



OFFER AND ACCEPTANCE PAGE
STATE OF NEW JERSEY
DEPARTMENT OF HEALTH
PO BOX 360 TRENTON, NEW JERSEY 08625-0360

BID SOLICITATION/REQUEST FOR QUOTES # AND TITLE: _____

TO THE STATE OF NEW JERSEY:

Name of Bidder/Contractor _____

Address _____

City, State, Zip Code _____

Phone Number _____

Email Address _____

FEIN _____

Print Name & Title of Authorized Representative _____

Signature of Authorized Representative _____

By submitting a Quote the Bidder certifies and confirms that:

1. It has read, understands, and agrees to all terms, conditions, and specifications set forth in the Bid Solicitation/Request for Quotes and the State of New Jersey Standard Terms and Conditions and agrees to furnish the goods, products, and/or services in compliance with those terms, and further, acknowledges the order of precedence of Contractual terms therein;
2. It has complied, and will continue to comply, with all applicable laws and regulations governing the provision of State goods and services, including the New Jersey Conflicts of Interest Law, N.J.S.A. 52:13D-12 to 28;
3. The price(s) and amount of its Quote have been arrived at independently and without consultation, communication or agreement with any other Contractor/Bidder or any other party;
4. Neither the price(s) nor the amount of its Quote, and neither the approximate price(s) nor approximate amount of this Quote, have been disclosed to any other firm or person who is a Bidder or potential Bidder, and they will not be disclosed before the Quote submission;
5. No attempt has been made or will be made to induce any firm or person to refrain from bidding on this Contract, or to submit a Quote higher than this Quote, or to submit any intentionally high or noncompetitive Quote or other form of complementary Quote;
6. The Quote is made in good faith and not pursuant to any agreement or discussion with, or inducement from, any firm or person to submit a complementary or other noncompetitive Quote;
7. The Bidder, its affiliates, subsidiaries, officers, directors, and employees are not, to Bidder's knowledge, currently under investigation by any governmental agency for alleged conspiracy or collusion with respect to bidding on any Contract and have not in the last five (5) years been convicted or found liable for any act prohibited by state or federal law in any jurisdiction involving conspiracy or collusion with respect to bidding on any Contract;
8. The Bidder's failure to meet any of the terms and conditions of the Contract shall constitute a breach and may result in suspension or debarment from further State bidding; and
9. A defaulting Contractor may also be liable, at the option of the State, for the difference between the Contract price and the price bid by an alternate Contract of the goods or services in addition to other remedies available.

NEW JERSEY DEPARTMENT OF HEALTH ACCEPTANCE OF OFFER *(For State Use Only)*

The Offer above is hereby accepted and now constitutes a Contract with the State of New Jersey, Department of Health (NJDOH)¹. The Contractor is now bound to sell the goods, products, or services in accordance with the terms of the Bid Solicitation/Request for Quotes and the State of New Jersey Standard Terms and Conditions. The Contractor shall not commence any work or provide any good, product, or service under this Contract until the Contractor complies with all requirements set forth in the Bid Solicitation/Request for Quotes and receives written notice to proceed.

NJDOH/NJSTART Contract Number _____

Award Date _____ Effective Date _____ Expiration Date (excluding extensions) _____

State of New Jersey, NJDOH Authorized Signature _____

Print Name and Title _____

¹This procurement is conducted and awarded pursuant to the New Jersey Department of Health's delegated purchasing authority and is subject to the requirements thereof (see N.J.S.A. 52:25-23).