CITY OF JERSEY CITY
REQUEST FOR PROPOSALS:

TO CONDUCT PHYSICAL AND OCCUPATIONAL THERAPY
TO CITY EMPLOYEES
AS A RESULT OF ON THE JOB INJURIES

SUBMISSION DEADLINE:
10:00 A.M.
August 20, 2008

ADDRESS ALL PROPOSALS TO:

Brian O'Reilly ,
Business Administrator,
280 Grove St,  
Jersey City, NJ 07302
1. GENERAL INFORMATION

The City of Jersey City, Office of Risk Management, is soliciting a request for proposals from licensed physical therapy (PT) organizations to provide physical and occupational therapy to City employees as a result of on the job injuries. The City’s workforce consists of approximately 800 police officers, 500 firefighters and 1500 civilian employees. To date we average 350 workers’ compensation claims per year.

To be considered, ten copies of a proposal must be received by Brian O’Reilly, Business Administrator, 280 Grove St, Jersey City, New Jersey 07302 by 10:00 AM, August 20, 2008. The City of Jersey City reserves the right to reject any or all proposals submitted. Proposals submitted will be evaluated by the Risk Manager and the members of the City’s Insurance Fund Commission. They will then make a recommendation to the City Council for the award of the contract.

During the evaluation process, the City of Jersey City reserves the right, where it may serve the City of Jersey City’s best interest, to request additional information or clarifications regarding proposals, or to allow corrections of minor errors or omissions.

The PT proposal is prepared at its own cost and expense. The City will not pay for any of the costs or expenses associated with the preparation or submission of a proposal.

This contract will be awarded as a professional services agreement using the “fair and open” process under the “New Jersey Local Unit Pay-to-Play” Law, N.J.S.A. 19:44A-20.4 et seq.

The City Council will vote to approve a resolution awarding a contract to the contractor for a sum not to exceed a specified amount.

2. TERM AND TERMINATION OF AGREEMENT

A) The agreement shall be executed within 30 days after the award of contract by the City Council.
B) The services shall be provided for one year starting October 1, 2008 and ending September 30, 2009. The City also reserves the option to renew the contract for a second and/or third year. Your proposal must include a flat annual fee for the optional second and third years.
C) The PT must include a fee proposal for treating employees under their care if the contract is canceled or not renewed.
D) The agreement may be terminated with or without cause at any time during the term hereof by either party upon sixty (60) days written notice by the terminating party to the non-terminating party.

3. AWARD OF CONTRACT

The proposed fee, while considered important, will not be the sole consideration in the selection of a PT. The City desires to have a quality physical therapy and occupational therapy services, and what the PT has to offer, to achieve this objective, will be closely examined. A physical therapist that has extensive experience in occupational injuries must be employed by the PT.

The following are factors, along with others, that will be used in the evaluation of a successful respondent:

A. Proven experience in treatment of occupational injuries and illnesses
B. Prior experience in a municipal setting
C. Level of fees
D. Nature, quality and timeliness of reports
E. Resumes of those responsible/accountable for servicing the contract.
F. References from New Jersey clients serviced by your organization
G. Evidence of adequate general liability and medical malpractice insurance and workers compensation insurance
H. Ability to provide required administrative services
I. Computerized data management system
J. The financial stability of the company, its owners and principles
K. Prior experience with the City of Jersey City

4. CAUSES FOR REJECTION

This Request for Proposals (“RFP”) constitutes an invitation to submit a proposal to the City. The City reserves the right in protection of the best interests of the City to waive any technical error, to reject any or all of the proposals, or any part thereof, for any reason whatsoever.

In addition, causes for rejection of proposals may include but not be limited to the following:

A) Level of fees
B) If PT does not own/lease sufficient or satisfactory equipment to perform required work
C) If PT does not have a facility in Jersey City
D) Inadequate staffing
E) All facilities are not accessible to the handicapped
F) Inability to provide required administrative services.
G) Inability to provide required computerized management system.
H) Proposal submitted by PT is found to be unqualified.
I) Failure to include necessary required information
J) Prior experience with the City of Jersey City that the City deems to have been negative

Required Information consists of:

1) Last two company annual reports
2) Financial statements of company owners/principles
3) Resumes of those responsible for servicing the contract.
4) References from NJ clients serviced by your organization.
5) Evidence of adequate general liability, medical malpractice and workers’ compensation insurance.
6) Certificate of Incorporation.
7) Copy of license(s) issued by the State of New Jersey authorizing PT to do business in New Jersey.
8) New Jersey Business Registration Certificate
9) Mandatory Affirmative Action Certification (see appendix A)

5. INTERPRETATIONS OF SPECIFICATIONS

All questions regarding this request for proposal should be directed to the City’s Risk Manager between the hours of 9:00 a.m. and 4:30 p.m., Monday through Friday at 547-5034.

6. PROPOSAL REQUIREMENTS

PT is required to submit a proposal based on an annual flat fee. This fee should include physical and occupational therapy. PT must be specific in describing the services that are provided under a flat fee arrangement as well as what services will not be included. You must also include a flat annual fee
for year two and three as the City has the option of renewing the agreement for an additional 2 years.

PT is required to keep a complete database on the City’s activities. This database will include the names of employees treated, dates of visits and corresponding fees that would have been charged under a fee for service arrangement. The corresponding fees will be agreed upon between the PT and the City prior to execution of the agreement. This information will be used solely as an informational tool for the City in its analysis of its workers' compensation program. This database must be made available to the City at anytime and the actual form of the database will be determined jointly by the PT and the City.

7. BUSINESS AND BACKGROUND INFORMATION

A) Provide the background on your company including financial, identification of the parent company, services, organization and company goals.

B) A copy of the company’s Annual Report including auditor’s report including financial statements of owners/principles.

C) Provide the following information regarding your company’s organization:

   1) Include an organizational chart
   2) A brief biography of those involved in the management of the company.

D) Provide a sample of the contract the City will be asked to execute.

E) Resumes of those responsible for providing treatment.

F) Evidence of experience, capability and financial responsibility for services major accounts for workers' compensation medical services.

G) A referral list of at least two (3) clients currently using your services shall be provided and two (2) former clients.

H) Indicate type of business organization it is, e.g. corporation, partnership, sole proprietorship, non profit, etc...

8. SERVICES TO BE PROVIDED

The services sought are physical therapy, occupational therapy, hand therapy, isokinetic exercise, work hardening, work simulation and other services necessary to rehabilitate injured employees. Services are only to be provided to employees who have been injured on the job and have been referred to PT by the authorized City physician.

The emphasis of this program will be on quality medical care for our employees with a goal of returning them to work as soon as they are physically capable.

9. COMPLIANCE WITH EQUAL EMPLOYMENT OPPORTUNITY/ AFFIRMATIVE ACTION PLAN

(A) If the Agreement exceeds $21,000.00, it shall also be subject to the provisions of N.J.S.A. 10:5-31 et seq. and N.J.A.C. 17:27 et seq. (Equal Employment Opportunity and Affirmative Action provisions).

(B) This Agreement shall not become effective and MSO shall provide no services under this Agreement until it has complied with the Equal Employment
Opportunity and Affirmative Action provisions. The Mandatory Equal Employment Opportunity/Affirmative Action Language, Exhibit A summarizes the full, required regulatory text (Exhibit A and additional EEO/AA mandatory languages and forms are attached hereto and incorporated herein).

(C) MSO 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:

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

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

3) A photocopy of an Employee Information Report (Form AA 302) provided by the Division and distributed to the public agency to be completed by the contractor, in accordance with N.J.A.C. 17:27-4.

10. COMPLIANCE WITH AMERICANS WITH DISABILITIES ACT OF 1990

Discrimination on the basis of disability in contracting for the purchase of goods and services is prohibited. PT is required to read Americans with Disabilities language that is included as Appendix A of this specification and agree that the provisions of Title II of the Act are made a part of the contract. The contractor is obligated to comply with the Act and to hold the owner harmless.

11. PROOF OF BUSINESS REGISTRATION

N.J.S.A. 52:32-44 requires that each bidder (contractor) submit proof of business registration with the bid proposal. Proof of registration shall be a copy of the bidder's Business Registration Certificate (BRC). A BRC is obtained from the New Jersey Division of Revenue. Information on obtaining a BRC is available on the internet at www.nj.gov/njbgs or by phone at (609) 292-1730. N.J.S.A. 52:32-44 imposes the following requirements on contractors and all subcontractors that knowingly provide goods or perform services for a contractor fulfilling this contract:

a) The contractor shall provide written notice to its subcontractors and suppliers to submit proof of business registration to the contractor;
b) Prior to receipt of final payment from a contracting agency, a contractor must submit to the contacting agency an accurate list of all subcontractors or attest that none was used;
c) During the term of this contract, the contractor and its affiliates shall collect and remit, and shall notify all subcontractors and their affiliates that they must collect and remit to the Director, New Jersey Division of Taxation, the use tax due pursuant to the Sales and Use Tax Act, (N.J.S.A. 54:32B-1 et seq.) on all sales of tangible personal property delivered into this State.
A contractor, subcontractor or supplier who fails to provide proof of business registration or provides false business registration information shall be liable to a penalty of $25 for each day of violation, not to exceed $50,000 for each business registration not properly provided or maintained under a contract with a contracting agency. Information on the law and its requirements is available by calling (609) 292-1730.

10. INSURANCE

For any insurance required by this agreement, a certified copy of each of the policies or a certificate or certificates of such insurance shall be delivered to the City of Jersey City within ten days after written notification of the award of the contract. Each certificate of such insurance shall contain as an additional insured, the City of Jersey City. Each insurance policy shall contain the provision or endorsement that the policy may not be canceled, terminated, changed or modified without giving thirty days notice to the City.

Insurance requirements are as follows:

- Comprehensive, General Liability in the amount of $2,000,000
- Medical Malpractice-Professional Services in the amount of $2,000,000
- Workers Compensation in the statutory amount of $100,000

11. COMPLIANCE WITH LAWS, REGULATIONS AND RULES

It shall be the responsibility of the PT to comply with any and all local, state, and federal laws, rules and regulations.

12. TIME REQUIREMENTS

A) Proposal Calendar
The following is a list of key dates up to and including the date proposals are due to be submitted.

- Request for proposals Issued: August 6, 2008
- Due date for Proposals: August 20, 2008

B) Notification and Contract Dates

- Award of Contract: September 10, 2008
- Services to Commence: October 1, 2008
13. MANAGEMENT REPORTS

A) Include sample copies of reports, both standard and optional.
B) Describe any alternative report capability.

14. RECORDS, REPORTS AND INSPECTIONS

A) The PTO shall maintain records for each employee in accordance with professional standards. Records pertaining to the employees’ treatment shall be made available when requested by the employee and those authorized to inspect such records.
B) Ownership of such records shall remain at all times with the PT, provided that the PT shall upon request of the City (during the term of the agreement) and for a period of six years following the termination, provide the City and the employee, with a true copy thereof or a clear, legible photocopy.
C) In the event of termination of the agreement, the City shall have the right to require all records to be deposited in a public warehouse, or such other place as may be designated by the City, at the expense of the City.
D) The PT shall provide a cumulative report at the termination of the agreement, containing a yearly summary description of the service provided including the date and reason for such services.
E) The PT must provide to the City monthly reports on the activity of the PT for services provided to the City. These reports should include the employee’s name, social security number, the physicians who treated the employee, dates of all visits, diagnosis and discharge summary.
F) All records and reports required to be prepared and maintained by the PT shall be maintained and made available as herein required during the term of the agreement and for a period of six (6) years following the termination of the agreement.

15. CLIENT SERVICE

A) Identify services which will be available to the Office of Risk Management personnel.
B) Identify key personnel who will be assigned on an ongoing basis as contacts for the Office of Risk Management.

16. CITY’S CLAIMS HISTORY

The following is the number of workers’ compensation claims filed by employees of the City of Jersey City for the last three years.

<table>
<thead>
<tr>
<th>YEAR</th>
<th># OF CLAIMS</th>
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<tbody>
<tr>
<td>2005</td>
<td>380</td>
</tr>
<tr>
<td>2006</td>
<td>311</td>
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<tr>
<td>2007</td>
<td>327</td>
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All reports pertaining to the above periods are located at the Office of Risk management, 280 Grove Street, Jersey City. Any PT interested in reviewing these records may contact the Office of Risk Management at 547-5034 for an appointment.

17. PAYMENT SCHEDULE

The flat annual fee will be paid to the PT by the City in twelve (12) equal monthly installments. The fee will be paid on the 1st of every month. The City will receive a thirty (30) days grace period for each monthly payment not paid by the 1st of every month.

The 1st payment is due on November 1, 2008.

18. MISCELLANEOUS

A) Any notice, consent or other communication required by, or to be given pursuant to the agreement shall be in writing and shall be delivered if mailed to the intended recipient by certified mail, return receipt requested, postage paid.

B) If any of the provisions of this Agreement are contrary to any law or regulation the parties shall by agreement have the right to modify and restructure the provisions thereof in whole or in part such that the covered employee will be able to obtain substantially all of the benefits provided for herein or the parties by agreement shall have the right to declare this Agreement null and void, in which case, the PT shall thereafter be relieved of all obligations hereunder.

C) This agreement is made in the State of New Jersey under, and subject to its laws. The laws of New Jersey shall govern and be used for the interpretation, construction and enforcement of this Agreement.

D) In the event of any dispute among the parties hereto with respect to construction of this agreement, such disputes shall be settled by arbitration in New Jersey in accordance with the rules of the American Arbitration Association, and judgment upon the award rendered may be entered in any court having jurisdiction therein.

E) The PT therapists will be required to cooperate with the City’s Corporation Counsel, or any other party designated by the City’s Corporation Counsel, in the defense of workers’ compensation claims. The cooperation will include but not limited to submission and certification of records, testimony at depositions and/or workers’ compensation court.
CITY OF JERSEY CITY

PROJECT: __________________________________

RESPONDENT: ________________________________________

RESPONDENT’S CHECKLIST

<table>
<thead>
<tr>
<th>Item</th>
<th>Respondent Initials</th>
<th>Purchasing Review</th>
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<tbody>
<tr>
<td>A. Non-Collusion Affidavit properly notarized</td>
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<tr>
<td>B. Public Disclosure Statement</td>
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<tr>
<td>C. Mandatory Affirmative Action Language</td>
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<td>D. Americans with Disabilities Act</td>
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<td>E. MWBE Questionnaire</td>
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<td>F. Affirmative Action Compliance Notice</td>
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<td>G. Employee Information Report</td>
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<td>H. Business Registration Certificate</td>
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<tr>
<td>I. Original signature(s) on all required forms.</td>
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NON COLLUSION AFFIDAVIT
STATE OF NEW JERSEY
CITY OF JERSEY CITY ss:

I certify that I am ______________________________________________________________
of the firm of _________________________________________________________________

the bidder making the proposal for the above named project, and that I executed the said
proposal with full authority so to do; that said bidder has not, directly or indirectly entered into
any agreement, participated in any collusion, or otherwise taken any action in restraint of free,
competitive bidding in connection with the above named project; and that all statements
contained in said proposal and in this affidavit are true and correct, and made with full
knowledge that the City of Jersey City relies upon the truth of the statements contained in said
proposal and in the statements contained in this affidavit in awarding the contract for the said
project.

I further warrant that no person or selling agency has been employed to solicit or secure such
contract upon an agreement or understanding for a commission, percentage, brokerage or
contingent fee, except bona fide employees or bona fide established commercial or selling
agencies maintained by (N.J.S.A.52: 34-25)

(Signature of respondent) ______________________________________________________

SUBSCRIBED AND SWORN TO
BEFORE ME THIS DAY ___________________________ OF 20_________

(TYPE OR PRINT NAME OF AFFIANT UNDER SIGNATURE)

NOTARY PUBLIC OF
MY COMMISSION EXPIRES: 20 .

(NOTE: THIS FORM MUST BE COMPLETED, NOTARIZED AND RETURNED WITH
THIS PROPOSAL).
PUBLIC DISCLOSURE INFORMATION
Chapter 33 of the Public Laws of 1977 provides that no Corporation or Partnership shall be awarded any State, City, Municipal or Schools District contracts for the performance of any work or the furnishing of any materials or supplies, unless prior to the receipt of the bid or accompanying the bid of said corporation or partnership there is submitted a public disclosure information statement. The statement shall set forth the names and addresses of all stockholders in the corporation or partnership who own ten percent (10%) or more of its stock of any class, or of all individual partners in the partnership who own a ten percent (10%) or greater interest therein.

STOCKHOLDERS:

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<th>Name</th>
<th>Address</th>
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</table>

SIGNATURE: _________________________________________________________________

TITLE: _________________________________________________________________

SUBSCRIBED AND SWORN TO
BEFORE ME THIS DAY ___________________________ OF 20_________

(TYPE OR PRINT NAME OF AFFIANT UNDER SIGNATURE)

NOTARY PUBLIC OF
MY COMMISSION EXPIRES: 20 ______

(NOTE: THIS FORM MUST BE COMPLETED, NOTARIZED AND RETURNED WITH THIS PROPOSAL).
MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE  
N.J.S.A. 10:5-31 and N.J.A.C. 17:27

Goods, Professional Services and General Service Contracts  
(Mandatory Affirmative Action Language)
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 or sex. Except with respect to affectional or sexual orientation, the contractor will take affirmative action to ensure that such applicants are recruited and employed, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation or sex. Such action 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 or sex.

The contractor or subcontractor, where applicable, will send to each labor union or representative or workers with which it has a collective bargaining agreement or other contract or understanding, a notice, to be provided by the agency contracting officer advising the labor union or workers' representative of the contractor's commitments under this act 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 employ minority and women workers consistent with the applicable county employment goals established in accordance with N.J.A.C. 17:27-5.2, or a binding determination of the applicable county employment goals determined by the Division, pursuant to 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, labor unions, that it does not discriminate on the basis of age, creed, color, national origin, ancestry, marital status, affectional or sexual orientation 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 applicable 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, creed, color, national origin, ancestry, marital status, affectional or sexual orientation 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 and its subcontractors shall furnish such reports or other documents to the Division of Contract Compliance & EEO as may be requested by the Division 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 Contract Compliance & EEO for conducting a compliance investigation pursuant to Subchapter 10 of the Administrative Code at N.J.A.C. 17:27.

The undersigned vendor certifies that he/she received, read, and is aware of the commitment to comply with:

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 his/her 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): ________________________________

Representative’s Signature: ________________________________

Name of Company: ________________________________

Tel. No.: _____________ Date: ____________
AMERICANS WITH DISABILITIES ACT OF 1990  
Equal Opportunity for Individuals with Disability

The contractor and the __________________ of ________________________, (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 there unto, are made a part of this contract.

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

In the event that the contractor, its agents, servants, employees, or subcontractors violate or are alleged to have violated the Act during the performance of this contract, the contractor shall defend the owner in any action or administrative proceeding commenced pursuant to this Act.

The contractor shall indemnify, protect, and save harmless the owner, its agents, servants, and employees from and against any and all suits, claims, losses, demands, or damages, of whatever kind or nature arising out of or claimed to arise out of the alleged violation.

The contractor shall, at its own expense, appear, defend, and pay any and all charges for legal services and any and all costs and other expenses arising from such action or administrative proceeding 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     _____ Minority & Woman Owned

_____ Woman Owned       _____ Neither

Definition of 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.
AFFIRMATIVE ACTION COMPLIANCE NOTICE
N.J.S.A. 10:5-31 and N.J.A.C. 17:27
GOODS AND SERVICES CONTRACTS
(INCLUDING PROFESSIONAL SERVICES)
This form is a summary of the successful bidder’s requirement to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27.

The successful bidder shall submit to the public agency, after notification of award but prior to execution of this contract, one of the following three documents as forms of evidence:

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

OR

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

OR

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

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

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

The undersigned vendor certifies that he/she is aware of the commitment to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27 and agrees to furnish the required forms of evidence.

The undersigned vendor further understands that his/her 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.

COMPANY:___________________________________________________________________

SIGNATURE: ____________________________________ DATE:________________

PRINT
NAME:_____________________________ TITLE: __________________________

AFFIRMATIVE ACTION COMPLIANCE (SAMPLE DOCUMENTS)
Vendor must submit one of the following 3 documents:

- Letter of Federal Affirmative Action Plan Approval
- Certificate of Employee Information Report
- Employee Information Report Form AA302 (submitted to NJ State Dept of Treasury)
CERTIFICATE OF EMPLOYEE INFORMATION REPORT

This is to certify that the contractor [Name] has submitted the Employee Information Report pursuant to N.J.A.C. 17:37-1.1 et seq., and the State Treasurer has approved said report. This approval will remain in effect for the period of

[Signature]

State Treasurer
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 may delay issuance of your certificate.
If you have a current certificate of employee information report, do not complete this form.
Send copy of current certificate to the public agency. 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 predominant 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.

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.

**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 copy for the vendor’s own files. The vendor is to submit a copy to the public agency awarding the contract and forward a copy to:

NJ Department of the Treasury
Division of Contract Compliance & Equal Employment Opportunity
P.O. Box 209
Trenton, New Jersey 08625-0209 Telephone No. (609) 292-5475


Note that the sample form shown on the following page is for illustrative purposes only and should not be submitted. Use the state website links above to obtain the actual form.

If you have any questions on EEO/AA forms and/or requirements, please contact:

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
STATE OF NEW JERSEY

Division of Contract Compliance & Equal Employment Opportunity

EMPLOYEE INFORMATION REPORT

For instructions on completing the form, go to: https://www.state.nj.us/treasury/contract_compliance/pdf/aa302.pdf

SECTION A - COMPANY IDENTIFICATION

1. FED. NO. OR SOCIAL SECURITY 2. TYPE OF BUSINESS
   0 1. MANUFACTURING 2. SERVICE 3. WHOLESALE
   4 5. AGRICULTURAL 6. OTHER
   7. COMPANY NAME

   3. TOTAL NO. EMPLOYEES IN THE ENTIRE COMPANY

   4. STREET NAME
   5. CITY
   6. COUNTY
   7. STATE
   8. ZIP CODE

SECTION B - EMPLOYMENT DATA

11. Report all permanent, temporary, and part-time employees ON YOUR OWN PAYROLL. Enter the appropriate figures on all lines and sub-columns. Where there are no employees in a particular category, enter 0. Include ALL employees, not just those in the workforce minority categories. Enter 1, 2, 3, 4, 5, etc. DO NOT SUBMIT AN LEED REPORT.

   JOB CATEGORIES

   OFFICIAL MANAGERS
   PROFESSIONALS
   TECHNICIANS
   TECHNICAL WRITERS
   OFFICE SUPPORT
   CUSTODIANS (TENANT)
   OPERATIVES (SALARIED)
   CLEANERS (UNSKILLED)
   SERVICE WORKERS
   TOTAL

   TOTAL EMPLOYEES
   FEMALE EMPLOYEES
   MALE EMPLOYEES

   Эти данные не должны быть включены в числа в соответствующие категории выше.

12. HOW WERE INFORMATIONS AS PER CATEGORY OF EMPLOYEES IN SECTION B OBTAINED?
   ☐ 1. VACANCY SURVEY ☐ 2. NEW EMPLOYEES HIRED ☐ 3. OTHER SPECIFY

13. EMPLOYEES PERIOD OF PAYROLL
   FROM
   TO

14. HAS THIS REPORT BEEN ISSUE D THIS YEAR?
   ☐ 1. YES ☐ 2. NO

SECTION C - SIGNATURE AND IDENTIFICATION

15. NAME OF PERSON COMPLETING FORM (PRINT OR TYPE)
   SIGNATURE
   TITLE
   DATE
   YEAR

16. PHONE (AREA CODE, NO. EXTENSION)

17. ADDRESS NO. & STREET
   CITY
   COUNTY
   STATE
   ZIP CODE
MANDATORY BUSINESS REGISTRATION LANGUAGE

Non Construction Contracts

P.L. 2004, c. 57 (Chapter 57) amends and supplements the business registration provisions of N.J.S.A. 52:32-44 which impose certain requirements upon a business competing for, or entering into a contract with a local contracting agency whose contracting activities are subject to the requirements of the Local Public Contracts Law (N.J.S.A. 40A:11-2).

“New Jersey Business Registration Requirements”

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 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.”