

**TOWNSHIP OF NEPTUNE
COUNTY OF MONMOUTH
STATE OF NEW JERSEY
REQUESTS FOR PROPOSALS/QUALIFICATIONS
CADD SERVICES PROPOSAL NT2015-19**

Sealed proposals will be received by the Township Clerk of the Township of Neptune, New Jersey and opened and read in public in the Neptune Municipal Building Executive Conference Room, located in the Township of Neptune Municipal Complex, 25 Neptune Boulevard, Neptune New Jersey, on **December 11, 2014 at 10:30 A.M.** for the following:

Request for Qualifications from Individuals and/or Firms Interested in providing "CADD Services" to the Township of Neptune for the period January 1, 2015 through December 31, 2015. **BID/PROPOSAL # NT2015-19**

Successful applicants will be required to comply with requirements of N.J.S.A. 10: 5-31, et seq. (N.J.A.C. 17:27) (Equal Employment Opportunity) and N.J.S.A. 52:32-44, et seq. (New Jersey Business Registration).

The right is reserved to reject any or all proposals if it is deemed to be in the best interest of the Township of Neptune to do so. The Township of Neptune also reserves the right to conduct interviews of any or all applicants, as it deems necessary.

By order of the Township Committee of the Township of Neptune

DR. MICHAEL BRANTLEY, Mayor, Township of Neptune
RICHARD J. CUTTRELL, Municipal Clerk, Township of Neptune
MICHAEL J. BASCOM, Chief Financial Officer, Township of Neptune

**Request for Qualifications from Individuals and/or Firms
Interested in Serving as “CADD Services” to the
Township of Neptune for the Period
January 1, 2015 through December 31, 2015
Bid/Proposal #NT2015-19**

Introduction

Pursuant to the Fair and Open Process established by N.J.S.A. 19:44A-1, et seq., the Township of Neptune seeks Requests for Qualifications (“RFQ”) from Individuals and /or Firms licensed to practice in the State of New Jersey that wish to provide CADD Services to the Township of Neptune. The successful individual/firm must have significant experience in working with clients in a variety of areas including CADD services.

The successful Firm will provide the Township of Neptune with CADD Services relating to but not necessarily limited to the following:

All CADD services, preparation of plans, mapping as requested graphics, presentations and other Professional CADD services and assistance to the Township of Neptune, including but not limited to plans, maps, presentations, graphics, meetings to prepare same, advisory opinions, and all else necessary and incidental hereto. Work may involve meeting/talking with Township Personnel to review the scope and intent of project.

All completed work shall be delivered as specified with the required number of plans and CD of plan/drawing In AutoCAD 2009 or latest version. In addition, same plan shall be available in Adobe format.

The CADD services shall bill services in accordance with the schedule outlined below: All billing shall be received monthly and sent with an executed Municipal Voucher. Billing shall be in accordance with NJSA 40: 55D-1, et seq.

The Township has adopted the following hourly rate schedule for Professional CADD performed pursuant to this RFQ:

Principal Engineer:	\$150.00	CADD Technician:	\$ 60.00
Associate Engineer:	\$130.00	Senior CADD Draftsman:	\$ 70.00
Engineer:	\$ 90.00	CADD Draftsman:	\$ 50.00
		Land Surveyor:	\$ 85.00

Professional Information and Qualifications

Each interested firm shall submit the following information:

1. Name of Firm:
2. Address of principal place of business and all or firm's Offices and corresponding telephone and fax numbers. Please note Specifically which CADD persons or other individuals will be assigned to work with the Township of Neptune, and in what capacity:
3. Description of education, experience, qualifications, number of years with the firm, for the firm's CADD persons and other individuals who will work with the Township of Neptune. Include a descriptive narrative of their experience with projects similar to those described above;
4. Experience related to prior work similar in nature and listing of other clients for which similar work was successfully completed;
5. At least four references, three of which must have knowledge of your representation of a public entity with Names and Numbers of contact person.
6. Examples of your record of success providing such services;
7. The firm's ability to provide the services in a timely fashion (including staffing, familiarity and location of key staff);
8. Any other information which the interested firm deems relevant;
9. A copy of your New Jersey Business Registration Certificate;
10. A completed Statement of Ownership form (Attached below).

Selection Criteria

The selection criteria used in awarding a contract or agreement for Professional Services as described herein shall include:

1. Qualifications of the individuals who will perform the tasks and the amounts of their respective participation;
2. Experience and references;
3. Ability to perform the task in a timely fashion, including staffing and familiarity with the subject matter; and
4. Cost effectiveness.
5. Other factors deemed relevant based upon quality of submissions;

If the firm is successful the following procedures will be implemented for each contract/job that the consultant is awarded within the Township:

1. Each job for which services are requested will be based upon an estimate from the professional consultant;
2. Based upon the estimate and/or proposal a Purchase Order will be issued for which services are required prior to commencement of work;
3. The Purchase Order number shall be referenced on all jobs and on all billing;
4. If for any reason, the professional consultant believe that there are additional services that will be required to complete the job, the obligation is on the part of the professional to notify the Township of the potential additional services and costs for same;
5. No additional work shall commence or prior to authorization and issuance of an additional Purchase Order or amendment to original Purchase Order;
6. Jobs that are billed on an hourly basis may have monies left in the Purchase Order upon completion;
7. Professional Consultants are required to invoice the Township of Neptune on a monthly basis for the previous month's work. If no work has been completed no bill shall be presented;

8. Professional Consultants are to provide monthly billing that provides the name of the person, persons title, hours spent, hourly rate and a description of work;
9. The Township of Neptune will not pay invoices that have a cumulative amount of work for numerous months; Billing shall be on a monthly basis;
10. The Township of Neptune based on the availability of funds shall pay consultants for work that has been completed in the prior month at the next available meeting, provided that the Purchase Order is in place and the funds have not been exceeded;
11. Unless a specific Purchase Order is issued, consultations with staff members, members of the Board or the Governing body under one hour shall not be billable to the Township;
12. The Township of Neptune shall not be charged and will not pay interest on any invoices;

Submission Requirements

Responses to this RFQ must be delivered in a sealed envelope bearing the title
And Bid/Proposal Number no later than **10:30 am** on **December 11, 2014** to:

Township Clerk, Neptune Township
Neptune Township Municipal Complex
25 Neptune Boulevard
Neptune, New Jersey 07753

Please submit one original and two copies of the Request for Qualifications (RFQ) on 8 ½" x 11" white paper.

NEW JERSEY BUSINESS REGISTRATION REQUIREMENTS – NON-CONSTRUCTION

All New Jersey and out of State Business Organizations must obtain a Business Registration Certificate (BRC) from the Department of Treasury, Division of Revenue, prior to conducting business in the State of New Jersey. Proof of valid business registration with the Division of Revenue, Department of Treasury, State of New Jersey, must be submitted with this proposal. No contract will be awarded without proof of business registration with the Division of Revenue. The contract will contain provisions in compliance with N.J.S.A. 52:32-44, as amended, outlined below.

The Contractor shall provide written notice to its subcontractors and suppliers of the responsibility to submit proof of business registration to the Contractor.

Before final payment of the contract is made by the Contracting Agency, the Contractor shall submit an accurate list and proof of business registration of each subcontractor or supplier used in the fulfillment of the contract, or shall attest that no subcontractors were used.

For the term of the contract, the Contractor and each of its affiliates and each Subcontractor and each of its affiliates (N.J.S.A. 52:32-44 (g) (3) shall collect and remit to the Director, New Jersey Division of Taxation, the use tax due pursuant to the "Sales and Use Tax Act" (N.J.S.A. 54:32 B-1, et seq.) on all sales of tangible personal property delivered into the State.

A Business Organization that fails to provide a copy of a registration as required pursuant to section 1 of P.L. 2001, c.134 (N.J.S.A. 52:32-44 et seq.) or subsection e. or f. of section 92 of P.L. 1977, c. 110 (N.J.S.A. 5:12-92), or that provides false business registration information under the requirements of either of those sections, shall be liable for a penalty of \$25.00 for each day of violation, not to exceed \$50,000.00 for each business registration copy not properly provided under a contract with a contracting agency.

A sample Business Registration Certificate is attached. Other forms such as Certificate of Authority to collect Sales and Use Taxes or a Certificate of Employee Information Report Approval, are **not** acceptable.

Any questions in this regard can be directed to the Division of Revenue at (609) 292-1730. Form NJ-REG can be filed online at:

<http://www.state.nj.us/treasury/revenue/gettingregistered.htm#busentity>

**TOWNSHIP OF NEPTUNE
COUNTY OF MONMOUTH
STATE OF NEW JERSEY**

STATEMENT OF OWNERSHIP

The Contractor is (check one): Individual: [] Partnership: [] P.A. [] L.L.C. []

Corporation: [] Joint Venture: [] Other: [] Specify: _____

NAMES:

ADDRESSES:

1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

NAME OF CONTRACTOR: _____

SIGNED BY: _____

PRINT NAME & TITLE: _____

DATE: _____

NOTES:

A. Attach additional sheets as needed and check here [].

B. If an entity owns a 10% or greater interest in the Contractor, attach a list of the owners of 10% or greater interest for each such entity. Repeat the process of disclosure as necessary for each tier or level of ownership until the name and address of each person who owns a 10% or greater interest has been disclosed. **If no person or entity owns a 10% or greater interest in a listed entity, so state.**

Sample Business Registration Certificate (for example purposes only)

STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE		DEPARTMENT OF TREASURY DIVISION OF REVENUE PO BOX 252 TRENTON, N.J. 08646-0252
TAXPAYER NAME:	TRADE NAME:	
TAXPAYER IDENTIFICATION#:	SEQUENCE NUMBER:	
ADDRESS:	ISSUANCE DATE:	
EFFECTIVE DATE:		
FORM-BRC(08-01)	Acting Director This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.	