# **PROPOSAL APPLICATION**

## **APPLICATION INSTRUCTIONS**

The following Proposal Application ("Application") including the Transmittal Letter <u>must</u> be used in applying for this concession opportunity with the Department of Environmental Protection ("Department"). All required documents must be completed in accordance with the instructions included within them and within this Application.

In the preparation of all proposal materials, applicants should keep in mind the nature of the operations to be conducted when framing the requested answers. Applicants should feel free to add attachments to the Application that stay within its organizational framework.

To become qualified as a Bidder you must submit a complete Application, <u>including all</u> <u>required Attachments</u>, prior to the established deadline.

Any entity, including any individual, corporation, partnership, sole proprietorship, affiliate or other entity related thereto, that is: (a) listed as debarred by the State of New Jersey; (b) was a party to a prior agreement with the Department that was terminated or not renewed due to breach, non-performance, failure to make required payments due thereunder or otherwise for cause; or (c) owes the Department compensation of any type from a prior agreement shall be considered nonresponsive to this solicitation. The Concessionaire shall not employ, or subcontract or assign the Concession Operation to, any individual, corporation, partnership, sole proprietorship, affiliate or other entity related to a disqualified entity.

## **OPEN PUBLIC RECORDS ACT**

The Legislature finds and declares it to be the public policy of this State that:

All records shall be accessible:

government records shall be readily accessible for inspection, copying, or examination by the citizens of this State, with certain exceptions, for the protection of the public interest, and any limitations on the right of access accorded by P.L. 1963, c. 73 (C. 47:1A-1 et seq.) as amended and supplemented, shall be construed in favor of the public's right of access;

## All records public unless meets a permitted exemption:

all government records shall be subject to public access unless exempt from such access by: P.L. 1963, c. 73 (C. 47:1A-1 et seq.) as amended and supplemented; any other statute; resolution of either or both houses of the Legislature; regulation promulgated under the authority of any statute or Executive Order of the Governor; Executive Order of the Governor; Rules of Court; any federal law, federal regulation, or federal order;

## Privacy interest:

a public agency has a responsibility and an obligation to safeguard from public access a citizen's personal information with which it has been entrusted when disclosure thereof would violate the citizen's reasonable expectation of privacy; and nothing contained in P.L. 1963, c. 73 (C. 47:1A-1 et seq.), as amended and supplemented, shall be construed as affecting in any way the common law right of access to any record, including but not limited to criminal investigatory records of a law enforcement agency.

## MONETARY PROPOSAL

## **BOAT-LIVERY CONCESSION AT:**

## SWARTSWOOD STATE PARK

For the privileges listed in the Concession Agreement, the selected Bidder(s) agrees to pay to the "Treasurer-State of New Jersey" such compensation as indicated below:

**Note:** Bidders must place below the <u>highest</u> total amount of compensation they are willing to pay for the Required Period of Operation of the Initial Term of the Concession Agreement. The Monetary Proposal must be an amount equal to or greater than the minimum guaranteed compensation amount of One Thousand Three Hundred Dollars (\$1,300.00). Lesser bids shall be rejected.

I/We submit the bid proposal for total compensation in the amount of \$\_\_\_\_\_\_, (write out) \_\_\_\_\_\_\_ Dollars, to the State of New Jersey for the Initial Term of the Concession Agreement. I/we acknowledge that failure to complete this form may result in a determination that the bid proposal is materially non-responsive. I/we further acknowledge that all materially non-responsive bids will be rejected.

## PLEASE PRINT/TYPE THE FOLLOWING INFORMATION

The undersigned represents a/an (circle one): (Individual), (Partnership), or (Corporation) under the law of the:

| State of:  |  |
|--|--|
| Name of Individual/Corporation:                                |  |
| If Corporation, Name and Title of Officer Submitting Proposal: |  |
|  |  |
| Principal Address:   |  |
| 1  |  |
| Telephone Number:  |  |
|  |  |
| Authorized Signature:  |  |
| Date:  |  |

**Note:** Only one (1) bid offering will be acceptable as noted. Variations, modifications, or exceptions to the bid offering will be cause to reject the bid offering. The Department of Environmental Protection reserves the right to waive any informality in or to reject any or all bids.

## APPLICANT'S FORMAT LETTER FOR SUBMITTING PROPOSAL (Please Print or Type)

TO:STATE OF NEW JERSEY<br/>DEPARTMENT OF ENVIRONMENTAL PROTECTION<br/>OFFICE OF TRANSACTIONS AND PUBLIC LAND ADMINISTRATION<br/>PUBLIC LAND ADMINISTRATION SECTION<br/>P.O. BOX 420, MAIL CODE 401-07<br/>TRENTON, NEW JERSEY 08625-0420

To Whom It May Concern:

(I)(We) hereby offer to provide concession services at (State Park Service Location) in accordance with the terms and conditions outlined in the posted Request for Proposal # LE\_\_\_\_\_\_ and as explained in detail in this Application which, by this reference, is made a part hereof. Any exceptions to the terms and conditions outlined in the Request for Proposal are noted and discussed in the Application where appropriate.

(I)(We) certify that the information furnished herewith is true to the best of (my)(our) knowledge and belief. (I)(We) further certify that (I)(We) have read Exhibit A: Proposed Concession Agreement and understand the terms and conditions set forth therein. In addition, (I)(we) agree to complete the negotiation and execution of a Concession Agreement (Agreement) within a reasonable time if presented by the Department.

BY:

| Signature |
|-----------|
|           |
|           |
|           |
| _         |

# PART I

# **IDENTIFYING INFORMATION**

## Criteria:

# COMPLETE THE INFORMATION REQUESTED BELOW AND ATTACH A COPY OF YOUR NEW JERSEY BUSINESS REGISTRATION.

Complete this form using the format and instructions on the next two pages adding information as necessary. Duplicate this form, as needed, to identify each of the entities or people involved.

| A. | Name of Organization:   |
|----|---|
| B. | Federal ID #:   |
| C. | Form of Organization (check box):         Corporation       Partnership         Sole Proprietorship       Nonprofit |
| D. | NJ Business/Charitable Registration #:  |
| E. | Name of Owner:  |
| F. | Organization Address:   |
| G. | Organization Mailing Address:   |
| H. | Present Telephone(s): (Organization)  |
|    | (Cell)  |
| I. | Email address/es:   |
|    |   |
| J. | Structure of Organization:  |

| Name of Applicant:<br>Concession Location & Type: |                         |
|---|-------------------------|
| Names and Addresses of Owners                     | Percentage of Ownership |
|   |                         |
|   |                         |
|   |                         |
|   |                         |
|   |                         |

K. Organizational History:

If Organization is a corporation, partnership, or is individually owned, provide the following information:

- 1. Corporation ATTACH the date of incorporation; State of incorporation; president's name; vice president's name; secretary's name; treasurer's name; corporate agent for service; current status of the corporation; how many years your organization been in business under its present business name; and what other or former names your organization operated under (if any).
- 2. Partnership ATTACH the date of organization; type of partnership; name(s) of general partner(s); how many years your organization been in business under its present business name; and what other or former names your organization operated under (if any).
- **3.** Individual ATTACH the date the organization established; name of owner; how many years your organization been in business under its present business name; and what other or former names your organization operated under (if any).
- L. The following attachments must be provided as applicable for each entity/person that is a subject of a copy of the preceding form:

## ALL APPLICANTS MUST ATTACH A CURRENT COPY OF THEIR NEW JERSEY BUSINESS OR CHARITABLE REGISTRATION

- 1. For a Corporate APPLICANT and proposed corporations: <u>Articles of Incorporation and By-Laws</u>.
- 2. For APPLICANTS who are Partnerships or for proposed partnerships: <u>Partnership</u> <u>Agreements</u>.
- 3. For Non-Profit APPLICANTS: Articles of Incorporation and By-Laws

# PART II

## **EXPERIENCE AND ORGANIZATIONAL STRUCTURE**

**ATTACH** resumes for all management, supervisory, and key personnel who will be acting under the Concession Agreement. Resumes should be structured to emphasize the relevant qualifications and experience of these individuals.

In the event the Bidder must hire or otherwise engage management, supervisory, and/or key personnel after being awarded an agreement, the Bidder should include a recruitment plan for such personnel. Said recruitment plan should demonstrate that the Bidder will be able to obtain and maintain the necessary personnel within the time frame required by this RFP.

Resumes must display proficiency in the use of Microsoft Office in order to complete various mandatory reports and correspondence, including but not limited to Microsoft Excel and Word.

## **ORGANIZATIONAL STRUCTURE**

**ATTACH** an organizational chart showing the entire organization structure, including principal lines of authority between functional areas and managers. Indicate the number of employees or volunteers in each functional area and provide summary descriptions of the basic functions where those are not obvious by title. Make absolutely clear who the management decision-makers will be. Provide proposed wage levels and estimated hours per week for each position or group of positions.

The Concession shall be open for business during the Period of Operation as outlined within the Request for Proposal. In the organizational chart, the Bidder must describe a contingency plan if a manager(s) cannot work on any given day or days. Describe, in detail, which employees will operate the Concession in these instances.

## PART III

## **OPERATION PLAN**

## Criteria:

- 1. The Applicant agrees to provide the facilities and/or service(s) substantially as requested and to operate on the schedule requested.
- 2. The maintenance activities proposed are systematic and reflect a goal of sustained high quality facilities.
- **3.** Employee/volunteer staffing and training is well planned. The proposed program will provide fully trained employees/volunteers to conduct seasonal operations.
- 4. Safety, security and sanitation issues are identified and planned for thoughtfully.
- 5. The Proposal reflects an understanding of the Department's mission and a Concessionaire's place in carrying out that mission.

## A. OPERATION PLAN

THIS APPLICATION IS USED BY THE DEPARTMENT FOR BOAT-LIVERY, FOOD/NOVELTY, MOBILE FOOD, MOBILE ICE CREAM, STAND UP PADDLEBOARD, AND OTHER REQUESTS FOR PROPOSAL: Please refer to the specific Request for Proposal for operational requirements.

- (i) Describe or attach the Operation Plan for the Concession you propose to operate. The Operation Plan must include, at a minimum, the following information:
  - a. Description of the services the Bidder proposes to provide;
  - b. Proposed number of employees/volunteers and required qualifications for all specific positions;
  - c. Description of employee/volunteer training procedures;
  - d. Proposed schedule, including days and hours of operation;
  - e. Mobilization and implementation plan containing a description of how the Bidder intends to have the Concession open and operational within a reasonable time after execution of a Concession Agreement.
  - f. Proposed plans for advertising and promotion;
  - g. Proposed plans for improvements to the Concession Premises and/or Stateowned equipment through routine maintenance and repair. Provide equipment maintenance schedules, if applicable.

| Name of Applicant: |
|--------------------|
| Name of Applicant: |
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- (ii) **ATTACH** a draft menu, with prices, you propose to serve. (if applicable)
- (iii) **ATTACH** a list of services and pricing, including rental fees, for boats, paddleboards, etc. (if applicable)
- (iv) **ATTACH** a list of the types of novelty items, with prices, you propose to sell. (if applicable)

## **B.** EQUIPMENT PROGRAM

- (i) Have you inspected the State-owned equipment? (if applicable) Circle (Yes / No)
- (ii) Describe, in as much detail as possible, all equipment you intend to utilize in the execution of the proposed operation. For proposals for mobile food operations, please provide a description and attach photos of the proposed mobile units.

(iii) List types and quantities of boats, paddleboards, etc., you propose to rent (if applicable).

#### С. **FACILITY INSPECTION**

- Have you site inspected the facility/Concession Premises? Circle (Yes / No) (i)
- What condition was the facility/Concession Premises found to be in? (ii)

#### SAFETY, SECURITY AND SANITATION D.

Describe the safety, security and sanitation issues typical of this type of Concession. Describe plans for managing these issues.

## PART IV

## **FINANCIAL OPERATIONS**

## Criteria:

- 1. The Applicant has a well-founded estimation of the level of sales and expenses the business will generate, can finance the business, and has made soundly based estimates showing sufficient cash flow and reasonable returns on the investments.
- 2. The Applicant agrees to pay no less than the minimum stipulated Concession Payment as determined by the bid process and made part of the Proposed Concession Agreement.

## **BUDGET**

Provide a budget estimating the capital needed to establish the business in operation. Provide the following summary figures here:

| TOTAL              | \$ |
|--------------------|----|
| Other (Specify)    | \$ |
| Wages              | \$ |
| Inventory/Goods    | \$ |
| Equipment required | \$ |

## PART V

## **CERTIFICATION**

## **CERTIFICATION:**

I \_\_\_\_\_\_ hereby certify that:

- a) this APPLICATION does not contain any materially untrue statement or omit any material fact or contain any statement that might be misleading; and
- b) this APPLICATION is a true and fair description of myself and/or organization.

I certify that the foregoing statements made by me are true to the best of my knowledge, information and belief. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment. I further certify that I have read Exhibit A: Proposed Concession Agreement and understand the terms and conditions set forth therein.

| Signed:               | Date: |
|-----------------------|-------|
| Print Name and Title: |       |

## **CERTIFICATE OF CORPORATE OFFER (IF APPLICABLE)**

| I,  |       |       | ,        | cert    | ify       | that   | Ι            | am         | the   |
|---|-------|-------|----------|---------|-----------|--------|--------------|------------|-------|
|   | of    | the   | corpor   | ration  | named     | as     | applicant    | herein;    | that  |
| ,v  | who   | signe | d this A | Applica | ation on  | behal  | f of the con | poration   | was   |
| then  | of    | said  | corpor   | ation;  | that said | prop   | osal was d   | uly signe  | d for |
| and in behalf of the corporation by authority | ority | of it | s gover  | ning b  | ody wit   | hin tł | ne scope of  | f its corp | orate |
| powers.                                       |       |       |          |         |           |        |              |            |       |
| Signed:                                       |       |       |          |         | Dat       | e:     |              |            |       |
| Print Name and Title:                         |       |       |          |         |           |        |              |            |       |

# PREQUALIFICATION APPLICATION – PART II

# VENDOR FORMS REQUIRED FOR ALL BID PROPOSAL SUBMISSIONS

This checklist is a guide to assist bidders in locating and compiling all required forms for bid proposal submissions. Bidders are required to ensure that all required forms have been completed and submitted to the Office of Transactions and Public Land Administration, Public Land Administration Section in accordance with the Bid Specifications <u>before the Bid Proposal Due Date</u>.

Fillable versions of most forms can be found and downloaded by clicking the document links below (underlined blue text). If you choose to use the fillable version of the forms, please ensure that you have completed all forms and that each form is submitted as part of the bid proposal submission.

| VENDOR FORM   | SUBMITTED TO<br>PUBLIC LAND<br>ADMINISTRATION<br>SECTION |
|---|--|
| OFFER AND ACCEPTANCE PAGE   |  |
| OWNERSHIP DISCLOSURE FORM   |  |
| DISCLOSURE OF INVEST IGATIONS AND OTHER<br>ACTIONS INVOLVING THE VENDOR FORM                                |  |
| DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN<br>FORM   |  |
| <b><u>CERTIFICATION OF NON-INVOLVEMENT IN PROHIBITED</u></b><br><u>ACTIVITIES IN RUSSIA OR BELARUS</u>      |  |
| SOURCE DISCLOSURE FORM  |  |
| MACBRIDE PRINCIPLES FORM  |  |
| CONFIDENTIALITY AND COMMITMENT TO DEFEND  |  |
| VENDOR/BIDDER CERTIFICATION AND POLITICAL<br>CONTRIBUTION DISCLOSURE FORM – PUBLIC LAW 2005,<br>CHAPTER 271 |  |
| NOTICE TO ALL BIDDERS – SET-OFF FOR STATE TAX   |  |



TO

Ρ

#### OFFER AND ACCEPTANCE PAGE STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY - DIVISION OF PURCHASE AND PROPERTY 33 WEST STATE STREET, P.O. BOX 230 TRENTON, NEW JERSEY 08625-0230

#### **BID SOLICITATION # AND TITLE:**

| Name of Bidder/Contractor      | _                  |  |  |  |
|--------------------------------|--------------------|--|--|--|
| Address                        |                    |  |  |  |
| City, State, Zip Code          |                    |  |  |  |
| Phone Number                   |                    |  |  |  |
| Fax Number                     |                    |  |  |  |
| Email Address                  |                    |  |  |  |
| FEIN                           |                    |  |  |  |
| Print Name & Title of Authoriz | zed Representative |  |  |  |
| Signature Authoriz             | zed Representative |  |  |  |

By submitting a Quote the Bidder certifies and confirms that:

- 1. It has read, understands, and agrees to all terms, conditions, and specifications set forth in the Bid Solicitation and the State of New Jersey Standard Terms and Conditions and agrees to furnish the goods, products, and/or services in compliance with those terms;
- It has complied, and will continue to comply, with all applicable laws and regulations governing the provision of State goods and services, including the New Jersey 2. Conflicts of Interest Law, N.J.S.A. 52:13D-12 to 28;
- The price(s) and amount of its Quote have been arrived at independently and without consultation, communication or agreement with any other Contractor/Bidder or 3. any other party;
- Neither the price(s) nor the amount of its Quote, and neither the approximate price(s) nor approximate amount of this Quote, have been disclosed to any other firm 4. or person who is a Bidder or potential Bidder, and they will not be disclosed before the Quote submission;
- 5. No attempt has been made or will be made to induce any firm or person to refrain from bidding on this Contract, or to submit a Quote higher than this Quote, or to submit any intentionally high or noncompetitive Quote or other form of complementary Quote:
- The Quote is made in good faith and not pursuant to any agreement or discussion with, or inducement from, any firm or person to submit a complementary or other 6. noncompetitive Quote;
- The Bidder, its affiliates, subsidiaries, officers, directors, and employees are not, to Bidder's knowledge, currently under investigation by any governmental agency 7. for alleged conspiracy or collusion with respect to bidding on any Contract and have not in the last five (5) years been convicted or found liable for any act prohibited by state or federal law in any jurisdiction involving conspiracy or collusion with respect to bidding on any Contract;
- The Bidder's failure to meet any of the terms and conditions of the Contract shall constitute a breach and may result in suspension or debarment from further State 8. bidding; and
- A defaulting Contractor may also be liable, at the option of the State, for the difference between the Blanket P.O. price and the price bid by an alternate Vendor Q {Bidder} of the goods or services in addition to other remedies available.

#### **ACCEPTANCE OF OFFER** (For State Use Only)

The Offer above is hereby accepted and now constitutes a Contract with the State of New Jersey. The Contractor is now bound to sell the goods, products, or services in accordance with the terms of the Bid Solicitation and the State of New Jersey Standard Terms and Conditions. The Contractor shall not commence any work or provide any good, product, or service under this Contract until the Vendor Contractor complies with all requirements set forth in the Bid Solicitation and receives written notice to proceed.

Contract/Master Blanket Purchase Order Number

Award Date

Effective Date

State of New Jersey Authorized Signature



## **OWNERSHIP DISCLOSURE FORM**

STATE OF NEW JERSEY

DEPARTMENT OF THE TREASURY - DIVISION OF PURCHASE AND PROPERTY 33 WEST STATE STREET, P.O. BOX 230 TRENTON, NEW JERSEY 08625-0230

VENDOR NAME:

#### PURSUANT TO N.J.S.A. 52:25-24.2, ALL PARTIES ENTERING INTO A CONTRACT WITH THE STATE ARE REQUIRED TO PROVIDE A STATEMENT OF OWNERSHIP. Please answer all questions and complete the information requested.

|   |  |   |   |   | YES | NO |
|---|--|---|---|---|-----|----|
| The vendor is a Non-Profit E  | ntity; and therefore, r  | no disclosure is necess   | ary.  |   |     |    |
| The vendor is a Sole Proprie  | tor and therefore no   | other disclosure is ner   | ressarv   |   |     |    |
| A Sole Proprietor is a pe   |  |   |   |   |     |    |
| A limited liability compar  |  |   |   |   |     |    |
|   |  |   | <b>y</b> with individuals, partners, m<br>reater interest; and therefore, d   |   |     |    |
| corporations, partiterships, or   |  | nies owning a 10 % of g   |   | 115010501 e 15 Hecessal y.  |     |    |
| If you answered YES to Ques<br>(a) the names and addre<br>(b) all individual partners<br>(c) all members in the lin   | esses of all stockholdes in the partnership where the state of all stockholdes in the partnership where the stockhold state of a stockh | ers in the corporation who own a 10% or great   | ho own 10% or more of its sto<br>er interest therein; or,   | ck, of any class;   |     |    |
| NAME  |  |   | NAME  |   |     |    |
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| ADDRESS   |  |   | ADDRESS   |   |     |    |
| CITY  | STATE  | ZIP   | CITY  | STATE   | ZI  | 2  |
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| ADDRESS   |  |   | ADDRESS   |   |     |    |
| ADDRESS<br>CITY   | STATE  | ZIP   | CITY  | STATE   | ZII |    |
| CITY<br>For each of the corporations,   | partnerships, or limite  | d liability companies id  | CITY CITY   | on #3 above,  | YES | NO |
| CITY<br>For each of the corporations,   | partnerships, or limite<br>tners, members, stock   | d liability companies ic  | CITY  | on #3 above,  |     |    |
| CITY<br>For each of the corporations,<br>are there any individuals, part<br>a 10% or greater interest of th<br>If you answered <b>YES</b> to Ques<br>(a) the names and addre<br>(b) all individual partners<br>(c) all members in the lim                           | partnerships, or limite<br>tners, members, stock<br>nose listed business e<br>tion 4, you must discl<br>sses of all stockholder<br>in the partnership who<br>nited liability company   | ed liability companies id<br>cholders, corporations,<br>ntities?<br>ose the information req<br>is in the corporation who<br>o own a 10% or greater<br>who own a 10% or greater  | CITY<br>entified in response to Questic<br>partnerships, or limited liability<br>uested in the space below:*  | on #3 above,<br>/ companies owning<br>of any class;<br>ure(s) shall be continued u                                | YES |    |
| CITY<br>For each of the corporations,<br>are there any individuals, part<br>a 10% or greater interest of th<br>If you answered <b>YES</b> to Ques<br>(a) the names and addre<br>(b) all individual partners<br>(c) all members in the lim<br>and addresses of eve   | partnerships, or limite<br>tners, members, stock<br>nose listed business e<br>tion 4, you must discl<br>sses of all stockholder<br>in the partnership who<br>nited liability company   | ed liability companies id<br>cholders, corporations,<br>ntities?<br>ose the information req<br>is in the corporation who<br>o own a 10% or greater<br>who own a 10% or greater  | CITY<br>entified in response to Questic<br>partnerships, or limited liability<br>uested in the space below:*<br>o own 10% or more of its stock,<br>interest therein; or,<br>iter interest therein. The disclos<br>er, and/or member a 10% or gre  | on #3 above,<br>/ companies owning<br>of any class;<br>ure(s) shall be continued u                                | YES |    |
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| CITY For each of the corporations,<br>are there any individuals, part<br>a 10% or greater interest of th<br>If you answered <b>YES</b> to Ques<br>(a) the names and addre<br>(b) all individual partners<br>(c) all members in the lim<br>and addresses of eve      | partnerships, or limite<br>tners, members, stock<br>nose listed business e<br>tion 4, you must discl<br>sses of all stockholder<br>in the partnership who<br>nited liability company   | ed liability companies id<br>cholders, corporations,<br>ntities?<br>ose the information req<br>is in the corporation who<br>o own a 10% or greater<br>who own a 10% or greater  | CITY<br>entified in response to Questic<br>partnerships, or limited liability<br>uested in the space below:*<br>o own 10% or more of its stock,<br>interest therein; or,<br>iter interest therein. The disclos<br>er, and/or member a 10% or gree   | on #3 above,<br>/ companies owning<br>of any class;<br>ure(s) shall be continued u                                | YES | NO |
| CITY For each of the corporations, are there any individuals, part a 10% or greater interest of tr If you answered <b>YES</b> to Ques (a) the names and addre (b) all individual partners (c) all members in the lim and addresses of eve NAME ADDRESS ADDRESS CITY | partnerships, or limite<br>tners, members, stock<br>nose listed business e<br>tion 4, you must discl<br>sses of all stockholder<br>in the partnership who<br>nited liability company<br>ry non-corporate stock   | ed liability companies id<br>cholders, corporations,<br>ntities?<br>ose the information req<br>s in the corporation who<br>o wn a 10% or greater<br>who own a 10% or greater<br>who dwn a 10% or greater<br>cholder, individual partn | CITY         Ientified in response to Questic         partnerships, or limited liability         uested in the space below:*         o own 10% or more of its stock,         interest therein; or,         tter interest therein. The disclos         er, and/or member a 10% or green         NAME         ADDRESS         CITY  | on #3 above,<br>/ companies owning<br>of any class;<br>ure(s) shall be continued u<br>eater interest has been ide | YES | NO |
| CITY For each of the corporations, are there any individuals, part a 10% or greater interest of the names and addre (b) all individual partners (c) all members in the lim and addresses of eve NAME ADDRESS ADDRESS CITY NAME                                      | partnerships, or limite<br>tners, members, stock<br>nose listed business e<br>tion 4, you must discl<br>sses of all stockholder<br>in the partnership who<br>nited liability company<br>ry non-corporate stock   | ed liability companies id<br>cholders, corporations,<br>ntities?<br>ose the information req<br>s in the corporation who<br>o wn a 10% or greater<br>who own a 10% or greater<br>who dwn a 10% or greater<br>cholder, individual partn | CITY         Ientified in response to Questic partnerships, or limited liability         uested in the space below:*         0 own 10% or more of its stock, interest therein; or, iter interest therein. The disclos er, and/or member a 10% or green and/or member and/or member a 10% or green and/or member and/or  | on #3 above,<br>/ companies owning<br>of any class;<br>ure(s) shall be continued u<br>eater interest has been ide | YES | NO |
| CITY For each of the corporations, are there any individuals, part a 10% or greater interest of the names and addre (b) all individual partners (c) all members in the lim and addresses of eve          NAME         ADDRESS         CITY                          | partnerships, or limite<br>tners, members, stock<br>nose listed business e<br>tion 4, you must discl<br>sses of all stockholder<br>in the partnership who<br>nited liability company<br>ry non-corporate stock   | ed liability companies id<br>cholders, corporations,<br>ntities?<br>ose the information req<br>s in the corporation who<br>o wn a 10% or greater<br>who own a 10% or greater<br>who dwn a 10% or greater<br>cholder, individual partn | CITY         Ientified in response to Questic partnerships, or limited liability         uested in the space below:*         o own 10% or more of its stock, interest therein; or, iter interest therein. The disclos er, and/or member a 10% or green and/or member and/or member a 10% or green and/or member and/o | on #3 above,<br>/ companies owning<br>of any class;<br>ure(s) shall be continued u<br>eater interest has been ide | YES | NO |
| CITY For each of the corporations, are there any individuals, part a 10% or greater interest of the names and addre (b) all individual partners (c) all members in the lim and addresses of eve NAME ADDRESS ADDRESS CITY NAME                                      | partnerships, or limite<br>tners, members, stock<br>nose listed business e<br>tion 4, you must discl<br>sses of all stockholder<br>in the partnership who<br>nited liability company<br>ry non-corporate stock   | ed liability companies id<br>cholders, corporations,<br>ntities?<br>ose the information req<br>s in the corporation who<br>o wn a 10% or greater<br>who own a 10% or greater<br>who dwn a 10% or greater<br>cholder, individual partn | CITY         Ientified in response to Questic partnerships, or limited liability         uested in the space below:*         0 own 10% or more of its stock, interest therein; or, iter interest therein. The disclos er, and/or member a 10% or green and/or member and/or member a 10% or green and/or member and/or  | on #3 above,<br>/ companies owning<br>of any class;<br>ure(s) shall be continued u<br>eater interest has been ide | YES | NO |

As an alternative to completing this form, a Vendor 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 publicly at 10% 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% 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% or greater beneficial interest.\*

<sup>\*</sup> Attach additional sheets if necessary

## DISCLOSURE OF INVESTIGATIONS AND OTHER ACTIONS INVOLVING THE VENDOR FORM



STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY - DIVISION OF PURCHASE AND PROPERTY 33 WEST STATE STREET, P.O. BOX 230 TRENTON, NEW JERSEY 08625-0230

**BID SOLICITATION # AND TITLE:** 

VENDOR NAME:

PART 1 PLEASE LIST ALL OFFICERS/DIRECTORS OF THE VENDOR BELOW.

| NAME    |       |     |  |
|---------|-------|-----|--|
| TITLE   |       |     |  |
| ADDRESS |       |     |  |
| ADDRESS |       |     |  |
| CITY    | STATE | ZIP |  |
|         |       |     |  |

| NAME    |       |     |  |
|---------|-------|-----|--|
| TITLE   |       |     |  |
| ADDRESS |       |     |  |
| ADDRESS |       |     |  |
| CITY    | STATE | ZIP |  |

| NAME    |       |     |  |
|---------|-------|-----|--|
| TITLE   |       |     |  |
| ADDRESS |       |     |  |
| ADDRESS |       |     |  |
| CITY    | STATE | ZIP |  |

| NAME    |       |     |  |
|---------|-------|-----|--|
| TITLE   |       |     |  |
| ADDRESS |       |     |  |
| ADDRESS |       |     |  |
| CITY    | STATE | ZIP |  |
|         |       |     |  |

\*Attach Additional Sheets If Necessary.

#### PART 2 PLEASE REFER TO THE PERSONS LISTED ABOVE AND/OR THE PERSONS AND/OR ENTITIES LISTED ON THE OWNERSHIP DISCLOSURE FORM WHEN ANSWERING THESE QUESTIONS.

- 1. Has 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?
- 2. 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?
- 3. Are there currently any pending criminal matters or debarment proceedings in which the firm and/or its officers and/or managers are involved?
- 4. 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?
- 5. Has any person or entity listed on this form or its attachments been involved as an adverse party to a public sector client in any civil litigation or administrative proceeding in the past five (5) years?

#### IF ANY OF THE ANSWERS TO QUESTIONS 1-5 ARE "YES", PLEASE PROVIDE THE REQUESTED INFORMATION IN PART 3. IF ALL OF THE ANSWERS TO QUESTIONS 1-5 ARE "NO", NO FURTHER ACTION IS NEEDED; PLEASE SIGN AND DATE THE FORM.

#### PART 3

#### DESCRIPTION OF THE INVESTIGATION OR LITIGATION, ETC.

If you answered "YES" to any of questions 1 - 5 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 and a brief description of the action, the date of inception, current status, and if applicable, the disposition.

| PERSON OR ENTITY NAME          |                |  |
|--------------------------------|----------------|--|
| CONTACT NAME                   | PHONE NUMBER   |  |
| CASE CAPTION                   |                |  |
| INCEPTION OF THE INVESTIGATION | CURRENT STATUS |  |
| SUMMARY OF INVESTIGATION       |                |  |
|                                |                |  |
| -                              |                |  |

\*Attach Additional Sheets If Necessary.

#### **CERTIFICATION**

I, the undersigned, certify that I am authorized to execute this certification on behalf of the Vendor, that the foregoing information and any attachments hereto, to the best of my knowledge are true and complete. I acknowledge that the State of New Jersey is relying on the information contained herein, and that the Vendor is under a continuing obligation from the date of this certification through the completion of any contract(s) with the State to notify the State 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 may be subject to criminal prosecution under the law, and it will constitute a material breach of my contract(s) with the State to declare any contract(s) resulting from this certification void and unenforceable.

Signature



## DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN FORM

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY - DIVISION OF PURCHASE AND PROPERTY 33 WEST STATE STREET, P.O. BOX 230 TRENTON, NEW JERSEY 08625-0230

#### **BID SOLICITATION # AND TITLE:**

#### VENDOR NAME:

Pursuant to N.J.S.A. 52:32-57, et seq. (P.L. 2012, c.25 and P.L. 2021, c.4) any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract must certify that neither the person nor entity, nor any of its parents, subsidiaries, or affiliates, is identified on the New Jersey Department of the Treasury's Chapter 25 List as a person or entity engaged in investment activities in Iran. The Chapter 25 list is found on the Division's website at <a href="https://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf">https://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf</a>. Vendors/Bidders must review this list prior to completing the below certification. If the Director of the Division of Purchase and Property finds a person or entity to be in violation of the 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.

#### CHECK THE APPROPRIATE BOX

I certify, pursuant to N.J.S.A. 52:32-57, et seq. (P.L. 2012, c.25 and P.L. 2021, c.4), that neither the Vendor/Bidder listed above nor any of its parents, subsidiaries, or affiliates is listed on the New Jersey Department of the Treasury's Chapter 25 List of entities determined to be engaged in prohibited activities in Iran.

#### 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 New Jersey Department of the Treasury's Chapter 25 List. I will provide a detailed, accurate and precise description of the activities of the Vendor/Bidder, or one of its parents, subsidiaries or affiliates, has engaged in regarding investment activities in Iran by completing the information requested below.

| Entity Engaged in Investment Activities |  |  |
|---|--|--|
| Relationship to Vendor/ Bidder          |  |  |
| Description of Activities               |  |  |
|   |  |  |
|   |  |  |
| Duration of Engagement                  |  |  |
| Anticipated Cessation Date              |  |  |
| *Attach Additional Sheets If Necessary. |  |  |

#### CERTIFICATION

I, the undersigned, certify that I am authorized to execute this certification on behalf of the Vendor, that the foregoing information and any attachments hereto, to the best of my knowledge are true and complete. I acknowledge that the State of New Jersey is relying on the information contained herein, and that the Vendor is under a continuing obligation from the date of this certification through the completion of any contract(s) with the State to notify the State 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 may be subject to criminal prosecution under the law, and it will constitute a material breach of my contract(s) with the State to declare any contract(s) resulting from this certification void and unenforceable.

Signature

Date



## CERTIFICATION OF NON-INVOLVEMENT IN PROHIBITED ACTIVITIES IN RUSSIA OR BELARUS

Pursuant to N.J.S.A. 52:32-60.1, et seq. (L. 2022, c. 3) any person or entity (hereinafter "Vendori") that seeks to enter into or renew a contract with a State agency for the provision of goods or services, or the purchase of bonds or other obligations, must complete the certification below indicating whether or not the Vendor is identified on the Office of Foreign Assets Control (OFAC) Specially Designated Nationals and Blocked Persons list. available here: https://sanctionssearch.ofac.treas.gov/. If the Department of the Treasury finds that a Vendor has made a certification in violation of the law, it shall take any 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.

I, the undersigned, certify that I have read the definition of "Vendor" below, and have reviewed the Office of Foreign Assets Control (OFAC) Specially Designated Nationals and Blocked Persons list, and having done so certify:

## (Check the Appropriate Box)

A. That the Vendor is not identified on the <u>OFAC Specially Designated Nationals and Blocked Persons list on</u> <u>account of activity related to Russia and/or Belarus</u>.

OR

B. That I am unable to certify as to "A" above, because the Vendor is identified on the <u>OFAC Specially</u> <u>Designated Nationals and Blocked Persons list on account of activity related to Russia and/or Belarus</u>.

## OR

 $\bigcirc$ 

C. That I am unable to certify as to "A" above, because the Vendor is identified on the <u>OFAC Specially</u> <u>Designated Nationals and Blocked Persons list</u>. However, the Vendor is engaged in activity related to Russia and/or Belarus consistent with federal law, regulation, license or exemption. A detailed description of how the Vendor's activity related to Russia and/or Belarus is consistent with federal law is set forth below.

(Attach Additional Sheets If Necessary.)

| Signature of Vendor's Authorized Representative            | Date                   |  |
|--|------------------------|--|
| Print Name and Title of Vendor's Authorized Representative | Vendor's FEIN          |  |
| Vendor's Name  | Vendor's Phone Number  |  |
| Vendor's Address (Street Address)                          | Vendor's Fax Number    |  |
| Vendor's Address (City/State/Zip Code)                     | Vendor's Email Address |  |

<sup>&</sup>lt;sup>i</sup> Vendor means: (1) A natural person, corporation, company, limited partnership, limited liability partnership, limited liability company, business association, sole proprietorship, joint venture, partnership, society, trust, or any other nongovernmental entity, organization, or group; (2) Any governmental entity or instrumentality of a government, including a multilateral development institution, as defined in Section 1701(c)(3) of the International Financial Institutions Act, 22 U.S.C. 262r(c)(3); or (3) Any parent, successor, subunit, direct or indirect subsidiary, or any entity under common ownership or control with, any entity described in paragraph (1) or (2).



## MACBRIDE PRINCIPLES FORM

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY - DIVISION OF PURCHASE AND PROPERTY 33 WEST STATE STREET, P.O. BOX 230 TRENTON, NEW JERSEY 08625-0230

#### **BID SOLICITATION # AND TITLE:**

#### VENDOR NAME:

Pursuant to Public Law 1995, c. 134, a responsible Vendor/Bidder is required to provide a certification in compliance with the MacBride Principles and Northern Ireland Act of 1989. Pursuant to N.J.S.A. 52:34-12.2, Vendor/Bidder must complete the certification below by checking one of the two options listed below and signing where indicated. If a Vendor/Bidder that would otherwise be awarded a purchase, contract or agreement does not complete the certification, then the Director may determine, in accordance with applicable law and rules, that it is in the best interest of the State to award the purchase, contract or agreement to another Vendor/ Bidder that has completed the certification and has submitted a bid within five (5) percent of the most advantageous bid. If the Director finds contractors to be in violation of the principles that are the subject of this law, he/she shall take such 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.

I, the undersigned, on behalf the Vendor/Bidder, certify pursuant to N.J.S.A. 52:34-12.2 that:

#### CHECK THE APPROPRIATE BOX



The Vendor/Bidder has no business operations in Northern Ireland; or

#### OR

The Vendor/Bidder will take lawful steps in good faith to conduct any business operations it has in Northern Ireland in accordance with the MacBride principles of nondiscrimination in employment as set forth in section 2 of P.L. 1987, c. 177 (<u>N.J.S.A.</u> 52:18A-89.5) and in conformance with the United Kingdom's Fair Employment (Northern Ireland) Act of 1989, and permit independent monitoring of its compliance with those principles.

#### **CERTIFICATION**

I, the undersigned, certify that I am authorized to execute this certification on behalf of the Vendor, that the foregoing information and any attachments hereto, to the best of my knowledge are true and complete. I acknowledge that the State of New Jersey is relying on the information contained herein, and that the Vendor is under a continuing obligation from the date of this certification through the completion of any contract(s) with the State to notify the State 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 may be subject to criminal prosecution under the law, and it will constitute a material breach of my contract(s) with the State to declare any contract(s) resulting from this certification void and unenforceable.

Signature

Date



## **CONFIDENTIALITY AND COMMITMENT TO DEFEND**

STATE OF NEW JERSEY

DEPARTMENT OF THE TREASURY - DIVISION OF PURCHASE AND PROPERTY 33 WEST STATE STREET, P.O. BOX 230 TRENTON, NEW JERSEY 08625-0230

#### BID SOLICITATION # & TITLE:

The Bid Solicitation advises Bidders (hereinafter "Company") that the submitted "Quotes can be released to the public pursuant to N.J.A.C. 17:12-1.2(b) and (c), or under the New Jersey Open Public Records Act (OPRA), N.J.S.A. 47:1A-1.1 et seq., or the common law right to know." In the event that the Division receives a request for documents related to above referenced Bid Solicitation, in accordance with its statutory obligations under the New Jersey Open Public Records Act and/or the common law right to know, it is the Division's intent to fulfill the request for records which may include a copy of the Company's Quote.

If Company objects to the disclosure of any portions of the Quote, the Company must advise the Division and must attach a detailed statement clearly identifying those sections of the Quote that Company claims are exempt from disclosure. In requesting any exemption, Company must identify the specific statutory or other legal justification for each requested exemption and the factual basis that supports said exemption. In addition, if Company requests any exemption to disclosure of the Quote based upon claims of confidential/proprietary information and trade secrets (setting forth the nature of the formula, process, pattern, device or compilation), in accordance with *Ingersoll-Rand Co. v. Ciavatta*, 110 N.J. 609 (1988), Company <u>must</u> also indicate the following with respect to the requested exemption:

- (1) the extent to which the information is known outside the owner's business;
- (2) the extent to which it is known by employees and others involved with your business;
- (3) the extent of the measures taken by your firm to guard the secrecy of the information;
- (4) the value of the information to your firm and your competitors;
- (5) the amount of effort or money expended by your firm in developing the information; and
- (6) the ease or difficulty with which the information could be properly acquired or duplicated by others.

Further, if the Quote includes any copyright notices, within five business days, the Division will be permitted to release a copy of the Quote document(s) unless Company serves the Division with an order from a court of competent jurisdiction precluding such release.

The State reserves the right to make the final determination as to what is and is not subject to public disclosure under OPRA and/or the common law right to know, and will advise the Company accordingly. Please note that the State will not honor any claim of confidential, proprietary, trade secret, and/or copyright material that is not supported by a specific statutory or legal justification provided by the Company. The State will not honor any attempts by the Company to designate the entire Quote as proprietary, confidential and/or to claim copyright protection for its entire Quote.

Accordingly, in order to assist the Division with the fulfillment of potential document requests, please select one of the following:

The Company's Quote <u>does not include</u> any confidential, proprietary and/or trade secrets; and therefore, the Company does not request any redactions be made prior to the release of the documents.

#### OR

The Company's Quote <u>does include</u> confidential, proprietary and/or trade secrets; and therefore, the Company requests that certain portions of the Quote be redacted prior to the release of the documents.

The requested redactions are set forth in the attached statement which specifically identifies the portions of the Quote by section, page number, paragraph and or line; and identifies the specific statutory or other legal reason for each requested exemption.

In the event of any challenge to the Company's assertion of confidential/proprietary information, the Company shall be solely responsible for defending its designation. Company agrees that it shall defend and cooperate in the defense of an action against the State of New Jersey arising from or related to the non-disclosure, due to the Company's request, of documents submitted to the State of New Jersey, and relating to a Quote submitted by the Company in response to the above referenced Bid Solicitation, which was the subject of a request for government records under the New Jersey Open Public Records Act, N.J.S.A. 47:1A-1 et seq. ("OPRA"), or the common law right to know. The Company further agrees to indemnify and hold harmless the State against any judgments, costs, or attorneys' fees assessed against the State in connection with any action arising from, or related to, the non-disclosure, due to the Company's request, of documents submitted to the State, which are the subject of a request for government records under OPRA.

The Company makes the forgoing agreement with the understanding that the State may immediately disclose any documents withheld without further notice if the Company ceases to cooperate in the defense of an action against the State arising from or related to the above described non-disclosure due to the Company's request, and will disclose such documents withheld if so ordered by a court of competent jurisdiction.

The undersigned certifies that s/he is duly authorized to make this commitment on behalf of the Company.

Company Name

Signature

Date

|                                 | DESCRIPTION OF VENDOR REQUESTED QUOTE REDACTIONS* |                          |                                    |  |  |
|---------------------------------|---|--------------------------|------------------------------------|--|--|
| Quote Section, Form or Document | Page Number                                       | Paragraph<br>and/or line | Description of item to be redacted | Statutory or other legal reason for each requested exemption |  |
|                                 |   |                          |                                    |  |  |
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|                                 |   |                          |                                    |  |  |

\* Home address and/or unlisted telephone/cell phone numbers must be listed on this form if they are to be redacted.



## STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF PURCHASE AND PROPERTY

33 WEST STATE STREET, P.O. BOX 0230 TRENTON, NEW JERSEY 08625-0230

## VENDOR/BIDDER CERTIFICATION AND POLITICAL CONTRIBUTION DISCLOSURE FORM PUBLIC LAW 2005, CHAPTER 271

#### CONTRACT #:

#### **VENDOR/BIDDER:**

At least ten (10) days <u>prior</u> to entering into the above-referenced Contract, the Vendor/Bidder must complete this Certification and Political Contribution Disclosure Form in accordance with the directions below and submit it to the State contact for the referenced Contract.

**NOTE** that the disclosure requirements under Public Law 2005, Chapter 271 are separate and different from the disclosure requirements under Public Law 2005, Chapter 51 (formerly Executive Order 134). Although no Vendor/Bidder will be precluded from entering into a contract by any information submitted on this form, a Vendor's/Bidder's failure to fully, accurately and truthfully complete this form and submit it to the appropriate State agency may result in the imposition of fines by the New Jersey Election Law Enforcement Commission.

## DISCLOSURE

The following is the required Vendor/Bidder Disclosure of all Reportable Contributions made in the twelve (12) months prior to and including the date of signing of this Certification and Disclosure to: (i) any State, county, or municipal committee of a political party, legislative leadership committee, candidate committee of a candidate for, or holder of, a State elective office, or (ii) any entity that is also defined as a "continuing political committee" under N.J.S.A. 19:44A-3(n) and N.J.A.C. 19:25-1.

The Vendor/Bidder is required to disclose Reportable Contributions by: the Vendor/Bidder itself; all persons or other business entities owning or controlling more than 10% of the profits of the Vendor/Bidder or more than 10% of the stock of the Vendor/Bidder, if the Vendor/Bidder is a corporation for profit; a spouse or child living with a natural person that is a Vendor/Bidder; all of the principals, partners, officers or directors of the Vendor/Contractor and all of their spouses; any subsidiaries directly or indirectly controlled by the Vendor/Bidder; and any political organization organized under section 527 of the Internal Revenue Code that is directly or indirectly controlled by the Vendor/Bidder, other than a candidate committee, election fund, or political party committee.

"Reportable Contributions" are those contributions that are required to be reported by the recipient under the "New Jersey Campaign Contributions and Expenditures Reporting Act," P.L. 1973, c.83 (C.19:44A-1 et seq.), and implementing regulations set forth at <u>N.J.A.C.</u> 19:25-10.1 et seq. As of January 1, 2005, contributions in excess of \$300 during a reporting period are deemed "reportable."

| Name and Address of Committee to which a Reportable     | Date of      | Amount of    | Contributor's |  |
|---|--------------|--------------|---------------|--|
| Contribution was made                                   | Reportable   | Reportable   | Name          |  |
|   | Contribution | Contribution |               |  |
| Indicate "NONE" if no Reportable Contribution was made. |              |              |               |  |
|   |              | \$           |               |  |
|   |              | \$           |               |  |
|   |              | \$           |               |  |
|   |              | \$           |               |  |
| Attach additional sheets if necessary                   |              |              |               |  |

## **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 State of New Jersey is relying on the information contained herein, and that the Vendor/Bidder is under a <u>continuing obligation</u> from the date of this certification through the completion of any contract(s) with the State to notify the State 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 <u>criminal prosecution</u> under the law, and it will constitute a material breach of **my** agreement(s) with the State to declare any contract(s) resulting from this certification void and unenforceable.

Signature

Date



## SOURCE DISCLOSURE FORM

STATE OF NEW JERSEY

DEPARTMENT OF THE TREASURY - DIVISION OF PURCHASE AND PROPERTY 33 WEST STATE STREET, P.O. BOX 230 TRENTON, NEW JERSEY 08625-0230

#### **BID SOLICITATION # AND TITLE:**

#### VENDOR NAME:

The Vendor/Bidder submits this Form in response to a Bid Solicitation issued by the State of New Jersey, Department of the Treasury, Division of Purchase and Property, in accordance with the requirements of N.J.S.A. 52:34-13.2.

#### <u> PART 1</u>

All services will be performed by the Contractor and Subcontractors in the United States. Skip Part 2.

Services will be performed by the Contractor and/or Subcontractors outside of the United States. Complete Part 2.

#### PART 2

Where services will be performed outside of the United States, please list every country where services will be performed by the Contractor and all Subcontractors. If any of the services cannot be performed within the United States, the Contractor shall state, with specificity, the reasons why the services cannot be performed in the United States. The Director of the Division of Purchase and Property will review this justification and if deemed sufficient, the Director may seek the Treasurer's approval.

| Name of Contractor /<br>Sub-contractor | Performance Location<br>by Country | Description of Service(s) to be Performed Outside of the United States * | Reason Why the Service(s) Cannot be Performed in the United States * |
|--|------------------------------------|--|--|
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\*Attach additional sheets if necessary to describe which service(s), if any, will be performed outside of the U.S. and the reason(s) why the service(s) cannot be performed in the U.S.

Any changes to the information set forth in this Form during the term of any Contract awarded under the referenced Bid Solicitation or extension thereof shall be immediately reported by the Contractor to the Director of the Division of Purchase and Property. If during the term of the Contract, the Contractor shifts the location of services outside the United States, without a prior written determination by the Director, the Contractor shall be deemed in breach of Contract, and the Contract will be subject to termination for cause pursuant to the State of New Jersey Standard Terms and Conditions.

#### **CERTIFICATION**

I, the undersigned, certify that I am authorized to execute this certification on behalf of the Vendor, that the foregoing information and any attachments hereto, to the best of my knowledge are true and complete. I acknowledge that the State of New Jersey is relying on the information contained herein, and that the Vendor is under a continuing obligation from the date of this certification through the completion of any contract(s) with the State to notify the State 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 may be subject to criminal prosecution under the law, and it will constitute a material breach of my contract(s) with the State to declare any contract(s) resulting from this certification void and unenforceable.

Signature

Date

## NOTICE TO ALL BIDDERS SET-OFF FOR STATE TAX

Please be advised that, pursuant to <u>P.L.</u> 1995, <u>c.</u> 159, effective January 1, 1996, and notwithstanding any provision of the law to the contrary, whenever any taxpayer, partnership or S corporation under contract to provide goods or services or construction projects to the State of New Jersey or its agencies or instrumentalities, including the legislative and judicial branches of State government, is entitled to payment for those goods or services at the same time a taxpayer, partner or shareholder of that entity is indebted for any State tax, the Director of the Division of Taxation shall seek to set off that taxpayer's or shareholder's share of the payment due the taxpayer, partnership or S corporation. The amount set off shall not allow for the deduction of any expenses or other deductions which might be attributable to the taxpayer, partner or shareholder subject to set-off under this act.

The Director of the Division of Taxation shall give notice of the set-off to the taxpayer and provide an opportunity for a hearing within 30 days of such notice under the procedures for protests established under <u>R.S.</u> 54:49-18. No requests for conference, protest, or subsequent appeal to the Tax Court from any protest under this section shall stay the collection of the indebtedness. Interest that may be payable by the State, pursuant to <u>P.L.</u> 1987, <u>c.</u> 184 (c. 52:32-32 <u>et seq</u>.), to the taxpayer shall be stayed.

## "I HAVE BEEN ADVISED OF THIS NOTICE"

| COMPANY   |      |      |
|-----------|------|------|
| SIGNATURE | <br> | <br> |
| NAME      | <br> | <br> |
| TITLE     |      | <br> |
| DATE      |      |      |

# VENDOR FORMS REQUIRED TO BE SUBMITTED AFTER AWARD OF AGREEMENT

The following forms are not required to be submitted with the bid proposal submission. However, if the Bidder is awarded an Agreement, the forms must be submitted before the Agreement will be executed by Department. It is acceptable for Bidders to submit these forms with the bid proposal submission.

Fillable versions of these forms can be found and downloaded by clicking the document links below (underlined blue text).

| VENDOR FORM   | SUBMITTED TO<br>PUBLIC LAND<br>ADMINISTRATION<br>SECTION |
|---|--|
| TWO-YEAR CHAPTER 51 /EXECUTIVE ORDER 333<br>VENDOR CERTIFICAITON AND DISCLOSURE OF<br>POLITICAL CONTRIBUTIONS FOR NON-FAIR AND OPEN<br>CONTRACTS      |  |
| PROOF OF AFFIRMATIVE ACTION COMPLIANCE – <u>Submit</u><br><u>one of the following</u> :   |  |
| NEW JERSEY CERTIFICATE OF EMPLOYEE<br>INFORMATION REPORT  |  |
| FEDERAL LETTER OF APPROVAL VERIFYING A<br>FEDERALLY APPROVED OR SANCTIONED<br>AFFIRMATIVE ACTION PROGRAM (Dated within one<br>year of the submission) |  |
| AFFIRMATIVE ACTION EMPLOYEE INFORMATION<br>REPORT (FORM AA302)  |  |

## INFORMATION AND INSTRUCTIONS For Completing the "Two-Year Chapter 51/Executive Order 333 Vendor Certification and Disclosure of Political Contributions for Non-Fair and Open Contracts" Form

## **Background Information**

New Jersey law insulates the negotiation and award of State contracts from political contributions that posed a risk of improper influence, purchase of access or the appearance thereof. P.L.2005, c.51, as amended by the Elections Transparency Act, P.L.2023, c.30, codified at N.J.S.A. 19:44A-20.13 to 20.25 ("Chapter 51") and Executive Order No. 333 (2023).

### For Contracts Awarded Pursuant to a Fair and Open Process

Pursuant to P.L.2005, c.51, as amended by the Elections Transparency Act, P.L.2023, c.30, codified at N.J.S.A. 19:44A-20.13 to 20.25 ("Chapter 51"), and Executive Order No. 333 (2023), contracts awarded pursuant to a fair and open process do <u>not</u> require a certification or disclosure of any solicitation or contribution of money, or pledge of contribution, including in-kind contributions.

### For Contracts Awarded Pursuant to a Non-Fair and Open Process

Pursuant to P.L.2005, c.51, as amended by the Elections Transparency Act, P.L.2023, c.30, codified at N.J.S.A. 19:44A-20.13 to 20.25 ("Chapter 51"), and Executive Order No. 333 (2023), the State shall not enter into a Contract to procure services or any material, supplies or equipment, or to acquire, sell, or lease any land or building from any Business Entity, where the value of the transaction exceeds \$17,500, if that Business Entity has solicited or made any contribution of money, or pledge of contribution, including in-kind contributions, to a Continuing Political Committee or to a candidate committee and/or election fund of any candidate for or holder of the public office of Governor during certain specified time periods.

## Definitions:

A "fair and open process" means, at a minimum, that the contract shall be: publicly advertised in newspapers or on the Internet website maintained by the public entity in sufficient time to give notice in advance of the contract; awarded under a process that provides for public solicitation of proposals or qualifications and awarded and disclosed under criteria established in writing by the public entity prior to the solicitation of proposals or qualifications; and publicly opened and announced when awarded. A contract awarded under a process that includes public bidding or competitive contracting pursuant to State contracts law shall constitute a fair and open process. N.J.S.A. 19:44A-20.23 (P.L.2005, c.51, rev. P.L.2023, c.30).

A "Continuing Political Committee" means any political organization (a) organized under section 527 of the Internal Revenue Code; and (b) consisting of any group of two or more persons acting jointly, or any corporation, partnership, or any other incorporated or unincorporated association, including a political club, political action committee, civic association or other organization, which in any calendar year contributes or expects to contribute at least \$5,500 to the aid or promotion of the candidacy of an individual, or of the candidacies of individuals, for elective public office, or the passage or defeat of a public question or public questions, and which may be expected to make contributions toward such aid or promotion or passage or defeat during a subsequent election, provided that the group, corporation, partnership, association or other organization has been determined to be a continuing political committee by the New Jersey Election Law Enforcement Commission under N.J.S.A.19:44A-8(b)(8). A Continuing Political Committee does not include a "political party committee," a "legislative leadership committee," or an "independent expenditure committee," as defined in N.J.S.A. 19:44A-3.

## **Two-Year Certification Process**

Upon approval by the State Chapter 51 Review Unit, the Certification and Disclosure of Political Contributions form **for Non-Fair and Open Contracts** is valid for a two (2) year period. Thus, if a Business Entity and/or vendor receives approval on January 1, 2022, the certification expiration date would be December 31, 2023. Any change in the Business Entity's ownership status and/or political contributions during the two-year period will require the submission of new Chapter 51 forms to the contracting State Agency. **Please note that it is the Business Entity's responsibility to file new forms with the State should these changes occur**.

## **State Agency Instructions**

Prior to the awarding of a contract, the State Agency should first use NJSTART (<u>https://www.njstart.gov/bso/</u>) to check the status of a Business Entity's Chapter 51 certification before contacting the Review Unit's mailbox at <u>CD134@treas.nj.gov</u>. If the State Agency does not find any Chapter 51 Certification information in NJSTART and/or the Business Entity is not registered in NJSTART, then the State Agency should send an e-mail to <u>CD134@treas.nj.gov</u> to verify the certification status of the Business Entity. If the response is that the Business Entity is NOT within an approved two-year period, then forms must be obtained from the Business Entity and forwarded for review. If the response is that the Business Entity is within an approved two-year period, then the response so stating should be placed with the bid/contract documentation for the subject project.

## Instructions for Completing the Form

### "For State Use Only" box

This box/section should **<u>only</u>** be filled out by the contracting State agency.

The contracting State agency must check the box indicating whether this is a fair and open contract. Please note that if the answer is **YES**, the <u>Chapter 51 form is not required</u> and should not be submitted as per the Elections Transparency Act, P.L.2023, c.30, codified at N.J.S.A. 19:44A-20.13 to 20.25 ("Chapter 51") and Executive Order No. 333 (2023).

NOTE: Parts 1, 2 and 3 of the form should be filled out the Business Entity.

### Part 1: BUSINESS ENTITY INFORMATION

Business Name – Enter the full legal name of the Business Entity, including trade name if applicable.

Address, City, State, Zip and Phone Number – Enter the Business Entity's street address, city, state, zip code and telephone number.

Vendor Email – Enter the Business Entity's primary email address.

Vendor FEIN – Please enter the Business Entity's Federal Employment Identification Number.

**Business Type –** Check the appropriate box that represents the Business Entity's type of business formation.

**Listing of officers, shareholders, partners or members –** Based on the box checked for the business type, provide the corresponding information. (A complete list must be provided.)

## Part 2: DISCLOSURE OF CONTRIBUTIONS

Read the two (2) types of political contributions that require disclosure and, if applicable, provide the recipient's information.

Name of Recipient - Enter the full legal name of the recipient.

Address of Recipient - Enter the recipient's street address.

**Date of Contribution –** Indicate the date the contribution was given.

Amount of Contribution – Enter the dollar amount of the contribution.

**Type of Contribution –** Select the type of contribution from the examples given.

Contributor's Name - Enter the full name of the contributor.

**Relationship of the Contributor to the Vendor –** Indicate the relationship of the contributor to the Business Entity. (e.g., officer or shareholder of the company, partner, member, parent company of the vendor, subsidiary of the vendor, etc.)

**NOTE:** If form is being completed electronically, click "Add a Contribution" to enter additional contributions. Otherwise, please attach additional pages as necessary.

Check the box under the recipient information within Part 2 if no reportable contributions have been solicited or made by the Business Entity. **This box** <u>must</u> be checked if there are no contributions to report.

## Part 3: CERTIFICATION

Check Box A if the representative completing the Certification and Disclosure form is doing so on behalf of the Business Entity <u>and all</u> individuals and/or entities whose contributions are attributable to the Business Entity. <u>No</u> additional Certification and Disclosure forms are required if BOX A is checked.

Check Box B if the representative completing the Certification and Disclosure form is doing so on behalf of the Business Entity <u>and all</u> individuals and/or entities whose contributions are attributable to the Business Entity <u>with the exception</u> of those individuals and/or entities that submit their own separate form. For example, the representative is not signing on behalf of the vice president of a corporation, but all others. The vice president completes a separate Certification and Disclosure form. Additional Certification and Disclosure forms are required from those individuals and/or entities that the representative is not signing on behalf of and are included with the business entity's submittal.

Check Box C if the representative completing the Certification and Disclosure form is doing so on behalf of the Business Entity only. Additional Certification and Disclosure forms are required from all individuals and/or entities whose contributions are attributable to the Business Entity and must be included with the Business Entity submittal.

Check Box D when a sole proprietor is completing the Certification and Disclosure form or when an individual or entity whose contributions are attributable to the Business Entity is completing a separate Certification and Disclosure form.

### Read the five statements of certification prior to signing.

The representative authorized to complete the Certification and Disclosure form must sign and print her/his name, title or position and enter the date.

### State Agency Procedure for Submitting Form(s)

The State Agency should submit the completed and signed Two-Year Vendor Certification and Disclosure forms either electronically to: <u>cd134@treas.nj.gov</u> or regular mail at: Chapter 51 Review Unit, P.O. Box 230, 33 West State Street, Trenton, NJ 08625-0230. Original forms should remain with the State Agency and copies should be sent to the Chapter 51 Review Unit.

### **Business Entity Procedure for Submitting Form(s)**

- The Business Entity should return this form to the contracting State Agency.
- The Business Entity should also submit the Certification and Disclosure form directly to the Chapter 51 review Unit only when:
- The Business Entity is approaching its two-year certification expiration date and is seeking certification renewal;
- The Business Entity had a change in its ownership structure; OR
- The Business Entity made any contributions during the period in which its last two-year certification was in effect, or during the term of a contract with a State Agency.

#### **Questions & Information**

Questions regarding Public Law 2005, Chapter 51 (N.J.S.A. 19:44A-20.13) as amended by the Elections Transparency Act, P.L.2023, c.30, codified at N.J.S.A. 19:44A-20.13 to 20.25 ("Chapter 51") and Executive Order No. 333 (2023) or may be submitted electronically through the Division of Purchase and Property website at: <u>https://www.state.nj.us/treas/purchase/eo333questions.shtml</u>.

Reference materials and forms are posted on the Political Contributions Compliance website at: <u>https://www.state.nj.us/</u> <u>treasury/purchase/execorder333.shtml</u>.



Two-Year Chapter 51 /Executive Order 333 Vendor Certification and Disclosure of Political Contributions for Non-Fair and Open Contracts

|  | FOR STATE   | USE ONLY   |   |
|--|---|--|---|
| Solicitation, RFP, or Contract No  |   | Award  | Amount  |
| Is the contract being awarded pursuant   |   |  |   |
| Description of Services  |   |  |   |
| State Agency Name  | Contac  | ct Person  |   |
| Phone Number   | Contac  | t Email  |   |
| Check if the Contract / Agreement is Bei   | ng Funded Using F   | HWA Funds  |   |
| Part 1: Business Entity Information  |   |  | Please check if requesting recertification $\Box$                                     |
| Full Legal Business Name   |   |  |   |
| (1   | including trade na  |  | )   |
| Address  |   |  |   |
| City   | State   | Zip  | Phone   |
| Vendor Email   | Vendor FEIN (   | SS# if sole prop   | rietor/natural person)  |
| <ul> <li>Corporation: LIST ALL OFFICERS and any</li> <li>Professional Corporation: LIST ALL OFFIC</li> <li>Partnership: LIST ALL PARTNERS with an</li> <li>Limited Liability Company: LIST ALL MEN</li> <li>Sole Proprietor</li> <li>Note: "Officers" means President, Vice Presid</li> <li>Officer or Chief Financial Officer of a corporat</li> <li>Also Note: "N/A will not be accepted as a val</li> </ul> | CERS <u>and</u> ALL SHAR<br>by equity interest<br>IBERS with any equ<br>ent with senior man<br>ion, or any person | EHOLDERS "sole<br>ity interest<br>nagement responsi<br>routinely performir | bility, Secretary, Treasurer, Chief Executive<br>ng such functions for a corporation. |
| All Officers of a Corporation or P   |   |  | eater shareholders of a corporation<br>or <u>all</u> shareholders of a PC             |
| All Equity partners of a Partner   | ship  | A  | II Equity members of a LLC  |
| If you need additional space for listing of Offi   | <br>cers, Shareholders,   | Partners or Memb   | ers, please attach separate page.   |

# Part 2: Disclosure of Contributions by the Business Entity or any person or entity whose contributions are attributable to the Business Entity.

# **1**. Report below all contributions solicited or made during the 4 years immediately preceding the commencement of negotiations or submission of a proposal to any:

Political organization organized under Section 527 of the Internal Revenue Code and which also meets the definition of a continuing political committee as defined in <u>N.J.S.A.</u> 19:44A-3(n).

# 2. Report below all contributions solicited or made during the 5 ½ years immediately preceding the commencement of negotiations or submission of a proposal to any:

Candidate Committee for or Election Fund of any Gubernatorial candidate.

| Full Legal Name of Recipient                               |                        |  |  |  |  |  |  |  |
|--|------------------------|--|--|--|--|--|--|--|
| Address of Recipient                                       |                        |  |  |  |  |  |  |  |
| Date of Contribution                                       | Amount of Contribution |  |  |  |  |  |  |  |
| Type of Contribution (i.e. currency, check, loan, in-kind) |                        |  |  |  |  |  |  |  |
| Contributor Name   |                        |  |  |  |  |  |  |  |
| If this form is not being com                              | e Vendor               |  |  |  |  |  |  |  |
| Remove Contribution  |                        |  |  |  |  |  |  |  |
| Add a Contribution   |                        |  |  |  |  |  |  |  |

# Check this box only if no political contributions have been solicited or made by the business entity or any person or entity whose contributions are attributable to the business entity.

Part 3: Certification (Check one box only)

- (A) I am certifying on behalf of the business entity <u>and all</u> individuals and/or entities whose contributions are attributable to the business entity as listed on Page 1 under **Part 1: Vendor Information**.
- (B) ☐ I am certifying on behalf of the business entity <u>and all</u> individuals and/or entities whose contributions are attributable to the business entity as listed on Page 1 under <u>Part 1: Vendor Information</u>, except for the individuals and/or entities who are submitting separate Certification and Disclosure forms which are included with this submittal.
- (C) I am certifying on behalf of the business entity only; any remaining persons or entities whose contributions are attributable to the business entity (as listed on Page 1) have completed separate Certification and Disclosure forms which are included with this submittal.
- (D) I am certifying as an individual or entity whose contributions are attributable to the business entity.

I hereby certify as follows:

- 1. I have read the Information and Instructions accompanying this form prior to completing the certification on behalf of the business entity.
- 2. All reportable contributions made by or attributable to the business entity have been listed above.

# 3. The business entity has not knowingly solicited or made any contribution of money, pledge of contribution, including in-kind contributions, that would bar the award of a contract to the business entity unless otherwise disclosed above:

a) Within the 18 months immediately preceding the commencement of negotiations or submission of a proposal for the contract or agreement to a candidate committee or election fund of any candidate for the public office of Governor or election fund of holder of public office of Governor.

b) During the term of office of the current Governor to a candidate committee or election fund of a holder of the public office of Governor.

c) Within the 18 months immediately preceding the last day of the sitting Governor's first term of office to a candidate committee or election fund of the incumbent Governor.

4. During the term During the term of the contract/agreement the business entity has a continuing responsibility to report, by submitting a new Certification and Disclosure form, any contribution it solicits or makes to any candidate committee or election fund of any candidate or holder of the public office of Governor.

The business entity further acknowledges that contributions solicited or made during the term of the contract/agreement may be determined to be a material breach of the contract/agreement.

5. During the two-year certification period the business entity will report any changes in its ownership structure (including the appointment of an officer within a corporation) by submitting a new Certification and Disclosure form indicating the new owner(s) and reporting said owner(s) contributions.

I certify that the foregoing statements in Parts 1, 2 and 3 are true. I am aware that if any of the statements are willfully false, I may be subject to punishment.

| Signed Name    | Print Name |
|----------------|------------|
| Title/Position | Date       |

#### Procedure for Submitting Form(s)

The contracting State Agency should submit this form to the Chapter 51 Review Unit when it has been required as part of a contracting process. The contracting State Agency should submit a copy of the completed and signed form(s), to the Chapter 51 Unit and retain the original for their records.

**The Business Entity should return this form to the contracting State Agency.** The Business Entity can submit this form directly to the Chapter 51 Review Unit <u>only</u> when it:

- Is approaching its two-year certification expiration date and wishes to renew certification;
- Had a change in ownership structure; OR
- Made any contributions during the period in which its last two-year certification was in effect, or during the term of a contract with a State Agency.

Forms should be submitted either electronically to:<u>cd134@treas.nj.gov</u>, or regular mail at: Chapter 51 Review Unit, P.O. Box 230, 33 West State Street, Trenton, NJ 08625.

## INSTRUCTIONS FOR COMPLETING THE EMPLOYEE INFORMATION REPORT (FORM AA302)

**IMPORTANT:** READ THE FOLLOWING INSTRUCTIONS CAREFULLY BEFORE COMPLETING THE FORM. PRINT OR TYPE ALL INFORMATION. FAILURE TO PROPERLY COMPLETE THE ENTIRE FORM <u>AND TO</u> <u>SUBMIT THE REQUIRED \$150.00 NON-REFUNDABLE FEE MAY DELAY ISSUANCE OF YOUR CERTIFICATE</u>. IF YOU HAVE A CURRENT CERTIFICATE OF EMPLOYEE INFORMATION REPORT, DO NOT COMPLETE THIS FORM UNLESS YOUR ARE RENEWING A CERTIFICATE THAT IS DUE FOR EXPIRATION. DO NOT COMPLETE THIS FORM FOR CONSTRUCTION CONTRACT AWARDS.

**ITEM 1** - Enter the Federal Identification Number assigned by the Internal Revenue Service, or if a Federal Employer Identification Number has been applied for, or if your business is such that you have not or will not receive a Federal Employer Identification Number, enter the Social Security Number of the owner or of one partner, in the case of a partnership.

**ITEM 2** - Check the box appropriate to your TYPE OF BUSINESS. If you are engaged in more than one type of business check the predominate one. If you are a manufacturer deriving more than 50% of your receipts from your own retail outlets, check "Retail".

**ITEM 3** - Enter the total "number" of employees in the entire company, including part-time employees. This number shall include all facilities in the entire firm or corporation.

**ITEM 4** - Enter the name by which the company is identified and the company email. If there is more than one company name, enter the predominate one.

**ITEM 5** - Enter the physical location of the company. Include City, County, State and Zip Code.

**ITEM 6** - Enter the name of any parent or affiliated company including the City, County, State and Zip Code. If there is none, so indicate by entering "None" or N/A.

**ITEM 7** - Check the box appropriate to your type of company establishment. "Single-establishment Employer" shall include an employer whose business is conducted at only one physical location. "Multi-establishment Employer" shall include an employer whose business is conducted at more than one location.

**ITEM 8** - If "Multi-establishment" was entered in item 8, enter the number of establishments within the State of New Jersey.

**ITEM 9** - Enter the total number of employees at the establishment being awarded the contract.

**ITEM 10** - Enter the name of the Public Agency awarding the contract. Include City, County, State and Zip Code. This is not applicable if you are renewing a current Certificate.

**ITEM 11** - Enter the appropriate figures on all lines and in all columns. THIS SHALL ONLY INCLUDE EMPLOYMENT DATA FROM THE FACILITY THAT IS BEING AWARDED THE CONTRACT. DO NOT list the same employee in more than one job category. **DO NOT attach an EEO-1 Report**.

#### Racial/Ethnic Groups will be defined:

**Black:** Not of Hispanic origin. Persons having origin in any of the Black racial groups of Africa.

**Hispanic:** Persons of Mexican, Puerto Rican, Cuban, or Central or South American or other Spanish culture or origin, regardless of race.

**American Indian or Alaskan Native:** Persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

**Asian or Pacific Islander:** Persons having origin in any of the original peoples of the Far East, Southeast Asia, the Indian Sub-continent or the Pacific Islands. This area includes for example, China, Japan, Korea, the Phillippine Islands and Samoa.

**Non-Minority:** Any Persons not identified in any of the aforementioned Racial/Ethnic Groups.

2 or More Races: Persons identifying as 2 or More Races.

**ITEM 12** - Check the appropriate box. If the race or ethnic group information was not obtained by 1 or 2, specify by what other means this was done in 3.

**ITEM 13** - Enter the dates of the payroll period used to prepare the employment data presented in Item 12.

**ITEM 14** - If this is the first time an Employee Information Report has been submitted for this company, check block "Yes".

**ITEM 15** - If the answer to Item 15 is "No", enter the date when the last Employee Information Report was submitted by this company.

**ITEM 16** - Print or type the name of the person completing the form. Include the signature, title and date.

**ITEM 17** - Enter the physical location where the form is being completed. Include City, State, Zip Code and Phone Number.

#### TYPE OR PRINT IN SHARP BALL POINT PEN

THE VENDOR IS TO COMPLETE THE EMPLOYEE INFORMATION REPORT FORM (AA302) AND RETAIN A COPY FOR THE VENDOR'S OWN FILES. THE VENDOR SHOULD ALSO SUBMIT A COPY TO THE PUBLIC AGENCY AWARDING THE CONTRACT IF THIS IS YOUR FIRST REPORT; AND FORWARD ONE COPY <u>WITH A CHECK IN THE AMOUNT OF \$150.00 PAYABLE TO</u> THE TREASURER, STATE OF NEW JERSEY(FEE IS NON-REFUNDABLE) TO:

NJ Department of the Treasury

Division of Purchase & Property Contract Compliance Audit Unit

> EEO Monitoring Program P.O. Box 206

Trenton, New Jersey 08625-0206

Telephone No. (609) 292-5473

Form AA302 Rev. 02/22

## **STATE OF NEW JERSEY**

Division of Purchase & Property Contract Compliance Audit Unit

EEO Monitoring Program

## **EMPLOYEE INFORMATION REPORT**

**IMPORTANT**-READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING FORM. FAILURE TO PROPERLY COMPLETE THE ENTIRE FORM AND TO SUBMIT THE REQUIRED \$150.00 FEE MAY DELAY ISSUANCE OF YOUR CERTIFICATE. DO NOT SUBMIT EEO-1 REPORT FOR SECTION B, ITEM 11. For Instructions on completing the form, go to: https://www.nj.gov/treasury/contract\_compliance/documents/pdf/forms/aa302ins.pdf

|  | SE                                     | CTION A - COM     | PANY IDENTIFIC    | ATION   |                                       |  |  |
|--|--|-------------------|-------------------|---|---------------------------------------|--|--|
| 1. FID. NO. OR SOCIAL SECURITY   |  | ESS<br>2. SERVICE | 3. WHOLESALE      | 3. TOTAL NO. EMPLOYEES IN THE ENTIRE<br>COMPANY |                                       |  |  |
| 4. COMPANY NAME  | l                                      |                   |                   | COMPANY E-MAIL                                  |                                       |  |  |
| 5. STREET  | CITY                                   |                   | COUNTY            | STATE   | ZIP CODE                              |  |  |
| 6. NAME OF PARENT OR AFFILIA   | TED COMPANY (IF NON                    | E, SO INDICATE)   | CITY              | STATE   | ZIP CODE                              |  |  |
| 7. CHECK ONE: IS THE COMPANY<br>8. IF MULTI-ESTABLISHMENT<br>9. TOTAL NUMBER OF EMPLOYED<br>10. PUBLIC AGENCY AWARDING | EMPLOYER, STATE<br>ES AT ESTABLISHMENT |                   | F ESTABLISHMEN    | TS IN NJ  | SHMENT EMPLOYER                       |  |  |
| Official Use Only  | DATE RECEIVED                          | INAUG.DATE        | ASSIGN            | ED CERTIFICATION                                | INUMBER                               |  |  |
| 11. Report all permanent, temporary a  | und part-time employees ON             |                   | MPLOYMENT DA      |   | lines and in all columns. Where there |  |  |
| no employees in a particular category,<br>AN EEO-1 REPORT.   |  |                   |                   |   |                                       |  |  |
| JOB ALL<br>CATEGORIES EMPLOY   | I                                      | PERMANENT MINO    | RITY/NON-MINORITY | Y EMPLOYEE BREAK                                | DOWN                                  |  |  |

| CATEGORIES   | EMPLOY<br>EES  |          |                                  |           | PERM         | ANENT MI            | NORITY/N   | ON-MIN     | ORITY EM              | IPLOYEE                                | BREAKDOW                   | /N             |   |            |                       |  |
|--|--|----------|----------------------------------|-----------|--------------|---------------------|------------|------------|-----------------------|--|----------------------------|----------------|---|------------|-----------------------|--|
|  | COL. 1   | COL. 2   | COL. 2 COL. 3 ******* MALE****** |           |              |                     |            |            |                       |  | ***** <b>FEMALE</b> ****** |                |   |            |                       |  |
| Total  |  | Male     | Female                           |           |              |                     |            |            |                       |  |                            |                |   |            |                       |  |
|  | (Cols.2<br>&3)   |          |                                  | BLACK     | HISPANIC     | AMER<br>INDIAN      | ASIAN      | NON<br>MIN | 2 OR<br>MORE<br>RACES | BLACK                                  | HISPANIC                   | AMER<br>INDIAN | ASIAN   | NON<br>MIN | 2 OR<br>MORE<br>RACES |  |
| Officials/<br>Managers                               |  |          |                                  |           |              |                     |            |            |                       |  |                            |                |   |            |                       |  |
| Professionals  |  |          |                                  |           |              |                     |            |            |                       |  |                            |                |   |            |                       |  |
| Technicians  |  |          |                                  |           |              |                     |            |            |                       |  |                            |                |   |            |                       |  |
| Sales Workers  |  |          |                                  |           |              |                     |            |            |                       |  |                            |                |   |            |                       |  |
| Office & Clerical                                    |  |          |                                  |           |              |                     |            |            |                       |  |                            |                |   |            |                       |  |
| Craftworkers<br>(Skilled)                            |  |          |                                  |           |              |                     |            |            |                       |  |                            |                |   |            |                       |  |
| Operatives<br>(Semi-skilled)                         |  |          |                                  |           |              |                     |            |            |                       |  |                            |                |   |            |                       |  |
| Laborers<br>(Unskilled)                              |  |          |                                  |           |              |                     |            |            |                       |  |                            |                |   |            |                       |  |
| Service Workers                                      |  |          |                                  |           |              |                     |            |            |                       |  |                            |                |   |            |                       |  |
| TOTAL  |  |          |                                  |           |              |                     |            |            |                       |  |                            |                |   |            |                       |  |
| Total employment<br>From previous<br>Report (if any) |  |          |                                  |           |              |                     |            |            |                       |  |                            |                |   |            |                       |  |
|  |  |          | The                              | data belo | w shall NOT  | be inclu            | ded in the | e figure   | es for the            | appropr                                | iate catego                | ories abo      | ove.  |            |                       |  |
| Temporary & Part-<br>Time Employees                  |  |          |                                  |           |              |                     |            |            |                       |  |                            |                |   |            |                       |  |
| 12. HOW WAS  |  | TION AS  |                                  |           | NIC GROUP    |                     | N B OBTA   | AINED?     | Empl                  | THIS THE<br>loyee Infor<br>ort Submitt | mation                     |                | . IF NO, D<br>EPORT SU<br>MO. <sub>1</sub> DA | BMITTE     | D                     |  |
| 13. DATES OF<br>From                                 |  | L PERIOD | USED                             | То        | То:          |                     |            |            | 1. YES 2. NO          |  |                            |                |   |            | -                     |  |
|  |  |          |                                  | SE        | CTION C - SI | GNATURE /           | AND IDEN   | TIFICAT    | ON                    |  |                            |                | · · ·   |            |                       |  |
| 16. NAME OF P  | NAME OF PERSON COMPLETING FORM (Print or Type) SIGNATURE |          |                                  |           | TI           | TITLE DATE MO DAY Y |            |            |                       | Y YEA                                  | R                          |                |   |            |                       |  |
| 17. ADDRESS  | NO. & ST   | REET     | CI                               | ГҮ        | 1            | COUN                | NTY        | ST         | ATE Z                 | IP CODE                                | PHONE (A                   | AREA CO        | DE, NO.,E                                     | XTENSIO    | DN)                   |  |

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#### EXHIBIT A

#### 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

#### 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

Employee Information Report Form AA302 (electronically provided by the Division and distributed to the public agency through the Division's 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**.