

**INFORMAL
BID PROPOSAL FORM**
STATE OF NEW JERSEY
DEPARTMENT OF TRANSPORTATION

The bid proposal is to be returned to the buyer via the e-mail noted in the solicitation, and will be accepted no later than 10:00 AM on: **December 21, 2017.**

FIRM NAME
AND ADDRESS:
(Please type or print)

ID#:

PROJECT: NJDOT 90 Crows Mill Road Keasby, NJ 08832: New Rest Room Partitions

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The undersigned proposes to furnish all labor and materials as called for in the specifications for:
Insert "X" opposite trade:

[] (Insert Trade & #)

[] **Single Bid (lump sum all trades)** \$ _____
(Numerical figures only)

The proposal is based upon the bid documents listed below:

1. Specifications dated 11/30/2017 which include General Conditions and Instructions to Bidders.
2. Scope of Work dated 11/30/2017
3. Drawing(s) # _____ N/A _____, dated _____ N/A _____.

This project will be fully completed and ready for occupancy within **30** calendar days.
Liquidated Damages: in accordance with Paragraph 10 of the Specifications, liquidated damages will be assessed at \$250.00.

The above price is good through 60 days after the bid opening date.

Bid Bond, Payment and Performance Bonds are waived.

The contractor acknowledges receipt of the following Bulletins:

BULLETIN

DATE OF BULLETIN

PROJECT: NJDOT 90 Crows Mill Road Keasby, NJ 08832: New Rest Room Partitions

FOR SINGLE BID (LUMP SUM ALL TRADES) ONLY

The names and addresses of each Subcontractor included in this Single Bid proposal are listed below and are classified with DPMC in accordance with N.J.S.A. 52:35-1 et seq. at time of the bid due date. The Contractor acknowledges the failure to list classified Subcontractors as part of the Single Bid proposals shall constitute a non-waivable material deviation resulting in a rejection of the bid.

TRADE: _____

NAME:

ADDRESS: _____

TRADE: _____

NAME:

ADDRESS: _____

TRADE: _____

NAME:

ADDRESS: _____

PROJECT: NJDOT 90 Crows Mill Road Keasby, NJ 08832: New Rest Room Partitions

CERTIFICATION

I certify that the below named firm is classified by the Division of Property Management and Construction in the approved amount of \$_____ for (trade) _____ until _____(expiration date).

I further certify that this firm's bid for this project does not cause the firm to exceed its aggregate rating limit, including consideration of uncompleted construction work (please refer to N.J.A.C. 17:19-2.13, which describes how certain major trade subcontract work is discounted 85% for purposes of calculating whether a contractor is within its rating).

(Affix Seal –
if bid proposal is
by a corporation)

Respectfully submitted,

By: _____
(Name of firm)

(Signature)

(Title)

(Business Street Address ONLY – No PO Box)

(City, State, County, Zip)

(Phone #)

(Fax #)

FEDERAL IDENTIFICATION #: _____

HAS THERE BEEN ANY CHANGE IN OWNERSHIP INFORMATION SINCE FILING YOUR REQUEST FOR CLASSIFICATION (FORM GSA-27)?

[] YES

[] NO

IF YES, ATTACH EXPLANATION.

PROJECT: NJDOT 90 Crows Mill Road Keasby, NJ 08832: New Rest Room Partitions

**STATE OF NEW JERSEY
DEPARTMENT OF TRANSPORTATION
NON-COLLUSION AFFADAVIT**

Project: NJDOT 90 Crows Mill Road Keasby, NJ 08832 New Rest Room Partitions

Name: NJDOT Keasby Complex (2 Buildings)

Location: 90 Crows Mill Road, Keasby, New Jersey 08832

County: Middlesex

Bid Due Date: **December 21, 2017@ 10:00 AM**

STATE OF NEW JERSEY [_____]
[SS.]
COUNTY OF [_____]

I, _____ of the City of _____ in the
County of _____ and the State of _____ of

full age, being duly sworn according to law on my oath depose and say that:

I am _____ of the firm

of _____ the Contractor making the Bid Proposal for the above named project, and that I execute the said Bid Proposal with full authority so to do; that said Contractor 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 Bid Proposal and in this Affidavit are true and correct, and made with full knowledge that the State of New Jersey relies upon the truth of the statements contained in said Bid Proposal, and in the statements contained in this Affidavit in awarding the contract for the said project.

SIGNATURE OF PRINCIPAL

Subscribed and sworn to
Before me this _____ day
of _____,

Notary Public of

My Commission expires _____, _____

SBE FORM A - SCHEDULE OF SMALL BUSINESS ENTERPRISE PARTICIPATION

PROJECT: NJDOT Keasby Complex 2 buildings New Rest Room Partitions

BID AMOUNT: _____

DATE: _____

NAME OF SMALL BUSINESS ENTERPRISE	ADDRESS/ PHONE#	TYPE OF WORK AND CONTRACT ITEMS OR PARTS THEREOF TO BE PERFORMED	ACTUAL DOLLAR AMOUNT OF SBE CONTRACT WORK	PERCENT OF TOTAL BID AMOUNT	ETHNICITY

_____ SBE LIAISON OFFICER _____
 BIDDER (Print Name)

TELEPHONE NUMBER _____

Attach copies of (SBE) Certification from Division of Minority & Women Business Development for Prime and Sub Contractors.

FORM B - CERTIFICATION OF SBE STATUS

PROJECT: NJDOT 90 Crows Mill Road Keasby, NJ 08832: New Rest Room Partitions

I, _____ OF THE CITY OF
AND THE STATE OF _____, CERTIFY THAT:

I AM _____ OF THE FIRM OF _____, HAVING AN ADDRESS OF _____, WHICH FIRM IS CERTIFIED AS A SBE BY THE NEW JERSEY COMMERCE AND ECONOMIC GROWTH COMMISSION.

I FURTHER WARRANT THAT I AM AUTHORIZED BY THE SAID FIRM TO MAKE THIS CERTIFICATION AND WILL PROVIDE INFORMATION REQUESTED BY THE DIVISION OF PROPERTY MANAGEMENT & CONSTRUCTION TO DOCUMENT THE FACT THAT THE SAID FIRM IS AN SBE.

(SIGNATURE)

Public Law 2005, Chapter 92
Formerly: Executive Order 129

SOURCE DISCLOSURE CERTIFICATION FORM

Bidder: _____
NJ 08832: New Rest Room Partitions

Project: PROJECT: NJDOT 90 Crows Mill Road Keasby,

I hereby certify and say:

I have personal knowledge of the facts set forth herein and am authorized to make this Certification on behalf of the Bidder.

The Bidder submits this Certification as part of a bid proposal in response to the referenced solicitation issued by the State of New Jersey, Department of Treasury, Division of Property Management and Construction (DPMC), in accordance with the requirements of Public Law 2005, Chapter 29, (N.J.S.A. 52:34-13.2 et seq., superseding Executive Order 129 (2004)), issued by Governor James E. McGreevey on September 9, 2004 (hereinafter "E.O. No 1290)).

The following is a list of every location where services will be performed by the bidder and all subcontractors.

<u>Bidder or Subcontractor</u>	<u>Description of Services</u>	<u>Performance Location(s) by Country</u>
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Any changes to the information set forth in this Certification during the term of any contract awarded under the referenced Project Number will be immediately reported by the Bidder to the Contract Compliance Unit in the DPMC, Department of Treasury, State of New Jersey, PO Box 034, Trenton, NJ 08625.

I understand that, after award of a contract to the Bidder, it is determined that the Bidder has shifted services declared above to be provided within the United States to sources outside the United States, prior to a written determination by the Director, Division of Property Management and Construction, that extraordinary circumstances require the shift of services or that the failure to shift the services would result in economic hardship to the State of New Jersey, the Bidder shall be deemed in breach of contract, which contract will be subject to termination for cause under its contract with DPMC.

I further understand that this Certification is submitted on behalf of the Bidder in order to induce DPMC to accept a bid proposal, with knowledge that the State of New Jersey and DPMC are relying upon the truth of the statements contained herein.

I certify that, to the best of my knowledge and belief, the foregoing statements by me are true. I am aware that if any of the statements are willfully false, I am subject to punishment.

Bidder: _____
[Name of Organization or Entity]

By: _____

Title: _____

Print Name: _____

Date: _____

PUBLIC LAW 2005, CHAPTER 271 VENDOR CERTIFICATION AND POLITICAL CONTRIBUTION DISCLOSURE FORM			
NAME AND ADDRESS OF COMMITTEE TO WHICH CONTRIBUTION WAS MADE	DATE OF CONTRIBUTION	AMOUNT OF CONTRIBUTION	CONTRIBUTOR'S NAME
Indicate " <u>none</u> " if no Reportable Contributions were made. Attach Additional Pages as Needed			

CERTIFICATION:

I certify as an officer or authorized representative of the Vendor that, to the best of my knowledge and belief, the foregoing statements by me are true. I am aware that if any of the statements are willfully false, I am subject to punishment.

Name of Vendor: _____

Signed: _____

Title: _____

Print Name: _____

Date: _____

MACBRIDE PRINCIPLES FORM

BIDDER'S REQUIREMENT: TO PROVIDE A CERTIFICATION IN COMPLIANCE WITH THE MACBRIDE PRINCIPLES AND NORTHERN IRELAND ACT OF 1989.

Pursuant to Public Law 1995, c. 134, a responsible bidder selected, after public bidding, by the Director of the Division of Purchase and Property, pursuant to N.J.S.A. 52:34-12, must complete the certification below by checking one of the two representations listed and signing where indicated. If a bidder who would otherwise be awarded a purchase, contract or agreement does not complete the certification, then the Director may determine, in accordance with applicable law and rules, that it is in the best interest of the State to award the purchase, contract or agreement to another bidder who has completed the certification and has submitted a bid within five (5) percent of the most advantageous bid. If the Director finds contractors to be in violation of the principles which are the subject of this law, they shall take such action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

I certify, pursuant to N.J.S.A. 52:34-12.2, that the entity for which I am authorized to bid:



Has no ongoing business activities in Northern Ireland and does not maintain a physical presence therein through the operation of offices, plants, factories, or similar facilities, either directly or indirectly, through intermediaries, subsidiaries or affiliated companies over which it maintains effective control; or



Will take lawful steps in good faith to conduct any business operations it has in Northern Ireland in accordance with the MacBride Principles of nondiscrimination in employment as set forth in N.J.S.A. 52:18A-89.8 and in conformance with the Fair Employment (Northern Ireland) Act of 1989, and permit independent monitoring of their compliance with those principles.

Certification: I, being duly sworn upon my oath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I acknowledge: that I am authorized to execute this certification on behalf of the bidder; that the State of New Jersey is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the completion of any contracts with the State to notify the State in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the State, permitting the State to declare any contract(s) resulting from this certification void and unenforceable.

Signature:

Print Name:

Title:

Firm Name:

Date: