## 5:34 – Appendix B LOCAL PUBLIC AND PUBLIC SCHOOL CONTRACTS LAWS

N.J. DIVISION OF LOCAL GOVERNMENT SERVICES SUBMISSION CHECKLIST Purchase At 10 Percent Less Than The State Cooperative Contract Price *N.J.S.A. 40A:11-5(4) and N.J.S.A. 18A:18A-5(e)* 

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CONTRACTING UNIT'S NAME: ITEM PURCHASED:	COUNTY: DATE:	
The Local Public Contracts Law at N.J.S.A. 40A:11-5(4) at Law at N.J.S.A. 18A:18A-5(e) require information on this paramaction(s) to be filed with the Director of the Division of The rule, N.J.A.C. 5:34-9.6, codifies and supplements the rule flaw. The rule requires documentation to be submitted to working days of the award of any such contract. The follows submitted:	particular type of of Local Govern equirements of the Director w	of purchasing ment Services. the provisions ithin five (5)
DOCUMENTATION INCLUDED WITH SUBMISSION		
1. Copy of the purchase order with the reference N.J.A.C. 5	5:34-9 included	YES () NO ()
2.Copy of the requisition or request for purchase order (if a	pplicable);	YES () NO()
3. Written certification by the purchasing agent stating that price of the materials, supplies or equipment is at least 10 than the State contract price.		YES () NO ()
<ol> <li>Documentation verifying that the materials, supplies or e purchased by the contracting unit are identical to the mat supplies or equipment on State contract.</li> </ol>		YES () NO ()
5. Copy of each request for quotation issued by the purchas	ing agent: and	YES () NO ()
6. Copy of each of the three (3) quotations received by the agent, which shall include the vendor's name and address identification of items offered, prices quoted, and percei (if applicable); and,	s and	YES () NO ()
7.Copy of the adopted resolution approved by two-thirds af vote of the full membership of the governing body or ,in of boards of education, copy of the motion made, carried recorded in the written minutes of the meeting.	the case	YES () NO ()

OTHER COMMENTS:	Please use a separate sheet of paper and attach	to Checklist.
FORM SUBMITTED BY:		
(Please Print Name)	(Title)	
(Telephone or E-mail)	(Date)	

Please return this form with all the required documentation to the Bureau of Local Management Services at the Division of Local Government Services, at PO Box 803, Trenton, NJ 08625-0803.