

Bidders Nam	ne:
Address:	
City and State:	
Phone:	
Fax:	
E Mai	il.

TOWNSHIP OF WOOLWICH

120 VILLAGE GREEN DRIVE

WOOLWICH TOWNSHIP, NJ 08085

SPECIFICATIONS AND RFP FORMS FOR

PROFESSIONAL SERVICES CONTRACTS

YEAR 2022

GENERAL INSTRUCTIONS

- 1. Bidders Name and address together with Category and Due Date must appear on the outside of the envelope containing the RFP.
- 2. All forms must be signed and notarized.
- 3. Any questions pertaining to this RFP must be directed to the office of the Woolwich Township Clerk, 856-467-2666 x3101 or the Woolwich Township QPA 856-367-2666 x3136.

PUBLIC NOTICE TOWNSHIP OF WOOLWICH

NOTICE FOR SOLICITATION OF QUALIFICATIONS FOR PROFESSIONAL SERVICES UNDER A FAIR AND OPEN PROCESS

NOTICE IS HEREBY GIVEN that sealed qualifications for professional services for the year 2022 not subject to bidding pursuant to N.J.S.A. 40A:11-5, will be received by the Administrator/Clerk of the Township of Woolwich . The sealed qualifications will be received and recorded at the Municipal Building, 120 Village Green Drive, Woolwich Township, NJ 08085 on Wednesday, November 10, 2021, at 10:00 a.m. by the Woolwich Township Administrator/Clerk.

Qualifications for the following professional services will be accepted:

Municipal Solicitor

Municipal Engineer

Municipal Auditor

Municipal Planner /COAH Planner

Labor Attorney

Conflict Solicitor

Municipal Prosecutor

Conflict Prosecutor

Municipal Public Defender

Conflict Engineer (Township and Land Use)

Special Counsel-COAH Matters

Administrative Agent COAH

Special Council Redevelopment

Bond Counsel

Financial Advisor

Fire Restoration Service

Risk Management Consultant

Joint Land Use Board Solicitor

Joint Land Use Board Engineer

Joint Land Use Board Planner

Each submission to be considered shall comport to the criteria set forth herein:

- (1) Should the applicant be a professional acquiring licensure in the State of New Jersey; said applicant shall be licensed for a period not less than five (5) years.
- (2) The applicant shall submit a "Certificate of Good Standing" or other similar document evidencing that the professional's license is not presently suspended or revoked.
- (3) The applicant shall submit a copy of the applicant or applicant firm's proposed 2022 Billing Schedule
- (4) The applicant shall submit a resume, which shall set forth information including, but not limited to the following (as applicable to a business entity or individual professional);
 - (a) Full name and business address;
 - (b) A listing of all post high school education of the applicant;

- (c) Dates of licensure in the State of New Jersey and any other state;
- (d) A listing of any professional affiliations or membership in any professional societies or organizations with an indication as to any offices held therein;
- (e) The number of licensed professionals employed by/affiliated with the business entity or the business entity which employs the applicant;
- (f) A listing of all special accreditations held by the individual licensed professional or business entity;
- (g) A listing of all previous public entities served by the business entity or licensed professional, indicating the dates of service and the position held.

Qualification Packets may be obtained on the Woolwich Township Website www.woolwichtwp.org under heading "Government" tab "Bid Specification/RFP's" or by contacting the Woolwich Township Clerk at 856-467-2666 x3101 or via e-mail to jdibella@woolwichtwp.org.

Qualification packets shall be enclosed in an opaque sealed envelope bearing the name and address of the responder and the words "Qualifications for Professional Services and the category of services" and clearly marked "Sealed Qualifications", and addressed to the Township of Woolwich, 120 Village Green Drive, Woolwich Twp., NJ 08085, and may be received through the mail or hand delivered. Qualifications may be received before the hour and time named in this notice.

Responders are required to comply with the requirements of P.L. 1975 c. 127 (Affirmative Action) and P.L. 2004, c.57 (Business Registration) and proof thereof is to be submitted with the RFP. Responders are also required to submit a statement of ownership with their qualifications as required by P.L. 1977 c.33 (Disclosure of Ownership).

The Township Committee of the Township of Woolwich reserves the right to reject any and all submission of qualifications and further reserves the right to waive minor irregularities and immaterial variances or formalities in the Qualifications received and to accept any Qualifications deemed most favorable by the Township of Woolwich, at the time and under the conditions stipulated.

The Township is not responsible for the loss or destruction of any qualifications packages mailed or delivered to the Township Clerk prior to the time set for the receipt of same.

Jane DiBella, Administrator/Clerk

CONTRACT FORMS

INSURANCE REQUIREMENTS

- 1. The Contractor(s) shall provide and pay for insurance coverage of such type and in such amounts as will completely protect the Contractor and the Township, its elected officials, officers, agents, servants, employees and assigns against any and all risks of loss (including costs of defense) or liability arising out of this Contract.
- 2. The insurance should be furnished by insurance companies with an "A-(Excellent) VI" or better rating as published in the most recent editions of Best Insurance Key Rating and shall be authorized to conduct business in the State of New Jersey.
- 3. It is recognized that in some instances that insurance may be acceptable which is underwritten by an insurance company that is not reported in the Best Guide, or the coverage is extended under a self insurance program. This insurance, or self insurance, must be in conformity with the rules and regulations of the Commissioner of Insurance of the State of New Jersey. Any Insurance or self insurance of this type is subject to the review and acceptance by the Townships Risk Manager or Legal Counsel. Furthermore, written proof of acceptability by the Office of the Commissioner of Insurance may be necessary.
- 4. The Contractor(s) shall furnish the Township with Certificate\s of Insurance. Policies for general Liability must be endorsed to include the Township of Woolwich as an "Additional Insured". The Certificate of Insurance shall set out the types of coverage, the limits of liability, describe the operation by reference to the contract and provide for thirty (3) days written notice to the Township of cancellation or non-renewal. All of the Contractors deductibles or retentions shall be the sole responsibility of the Contractor. Those in excess of \$10,000 are to be disclosed and are subject to approval by the Township. If requested actual policy copies or incurred loss information may be required.
- 5. The policies and specified limits of coverage must be effective prior to the commencement of work and must remain in force until the end of the Contract
- 6. The Contractor(s) shall obtain and furnish the Township, certificates of insurance for any subcontractors showing policies in force with coverage and limits described under these insurance requirements.
- 7. The Certificate of Insurance are to be signed by a person authorized by the insuring company to bind coverage on its behalf. Neither approval by the Township nor failure to disapprove Certificates of Insurance furnished by the Contractor shall release the Contractor from full responsibility for all liability including costs of defense. Insurance is required as a measure of protection and the Contractor's liability is not limited thereby.

- 8. The Certificate of Insurance must be submitted to the Township and shall be subject to the approval of the Township Counsel or Risk Manager.
- 9. If at any time during the term of the Contract or any extension thereof, if any of the required policies of insurance should expire, change or be canceled, it will be the responsibility of the Contractor, prior to the expiration, change or cancellation, to furnish to the Township a Certificate of Insurance indicating renewal or a replacement of the policy so that there will be no lapse in coverage. In the event of any interruption of any coverage for any reason, all payments and work under the contract shall cease and not be resumed until coverage has been restored and a current Certificate of Insurance received and approved.
- 10. Insurance maintained by the Township shall be considered as Excess over Contractors Insurance . Insurance maintained by the Township does not provide protection for contractors liability.
- 11. Certificates of Insurance shall show the certificate Holder and Additional Insured as

Township of Woolwich

120 Village Green Drive

Woolwich Twp., NJ 08085

SPECIFIC COVERAGE REQUIREMENTS

The following are the minimum mandatory types of coverage to be carried under the preceeding requirements:

General Liability in a comprehensive form, with minimum limits as follows:

Each Occurrence	\$1 ,	,000,000
Damage to rented or leased property	\$	100,000
Medical Expense	\$	5,000
Personal and Adv. Injury	\$1,	,000,000
General Aggregate	\$2,	,000,000

SAMPLE CONTRACT

THIS AGREEMENT made this	day of, 20, between the Township of
	the State of New Jersey, hereinafter referred to as es at 120 Village Green Drive, Woolwich Township, New Jersey
And:	
Hereinafter referred to as "CONTRACTOR"	
WITNESSETH:	
time and in the manner set forth hereinafted services of and set forth and in accordance with the property of the proper	ation of the payments made to it by the TOWNSHIP at the er set forth does hereby and agree to provide and deliver the in strict accordance with requirements attached roposal of the CONTRACTOR, a copy of which is attached mitted to the TOWNSHIP and awarded to the CONTRACTOR.
The Notice to Bidders, Specifications, Requiring any, are all incorporated by reference and	d comprise the Contract Documents.
	ortunity Language, Certificate of Employee Information and Business Registration Certificate shall accompany the tract document when executed.
and the acceptance thereof by the TOWNS	te on this contract, its covenants and agreements entered into SHIP, The TOWNSHIP does hereby agree to pay to the it schedule established in the RFP and upon presentation of a
IN WITNESS WHEREOF the parties have call officers and sealed with their seals, the day	used these presents to be signed by their duly authorized y and year first above written.
ATTEST:	TOWNSHIP OF WOOLWICH
WITNESS:	CONTRACTOR
	Name and Title

MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE

N.J.S.A.10:5-31 ET SEQ. (P.L. 1975, c. 127)

N.J.A.C. 17:27

During the performance of this Contract, the Contractor agrees as follows:

The contractor r 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 employee's 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 to 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 by 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

Employee Information report Form AA302 (electronically provided by the Division and distributed to the public agency through the Divisions website at www.state.nj.us/treasury/contract compliance)

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Public Contracts Equal Employment Opportunity Compliance as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Public Contracts Equal Employment Opportunity Compliance for conducting a compliance investigation pursuant to Subchapter 10 of the Administrative Code at N.J.A.C. 17:27.

Name:	 	
Signature:		
Title:		
Date:		

BID CHECK LIST

FAILURE TO SUBMIT ANY OF THESE ITEMS IS MANDATORY CAUSE FOR REJECTION OF RFP

1.	Professional License (shall be licensed for a period of not less than five (5) years)		
2.	Certificate of Good Standing		
3.	Proposed 2022 Billing Schedule		
4.	Resume including the following information		
	 (a) Full name and business address; (b) A listing of all post high school education of the applicant; (c) Dates of licensure in the State of New Jersey and any other state (d) A listing of any professional affiliations or membership in any professional affiliation as to any offices held therein (e) The number of licensed professionals employed by/affiliated with entity or the business entity which employs the applicant; (f) A listing of all special accreditations held by the individual license business entity; (g) A listing of all previous public entities served by the business entity professional, indicating the dates of service and the position held 	ofessional societies;; h the business ed professional or ity or licensed	
5.	Copy of New Jersey Business Registration Certificate		
6.	Signed Affirmative Action Statement		
7.	Corporate Disclosure Statement Pursuant to N.J.S.A. 40A:11-16		
8.	Non-Collusion Affidavit		
	This Checklist must be signed and return with all items: Print Name of Entity:	Date:	
	Print Name and Title:		
	Signature:		

DISCLOSURE STATEMENT

Name of Business:

Principal Place of Business: Partnership Corporation Sole Proprietorship I certify that the list below contains the names and home addresses of all stock holders holding 10% or more of the issued and outstanding stock of the undersigned. If one or more of the below is itself a corporation or partnership, I have annexed the names and addresses of anyone owning a 10% or greater interest therein. I certify that no one stockholder owns 10% or more of the issued and outstanding stock of the undersigned. Please check appropriate boxes above and sign below Stockholder Name Street Address City and State I further certify that no officer or employee of the Township of Woolwich has any interest, direct or indirect in this corporation or partnership or in this contract. I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment. SWORN and SUBSCRIBED To BEFORE ME THIS _____ DAY OF , 20 Signature of Notary Public: Signature: Notary public of: _____ Print Name: My Commission Expires: _____ Title of Person Signing

NON-COLLUSION AFFIDAVIT

(State of New Jersey)		
County of		
l,	of	in the County
of	and the State of	
Of full age, being duly sworn accor	rding to law on my oath, de	pose and say, that:
I am	of the firm of	, the
contractor submitting the enclosed	d RFP, and that I executed s	said RFP with full with full authority
	·	d into any agreement, participated
in any collusion, or otherwise take	•	. ,
connection with the above named affidavit are true and correct, and	•	
relies upon the truth of the statem		· ·
contained in this affidavit in award	, ,	
I warrant that no requirement or contribution to any party, person, were promised to anyone connect reference hereto.	or elected official and that	no undisclosed benefits of any kind
I further warrant that no person o secure such contract upon agreem brokerage or contingent fee, excel or selling agencies maintained by	nent or understanding for a	commission, percentage,
Name of Contractor		

I further warrant and represent that I have never been convicted of or acknowledged nor admitted to any payment of kickbacks or unlawful gifts to any government official or employee for which conduct the Township of Woolwich deems me disqualified from doing business with Woolwi9ch Township under such circumstances.

I also understand that the above disqualification does not apply to any vendor who cooperates with the prosecution and gives supporting testimony on behalf of the prosecution in the course of a judicial inquiry.

SWORN and SUBSCRIBED To	
BEFORE ME THIS DAY	
OF, 20	
 Signature of Notary Public:	Signature of Affiant:
Notary public of:	
	Print Name:
My Commission Expires:	
	Title of Person Signing

AFFIRMATIVE ACTION INFORMATION

Please complete the	following:
Company Name	
Our Company has ar	Affirmative Action Plan Approval:
YES	No
	a) If yes, submit a photographic copy of the approval
Our Company has a	New Jersey Certificate of Employee Information Report:
YES	No
	a) If yes, submit a photographic copy of the Certificate
Our company has ne Employee Information	either of the above, therefore send us Form AA-302 (Affirmative Action on Report)
Send AA- 302	
I certify that the abo	ve information is correct to the best of my knowledge.
Name:	
Signature:	
Title:	
Dato:	