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). **Disregard Part 2 and complete and sign the Certification below.**

**OR**

I am unable to certify as above because the Vendor/Bidder and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below. Failure to provide such information will result in the proposal being rendered nonresponsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.

**PART 2: IF YOU CHECKED BOX "B" ABOVE**

**PLEASE PROVIDE ADDITIONAL INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN.** Provide a detailed, accurate and precise description of the activities of the Vendor/Bidder, or one of its parents, subsidiaries or affiliates, engaged in the investment activities in Iran by completing the boxes below.

Name: \_\_\_\_\_ Relationship to Vendor/Bidder: \_\_\_\_\_  
Description of Activities: \_\_\_\_\_  
Duration of Engagement: \_\_\_\_\_ Anticipated Cessation Date: \_\_\_\_\_  
Vendor/Bidder Contact Name: \_\_\_\_\_ Vendor/Bidder Phone Number: \_\_\_\_\_

**CERTIFICATION**

I, the undersigned, certify that I am authorized to execute this certification on behalf of the Vendor/Bidder, that the foregoing information and any attachments hereto, to the best of my knowledge are true and complete. I acknowledge that the Township is relying on the information contained herein, and that the Vendor/Bidder is under a continuing obligation from the date of this Certification through the completion of any contract(s) with the Township to notify the Township in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification. If I do so, I will be subject to criminal prosecution under the law, and it will constitute a material breach of my agreement(s) with the Township, permitting the Township to declare any contract(s) resulting from this certification void and unenforceable.

\_\_\_\_\_  
*Printed Name of Authorized Agent*

\_\_\_\_\_  
*Signature of Authorized Agent*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Company Name*

**FALSE STATEMENT PENALTIES CERTIFICATION**

**N.J.S.A. 40A:11-34**

Any person who makes or causes to be made, a false, deceptive or fraudulent statement in the statement or answers in response to the questionnaire, or in the course of any hearing hereunder, shall be guilty of a misdemeanor, and upon conviction shall be punishable by a fine of not less than \$100.00 nor more than \$1,000.00, and shall be permanently disqualified from bidding on all public work or contracts of the contracting unit which submitted the questionnaire; or, in the case of an individual or an officer or employee charged with the duty of responding to the questionnaire for a person, firm, co-partnership, association or corporation, by such fine or by imprisonment, not exceeding 6 months, or both.

I hereby certify that as a duly authorized agent of the Applicant and the requirements of N.J.S.A. 40A:11-34 have been read and are understood.

\_\_\_\_\_  
*Printed Name of Authorized Agent*

\_\_\_\_\_  
*Signature of Authorized Agent*

Sworn and subscribed to before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
*Printed Name of Notary, ID# and  
Expiration Date*

\_\_\_\_\_  
*Signature of Notary*



**RESPONSIBLE APPLICANT CERTIFICATION**

A copy of this Certification must be included with the submission and must be fully completed, signed by at least one general partner, owner, or officer authorized to legally obligate the Applicant and notarized.

The undersigned recognizes that the information submitted in the questionnaire herein is for the express purpose of inducing the Township to award a contract to the Applicant. The undersigned acknowledges that they have read and understand the requirements of this RFP and has read and understands the instructions for completing the RFP. The Applicant acknowledges that they are duly authorized to provide the information contained in this RFP and that answering the questions in this RFP is entirely within their control.

***DECLARATION***

I hereby certify that I am a general partner, owner, or officer and as such authorized to legally obligate the Applicant and am authorized to make this Certification on their behalf.

I certify that I have read and understood the questions contained in this RFP, and that to the best of my knowledge and belief all information contained herein and submitted concurrently or in supplemental documents with this RFP is complete, current, and true. I further acknowledge that any false, deceptive or fraudulent statements or documents submitted with this RFP may result in non-award of contract.

I hereby authorize the Township to contact any entity named herein, or any other internal or outside resource, for the purpose of verifying information provided in the questionnaire or this RFP to develop other information deemed relevant by the Township.

\_\_\_\_\_  
*Printed Name of Authorized Agent*

\_\_\_\_\_  
*Signature of Authorized Agent*

Sworn and subscribed to before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
*Printed Name of Notary, ID# and  
Expiration Date*

\_\_\_\_\_  
*Signature of Notary*

## RESPONSIBLE APPLICANT'S CHECKLIST

The following are screening statements which shall be used to determine whether or not a prospective Applicant is responsible to enter into a contract with the Township of Maple Shade.

Refusal to answer or omission of response to any question in this checklist shall be considered a fatal flaw and shall result in disqualification of the bidder/applicant.

### PART 1

1. In the last five (5) years, has your firm or any person in your firm or any person or entity listed on this form or its attachments ever been arrested, charged, indicted, or convicted in a criminal or disorderly persons matter by the State of New Jersey (or political subdivision thereof), or by any other state or the U.S. Government?  Yes  No
2. In the last five (5) years, has your firm or any person in your firm or any person or entity listed on this form, been "defaulted" or "terminated" by an owner (other than for convenience of the owner) or has your insurance had a claim placed against it?  Yes  No
3. In the last five (5) years, has any person or entity listed on this form or its attachments ever been suspended, debarred or otherwise declared ineligible by any government agency from bidding or contracting to provide services, labor, materials or supplies?  Yes  No
4. At the time of submitting this proposal form, is your firm or any person in your firm or any person or entity listed on this form or its attachments, ineligible to bid on or be awarded any public contract, or perform as a sub-contractor on a public contract?  Yes  No
5. Has your firm, any person in your firm or any person or entity listed on this form or its attachments, ever been found guilty in a criminal action, for making any false claim or material misrepresentation to any public agency or entity?  Yes  No
6. In the last ten (10) years, has your firm, or any key Person in your firm, ever been convicted of a crime involving any federal, state or local contracts or been held as a defendant by a government entity for failure to perform services?  Yes  No
7. Are there currently any pending criminal matters or debarment proceedings in which the firm and/or its officers and/or managers are involved?  Yes  No
8. Has any person or entity listed on this form or its attachments been denied any license, permit or similar authorization required to engage in the work applied for herein, or has any such license, permit or similar authorization been revoked by any agency of federal, state or local government?  Yes  No

IF ANY of the answers to these questions is "yes", please provide the requested information in Part 2.

IF ALL of the answers to the questions are "no", no further action is needed; please sign and date the certification in Part 3.

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**PART 2**

If you answered “YES” any of the questions above, you must provide a detailed description of any investigation or litigation, including but not limited to administrative complaints or other administrative proceedings, involving public sector clients during the past five (5) years. The description must include the nature and status of the investigation, and for any litigation, the caption of the action, a brief description of the action, the date of inception, current status, and if applicable, disposition.

Person/Entity Involved: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Case Caption: \_\_\_\_\_

Current Status: \_\_\_\_\_ Date of Inception: \_\_\_\_\_

Summary of Investigation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Attached additional sheets if necessary

**PART 3**

**CERTIFICATION**

I, the undersigned, certify that I am authorized to execute this certification on behalf of the Applicant, that the foregoing information and any attachments hereto, to the best of my knowledge are true and complete. I acknowledge that the Township is relying on the information contained herein, and that the Applicant is under a continuing obligation from the date of this certification through the completion of any contract(s) with the Township to notify the Township in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification. If I do so, I will be subject to criminal prosecution under the law and it will constitute a material breach of my agreement(s) with the Township, permitting the Township to declare any contract(s) resulting from this certification void and unenforceable.

\_\_\_\_\_  
*Printed Name of Authorized Agent*

\_\_\_\_\_  
*Signature of Authorized Agent*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Company Name*



# TAXPAYER IDENTIFICATION

Form **W-9**  
(Rev. March 2024)  
Department of the Treasury  
Internal Revenue Service

## Request for Taxpayer Identification Number and Certification

Go to [www.irs.gov/FormW9](http://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 Specific instructions on page 3.	<b>1</b> 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.)	
	<b>2</b> Business name/disregarded entity name, if different from above.	
	<b>3a</b> Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only <b>one</b> of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input 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) . . . . . <b>Note:</b> 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)	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____  (Applies to accounts maintained outside the United States.)
	<b>3b</b> 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"/>	
	<b>5</b> Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)
	<b>6</b> City, state, and ZIP code	
	<b>7</b> List account number(s) here (optional)	

### 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.

<b>Social security number</b>
or
<b>Employer identification number</b>

### 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.

<b>Sign Here</b>	Signature of U.S. person	Date
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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](http://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.

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).

### 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

**INSURANCE CERTIFICATION**

The successful applicant shall provide coverage so that all insurance coverage will be in effect no later than 12:01 A.M. EST at the start of the day of the contract and remain in effect for the duration of the contract, including any extensions.

Certificates of Insurance for policies and coverage amounts as detailed in the Instructions for Applicants shall be submitted with the contract. Such coverage shall be with an insurance company authorized to do business in the State of New Jersey and shall name the owner as the certificate holder and as additional insured for the bid number and description.

Self-insured contractors shall submit an affidavit attesting to their self-insured coverage and shall name the owner as an additional insured.

**Proof of the required coverage shall be included with the proposal submission.**

I hereby certify that the Applicant has the required insurance coverage and proof of coverage has been included in this bid/proposal submission and will be provided if awarded a contract.

\_\_\_\_\_  
*Printed Name of Authorized Agent*

\_\_\_\_\_  
*Signature of Authorized Agent*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Company Name*

**RESPONSIBILITY ACKNOWLEDGEMENT**  
**POST CONTRACT AWARD**

The undersigned hereby acknowledges that the following documents shall be submitted to the Township within 10 days after receiving a Notice of Award by the Township on the above-named project.

**Signed Contracts**

- In accordance with Instructions for Applicants section “Notification of Award”

**Certification of Insurance**

- In accordance with the Instructions for Applicants section “Insurance”
  - *Please provide a Current Certificate of Insurance as verification*

---

*Printed Name of Authorized Agent*

---

*Signature of Authorized Agent*

---

*Title*

---

*Date*

---

*Company Name*

---

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## **INSTRUCTIONS FOR APPLICANTS**

### **“TRUTH IN CONTRACTING” LAWS**

Bidders/Applicants should be aware of the following statutes that represent “Truth in Contracting” laws:

- N.J.S.A. 2C:21-34, et seq. governs false claims and representations by bidders/applicants. It is a serious crime for the bidder to knowingly submit a false claim and/or knowingly make material misrepresentation.
- N.J.S.A. 2C:27-10 provides that a public servant commits a crime if said public servant solicits or receives a benefit directly or indirectly, for an official act performed or to be performed by a public servant, which is a violation of official duty.
- N.J.S.A. 2C:27-11 provides that a bidder/applicant commits a crime if said person, directly or indirectly, confers or agrees to confer any benefit not allowed by law to a public servant.
- Bidder/Applicant should consult the statutes or legal counsel for further information.

### **PROHIBITED CONTRACT AWARDS**

N.J.S.A. 40A:11-2.1 and P.L. 2012, c.25 section 4 C.52:32-58.4 prohibits State and local public contracts with persons or entities engaging in certain investment activities in energy or finance sectors of Iran.

Failure to certify, pursuant to N.J.S.A. 40A:11-2.1 and Public Law 2012, c. 25, that neither the bidder/applicant submitting the Bid/RFP nor any of its parents, subsidiaries, or affiliates is listed on the N.J. Department of the Treasury’s list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 (“Chapter 25 List”) shall result in a “fatal flaw” and the Bid/RFP Submission shall be rejected.

### **RESPONSIBLE APPLICANT INFORMATION**

A person who is knowledgeable and duly authorized to attest to the past and present operations of the applicant and its policies must complete the Proposal. All questions must be answered. Disclaimers, general statements with global qualifications, or notations of “Not Applicable” are not acceptable. Any pages containing supplemental information, and other documentation which the applicant submits to ensure full disclosure, shall be attached to and submitted with the RFP Documents.

The applicant shall provide current, accurate, and complete information. Incomplete or inaccurate information and/or documentation shall result in a non-curable defect in the Bid documents. The Owner reserves the right to verify the information submitted by the applicant, in any related documents, or by supplemental information or data as necessary. If it is determined that false or misleading information or data was submitted in conjunction with the RFP, the Owner shall consider the RFP fatal and deny award.

### **RECEIPT OF PROPOSAL**

1. RFP’s shall be received in accordance with public advertisement as required by law, a copy of said Notice being attached hereto and made a part of this RFP.
2. It is the Applicant’s responsibility for the timely delivery of their proposal to the Purchasing Agent. RFP’s received after the designated time and date will not be considered.
3. Each Proposal shall be submitted on the proposal forms, with all required documentation, in a sealed envelope addressed to the Township Clerk’s office, bearing the name and address of the Applicant on the outside, and clearly marked “REQUEST FOR PROPOSAL” with the name of the item(s) and contract number being proposed.
  - If a Proposal is sent by FedEx, UPS or other courier service, the outside of the courier service envelope MUST be addressed and clearly marked as shown above on both sides of the courier envelope.
  - Proposals may be hand delivered.
  - An electronic copy of all proposals must be sent to [tmcveigh@mapleshade.com](mailto:tmcveigh@mapleshade.com) with the position and RFP number in the subject of the email.

## **PROPOSAL FORM**

Proposals shall be submitted on the Proposal Form ('P' pages) and the documents/certifications ('Q' pages) contained in this RFP package and shall include submission of all documentation as required by the Checklist of Required Documents. All blank spaces must be filled in. All proposals shall be typewritten or written in ink on the forms included in this Bid package. Unit prices and totals must be inserted in the space provided. Insert "N/A" in the blanks if "not applicable". N/A is not acceptable on any 'P or Q' pages. Bids showing any erasure, alteration or interlineations must be initialed by the Applicant in ink. Failure to comply may be cause for rejection of the RFP.

The Proposal Form must have the full business address, business phone, fax, e-mail, the contact person of the Applicant, and be signed by an authorized representative as follows:

1. RFPs by partnerships must be signed in the partnership name by one of the members of the partnership or by an authorized representative, followed by the signature and designation of the person signing.
2. RFPs by corporations must be signed in the legal name of the corporation, followed by the name of the State in which incorporated and must contain the signature and designation of the president, secretary or other person authorized to bind the corporation in the matter.
3. RFPs by sole-proprietorship shall be signed by the proprietor.
4. When requested, satisfactory evidence of the authority of the officer signing shall be furnished.

## **WITHDRAWING A PROPOSAL**

A written request for the withdrawal of a Bid will be granted if the request is received by the Purchasing Agent prior to the specified time of the Bid opening. Bids not for Public Works Projects cannot be withdrawn after the time set for receiving bids, nor can any changes in price or other details be made by letter, telefax, electronic mail or verbal statement.

## **POLITICAL CONTRIBUTIONS**

### Pay-to-Play Disclosure

Business entities are advised of their responsibility to file an annual disclosure statement of political contributions with the New Jersey Election Law Enforcement Commission (ELEC) pursuant to N.J.S.A. 19:44A-20.27 if they receive contracts in excess of \$50,000 from public entities in a calendar year.

Business entities are responsible for determining if filing is necessary, Additional information on this requirement is available from ELEC at 888-313-3532 or at [www.elec.state.nj.us](http://www.elec.state.nj.us).

## **CHALLENGES**

Pursuant to N.J.S.A. 40A-11-13 "Any prospective bidder who wishes to challenge a bid specification shall file such challenges in writing with the contracting agent no less than three business days prior to the opening of the bids. Challenges filed after that time shall be considered void and having no impact on the contracting unit or the award of a contract."

Challenges shall be addressed to the Purchasing Agent, in writing, by either certified mail or fax to 908-526-8486. Challenges will be reviewed and answered by the Township Attorney.

## **ADDENDA AND CLARIFICATIONS**

Should any Applicant be in doubt as to the intent of the scope of work, they should immediately notify the Township Clerk, in writing, by email to [tmcveigh@mapleshade.com](mailto:tmcveigh@mapleshade.com). Applicants may not rely on oral responses to inquiries. Questions left on voicemail will not be answered and calls will not be returned. Questions received later than stated shall be considered void and having no impact on the Township or the award of the contract.

The Applicant is responsible for understanding all of the RFP documents that have been provided by the Township. Ambiguities, errors or omissions noted by applicants should be promptly reported in writing. If the

Applicant fails to notify the Township of such the Applicant shall be bound by the requirements of the RFP Documents.

- Every request for an interpretation shall be in writing, addressed to the Township Clerk via email to [tmcveigh@mapleshade.com](mailto:tmcveigh@mapleshade.com)
- No oral interpretation of the meaning of the specifications or any part of the RFP Document will be made to anyone.
- The Township’s interpretations or corrections thereof shall be final.

1. Clarifications

\*\* It is the Applicants responsibility to check the Township website for clarifications.

Requests for clarification must be received no less than seven (7) business days prior to the opening date. If determined that a clarification is required, an informal, numbered, ‘Question and Answer’ will be posted on the Township’s website <https://mapleshade.com/> no later than three (3) days before the opening date.

2. Addenda

\*\* It is the Applicants responsibility to check the Township website for addenda.

N.J.S.A. 40A:11-23 requires that Notice of Addenda be published “no later than seven (7) days, Saturdays, Sundays, and holidays excepted, prior to the date of acceptance of bids ...”.

Questions that require substantial changes or revisions to the scope of work or any other part of the RFP document must be received no less than ten (10) days prior to the opening. If an addenda is issued the date of the opening may be rescheduled.

Addenda issued will be posted on the Township’s website <https://mapleshade.com/> before the bid opening date. Addenda will not be emailed. All addenda issued shall become part of the contract documents.

It is the applicant’s sole responsibility to be knowledgeable of all addenda issued. Acknowledgement of Addenda shall be completed and submitted in accordance with the Checklist of Required Documents.

Applicants are advised that responses may not be issued if it is determined that the specifications clearly and concisely provide the answer. In these situations the Applicant will receive a page number to the appropriate section of the RFP Document. Continued requests (Unwarranted Requests) for information which is available in the RFP Documents shall result in responses being held and the Applicant being put on notice that they may be deemed “Not Sufficiently Experienced” and their bid being considered fatally flawed due to the Applicant being “Not Responsive” and be thrown out.

**AFFIRMATIVE ACTION EVIDENCE**

No firm may be issued a contract unless it complies with the provisions of N.J.S.A. 10:5-31 et seq. and N.J.A.C. 17:27et seq. as administered by the Division of Purchase & Property Contract Compliance and Audit Unit (Division) and provided to the Owner.

Each Applicant shall submit to the Owner, after notification of award but prior to execution of a goods and services contract, one of the following documents:

1. A Letter of Federal Approval indicating that the vendor is under an existing federally approved or sanctioned affirmative action program. A copy of the approval letter must be provided by the vendor to the Public Agency and the Division. This approval letter is valid for one year from the date of issuance;

**OR**





2. A **Certificate of Employee Information Report** (hereafter "Certificate"), issued in accordance with N.J.A.C. 17:27 et seq. The vendor must provide a copy of the Certificate to the Public Agency as evidence of its compliance with the regulations. The Certificate represents the review and approval of the vendor's Employee Information Report, Form AA-302 by the Division;  
**OR**



3. The successful applicant shall complete an Initial Employee Report, Form AA-302 and submit it to the Division with a check or money order for \$150.00 made payable to "Treasurer, State of NJ" and forward a copy of the Form to the Public Agency. Upon submission and review by the Division, the Report shall constitute evidence of compliance with the regulations.

### **EQUAL EMPLOYMENT OPPORTUNITY COMPLIANCE**

No firm may be issued a contract unless it complies with the provision of N.J.S.A. 10:5-31 et seq. and N.J.A.C. 17:27et seq. as administered by the Division of Purchase & Property Contract Compliance and Audit Unit (Division) and provided to the Owner.

### **NEW JERSEY ANTI-DISCRIMINATION**

The Contract for this RFP shall require that the Applicant agrees not to discriminate in employment and agrees to abide by all anti-discrimination laws including but not limited to N.J.S.A. 10:2-1.

### **AMERICANS WITH DISABILITIES ACT OF 1990**

Discrimination on the basis of disability in contracting for the purchase of goods and/or services is prohibited. If awarded the Contract, the Applicant is required to comply with requirements related to the Americans with Disabilities Act as provided in this RFP Document. The Applicant is obligated to comply with the Act and to hold the Owner harmless for any violations committed under the Contract.

### **STATEMENT OF OWNERSHIP**

N.J.S.A. 52:25-24.2 provide that no business organization, regardless of form of ownership shall be awarded any contract for the performance of any work or the furnishing of any goods and services, unless, prior to the receipt of the bid or accompanying the bid of said business organization, Applicants shall submit a statement setting forth the names and addresses of all persons and entities that own ten percent (10%) or more of its stock or interest of any type at all levels of ownership. The disclosure shall be continued until names and addresses of every noncorporate stockholder, and individual partner, and member exceeding the ten percent ownership, has been listed.

The Statement of Ownership and Ownership Disclosure Statement, provided in the "Q" pages shall be completed and included in the RFP Submission. This requirement applies to all forms of business organizations, including, but not limited to, corporations and partnerships, publicly-owned corporations, limited partnerships, limited liability corporations, limited liability partnerships, sole proprietorship, and Subchapter S corporations.

Not-for-profit entities should fill in their name, check the not-for-profit box, and certify the Statements. No other information is necessary.

Failure to complete and submit these Statements shall result in an automatic rejection of the RFP as it cannot be remedied after RFPs have been opened.

### **AFFIDAVIT OF NON-COLLUSION**

The Affidavit of Non-Collusion, which is part of this RFP document, shall be properly executed and submitted intact with the proposal.

## **INSURANCE**

The Applicant will not be allowed to begin work under the Contract until he has provided proof of all insurance required under the contract documents and the insurance has been approved by the Township. The Applicant shall not allow any sub-contractor to begin work on his Contract until the insurance required of the sub-contractor has been obtained and approved. The insurance required shall be maintained in full force and effect until all work to be performed under the terms of the contract is satisfactorily completed and accepted by the Township.

- A. **Professional Liability/Errors & Omissions Insurance:** The Applicant shall procure and shall maintain during the life of the contract Professional Liability Insurance in an amount not less than \$3,000,000 combined single limit.
- B. **Workers' Compensation Insurance:** The Applicant shall procure and maintain during the life of the contract Workers' Compensation Insurance for all personnel to be engaged in work on the project, and in the case of any sublet, the Applicant shall require the sub-contractor similarly to provide Workers' Compensation Insurance for all of the latter's employees unless such employees are covered by the Professional's Insurance. In case any class of employees engaged in hazardous work on the project under this contract are not protected under the Workers' Compensation Statute, the Applicant shall provide and cause each sub-contractor to provide adequate employer's general liability insurance for the protection of such of his employees as are otherwise protected.
- C. **Automobile Liability and Property Damage Insurance:** The Applicant shall procure and shall maintain during the life of the contract Automobile Liability Insurance in an amount not less than \$3,000,000 combined single limit. The Applicant shall also carry insurance in the same amounts stipulated above on all vehicles not owned by him, but which are used in connection with the work being performed under this contract.
- D. **Proof of Insurance:** The Applicant shall furnish the Township with satisfactory proof of carriage of the insurance required by submitting the original insurance policies and endorsements or properly executed Certificates of Insurance (COI). Each insurance policy and endorsement shall contain undertaking by the insurance carrier not to cancel the policy or reduce the limits except upon thirty (30) days' notice to the Township by certified mail, return receipt requested. A COI shall be submitted showing proof of the above coverage and show the Township of Maple Shade as the Certificate Holder. All insurance required by this contract shall be placed with responsible insurance companies authorized to do business in the State of New Jersey, which are satisfactory to the Township.

## **INDEMNIFICATION**

The Applicant agrees to indemnify and save harmless the Township, its officers, agents and employees, hereinafter referred to as indemnities', from all suits, including attorney's' fees and costs of litigation, actions, loss damage, expense, cost of claims, of any character or on account of any act, claim or amount arising or recovered under Workers Compensation law, or arising out of failure of the Applicant or those acting under the Applicant to conform to any statutes, ordinances, regulations, law or court decree. It is the intent of the parties to this contract that the indemnities shall, in all instances, except for loss or damage resulting from the sole negligence of the indemnity, be indemnified against all liability, loss or damage of any nature whatever.

## **TAXPAYER IDENTIFICATION**

A U.S. taxpayer identification number (TIN), W-9 Form, shall be submitted with the bid.

## **BUSINESS REGISTRATION CERTIFICATE**

P.L. 2009, c.315 (A-557/S2366) and N.J.S.A. 52:32-44 requires that each Contractor and subcontractor submit proof of business registration prior to an award of contract if not filed with the Bid. Proof of registration shall be a copy of the Business Registration Certificate (BRC). A BRC can be obtained from the New Jersey Division of Revenue.

Information on obtaining a BRC is available by calling (609) 292-9292 or on the internet at <http://www.state.nj.us/treasury/revenue/busregcert.shtml>.

## **AWARD OF CONTRACT PROCEDURES**

The Applicant, by submitting a Proposal, consents in accordance with N.J.S.A. 40A:11-24, which provides in part that “any Applicant who consent thereto may, at the request of the contracting unit, have their proposal held for consideration for such longer period as may be agreed.” All prospective Applicants are advised of this schedule since all proposals must be firm when proposed, and must remain so until the respective reorganization meeting of the respective Committee or Board. But in no case shall the proposal be valid after the reorganizational meeting of the respective Committee or Board without written consent from both parties to extend.

## **NOTIFICATION OF AWARD**

1. Upon the adoption of a Resolution by the Township Committee or Board awarding the contract, two (2) signed agreements will be forwarded to the successful Applicant with a copy of the approving Resolution. The Applicant actor shall return one fully executed copy of the contract to the Township Clerk within ten (10) days of the date of the notice of award of the contract.
2. No Resolution of Award will become binding on the Township before the contract documents have been fully executed by all parties and all requirements of the Checklist of Required Documents have been met.
3. Should the successful Applicant fail to execute the contract within ten (10) days of notification of award, the Township will be free to award the contract to another Applicant.

## **REJECTION OF PROPOSALS**

RFPs shall be rejected in accordance with N.J.S.A. 40A:11-13.2. RFPs shall also be rejected in accordance with the Checklist of Required Documents and for any of the following reasons:

1. If more than one proposal is received from an individual, firm or partnership, corporation or association under the same name for the same position;
2. Multiple submissions from an agent representing competing applicants; or
3. The RFP is inappropriately unbalanced; or
4. The Applicant is determined to possess, pursuant to N.J.S.A. 40A:11-4b, Prior Negative Experience; or,
5. If the Successful Applicant fails to enter into a contract within 21 days, Sundays and holidays excepted, or as otherwise agreed upon by the parties to the contract.

The Township reserves the right to reject RFPs and to waive any minor informality in any RFP should it be deemed in the best interest of the Township to do so in accordance with N.J.S.A. 40A:11-13.2.

## **TERMINATION OF CONTRACT**

1. **DEFAULT**: Non-performance of the Applicant in terms of the Request for Proposal shall be a basis for termination of the contract by the Township. The Township may terminate the contract upon 30 days' written notice to the Applicant. The Township shall not pay for any services and/or materials, which are unsatisfactory. The Applicant may be given a reasonable opportunity before termination to correct the deficiencies. This, however, shall in no way be construed as negating the basis for termination for non-performance.
2. **UNCONDITIONAL TERMINATION FOR CONVENIENCE**: The Township may terminate the resultant contact for convenience by providing sixty (60) calendar days advance notice to the Applicant.
3. **TERMINATION FOR DEFAULT**: If the Applicant fails to meet deadlines, or fails to provide the agreed upon services, and or material altogether, a termination for default will be issued, but only after the Township has determined the Applicant has failed to remedy the problem after being forewarned.
4. **TERMINATION BY THE TOWNSHIP**: If the Applicant should be adjudged bankrupt or should make a general assignment for the benefit of its creditors, or if a receiver should be appointed on account of its insolvency, the Township may terminate this contract. If the Applicant should persistently or repeatedly refuse or should fail, except in cases for which extension of time is provided, to provide enough properly skilled workers or proper materials, or persistently disregard laws and ordinances, or not proceed with work or of this contract, the Township shall give the Applicant fifteen (15) calendar days written notice. Upon

receipt of such termination notice, the Applicant shall be allowed seven (7) calendar days to cure such deficiencies.

## **PAYMENT**

Applicant shall be paid in accordance with the terms in this RFP document and the Contract.

The Township will not honor any invoices submitted for work performed other than that stipulated by the Scope of Work/Specifications, Contract and RFP Documents unless previously authorized, in writing, by the Township and approved by the Township Committee as required by N.J.A.C 5:30-11. Invoices for services rendered shall be received, with a properly executed Payment Voucher, by the Township by the end of the month following the month in which the expense was incurred.

All services shall be certified by the Department Manager, or designee, before payment requests are processed.

- A. No payment will be made unless duly authorized by the owner's authorized representative and accompanied by proper documentation (i.e. invoice and payment voucher).
- B. Payment will be made in accordance with the owner's policy and procedures. Invoices shall specify, in detail, the period for which payment is claimed, the services performed during the prescribed period, the amount claimed and correlation between the services claimed and this proposal.
- C. The owner may withhold all or partial payments on account of subsequently discovered evidence including but not limited to the following:
  - 1) Deliverables not complying with the project specification;
  - 2) Claims filed or responsible evidence indicating probability of filing claims;
  - 3) A reasonable doubt that the contract can be completed for the balance then unpaid.

When the above grounds are removed, payment shall be made for amounts withheld because of them.

Public funds may be used to pay only for goods delivered or services rendered. The owner shall not pay penalties and/or interest on overdue bills unless otherwise required by law. No employee is authorized to sign a letter of credit or any other document that represents a legal commitment on the part of the owner to pay additional fees.

## **THE CONTRACT**

The following shall be deemed to be part of the Contract:

- This entire RFP Document which includes, but is not limited to:
  - Notice to Applicants
  - Completed Proposal Forms
  - Instructions for Applicants
  - General Conditions
  - Scope of Work
  - Exhibits
  - All addenda issued by the Township prior to the receipt of proposals
- All attachments submitted by the Applicant with their proposal.

## **ASSIGNING THE CONTRACT**

The Contract shall not be sublet, assigned, pledged, hypothecated or sold, in whole or in part, without the written permission of the Owner.

## **ADDITIONAL PROVISIONS**

1. Both parties agree to comply with all requirements of the Federal Health Insurance Portability and Accountability Act of 1996 ("HIPAA") as maybe amended from time to time, and the corresponding HIPAA

regulations for the confidentiality and security of medical information. If awarded the bid, the contractor shall:

- a. Not use or disclose protected health information other than as permitted or required by law
- b. Use appropriate safeguards to protect the confidentiality of the information
- c. Report any use or disclosure not permitted

The applicant, by execution of the contract, shall thereby indemnify and hold the owner harmless from any and all liabilities, claims, actions, costs and penalties which may be incurred as the result of the failure of the contractor to comply with the requirements of the Health Insurance Portability and Accountability Act (HIPAA) or any other statute or case law protecting the privacy of persons using its services.

2. The Owner shall retain all of its rights and interest in any and all documents and property, both hard copy and digital furnished by the Owner to the Successful Applicant for the purpose of assisting the Contractor in the performance of this Contract. None of the documents and/or property shall, without the written consent of the Owner, be disclosed to others or used by the Contractor or permitted by the Contractor to be used by their parties at any time except in the performance of the resulting Contract.

The Applicant shall not have the right to use, sell, or disclose the total of the interim or final work products, or make available to third parties, without the prior written consent of the Owner. Any information supplied to the Owner may be required to be supplied on CD/DVD or USB flash drive media compatible with Microsoft Windows, and Microsoft Office Suite 2010 or greater.

3. Under state and federal statutes, certain government records are protected from public disclosure. The Owner, the Applicant and any subcontractors have a responsibility and an obligation to safeguard from public access an employee's personal information with which it has been entrusted when disclosure thereof would violate the employee's reasonable expectation of privacy. All payroll, personnel and health insurance related files are confidential. Additionally, the applicant and any subcontractors may be privy to sensitive law enforcement information or investigations during their review which must remain confidential. The Owner retains the right to make any public disclosure under the law. Also, among government records deemed confidential are administrative or technical information regarding computer hardware, software and networks that, if disclosed, would jeopardize computer security. The Applicant and any subcontractor(s) are prohibited from the sale or distribution of all supplied information to any third party.
4. Proof of licensure for any activity regulated by the State of New Jersey and required to do the work required under this specification, for either the firm or the person responsible for the work, shall be provided as required by the Owner.

### **STATE COMPTROLLER REQUIREMENTS**

In accordance with N.J.A.C. 17:44-2.2 the Contractor/Vendor shall maintain all documentation related to products, transactions and/or services under this contract for a period of five years from the date of final payment. Such records shall be made available to the New Jersey Office of the State Comptroller.

### **COMPLIANCE WITH LAWS**

The Applicant shall keep himself fully informed of, and observe and comply with, all state, national and municipal laws in any manner affecting those engaged or employed in the work or the materials used in the work and of all such orders and decrees for bodies having any jurisdiction or authority over the same.

If any discrepancy is discovered in the Contract in relation to any such law, ordinance, regulation, order or decree, the Applicant shall notify the Purchasing Agent immediately in writing. The Applicant shall protect and indemnify the Township, its officers and agents against any claim or liability arising from a violation of any law, regulation, ordinance, order or decree whether by himself or his employees or sub-contractors.

**ACQUISITIONS, MERGER, SALE AND/OR TRANSFER OF BUSINESS, ETC.**

Prior to any mergers where the Applicant is to become the “Division of .....” or changes the financial structure or reporting of the Applicant, the Applicant shall notify the Township of Maple Shade. Failure to notify the Township prior to any merger may cause termination of the contract.

If during the life of the contract, the Applicant disposes of the business concern by acquisition, merger, sale and/or transfer or by any means conveys their interest(s) to another party, all obligations are transferred to that new party. In this event, the new owner(s) will be required to submit, when required a performance bond in the amount of the open balance of the contract.

**DISPUTE RESOLUTION**

Disputes arising under this agreement shall be resolved pursuant to alternative dispute resolution practices, such as mediation, binding arbitration or non-binding arbitration, as required by P.L. 1997, c. 371 (N.J.S.A. 40A:11-50), pursuant to industry standards, prior to being submitted to a court for adjudication. The specific type of alternate dispute resolution to be utilized shall be selected by the Township and the costs payable to the mediator or arbitrator(s) shall be borne equally by the Township and the Applicant.

## **GENERAL CONDITIONS**

### **1.0 SEALED RESPONSES**

BE ADVISED THAT absent an expressed written notice to the contrary Scope of Work, Proposal Forms, Instructions for Applicants and these General Conditions all proposals shall:

1. be submitted on the enclosed Proposal Forms
2. include all Proposal Forms completed as indicated in the Checklist of Required Documents.
3. include a compensation schedule.
4. include such other documents and materials as the Applicant may deem appropriate to show their qualifications and experience or to meet the requirements of this RFP document.
6. be subject to all of the requirements as outlined in this RFP document.

### **2.0 SUBMISSION DEADLINE AND PUBLIC READING**

Sealed responses shall be received in the Township of Maple Shade, Attn: Township Clerk, 200 Stiles Avenue, Maple Shade, NJ 08052 on or before the date and time (“due date” set forth in this notice (also referred to as the “submission deadline”). The Township Clerk or designated representative will receive submissions up to the submission deadline date and time noted in the Notice of Request for Proposals.

The Township reserves the right to extend the submission deadline at any time prior to opening of the sealed submissions, to reject all submissions without the need for cause or prior notice, to reject particular submissions due to defects in mandatory items, to waive non-mandatory items and to accept any submissions that in their judgment will be in the best interest of the Township.

### **3.0 APPLICANT TERMS AND CONDITIONS**

Proposals will be evaluated by the Township Committee and/or sub-committees of the Township on the basis of the most advantageous, price and other factors considered but not limited to the following:

- Knowledge of the administrative structure of the Township and subject matter to be addressed under the contract.
- Individual designated by the applicant and approved by Township is required to attend all regular scheduled meetings as directed by the Township. If the designated individual cannot attend they shall notify the Township in advance and have the individual to attend the meeting approved by Township.
- Applicant shall respond to Township inquiries within 24 hours.
- Applicant shall be available to accommodate any special meetings as required by the Township.
- Applicant will provide written proposals for specific projects as required by Township.
- Applicants included compensation schedules.
- Evaluation Categories listed in the Exhibits.
- Other factors that may reasonably impact the Township during the proposal year.

#### **4.0 REIMBURSABLES**

##### Acceptable Reimbursable Items

- Postage

##### Not Acceptable Reimbursable Items

- The Township shall not pay for travel time in the form of hours billed, mileage, car rentals, or commuting expenses.
- The Township will not pay expenses for telephone, fax, etc.
- All site visits and meetings with persons not employed by the Applicant, other than meetings with the Township Committee and/or any other Township Board, Commission, or other Township agency or instrumentality, unless approved in writing, in advance by the Township Committee.
- Work by more than one billing employee on a matter must be approved in writing, in advance by the Township.



## **SCOPE OF WORK**

The Township of Maple Shade (hereinafter “the Township”) is requesting proposals for the appointment of the following services for the Township for a one-year term, January 23<sup>rd</sup> to December 31, 2025 in all matters pertaining to the service.

### **1. TOWNSHIP ATTORNEY**

Applicant must be licensed to practice law in the State of New Jersey and be a member of the Bar in good standing. The applicant shall have at least ten (10) years’ experience as an attorney in the State of New Jersey and must demonstrate sufficient capability of his/her organization to represent Maple Shade. Applicants must provide his/her knowledge of governmental and municipal law and in particular, knowledge of and experience in Burlington County and preferably the Township of Maple Shade. It is preferred that the applicant will provide the Township with knowledge in the areas of local government and municipal law, litigation, real estate acquisition and sale, tax appeals, municipal redevelopment law, acquiring and administering grants, bankruptcy and other laws regarding and affecting municipal government.

## **EXHIBIT A: MEETING SCHEDULES**

- The Township Committee meets the 2<sup>nd</sup> and 4<sup>th</sup> Thursday of each month at 6:30 pm (Executive Session if needed, 7:00pm Open Public Meeting)
- The Zoning Board meets the 1<sup>st</sup> and 3<sup>rd</sup> Wednesday of each month at 7:00 pm
- The Planning Board meets the 2<sup>nd</sup> and 4<sup>th</sup> Wednesday of each month at 7:00pm

***NOTE: All meeting dates are subject to change***

**EXHIBIT B: EVALUATION CATEGORIES**

<b>Understanding the Requested Work</b>
Demonstrates clear understanding
Completeness and responsiveness to RFP
Compliance with instructions and requests
<b>Knowledge and Professional Compliance</b>
Education and training of employees, suitability to perform the required tasks
Does respondent have the character, integrity, reputation, judgment, experience & efficiency required by the Professional <b>OR</b> Expert methods, process & resources to be utilized
Experience with the Township.
Primary Professional vs. subcontracted resources. Depending on nature of sub & percentage of project.
<b>Ability to Perform Services in a Timely Manner</b>
Scheduling Timeline
Personnel & Resources
Primary Professional relationship sub-Professionals
<b>Management, Experience and Personnel Qualifications</b>
Project Management Plan
Project Management Team
Record of reliability and quality of service
Scope of Work Experience
Experience in performing similar work by employees
<b>Management, Experience and Personnel Qualifications</b>
Explanation of costs
Cost comparison
Other costs, Copies, travel, etc...
Additional Services

**EXHIBIT C: SAMPLE CERTIFICATE OF INSURANCE**



**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

<b>PRODUCER</b> Applicants Insurance Company Name and Address	THIS CERTIFICATION IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
	<b>INSURERS AFFORDING COVERAGE</b>	<b>NAIC #</b>
<b>INSURED</b> Applicants Company Name and Address	INSURER A:	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

**COVERAGES**

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSURANCE TYPE	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
<input type="checkbox"/> LTR <input type="checkbox"/> INSUR	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	Policy Number	Term		EACH OCCURRENCE \$ \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	Policy Number	Term		COMBINED SINGLE LIMIT (Ea accident) \$ \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
GARAGE LIABILITY <input type="checkbox"/> ANY AUTO					AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$	Policy Number	Term			EACH OCCURRENCE \$ \$2,000,000 AGGREGATE \$ \$ \$
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER	Policy Number If applicable	Term			WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ \$100,000 E.L. DISEASE - EA EMPLOYEE \$ \$100,000 E.L. DISEASE - POLICY LIMIT \$ \$500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

**Leave Blank**

<b>CERTIFICATE HOLDER</b> ATTN: Township Mgr. Maple Shade Township 200 Stiles Ave Maple Shade, NJ 08052	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL _____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE
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ACORD 25 (2001/08)

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## **EXHIBIT D: SAMPLE CONTRACT**

This CONTRACT is made on \_\_\_\_\_, 20\_\_\_\_  
Resolution Number: \_\_\_\_\_

### **BETWEEN**

Township of Maple Shade, a Municipal Corporation, whose address is 200 Stiles Avenue, Maple Shade NJ 08052 (the "Township").

### **APPLICANT**

Name and address of Applicant  
(the "Applicant").

### **RECITALS**

1. A proposal for \_\_\_\_\_ ("Professional Service") was received from the Applicant by the Township on \_\_\_\_\_, 20\_\_.
2. The Applicant was thereafter awarded a contract by the Maple Shade Township Council for the Professional Service.

### **AGREEMENT**

The Applicant and the Township, for and in consideration herein specified, hereby agree as follows:

1. The Applicant shall undertake and provide the services as indicated in their RFP Proposal and submitted documents and in strict and entire conformity with the Scope of Work, General Conditions, Instructions for Applicants, and all other requirements contained in the RFP Document for the Professional Service.
2. The term of this contract shall be until December 31<sup>st</sup>, 2025, starting January 23, 2025.
3. Signed contract and insurance certification shall be returned within 10 days of Notification of Award to the Township Clerk.
4. The Township shall compensate the Applicant for the Professional Service provided in accordance with the Contract Documents.
5. The Applicant shall hold harmless and defend the Township against any and all suits and assume liability for the use of any patented process, device or article forming a part of the apparatus or any appliance furnished under this Contract.
6. This Contract shall be binding on the Applicant and the Township, and their respective successors and assigns.

### **TERMINATION**

1. The Township may terminate the contract as delineated in the specifications.

**IN WITNESS WHEREOF**, the Township has caused this instrument to be signed by its Mayor, attested by its Township Clerk and its seal to be affixed pursuant to the resolution of the Township Committee passed for that purpose, and the Applicant has signed, sealed and delivered this Agreement or has caused this Agreement to be signed by its proper corporate officers and its corporate seal to be affixed pursuant to authority conferred by its Board of Directors on the date and year first above written.

**FOR THE TOWNSHIP:**

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Mayor

**ATTEST:**

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Andrea T. McVeigh, RMC  
Township Clerk

**FOR THE APPLICANT:**

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NAME/TITLE (PLEASE PRINT)

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SIGNATURE

**WITNESS/ATTEST:**

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PRINT NAME

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SIGNATURE

(If corporation, affix corporate seal)