TOWNSHIP OF LAKEWOOD REQUEST FOR PROPOSALS

Notice is hereby given that the Lakewood Planning Board, Township of Lakewood, County of Ocean and State of New Jersey, will until Friday, December 14, 2018 at 10:00 A.M. at the Township Hall, 231 Third Street, Engineering and Planning Department, Room 5, Second Floor, Lakewood, New Jersey, 08701, receive sealed proposals for the following:

2019 Planning Board Attorney 2019 Planning Board Engineer 2019 Planning Board Planner

Two copies of all proposals must be contained in a sealed envelope with the name and address of the party submitting the proposal and marked "sealed proposal" and the position sought.

Specifications are available at the address above and may be picked up during normal business hours, Monday through Friday, 8:30 a.m. to 4:00 p.m. or may be obtained at the Township Website at www.lakewoodnj.gov. Any additional information may be obtained from the Planning Board Secretary's Office by calling 732-364-2500 x 5235.

This proposal is being solicited through a fair and open process in accordance with N.J.S.A. 19:44A-20.4 et. seq.

By Order of LAKEWOOD TOWNSHIP PLANNING BOARD Yechiel Herzl, Chairman

Request for Proposals for Professional Services

The Lakewood Township Planning Board hereby solicits sealed proposals for the positions of Planning Board Attorney, Planning Board Engineer and Planning Board Planner.

The proposal shall include a fee schedule specifying an hourly rate for all services required. Services billed at this rate shall include, but not be limited to, telephone calls, correspondence, research, preparation of ordinances, preparation of resolutions, preparation of contracts, negotiations, meetings, hearings, litigation and any other services rendered on behalf of the Township. Any other charges must be noted and must accompany this proposal. Please use the attached exception sheet for any exceptions you may want to take regarding any details in the specifications.

The submission requirements shall include:

- a. Designation of the Lead Counsel/Engineer/Planner and any other individual(s) to be assigned to perform the tasks.
- b. Professional experience of the individual(s) to be assigned, including a list of experience with Lakewood and/or experience with other municipalities.
- c. A statement concerning the ability of the firm/individual to perform tasks assigned by the Board in a timely fashion.
- d. Professional licenses held by the individual(s) to be assigned.
- e. Education background and experience of the individual(s) to be assigned.
- f. A description of the support staff available to the individual(s) to be assigned.
- g. A copy of a Certificate of Insurance, issued by an insurance carrier licensed in the State of New Jersey, for the firm/company showing the current amount of professional liability insurance.
- h. A list of professional references with addresses and telephone contact numbers.
- i. Completion of Non-Collusion Affidavit and Stockholder Disclosure Form.
- j. Proposed Contract with fee schedule.

The award of this contract shall be made to the person or firm submitting the proposal which is deemed to be that which is most advantageous to the Township, price and other factors considered.

The applicant should note that the board meets on the first and third Tuesday of each month, except as noted in the 2019 Lakewood Township Planning Board schedule.

The selection criteria to be used in awarding this contract as a fair and open contract in accordance with N.J.S.A. 19:44A-20.4 et. seq.

- a. Qualifications of the individuals who will perform the services and their experience and familiarity with Planning Board matters.
- b. Ability to perform the services in a timely fashion, including staffing and familiarity with the subject matter.
- c. Cost consideration including, but not limited to, standardized submission and compliance with proposal documents.
- d. Experience with Lakewood, and/or experience in the applicant's field of expertise.

Pursuant to N.J.S.A. 40A:11-3(b), contracts for professional services pursuant to subparagraph (i) of paragraph (a) subsection 10 of section 5 of P.L. 1971, c. 198 (N.J.S.A. 40A:11-5) may be awarded for a period not exceeding twelve (12) consecutive months.

TOWNSHIP OF LAKEWOOD NON-COLLUSION AFFIDAVIT

STATE OF NEW JERSE		
COUNTY OF OCEAN	: SS :	
I,	, of the	of
		, in the County
of	and the Sta	ate of New Jersey, of full age, being duly
sworn according to law on	my oath depose and say th	nat:
I am		
of the firm of		
not, directly or indirectly, e taken any action in restrain Service; and that all stater correct, and made with ful the statements contained in awarding the contract for sall further warrant that no prescure such contract upo	entered into any agreement of fair and open components contained in said sultant the Town said submission and in aid Service. Deerson or selling agency has a greement or under, except for bonafide empression and in a greement or under, except for bonafide empression.	o so; that said Professional Service Entity has ts, participated in any collusion, or otherwise setition in connection with the above named submission and in this affidavit are true and with the statements contained in this affidavit in the statements contained in this affidavit in the statements contained to solicit or derstanding for a commission, percentage, ployees or bonafide establish, commercial or
Name of Professional Servi	ce Entity	
Subscribed and sworn to be	efore me	
This day of	, 20	
Notary Public of New Jerse	<u></u>	Signature of Professional
		Type or print name of affiant and Title

TOWNSHIP OF LAKEWOOD DISCLOSURE OF OWNERSHIP FORM

N.J.S.A. 52:25-24.2 reads in part that "no corporation or partnership shall be awarded any contract by the State, County, Municipality or School District, or any subsidiary or agency thereof, unless prior to the receipt of the submission of the corporation or partnership, there is provided to the public contracting unit a statement setting forth the names and addresses of all individuals who own 10% or more of the stock or interest in the corporation or partnership".

- 1. If the professional service entity is a partnership, then the statement shall set forth the names and addresses of all partners who own a 10% or greater interest in the partnership.
- 2. If the professional service entity is a corporation, then the statement shall set forth the names and addresses of all stockholders in the corporation who own 10% or more of its stock of any class.
- 3. If a corporation owns all or part of the stock of the corporation or partnership providing the submission, then the statement shall include a list of the stockholders who own 10% or more of the stock of any class of that corporation.
- 4. If the professional service entity is other than a corporation or partnership, the contractor shall indicate the form of corporate ownership as listed below.

COMPLETE ONE OF THE FOLLOWING STATEMENTS:

Name:	Address:	ore of the company providing the submis
		Date:
No Stockholder or	Partner owns 10% or mo	ore of the company providing this submis
Signature:		Date:
Submission is bein	g provided by an individ	ual who operates as a sole proprietorship
Signature:		Date:
Submission is being one of the following	• • •	ation or partnership that operates as a (
Limited P	artnership	Limited Liability Corpora
Limited L	iability Partnership	Subchapter S Corporation
ure:		Date:

TOWNSHIP OF LAKEWOOD INSURANCE REQUIREMENTS AND ACKNOWLEDGMENT FORM (Fair and Open Public Solicitation Process)

Certificate(s) of Insurance for Professional Liability Insurance, satisfactory to the Township of Lakewood, shall be filed with the Township Purchasing Division upon award of contract by the Township Committee.

The minimum amounts of insurance to be carried by the Professional Service Entity shall be as follows:

1. Professional Liability Insurance

Limits shall be a minimum of \$1,000,000.00 for each claim and \$1,000,000.00 aggregate each policy period.

Acknowledgment of Insurance Requirement:					
			D (
			Date		
(Print Name and Title)					
(0 0 10	2.7				

(See Certificate of Insurance attached hereto as Exhibit B)

TOWNSHIP OF LAKEWOOD

Mandatory Equal Employment Opportunity Notice N.J.S.A. 10:5-31 et seq. and N.J.A.C. 17:27 et seq. GOODS, PROFESSIONAL SERVICES AND GENERAL SERVICE CONTRACTS

This form is a summary of the successful professional service entity's requirement to comply with the requirements of N.J.S.A. 10:5-31 et seq. and N.J.A.C. 17:27 et seq.

The successful professional service entity shall submit to the Township of Lakewood, 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 vendor 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. 17:27-1.1 et seq.; or
- (C) A photocopy of an Employee Information Report (Form AA302) provided by the Division of Contract Compliance and distributed to the Township of Lakewood to be completed by the vendor in accordance with N.J.A.C. 17:27-1.1 et seq.

The successful professional service entity may obtain the Employee Information Report (AA302) from the Township of Lakewood during normal business hours and distributed in accordance with the requirements on the Employee Information Report.

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

The undersigned professional service entity further understands that his/her submission shall be rejected as non-responsive if said professional service entity fails to comply with the requirements of N.J.S.A. 10:5-31 et seq. and N.J.A.C. 17:27 et seq.

Company:	
Signature:	Print Name:
Title:	Date:

TOWNSHIP OF LAKEWOOD

AFFIDAVIT OF AFFIRMATIVE ACTION

STATE OF NEW JERSEY	;
	: SS
COUNTY OF	:
being duly	y sworn, deposes and says that his business address is
	and that he is the
	of
(Title)	of(Partnership/Corporation)
more particularly detailed in the	e Action as outlined in the NOTICE TO BIDDERS, and contract documents.
	, Affiant
Subscribed and sworn to before r	me this
day of, 20	
Notary Public of New Jersey	

TOWNSHIP OF LAKEWOOD AMERICANS WITH DISABILITIES ACT

Equal Opportunity for Individuals with Disabilities

The CONTRACTOR and the TOWNSHIP OF LAKEWOOD 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 thereunto, are made a part of this contract. In providing any aid, benefit, or service on behalf of the TOWNSHIP OF LAKEWOOD 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 TOWNSHIP OF LAKEWOOD I any action or administrative proceeding commenced pursuant to this Act. The CONTRACTOR shall indemnify, protect and save harmless the TOWNSHIP OF LAKEWOOD, its agents, servants and employees from and against any and all suits, claims, losses, demands, or damages or 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.

The TOWNSHIP OF LAKEWOOD 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 TOWNSHIP OF LAKEWOOD or any of its agents, servants and employees, the TOWNSHIP OF LAKEWOOD shall expeditiously forward or have forwarded to the CONTRACTOR every demand, complaint, notice, summons, pleading or other process received by the TOWNSHIP OF LAKEWOOD or its representatives.

It is expressly agreed and understood that any approval by the TOWNSHIP OF LAKEWOOD 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 TOWNSHIP OF LAKEWOOD pursuant to this paragraph.

It is further agreed and understood that the TOWNSHIP OF LAKEWOOD 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 provision 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 prelude the TOWNSHIP OF LAKEWOOD from taking any other actions available to it under any other provisions of this Agreement or otherwise at law.

The TOWNSHIP OF LAKEWOOD does not discriminate on the basis of handicapped status in the admission or access to, or treatment, or employment in its programs or activities.

The TOWNSHIP OF LAKEWOOD shall allow access to any books, documents, papers and records of the contractor, which are directly pertinent to that specific contract.

Compliance is required with all applicable standards, orders, or requirements issued under 306 of the Clean Air Act, Section 508 of the Clean Water Act, Executive Order 11738 and Environmental Protection Agency Regulations (40 CRF, Part 15) which prohibits the use under non-exempt federal contracts, grants or loans of facilities included on the EPA list of violating facilities.

The TOWNSHIP OF LAKEWOOD considers it to be a substantial conflict of interest for any company desiring to do business with the TOWNSHIP OF LAKEWOOD to be owned, operated or managed by any TOWNSHIP OF LAKEWOOD employee, nor shall any TOWNSHIP OF LAKEWOOD personnel be employed by the vendor in conjunction with any work to be performed for or on behalf of the TOWNSHIP OF LAKEWOOD.

I hereby certify compliance with the foregoing.

_	(Corporation, Partnership, Limited Liability Company, Individual – ease choose one)) under the law of the State
of	, having principal
offices at	
	Name of Company, Corporation or Individual
	Signed by:
	Print Name and Official Title
	Address:
	Telephone:Facsimile:
	E-mail address:
	Federal Id. No.:

TOWNSHIP OF LAKEWOOD Professional Service Entity Information Form

If the Professional Service Entity is an INDIVIDUAL, sign name and give the following information:

Name:	
Address:	
Telephone No.:	Social Security No.:
Fax No.:	E-Mail:
If individual is a TRADE NAME ,	give such trade name:
Trading As:	Telephone No.:
************	*****************
If the Professional Service Entity is	a PARTNERSHIP , give the following information:
Name of Partners:	
Firm Name:	
Telephone No.:	Federal I.D. No.:
	E-Mail:
Social Security No.:	
Signature of authorized agent:	
***********	****************
If the Professional Service Entity is	INCORPORATED , give the following information: (LLC)
State under whose laws incorporate	d
Location of principal office:	
Telephone No.:	Federal I.D. No.:
Fax No.:	E-Mail:
Name of agent in charge of said off	ice upon who notice may be legally served:
Telephone No.:	Name of Corp.
Signature:	By:
Title	Address

TOWNSHIP OF LAKEWOOD (Fair and Open Public Solicitation Process for Professional Services) SUBMISSION FORM

	nd roles of the individuals who will perform the services and deseducation and experience with projects similar to the services co
Docume	nted past performance of same or similar service:
	med past performance of same of similar service.
Reference	ees and record of success of same or similar service:
	ion of ability to provide the services in a timely fashion (in familiarity and location of key staff):
starring,	

5.	Cost details, including the hourly rat perform services, and all expenses:	tes of each of the individuals who wi
6.	Description of technical process and equ	uipment used in performing task(s).
7.	proximity to the Township of Lakewo	history, including office location and the ood, the number of years in business, the o municipal clients, and financial stability
8.	Knowledge of the Township of Lakewounder the contract.	ood and the subject matter to be addresse
Note:	Attach additional sheets as necessary	
Firm:		Date:
Autho	rized Representative (Print)	
Signat	cure:	Title:
Talani	one.	Fay No :

TOWNSHIP OF LAKEWOOD

Acknowledgement of Corrections, Additions and Deletions Form (Fair & Open Public Solicitation Process)

l,						of the firi	m of
						he	reby
acknowledge that any corrections,	additions	and/or	deletions	have	been	initialed	and
dated in this Submission Package.							
					,,	Affiant	
	Firm:						
	Date:						

TOWNSHIP OF LAKEWOOD PROPOSAL SHEET

Position:	
Company Name:	
Authorized Representative: _	
Signature:	Date:
Title:	
Telephone No.:	Facsimile No.:
auditor(s), paralegal(s) and so must also include any cos	rates for all positions including attorney(s), engineer(s) ecretary(s) hours applicable for each position. The schedules for all particular kinds of work, such as secretarial simile, messenger and any other necessary expenses.
Schedule Attached:	Yes No (Check One)

TOWNSHIP OF LAKEWOOD CHECKLIST – FAIR & OPEN PUBLIC SOLICITATION PROCESS

Professional Service:
Submission Date:
The following items, as indicated by initialing, shall be provided with the receipt of sealed submissions:
1. Non-Collusion Affidavit
2. Disclosure of Ownership Form
3. Insurance Requirement Acknowledgment Form
4. Mandatory Equal Employment Opportunity Notice Acknowledgment (Contracts over \$17,500.00)
5. Affidavit of Affirmative Action
6. Americans with Disabilities Act Compliance Certification
7. Copy of Business Registration Certificate as issued by the State of New Jersey, Department of Treasury, Division of Revenue
8. Professional Service Entity Information Form
9. Qualifications Submission Form
10. Acknowledgment of Corrections, Additions or Deletions Form
11. Compensation/Fee Proposal. Detailing all charges to be billed to the Township