**Exhibit C**

**CSOC Pre Award Documents**

**Required to Be Submitted with a Response to an Out of Home RFP**

Rev. 7-1-16

|  |  |
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| ▶ | **contract documents to be submitted once with the RFP response:**  |
| 1 | [ ]  | **Signed Standard Language Document** (SLD) [Version: Rev. June 6, 2014] Form: <http://www.nj.gov/dcf/documents/contract/forms/StandardLanguage.doc> |
| 2 | [ ]  | **Business Associate Agreement/HIPAA**, with signature under Business Associate [Version: Rev. 9-2013] Form: <http://www.nj.gov/dcf/providers/contracting/forms/HIPAA.doc>  |
| 3 | [ ]  | **Source Disclosure Certification** Form [P.L. 2005, c 92-formerly Executive Order 129] Website: <http://www.state.nj.us/treasury/purchase/forms.shtml>Form: <http://www.state.nj.us/treasury/purchase/forms/SourceDisclosureCertification.pdf> |
| 4 | [ ]  | Dated List of Names, Titles, Addresses & Terms of **Board of Directors** --or-- **Managing Partners**, if an LLC or Partnership |
| 5 | [ ]  | **Disclosure of Investigations & Other Actions Involving Bidder Form** (PDF)  <http://www.state.nj.us/treasury/purchase/forms/DisclosureofInvestigations.pdf> |
| 6 | [ ]  | **Disclosure of Investment Activities in Iran** (PDF)  <http://www.state.nj.us/treasury/purchase/forms/DisclosureofInvestmentActivitiesinIran.pdf> |
| 7 | [ ]  | For Profit: **Statement of Bidder/Vendor Ownership Form** (PDF)  <http://www.state.nj.us/treasury/purchase/forms/OwnershipFinal12-14.pdf>  |
| 8 | [ ]  | **Subcontract/Consultant Agreements** related to this RFP/RFQ - If not applicable, include a written statement |
| 9 | [ ]  | Document showing **Data Universal Numbering System** (**DUNS**) Number [2006 Federal Accountability & Transparency Act (FFATA)]Website: <http://www.dnb.com> Helpline: 1-866-705-5711 |
| 10 | [ ]  | **Certificate of Incorporation**Website: <http://www.nj.gov/treasury/revenue/filecerts.shtml> |
| 11 | [ ]  | For Profit: **NJ Business Registration** Certificate with the Division of Revenue. See instructions for applicability to your organization. If not applicable, include a written statement. Website: <http://www.nj.gov/njbusiness/registration/>  |
| 12 | [ ]  | **Agency By Laws** or **Management Operating Agreement** if an LLC  |
| 13 | [ ]  | **Tax Exempt Certification** Website: <http://www.state.nj.us/treasury/taxation/exemption.shtml> |
| 14 | [ ]  | **Statement of Assurances** -Use the RFP forms found directly under the Notices section onWebsite: [www.nj.gov/dcf/providers/notices/](http://www.nj.gov/dcf/providers/notices/)Form: <http://www.nj.gov/dcf/providers/notices/Statement.of.Assurance.doc> |
|  | **contract documents to be submitted once with the RFP response:** (continued) |
| 15 | [ ]  | **Safe-Child Standards Description** – Submit a brief statement demonstrating ways in which your agency will implement the “Standards” (2 pgs. max. double spaced) Policy: <http://www.state.nj.us/dcf/SafeChildStandards.pdf>  |
| 16 | [ ]  | For Profit: Two-Year **Chapter 51/Executive Order 117** Vendor Certification --and--Disclosure of Political Contributions [Version: Rev 4/17/15] See instructions for applicability to your organization. If not applicable, include a written statement. Website: <http://www.state.nj.us/treasury/purchase/forms.shtml>  |
| 17 | [ ]  | **Chapter 271/Vendor Certification and Political Contribution Disclosure Form** Website: <http://www.state.nj.us/treasury/purchase/forms.shtml>Form: <http://www.state.nj.us/treasury/purchase/forms/CertandDisc2706.pdf> |
| 18 | [ ]  | Proposed **Annex B Budget Form** documenting anticipated budget (Include Signed Cover Sheet)Annex B: <http://www.nj.gov/dcf/documents/contract/forms/AnnexB.xls>Note: Expense Summary Form is auto populated. Begin data input on Personnel Detail Tab. |
| 19 | [ ]  | Proposed **Program Implementation Status Update Form** documenting anticipated implementation scheduleWebsite: <http://nj.gov/dcf/providers/contracting/forms/csoc.html>  |
| ▶ | **contract documents to be submitted with the RFP response & annually updated thereafter:**  |
| 20 | [ ]  | **System for Award Management** (**SAM**) printout showing "active" status (free of charge)Website: <https://www.sam.gov/portal/public/SAM> Helpline: 1-866-606-8220 |
| 21 | [ ]  | **Tax Forms:** Non Profit **Form 990** Return of Organization Exempt from Income Tax --or-- For Profit **Form 1120** US Corporation Income Tax Return --or--LLC **Applicable Tax Form** and may delete or redact any SSN or personal information  |
| 22 | [ ]  | **Affirmative Action Certificate** --or-- **Renewal Application** [AA302] sent to TreasuryWebsite: <http://www.state.nj.us/treasury/purchase/forms.shtml>Form: <http://www.state.nj.us/treasury/purchase/forms/AA_%20Supplement.pdf> |
| 23 | [ ]  | Most recent **Audit or Financial Statement** (certified by accountant or accounting firm) Audit: For agencies expending over $100,000 in combined Federal/State Awards --or--Financial Statement: For agencies expending under $100,000 Policy: <http://www.nj.gov/dcf/documents/contract/manuals/CPIM_p7_audit.pdf> |
| 24 | [ ]  | **Annual Report to Secretary of State** Website: <https://www1.state.nj.us/TYTR_COARS/JSP/page1.jsp> |
| 25 | [ ]  | Certification Regarding **Debarment**Form: <http://www.state.nj.us/dcf/providers/notices/Cert.Debarment.pdf> |
| 26 | [ ]  | Non Profit: Annual Report - **Charitable Organizations**  -If not applicable, include a written statement Website: <http://www.njpublicsafety.org/ca/charity/charfrm.htm> |
| 27 | [ ]  | **Professional Licenses** related to job responsibilities for this RFP - If not applicable, include a written statement  |
| 28 | [ ]  | Proposed **Organizational Chart** for Services Required by this RFP  |
| 29 | [ ]  | Proposed **Program Staffing Summary Report (PSSR)** documenting anticipated staff levels and assignments Form: OOH Program Staffing Summary Report April 2015.xls Website: <http://nj.gov/dcf/providers/contracting/forms/csoc.html>  |