REQUEST FOR PROPOSALS

TAKEOVER OF
268 FAIRMOUNT AVENUE
JERSEY CITY, NEW JERSEY 07306
[A SEVEN (7) UNIT AFFORDABLE HOUSING PROJECT]

PROPOSAL DUE DATE: MAY 28, 2013
This Request for Proposals (RFP) is for the takeover of 268 Fairmount Avenue in Jersey City, a seven (7) unit affordable housing project. The project was partially rehabilitated in 2004 and 2009. It consists of seven (7) two bedroom units. All units are to remain affordable to eligible households for a minimum period of thirty (30) years from December 2004. The City of Jersey City (“City”), by its Department of Housing, Economic Development and Commerce (“HEDC”) Division of Community Development (DCD), is seeking proposals from qualified Applicants for the project described herein.

All proposals shall be submitted on or before **May 28, 2013**.

All proposals are prepared at the cost and expense of the Applicants. The City will not be responsible for paying for any of the costs or expenses associated with the preparation or submission of proposals.

The Applicant is required to comply with requirements of L. 1975, c. 127, the Law Against Discrimination and with N.J.A.C. 17:27-1.1 et seq., the Affirmative Action Rules.

This RFP constitutes an invitation to submit proposals to the City. The City reserves the right to protect the best interests of the City of Jersey City (City) and Department of Housing, Economic Development, and Commerce (HEDC) Division of Community Development (DCD), to waive any technical error, to reject any proposal, or any part thereof, for any reason whatsoever or to reject all proposals for any reason whatsoever.

This RFP package will be available effective **April 23, 2013** on the City’s website @ [http://jerseycitynj.gov/pub-contracts.aspx](http://jerseycitynj.gov/pub-contracts.aspx). There is no cost to
download this package.

During the application preparation period, no oral interpretation of any requirements will be given to any prospective Applicant. However, written requests for interpretation or modifications to the adopted procedures will be accepted until May 21, 2013 and should emailed to: Darice@jcnj.org with a copy Hairstonr@jcnj.org. A written response will be made within three (3) business days and circulated to all parties who have received Request for Proposals.

All proposals must be in writing and must be delivered no later than 4:00 p.m. on the day of May 28, 2013. Proposals are not subject to a proposal submission fee. Proposals may be submitted in person, or may be sent by U.S. certified mail return receipt requested, or by private courier service. Mail proposals to: Darice Toon, Director, Jersey City Division of Community Development, 30 Montgomery Street, Room 404, Jersey City, New Jersey 07302.

Post marked proposals dated on the reception date but received after the reception date will be deemed late and rejected. The City shall not be responsible for the loss, non-delivery, or physical condition of proposals sent by mail or courier service.

Applicants must supply five (5) copies of their proposal.

For further information, contact Darice Toon, Director, Jersey City Division of Community Development at 201-547-6910.
OBJECTIVE

The City of Jersey City ("City") through its Department of Housing, Economic Development & Commerce, Division of Community Development ("DCD") is seeking proposals from interested entities experienced in managing affordable housing to: (1) take title from the City to real property located at 268 Fairmount Avenue ("the Property"); (2) to maintain and operate the property’s seven (7) affordable rental units in compliance with all local and federal requirements.

BACKGROUND

The real property in question is located at 268 Fairmount Avenue in Jersey City and the building located thereon contains seven (7) units of affordable rental housing. It is the City’s information and belief that three (3) of the units may be vacant and in need of minor renovations which would be part of the successful Applicant’s responsibility to undertake.

In 2004, the City of Jersey City executed an agreement with the Fairmount Housing Corporation (the former owner of the property) to provide federal HOME Program funds in the amount of $299,152 for the rehabilitation and refinancing of 268 Fairmount Avenue. The agreement obligated all seven (7) residential units at the property to remain restricted as affordable to low income households for a period of thirty (30) years to year 2034. A second agreement was executed in 2009 utilizing HOME funds in the amount of $140,900. The total amount of HOME funds invested in this project totals $440,052.

SITE DESCRIPTION
General Description
The property is located at 268 Fairmount Avenue in Jersey City, on the following tax lot:

Block: 15003 Lot: 29
The property is a brick aluminum siding walk-up apartment building on Fairmount Avenue in the Bergen Hill section of Jersey City. The property consists of seven (7) two-bedroom units. As of March 2013, four (4) units are occupied with tenants and three (3) units are vacant. The layout is as follows:

<table>
<thead>
<tr>
<th>#Units</th>
<th>Type</th>
<th>Rooms-Bedrooms-Baths</th>
<th>Square Ft.</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>2 Bedrooms</td>
<td>4-2-1</td>
<td>706</td>
</tr>
</tbody>
</table>

The total lot size according to the City’s Tax records is 30 X 115 or .079 acres (3450 sq. ft.).

### Current Real Estate Taxes and Assessments

<table>
<thead>
<tr>
<th>Lot 29</th>
</tr>
</thead>
<tbody>
<tr>
<td>Land</td>
</tr>
<tr>
<td>Improvements</td>
</tr>
<tr>
<td>Total</td>
</tr>
<tr>
<td>Real Estate Taxes</td>
</tr>
</tbody>
</table>

### Projected Gross Income

<table>
<thead>
<tr>
<th>Status</th>
<th>#</th>
<th>Type</th>
<th>Actual Rent</th>
<th>Annualized</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupied</td>
<td>1L</td>
<td>2BD</td>
<td>644</td>
<td>7,728</td>
</tr>
<tr>
<td>Occupied</td>
<td>1R</td>
<td>2BD</td>
<td>644</td>
<td>7,728</td>
</tr>
<tr>
<td>Vacant</td>
<td>2L</td>
<td>2BD</td>
<td>662</td>
<td>7,944</td>
</tr>
<tr>
<td>Occupied</td>
<td>2R</td>
<td>2BD</td>
<td>603</td>
<td>7,236</td>
</tr>
<tr>
<td>Vacant</td>
<td>3L</td>
<td>2BD</td>
<td>662</td>
<td>7,944</td>
</tr>
<tr>
<td>Occupied</td>
<td>3R</td>
<td>2BD</td>
<td>600</td>
<td></td>
</tr>
<tr>
<td>----------</td>
<td>-----</td>
<td>-----</td>
<td>------</td>
<td></td>
</tr>
<tr>
<td>Vacant</td>
<td>Basement</td>
<td>2BD</td>
<td>662</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td>4,477</td>
<td></td>
</tr>
</tbody>
</table>

The foregoing rents were projected using the U.S. Department of Housing and Urban Development’s (HUD) 2012 maximum rent limits. While the above projected rents are based on maximum allowable rents, current rents paid by existing tenants are lower.

**Deed Restrictions**

The property has a deed restriction since December 2004 for a minimum period of thirty (30) thirty years to ensure that the rental units remain affordable to low income eligible households. In addition the units must remain in compliance with the requirements of the HOME program (24 CFR Part 92). For additional details, go to HUD’s website: [www.hud.gov](http://www.hud.gov).

**Environmental**

The City makes no representation as to the environmental condition of the Property other than to state that to the best of its knowledge there are no known adverse environmental conditions.

**PROJECT DESCRIPTION, TAKEOVER GOALS AND OBJECTIVES**

As set forth above, the City of Jersey City is seeking proposals from financially qualified Applicants experienced in managing and operating affordable housing developments to take over the Property to ensure continued affordability of the seven (7) rental housing units within the building at the Property.

The successful Applicant will be required to adhere to all terms and conditions of affordability controls and deed restrictions applicable to this property, unless specifically waived by the City in writing.
RFP RESPONSES

The City will evaluate and score all proposals with the evaluation criteria described below. To facilitate a timely and comprehensive evaluation of all submitted proposals, it is essential that all Applicants adhere to the desired response format, detailed below. The City requires a standard format for all proposals submitted to ensure that clear, concise and complete statements are available from each Applicant in response to requirements. The City is not under any obligation to search for clarification through additional or unformatted information submitted as a supplement to the formatted response. Where a proposal contains conflicting information, the City at its option may either request clarification or may consider the information unresponsive.

Each proposal submitted must address, in sequence, the areas described below. The exact presentation and layout format of proposals is as follows:

1) Title Page
2) Table of Contents
3) Executive Summary
4) Background / Capacity
5) Proposed Plan of Action / Timelines
6) Assumptions
7) Appendices / Audited Financial Statement / Administrative Questionnaire

The information requested by the sectional format described above is further defined.

Title Page
The proposal should include a title page, which identifies the project; the Applicant’s Firm, name of the Applicant’s primary contact, address, telephone number, fax number and email address.
Table of Contents
The Applicant's proposal should include a Table of Contents, which lists the titles and page numbers for each major topic and sub-topic contained in the proposal.

Executive Summary
This section should include a summary of the key points and highlights of the Applicant's response and should illustrate why the applicant is best suited for the project.

Background / Capacity
In this section the Applicant should provide a brief history of its company and how its experience is analogous to and qualifies them for the requirements of the RFP. The citation of specific projects that are currently being worked on or have been completed in the past is strongly encouraged.

Applicant must indicate what type of business organization it is e.g., corporation, partnership, sole proprietorship, or non-profit organization. If the Applicant is a subsidiary or direct or indirect affiliate of any other organization, it must indicate in its proposal the name of the related organization and the relationship. If the Applicant is a partnership, it shall list the names of all partners. If the Applicant is a corporation it shall list the names of those stockholders holding 10% or more of the outstanding stock.

Proposed Plan of Action/Timelines for Implementation
In this section the Applicant must provide a detailed description of its plan of action with delineated tasks and accompanying timelines necessary to accomplish the objectives stated in the RFP. At minimum, the action plan must include the following:

- Complete repairs to vacant units (if required)
- Ensure that all units meet Housing Quality Standards (HQS)
- Other tasks as necessary to ensure the financial viability of the project
Assumptions
In this section, Applicants should state any assumptions being made relating to any part of the proposal or project strategy.

Appendices / Audited Financial Statement / Administrative Questionnaire
This section should include at minimum a complete applicant questionnaire for each of the key personnel responsible for the project. In addition, the Applicant must provide a copy of the organization’s most recent audited financial statements. Applicants may include additional information they deem necessary other than that which has been requested directly in the RFP.

PROJECT SELECTION

Proposals will be reviewed for compliance with the terms and conditions of the RFP. Any proposals not responsive to the RFP will be rejected.

Proposals will be evaluated by the Jersey City Department of Housing, Economic Development, and Commerce (HEDC) Director’s Office and the Division of Community Development (DCD).

There will be four (4) broad criteria by which proposals will be evaluated. Each criterion will bear a certain weight, and the extent to which the criterion is met or exceeded will be determined by the committee.

1. **Required Format (10 points)**
   The City will determine the extent to which the proposal is presented in the required format (Title page, Table of contents, etc).

2. **Appropriateness of Entity (30 points)**
   The City will determine the extent to which the proposed entity meets the objectives of the RFP and is a suitable partner for the City as well as an applicant’s prior history with City sponsored affordable housing projects.
3. **Timeliness of Project (20 points)**

   Proposals featuring achievable time frames for completion of takeover will be viewed favorably.

4. **Prior Experience with Similar Projects (40 points)**

   The prior experience of the Applicant with similar projects will weigh heavily. As a result, proposals which include documentation (including references) of successful projects in organizations of similar size and complexity will be viewed more favorably. In this section, the committee will also consider the financial capability and experience of the Applicants.

The committee will evaluate each proposal in accordance with the criteria above.

**GENERAL NOTES, CONDITIONS, TERMS AND LIMITATIONS**

Applicants are responsible for inspecting the property first-hand and for ascertaining the current condition of the property. The Division of Community Development will serve as the liaison between the Applicant and the Jersey City Real Estate Department in arranging the inspections. Conveyance of the property will be in its “AS IS” and “WHERE IS” condition.

All title, legal, survey or other costs associated with the transfer of the Property to the Applicant will be at the selected Applicant’s sole cost and expense.

No commission for brokerage or any other fee or compensation shall be due and payable by the City.

The City shall not pay any costs or losses of any kind whatsoever incurred or suffered by any Applicant at any time, including the cost of responding to this RFP.

The City reserves the right at any time to reject any or all proposals and / or to withdraw this RFP. In addition, the City retains the right to make modifications
or additions to the RFP.

This RFP is a solicitation of proposals only and does not represent an offer, obligation or agreement, whatsoever on the part of the City.

Selection of an applicant's proposal will not create any rights on the applicant's part whatsoever until the execution by the City of a contract.

The City in its sole discretion will have the option to terminate negotiations at any time if not satisfied with the progress of negotiations.

**Additional Conditions of Sale**

(a) No proposal shall be accepted from any Applicant who has previously purchased a property from the City and has breached any of the terms and conditions of that purchase contract.

(b) No proposal shall be accepted from any Applicant if that Applicant is or has been delinquent in the payment of taxes or other municipal charges on any other property which the Applicant owns in the City.

(c) No proposal shall be accepted from any Applicant who owns other property in the City for which there are violations of the Property Maintenance Code and/or Uniform Construction Code, which violations have not been corrected at the time proposals are accepted.

(d) PLEASE TAKE NOTICE all Applicants shall submit an affidavit, under oath setting forth the following:

   (i) That the Applicant is not a person who has previously breached a contract for the purchase of property from the City.

   (ii) That the Applicant is not the owner of any other property in the City that is delinquent in the payment of taxes or other municipal charges.

   (iii) That the Applicant is not the owner of other property in the City for which there are violations of the Property Maintenance Code and/or Uniform Construction Code, which violations have not been corrected at the time proposals are accepted.
(iv) Such affidavit shall contain the addresses and block and lot numbers of all properties that the Applicant owns in the City.

(e) Such affidavit shall be submitted with the response to this RFP.
EEO/AFFIRMATIVE ACTION REQUIREMENTS

Goods, Professional Services and General Service Contracts

Questions in reference to EEO/AA Requirements For Goods, Professional Services and General Service Contracts should be directed to:

Jeana F. Abuan
Affirmative Action Officer, Public Agency Compliance Officer
Department of Administration
Office of Equal Opportunity/Affirmative action
280 Grove Street Room-103
Jersey City NJ 07302
Tel. #201-547-4533
Fax# 201-547-5088
E-mail Address: abuanJ@jcnj.org
EXHIBIT A
MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE
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.
EXHIBIT A (Continuation)

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](http://www.state.nj.us/treasury/contract_compliance))

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

The undersigned vendor certifies on their company's receipt, knowledge and commitment to comply with:

EXHIBIT A
N.J.S.A. 10:5-31 and N.J.A.C. 17:27
MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE
Goods, Professional Services and General Service Contracts
(Mandatory Affirmative Action Language)

The undersigned vendor further agrees to furnish the required forms of evidence and understands that their contract/company's bid shall be rejected as non-responsive if said contractor fails to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27.

Representative's Name/Title (Print):

[Signature]

Name of Company:

Tel. No.: Date:

[Printed Name]

[Printed Title]
Sample Letter of Federally Approved Affirmative Action Plan

U.S. Department of Labor
Employment Standards Administration
Office of Federal Contract Compliance Program

Newark Area Office
134 Evergreen Place, Fourth Floor
East Orange, NJ 07018

February 27, 19__

Reply to the attention of:

President

Dear

Our recent compliance review of your establishment’s equal employment opportunity policies and practices was completed on February 27, 19__.

We found no apparent deficiencies or violations of Executive Order 11346, as amended. Section 503 of the Rehabilitation Act of 1973 or of 38 USC 2012 (the Vietnam Era Veterans’ Readjustment Assistance Act). Accordingly, your establishment is deemed to be in compliance with these laws based on the material reviewed.

The Office of Federal Contract Compliance Progress sincerely appreciated the cooperation and courtesies extended by you and your staff during the conduct of the compliance review.

Sincerely,

Area Office Director
ISSUANCE OF CERTIFICATE OF EMPLOYEE INFORMATION REPORT

Enclosed is your Certificate of Employee information Report (hereinafter referred to as the “Certificate” and issued based on the Employee Information Report (AA-302) form completed by a representative of your company or firm. Immediately upon receipt, this certificate should be forwarded to the person in your company or firm responsible for ensuring equal employment opportunity and/or overseeing the company or firm’s contracts with public agencies. Typically, this person may be your company or firm’s Human Resources Manager, Equal Employment Opportunity Officer or Contract Administrator. If you do not know to whom the certificate should be forward, kindly forward it to the head of your company or firm. Copies of the certificate should also be distributed to all facilities of your company or firm who engage in bidding on public contracts in New Jersey and who use the same federal identification number and company name. The certificate should be retained in your records until the date it expires. This is very important since a request for a duplicate/replacement certificate will result in a $75.00 fee.

On future successful bids on public contracts, your company or firm must present a photocopy of the certificate to the public agency awarding the contract after notification of the award but prior to execution of a goods and services or professional services contract. Failure to present the certificate within the time limits prescribed may result in the awarded contract being rescinded in accordance with N.J.A.C. 17:27-4.3b.

Please be advised that this certificate has been approved only for the time periods stated on the certificate. As early as ninety (90) days prior to its expiration, the Division will forward a renewal notification. Upon the Division’s receipt of a properly completed renewal application and $150.00 application fee, it will issue a renewal certificate. In addition, representatives from the Division may conduct periodic visits and/or request additional information to monitor and evaluate the continued equal employment opportunity compliance of your company or firm. Moreover, the Division may provide your company or firm with technical assistance, as required. Please be sure to notify the Division immediately if your company’s federal identification number, name or address changes.

If you have any questions, please call (609) 292-5473 and a representative will be available to assist you.

Enclosure(s) (AA-01 Rev. 11/11)
CERTIFICATE OF EMPLOYEE INFORMATION REPORT

This is to certify that the contractor/recipient below has submitted an Employee Information Report pursuant to N.J.A.C. 17:27-1.1 at sec., and the State Treasurer has approved said report. This approval will remain in effect for the period of _______________________.

The Great State of New Jersey

State Treasurer

VOID

VOID
Sample Employee Information Report Form AA302

STATE OF NEW JERSEY
Division of Purchase & Property
Contract Compliance Audit Unit
CEO 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 DELAYISSUANCE OF YOUR CERTIFICATE. DO NOT SUBMIT FORM IF REQUIRED FOR SECTION B, ITEM 11. FOR INSTRUCTION ON COMPLETING THE FORM, SEE:

http://www.state.nj.us/bca/afas/audit/reporting/section.b/forma302.pdf

SECTION A - COMPANY IDENTIFICATION

1. FED. NO. OR SOCIAL SECURITY:
2. TYPE OF BUSINESS:
   - 1. MANUF.
   - 2. SERVICE
   - 3. WHOLESALE
   - 4. RETAIL
   - 5. OTHER
3. TOTAL NO. EMPLOYEES IN THE ENTERPRISE

4. COMPANY NAME:
5. STREET: CITY: COUNTY:
   STATE: ZIP CODE:

6. NAME OF PARENT OR AFFILIATED COMPANY (IF NONE, SO INDICATE): CITY: STATE: ZIP CODE:

7. CHECK ONE OF THE COMPANY:
   - SINGLE-ESTABLISHMENT EMPLOYER
   - MULTI-ESTABLISHMENT EMPLOYER

8. IF MULTIPLE ESTABLISHMENT EMPLOYER, STATE THE NUMBER OF ESTABLISHMENTS IN NJ: _______________

9. TOTAL NUMBER OF EMPLOYEES AT ESTABLISHMENT WHICH HAS BEEN AWARDED THE CONTRACT: _______________

10. PUBLIC AGENCY AWARDING CONTRACT:
     CITY: COUNTY: STATE: ZIP CODE:

Official Use Only:
DATE RECEIVED:
ASSIGNED CERTIFICATION NUMBER:

SECTION B - EMPLOYMENT DATA

11. Report all permanent, temporary and part-time employees ON YOUR OWN PAYROLL. Enter the appropriate figures on all lines in all columns. Where there are no employees in a particular category, enter zero. Include all employees, not just those in minority/non-minority categories, in columns 1, 2, 3. SEND REPORT ANNOY:

OFFICIALS/MANAGERS
Professionals
Technicians
Sales Workers
Office & Clerical
Craftsmen (Skilled)
Operatives (Semi-Skilled)
Laborers (Unskilled)
Service Workers
TOTAL

The data below shall NOT be included in the figures for the appropriate categories above.

12. HOW WAS INFORMATION AS TO RACE OR ETHNIC GROUP IN SECTION A OBTAINED:
   - 1. Visual Survey
   - 2. Employment Record
   - 3. Other (Specify):

13. ARE THERE ANY TEMPORARY & PART-TIME EMPLOYEES:
   - YES
   - NO

14. IS THIS THE FIRST EMPLOYEE INFORMATION REPORT SUBMITTED?
   - YES
   - NO

15. IF NO, DATE LAST REPORT SUBMITTED:
   - MONTH
   - DAY
   - YEAR

SECTION C - SIGNATURE AND IDENTIFICATION

16. NAME OF PERSON COMPLETING FORM (Print or Type):
    SIGNATURE:
    TITLE:
    DATE:
    MO: DAY: YEAR

17. ADDRESS NO.
    STREET:
    CITY:
    COUNTY:
    STATE:
    ZIP CODE:
    PHONE AREA CODE:
    EXTENSION:
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 AND TO SUBMIT THE REQUIRED $150.00 NON-REFUNDABLE FEE MAY DELAY ISSUANCE OF YOUR CERTIFICATE. 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 outlet, 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. 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 origins 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, who maintain cultural identification through tribal affiliation or community recognition.
Asian or Pacific Islander: Persons having origins 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 Philippine Islands and Samoa.
Non-Minority: Any Persons not identified as any of the aforementioned Racial/Ethnic Groups.

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 AWARDED THE CONTRACT. IF THIS IS YOUR FIRST REPORT, AND FORWARD ONE COPY WITH A CHECK IN THE AMOUNT OF $150.00 PAYABLE TO THE TREASURER, STATE OF NEW JERSEY (IN 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
Sample Duplicate Certificate of Employee Information Report Request

Form Duplicate Cert.
Rev. 1/11

STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
Division of Purchase & Property, Contract Compliance Audit Unit
EEO Monitoring Program

DUPLICATE CERTIFICATE OF EMPLOYEE INFORMATION REPORT REQUEST
IMPORTANT - FAILURE TO PROPERLY COMPLETE THE ENTIRE FORM AND SUBMIT THE REQUIRED $75.00 FEE (Non-Refundable) MAY DELAY ISSUANCE OF YOUR DUPLICATE CERTIFICATE OF EMPLOYEE INFORMATION REPORT.

SECTION A - COMPANY IDENTIFICATION
1. FID. NO. OR SOCIAL SECURITY NUMBER
2. ASSIGNED CERTIFICATION NUMBER
3. COMPANY NAME

SECTION B - SIGNATURE AND IDENTIFICATION
4. STREET
5. REASON FOR REQUEST OF DUPLICATE CERTIFICATE
   ☐ 1. Lost Certificate ☐ 2. Damaged ☐ 3. Other (Specify)
6. NAME OF PERSON COMPLETING FORM (Print or Type)
   SIGNATURE
   TITLE
   DATE
   MO  DAY  YEAR
7. ADDRESS NO. & STREET
   CITY
   COUNTY
   STATE
   ZIP CODE
   PHONE (AREA CODE, NO. EXTENSION)

I certify that the information on this Form is true and correct.

SECTION C - OFFICIAL USE ONLY
RECEIVED DATE:
DIVISION OF REVENUE DLN #: INSTRUCTIONS FOR COMPLETING DUPLICATE CERTIFICATE REQUEST

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 - Enter the Certificate Number that was assigned to your company along with the Issue Date and Expiration Date (if available).

ITEM 3 - Enter the name by which the company is identified.

ITEM 4 - Enter the physical location of the company. Include City, County, State and Zip Code.

ITEM 5 - Enter the reason for requesting a Duplicate Certificate of Employee Information Report.

ITEM 6 - Print or type the name of the person completing the form. Include the signature, title and date.

ITEM 7 - Enter the physical location where the form is being completed. Include City, State, Zip Code and Phone Number.

RETAIN A COPY OF THIS REQUEST FOR THE VENDOR'S OWN FILES AND FORWARD ONE COPY WITH A CHECK IN THE AMOUNT OF $75.00 (Non-Refundable Fee) PAYABLE TO "THE TREASURER, STATE OF NEW JERSEY" TO:

NJ Department of the Treasury
Division of Purchase & Property
Contract Compliance Audit Unit
EEO Monitoring Program
PO Box 206
Trenton, New Jersey 08625-0206

Telephone No. (609) 292-5473

PLEASE ALLOW 15 BUSINESS DAYS FOR PROCESSING THE DUPLICATE CERTIFICATE.
RENEWAL PACKAGE
FOR CERTIFICATE OF
EMPLOYEE
INFORMATION REPORT
RENEWAL NOTICE

The Certificate of Employee Information Report (hereinafter referred to as the "State Certificate") issued by this Division is due to expire within the next 90 days. In order for your firm to continue to provide a current State Certificate for public contract awards, you must apply for renewal by properly completing the following renewal documents:

1. The Employee Information Report Form AA-302 for the facility indicated on the "State Certificate" and any additional New Jersey facilities, with a check in the amount of $150.00 payable to "the Treasurer, State of New Jersey" (fee is non-refundable) and

2. The Vendor Activity Summary Report forms, one for each of the four (4) personnel activities noted (new hires, promotions, transfers and terminations etc.) for the previous "State Certificate" period, or

3. If you are operating under a federally approved affirmative action plan, a photocopy of the letter of Federal Approval issued by the US Department of Labor, Office of Federal Contract Compliance Programs, not greater than one year old, may be submitted to the awarding agency in lieu of the State Certificate. Please do not submit an EEO-1 Report as it will not be accepted.

All goods, service and professional service vendors are encouraged to complete and file these renewal documents electronically by accessing the Division's website at www.state.nj.us/treasury/contract_compliance. This website provides access to the Forms in electronic format or on-line internet submission registration via the internet. Or you may call the Division at (609) 292-5473 and a representative will be available to assist you. Please have your certificate number ready when calling. Your certificate number is noted at the end of your company name on your mailing label.

Upon receipt of the above-referenced documents, the Division will approve or reject your application within sixty (60) days of submission. If your application is approved, the Division will issue a Certificate provided your firm meets the standards of good faith compliance with the Affirmative Action Regulations set forth in N.J.A.C. 17:27-1.1 et seq. Periodic reviews may be conducted and additional information may be requested, as required by the Division. In all instances, however, a copy of the Certificate must be presented to the public agency awarding the contract, prior to the award of the contract.

(AA-02 Rev. Mar-10)
NEW INSTRUCTIONS FOR COMPLETING THE
EMPLOYEE INFORMATION REPORT (FORM AA302) RENEWAL
DISREGARD INSTRUCTIONS ON PRE-PRINTED FORM REV. 1/00

IMPORTANT: READ THE FOLLOWING INSTRUCTIONS CAREFULLY BEFORE COMPLETING THE FORM.
PRINT OR TYPE ALL INFORMATION. FAILURE TO PROPERLY COMPLETE THE ENTIRE FORM AND TO
SUBMIT THE REQUIRED $150.00 FEE MAY DELAY ISSUANCE OF YOUR CERTIFICATE. 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.
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 - Not Applicable.

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 employees 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 Phillipina
Islands and Samoa.
Non-Minority: Any Persons not identified in any of the
aforementioned Racial/Ethnic Groups.

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 - Not Applicable.

ITEM 15 - Not Applicable.

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 RENEWAL FORM (AA302) AND RETAIN THE PINK
COPY FOR THE VENDOR'S OWN FILES. FORWARD THE REMAINING TWO (2) WHITE AND CANARY COPIES WITH A CHECK
IN THE AMOUNT OF $150.00 PAYABLE TO THE TREASURER, STATE OF NEW JERSEY TO:

NJ Department of the Treasury
Division of Public Contracts
Equal Employment Opportunity Compliance
P.O. Box 206
Trenton, New Jersey 08625-0206

Telephone No. (609) 292-5473
**STATE OF NEW JERSEY**  
**DEPARTMENT OF THE TREASURY**  
**Division of Public Contracts Equal Employment Opportunity Compliance**

**DUPLICATE CERTIFICATE OF EMPLOYEE INFORMATION REPORT REQUEST**

**IMPORTANT:** FAILURE TO PROPERLY COMPLETE THE ENTIRE FORM AND SUBMIT THE REQUIRED $75.00 FEE (Non-Refundable) MAY DELAY ISSUANCE OF YOUR DUPLICATE CERTIFICATE OF EMPLOYEE INFORMATION REPORT.

<table>
<thead>
<tr>
<th>SECTION A - COMPANY IDENTIFICATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. FID. NO. OR SOCIAL SECURITY</td>
</tr>
<tr>
<td>2. ASSIGNED CERTIFICATION NUMBER</td>
</tr>
<tr>
<td>ISSUE DATE</td>
</tr>
<tr>
<td>EXPIRATION DATE</td>
</tr>
</tbody>
</table>

| 3. COMPANY NAME                    |
| 4. STREET                         |
| CITY                              |
| COUNTY                           |
| STATE                             |
| ZIP CODE                          |

<table>
<thead>
<tr>
<th>SECTION B - SIGNATURE AND IDENTIFICATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. NAME OF PERSON COMPLETING FORM (Print or Type)</td>
</tr>
<tr>
<td>SIGNATURE</td>
</tr>
<tr>
<td>TITLE</td>
</tr>
<tr>
<td>DATE MO DAY YEAR</td>
</tr>
</tbody>
</table>

| 7. ADDRESS NO. & STREET | CITY | COUNTY | STATE | ZIP CODE | PRONE (AREA CODE, NO., EXTENSION) |

I certify that the information on this Form is true and correct.

<table>
<thead>
<tr>
<th>SECTION C - OFFICIAL USE ONLY</th>
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<tr>
<td>RECEIVED DATE:</td>
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<tr>
<td>DIVISION OF REVENUE DLN #:</td>
</tr>
</tbody>
</table>

**INSTRUCTIONS FOR COMPLEting DUPLICATE CERTIFICATE REQUEST**

**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** - Enter the Certificate Number that was assigned to your company along with the Issue Date and Expiration Date (if available).

**ITEM 3** - Enter the name by which the company is identified.

**ITEM 4** - Enter the physical location of the company. Include City, County, State and Zip Code.

**ITEM 5** - Enter the reason for requesting a Duplicate Certificate of Employee Information Report.

**ITEM 6** - Print or type the name of the person completing the form. Include the signature, title and date.

**ITEM 7** - Enter the physical location where the form is being completed. Include City, State, Zip Code and Phone Number.

RETAIN A COPY OF THIS REQUEST FOR THE VENDOR'S OWN FILES AND FORWARD ONE COPY WITH A CHECK IN THE AMOUNT OF $75.00 (Non-Refundable Fee) PAYABLE TO "THE TREASURER, STATE OF NEW JERSEY" TO:

'Treasure State of New Jersey  
Division of Public Contracts  
Equal Employment Opportunity Compliance  
PO Box 206  
Trenton, New Jersey 08625-0206  
Telephone No. (609) 292-5473

PLEASE ALLOW 15 BUSINESS DAYS FOR PROCESSING THE DUPLICATE CERTIFICATE
INSTRUCTIONS

VENDOR ACTIVITY SUMMARY REPORTS

1. You should complete 4 blank Vendor Activity Summary Reports with your AA-302, Employee Information Report Renewal Application package. These 4 Reports are to be completed for new hires, promotions, transfers and terminations that took place between the time you received your Certificate of Employee Information Report (hereafter referred to as "Certificate") and the date of your Renewal Application.

2. The Vendor Activity Summary Reports must be completed to show your firm's total personnel actions for the previous Certificate period. For example, if your firm renews its Certificate every 3 years, one of the reports should indicate the total number of people hired during the entire 3-year period during which you held the Certificate. Another report should indicate the total number of people terminated during that 3-year period. The third report should indicate the total number of people transferred during that 3-year period and the final report should indicate the total number of people promoted during that 3-year period. Please note, there is no need to re-state the information provided on the AA-302 form.
APPENDIX A
AMERICANS WITH DISABILITIES ACT OF 1990
Equal Opportunity for Individuals with Disability

The contractor and the __________________________ (hereafter "owner") do hereby agree that the provisions of Title 11 of the Americans With Disabilities Act of 1990 (the "Act") (42 U.S.C. §12101 et seq.), which prohibits discrimination on the basis of disability by public entities in all services, programs, and activities provided or made available by public entities, and the rules and regulations promulgated pursuant thereunto, are made a part of this contract. In providing any aid, benefit, or service on behalf of the owner pursuant to this contract, the contractor agrees that the performance shall be in strict compliance with the Act. In the event that the contractor, its agents, servants, employees, or subcontractors violate or are alleged to have violated the Act during the performance of this contract, the contractor shall defend the owner in any action or administrative proceeding commenced pursuant to this Act. The contractor shall indemnify, protect, and save harmless the owner, its agents, servants, and employees from and against any and all suits, claims, losses, demands, or damages, of whatever kind or nature, arising out of or claimed to arise out of the alleged violation. The contractor shall, at its own expense, appear, defend, and pay any and all charges for legal services and any and all costs and other expenses arising from such action or administrative proceeding or incurred in connection therewith. In any and all complaints brought pursuant to the owner’s grievance procedure, the contractor agrees to abide by any decision of the owner which is rendered pursuant to said grievance procedure. If any action or administrative proceeding results in an award of damages against the owner, or if the owner incurs any expense to cure a violation of the ADA which has been brought pursuant to its grievance procedure, the contractor shall satisfy and discharge the same at its own expense.

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

It is expressly agreed and understood that any approval by the owner of the services provided by the contractor pursuant to this contract will not relieve the contractor of the obligation to comply with the Act and to defend, indemnify, protect, and save harmless the owner pursuant to this paragraph.

It is further agreed and understood that the owner assumes no obligation to indemnify or save harmless the contractor, its agents, servants, employees and subcontractors for any claim which may arise out of their performance of this Agreement. Furthermore, the contractor expressly understands and agrees that the provisions of this indemnification clause shall in no way limit the contractor’s obligations assumed in this Agreement, nor shall they be construed to relieve the contractor from any liability, nor preclude the owner from taking any other actions available to it under any other provisions of the Agreement or otherwise at law.

[Representative’s Name/Title/Print]:________________________________________
[Representative’s Signature]:______________________________________________
[Name of Company]:_____________________________________________________
[Tel. No.]:_________________________ [Date]:__________________________
Minority/Woman Business Enterprise (MWBE)
Questionnaire for Bidders

Jersey City Ordinance C-829 establishes a goal of awarding 20% of the dollar amount of total city procurement to minority and woman owned business enterprises.

To assist us in monitoring our achievement of this goal, please indicate below whether your company is or is not a minority owned and/or woman owned business, and return this form with your bid proposal.

Business Name: ________________________________________________________________

Address: ______________________________________________________________________

Telephone No.: ________________________________________________________________

Contact Name: ________________________________________________________________

Please check applicable category:

_____ Minority Owned Business (MBE)  _____ Minority & Woman Owned Business (MWBE)

_____ Woman Owned business (WBE)  _____ Neither

Definitions
Minority Business Enterprise

Minority Business Enterprise means a business which is a sole proprietorship, partnership or corporation at least 51% of which is owned and controlled by persons who are African American, Hispanic, Asian American, American Indian or Alaskan native, defined as follows:

African American: a person having origins in any of the black racial groups of Africa

Hispanic: a person of Mexican, Puerto Rican, Central or South American or other non-European Spanish culture or origin regardless of race.

Asian: a person having origins in any of the original peoples of the Far East, South East Asia, Indian subcontinent, Hawaii or the Pacific Islands.

American Indian or Alaskan Native: a person having origins in any of the original peoples of North America and who maintains cultural identification through tribal affiliation or community recognition.

Woman Business Enterprise

Woman Business Enterprise means a business which is a sole proprietorship, partnership or corporation at least 51% of which is owned and controlled by a woman or women.
Minority/Woman Business Enterprise (MWBE) Questionnaire for Bidders

Jersey City Ordinance C-829 establishes a goal of awarding 20% of the dollar amount of total city procurement to minority and woman owned business enterprises.

To assist us in monitoring our achievement of this goal, please indicate below whether your company is or is not a minority owned and/or woman owned business, and return this form with your bid proposal.

Business Name: __________________________________________________________

Address: ______________________________________________________________

Telephone No.: __________________________________________________________

Contact Name: __________________________________________________________

Please check applicable category:

_____ Minority Owned Business (MBE)          _____ Minority & Woman Owned Business (MWBE)

_____ Woman Owned business (WBE)          _____ Neither

Definitions
Minority Business Enterprise

Minority Business Enterprise means a business which is a sole proprietorship, partnership or corporation at least 51% of which is owned and controlled by persons who are African American, Hispanic, Asian American, American Indian or Alaskan native, defined as follows:

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American Indian or Alaskan Native: a person having origins in any of the original peoples of North America and who maintains cultural identification through tribal affiliation or community recognition.

Woman Business Enterprise

Woman Business Enterprise means a business which is a sole proprietorship, partnership or corporation at least 51% of which is owned and controlled by a woman or women.

DIVISION OF PURCHASING COPY
"New Jersey Business Registration Requirements"
For Goods, Professional Service and General Service Contracts

The contractor shall provide written notice to its subcontractors of the responsibility to submit proof of business registration to the contractor.

Before final payment on the contract is made by the contracting agency, the contractor shall submit an accurate list and the proof of business registration of each subcontractor or supplier used in the fulfillment of the contract, or shall attest that no subcontractors were used.

For the term of the contract, the contractor and each of its affiliates and a subcontractor and each of its affiliates [N.J.S.A. 52:32-44(g)(3)] shall collect and remit to the Director, New Jersey Division of Taxation, the use tax due pursuant to the Sales and Use Tax Act on all sales of tangible personal property delivered into this State, regardless of whether the tangible personal property is intended for a contract with a contracting agency.

A business organization that fails to provide a copy of a business registration as required pursuant to section 1 of P.L.2001, c.134 (C.52:32-44 et al.) or subsection e. or f. of section 92 of P.L.1977, c.110 (C.5:12-92), or that provides false business registration information under the requirements of either of those sections, shall be liable for a penalty of $25 for each day of violation, not to exceed $50,000 for each business registration copy not properly provided under a contract with a contracting agency."