

**TOWNSHIP OF SHREWSBURY
COUNTY OF MONMOUTH, STATE OF
NEW JERSEY
REQUESTS FOR
PROPOSALS/QUALIFICATIONS BOND
COUNSEL
ST2022-02**

Sealed proposals will be received by the Township Clerk of the Township of Shrewsbury, New Jersey and opened and read in public in the Executive Conference Room, located on the First Floor, in the Township of Shrewsbury Municipal Complex, 25 Neptune Boulevard, Neptune, New Jersey, on **December 14, 2021 at 10:00 A.M.** for the following:

Request for Qualifications from Law Firms Interested in
Serving as “Bond Counsel” to the Township of Shrewsbury
for the period January 1, 2022 through December 31, 2022

BID/PROPOSAL # ST2022-02

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 Shrewsbury to do so. The Township of Shrewsbury 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 Shrewsbury

GLENWOOD PUHAK, Mayor, Township of Township
PAMELA D. HOWARD, Municipal Clerk, Township of Shrewsbury
THOMAS X. SEAMAN, Chief Financial Officer, Township of Shrewsbury

**Request for Qualifications from Law Firms Interested in Serving
as “Bond Counsel” to the Township of Shrewsbury for the
Period January 1, 2022 through December 31, 2022
BID/PROPOSAL #ST2022-02**

Introduction

Pursuant to the Fair and Open Process established by N.J.S.A. 19:44A-1, et seq., the Township seeks Requests for Qualifications (“RFQ”) from law firms licensed to practice law in the State of New Jersey that wish to serve as Bond Counsel for the Township of Shrewsbury. The successful firm must have significant experience in representing New Jersey public entities in a variety of areas of consultation and litigation in State and Federal Courts, administrative forums and arbitration. The successful firm will provide the Township with legal guidance relating to, but not necessarily limited to:

1. Matters involving public finance including, but not limited to the financing of various capital projects through the adoption of appropriate bond ordinances and the issuance of bonds and/or bond anticipation notes and other matters as directed by the Township Committee, including but not limited to the authorization, issuance, sale and delivery of bonds and/or bond anticipation notes for the Township, including legal services related to or necessary in connection therewith.
2. The preparation of any bond ordinances, the preparation of the resolution authorizing the financing, the preparation and review of the Notice of Sale and the bonds or bond anticipation notes, the assistance in the preparation and review of the Official Statement, the preparation of all closing documents necessary for the issuance of the bonds or bond anticipation notes, attendance at the closing at which time the bonds or bond anticipation notes will be delivered, payments being made therefore and deliver a final approving opinion for the bond or bond anticipation notes issue.
3. Preparation, review and distribution of Preliminary Official Statements and Official Statements, as directed by the Township Committee.
4. Temporary financings of the Township involving private placement and not involving preparation of an Official Statement, as directed by the Township Committee.
5. Any other matters as directed by the Township related to financing.

The Township has adopted the following rate schedule for professional legal services rendered for all professional services performed pursuant to this RFQ:

Base fee of \$4,100.00 plus \$1.00 per \$1,000.00 of bonds issued;

For temporary financings of the Township involving a private placement and not involving the preparation of an Official Statement, \$1,000.00 for its approving opinion and \$0.50 per \$1,000.00 of notes issues.

Preparation and review of Ordinances, \$400 for each single purpose ordinance and \$550.00 for each multiple ordinance, exclusive of consultations, meetings or discussions, which are to be invoiced at an hourly rate.

For all other services requiring an hourly rate:

Partners/Counsel:	\$160.00
Associates:	\$120.00
Paralegals:	\$100.00 per hour

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 attorneys or firm's offices and corresponding telephone and fax numbers. Please note specifically which attorneys will be assigned to work with the Township;
3. Areas of Practice ;
4. Description of firm's attorneys' education, experience, qualifications, number of years with the firm and a descriptive narrative of their experience with projects similar to those described above;
5. Experience related to representation of Municipalities and other public entities;
6. At least four references, three of which must have knowledge of your representation of a public entity;
7. Examples of your record of success representing public entities;
8. The firm's ability to provide the services in a timely fashion (including staffing, familiarity and location of key staff);
9. Any other information which the interested firm deems relevant;
- 10 . A copy of your New Jersey Business Registration Certificate
- 11 . 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.

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 14, 2021** to:

Township Clerk, Shrewsbury Township
1979 Crawford Street
Shrewsbury, New Jersey 07724

Please submit one original and one copy 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
SHREWSBURY 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.

TOWNSHIP OF SHREWSBURY

NON-COLLUSION AFFIDAVIT

State of New Jersey

County of _____ ss:

I, _____ residing in _____ (Name of affiant) (Name of municipality)

in the County of _____ and State of _____ of full age, being duly sworn according to law on my oath depose and say that:

I am _____ of the firm of _____ (Title or position) (Name of firm)

_____, the bidder making this Proposal for the RFP entitled _____, (Title RFP)

and that I executed the said proposal with full authority to do so that said bidder 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 proposal and in this affidavit are true and correct, and made with full knowledge that the **Township of Shrewsbury** relies upon the truth of the statements contained in said Proposal and in the statements contained in this affidavit in awarding the contract for the said project.

I further warrant that no person or selling agency has been employed or retained to solicit or secure such contract upon an agreement or understanding for a commission, percentage, brokerage, or contingent fee, except bona fide employees or bona fide established commercial or selling agencies maintained by

_____. (Name of Business Entity)

Subscribed and sworn to before me _____, 20_____

Signature

(Type or print name under signature)

Notary Public _____

My Commission expires _____

(Seal

TOWNSHIP OF SHREWSBURY

INSURANCE REQUIREMENTS AND ACKNOWLEDGEMENT FORM

Certificate(s) of Insurance shall be filed with the Township's Clerk's Office upon award of contract by the Township Committee.

The minimum amount of insurance to be carried by the Professional Service Entity shall be as follows:

A. Commercial General Liability (CGL)

1. CGL with limits of insurance of not less than \$1,000,000 Each Occurrence, \$2,000,000 Products -Completed Operations Aggregate, \$1,000,000 Personal & Advertising Injury, and \$2,000,000 General Annual Aggregate.
2. CGL coverage shall be written on a current version of ISO Occurrence Commercial General Liability Coverage form CG 00 01 or a form providing equivalent coverage and shall cover liability arising from premises, ongoing operations, independent contractors, products-completed operations, and personal and advertising injury.
3. The Owner and all other parties required by the Owner, shall be named as additional insureds on the CGL coverage part using Additional Insured - Owners, Lessees or Contractors CG 20 10, Additional Insured - Owners, Lessees or Contractors - Completed Operations CG 20 37, or endorsements providing equivalent coverage to the additional insureds. Coverage for the additional insureds shall be as broad as the coverage provided for the named insured Professional Service Entity. It shall apply as primary and non-contributory insurance before any other insurance or self-insurance, including any deductible, maintained by, or provided to, the additional insured.
4. The Professional Service Entity shall maintain CGL coverage for itself and all additional insureds for the duration of the contract.

C. Automobile Liability

1. Business Auto Liability with limits of at least \$ 1,000,000 each accident.
2. Business Auto coverage must include coverage for liability arising out of all owned, leased, hired and non-owned automobiles.

C. Commercial Umbrella

1. Umbrella limits must be at least \$ 1,000,000 and must provide coverage over all underlying policies.
2. Umbrella coverage must include as additional insureds all entities that are additional insureds on the CGL.

D. Workers Compensation and Employers Liability

1. Coverage A- Statutory
2. Coverage B -Employers Liability Insurance limits of at least \$1,000,000 each accident for bodily injury by accident, \$1,000,000 each employee for injury by disease and \$1,000,000 for total policy bodily injury by disease.
3. Where applicable, U.S. Longshore and Harborworkers Compensation Act Endorsement shall be attached to the policy.
4. Where applicable, the Maritime Coverage Endorsement shall be attached to the policy.

E. Professional Liability Insurance

Limits shall be a minimum of \$1,000,000.00 for each claim and \$1,000,000.00 aggregate each policy period.

F. Waiver of Subrogation (Waiver of Transfer of Rights of Recovery Against Others to Us)

Professional Service Entity shall waive all rights against Owner and their agents, officers, directors and employees for recovery of damages to the extent these damages are covered by commercial general liability, commercial umbrella liability, business auto liability or workers compensation and employers liability insurance maintained per requirements stated above and where permitted by law.

G. Certificates of Insurance

Professional Service Entity shall provide the Owner, prior to commencement of work, valid Certificates of Insurance, and all applicable additional insured endorsements, verifying that the foregoing insurance requirements have been met. Professional Service Entity understands the terms of this Insurance Requirements agreement and acknowledges that it is part of any contract or as a standalone Insurance Requirements Agreement.

Acknowledgement of Insurance Requirement:

(Signature)

(Date)

(Printed Name and Title)

TOWNSHIP OF SHREWSBURY

MANDATORY EQUAL EMPLOYMENT OPPORTUNITY NOTICE
(N.J.S.A. 10:5-31 et seq. and N.J.A.C. 17:27 et seq.)

GOODS, PROFESSIONAL SERVICES AND GENERAL SERVICE CONTRACTS

This form is a summary of the successful professional service entity's requirement to comply with the requirements of **N.J.S.A. 10:5-31 et seq.** and **N.J.A.C. 17:27 et seq.**

The successful professional service entity shall submit to the Township of Shrewsbury, after notification of award but prior to execution of this contract, one of the following three documents as forms of evidence:

(a) A photocopy of a valid letter that the vendor is operating under an existing Federally approved or sanctioned affirmative action program (good for one year from the date of the letter);

OR

(b) A photocopy of a Certificate of Employee Information Report approval, issued in accordance with N.J.A.C. 17:27-1.1 et seq.;

OR

(c) A photocopy of an Employee Information Report (Form AA302) provided by the Division of Contract Compliance and distributed to the Township of Shrewsbury to be completed by the vendor in accordance with N.J.A.C. 17:27-1.1 et seq.

The successful professional service entity may obtain the Employee Information Report (AA302) from the Township of Shrewsbury during normal business hours.

The successful professional service entities must submit the white and canary copies of the AA302 (Employee Information Report) to the Division of Contract Compliance and Equal Employment Opportunity in Public Contracts (Division). The pink *Public Agency* copy is submitted to the Township of Shrewsbury, and the gold *Vendor* copy is retained by the professional service entity.

The undersigned professional service entity certifies that he/she is aware of the commitment to comply with the requirements of N.J.S.A. 10:5-31 et seq. and N.J.A.C. 17:27 et seq. and agrees to furnish the required forms of evidence.


The undersigned professional service entity further understands that his/her submission shall be rejected as non-responsive if said professional service entity fails to comply with the requirements of N.J.S.A. 10:5-31 et seq. and N.J.A.C. 17:27 et seq.

COMPANY: _____


SIGNATURE: _____ PRINT NAME: _____

TITLE: _____ DATE: _____

SAMPLE CERTIFICATE OF EMPLOYEE INFORMATION REPORT

STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE FOR STATE AGENCY AND CASINO SERVICE CONTRACTORS		DEPARTMENT OF TREASURY DIVISION OF REVENUE PO BOX 252 TRENTON, N.J. 08646-0252
TAXPAYER NAME: TAX REGISTRATION TEST ACCOUNT	TRADE NAME: CLIENT REGISTRATION	
TAXPAYER IDENTIFICATION#: 970-097-382/500	SEQUENCE NUMBER: 0107330	
ADDRESS: 847 ROEBLING AVE TRENTON NJ 08611	ISSUANCE DATE: 07/14/04	
EFFECTIVE DATE: 01/01/01		
FORM-BRC(08-01)	Acting Director	

This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.

STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE	
	
Taxpayer Name:	TAX REG TEST ACCOUNT
Trade Name:	
Address:	847 ROEBLING AVE TRENTON, NJ 08611
Certificate Number:	1093907
Date of Issuance:	October 14, 2004
For Office Use Only:	
	20041014112823533

TOWNSHIP OF SHREWSBURY

DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN

Contract Number: _____ Bidder/Proposer: _____

Pursuant to Public Law 2012, c. 25, any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract must complete the certification below to attest, under penalty of perjury, that the person or entity, or one of the person or entity's parents, subsidiaries, or affiliates, is not identified on a list created and maintained by the New Jersey Department of the Treasury as a person or entity engaging in investment activities in Iran. If the Township of Shrewsbury finds a person or entity to be in violation of the principles which are the subject of this law, s/he shall take 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 person or entity.

I certify, pursuant to Public Law 2012, c. 25, that the person or entity listed above for which I am authorized to submit a bid/proposal:

is not providing goods or services of \$20,000,000 or more in the energy sector of Iran, including a person or entity that provides oil or liquefied natural gas tankers, or products used to construct or maintain pipelines used to transport oil or liquefied natural gas, for the energy sector of Iran,

AND

is not a financial institution that extends \$20,000,000 or more in credit to another person or entity, for 45 days or more, if that person or entity will use the credit to provide goods or services in the energy sector in Iran.

In the event that a person or entity is unable to make the above certification because it or one of its parents, subsidiaries, or affiliates has engaged in the above-referenced activities, a detailed, accurate and precise description of the activities must be provided in part 2 below to the Township of Shrewsbury under penalty of perjury. Failure to provide such will result in the bid/proposal being rendered as non-responsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.

PART 2: PLEASE PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN

You must provide a detailed, accurate and precise description of the activities of the proposer, or one of its parents, subsidiaries or affiliates, engaging in the investment activities in Iran outlined above by completing the boxes below.

Name: _____ Relationship to Proposer: _____

Description of Activities:

Duration of Engagement: _____ Anticipated Cessation Date: _____

Proposer Contact Name: _____ Contact Phone Number: _____

Certification: I, being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I attest that I am authorized to execute this certification on behalf of the above-referenced person or entity. I acknowledge that the State of New Jersey and the Township of Shrewsbury are relying on the information contained herein and thereby acknowledge that I am under a continuing obligation from the date of this certification through the completion of any contracts with the State and the Township of Howell to notify the State and the Township of Shrewsbury in writing of any changes to the answers of information contained herein. I acknowledge 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 recognize that I am subject to criminal prosecution under the law and that it will also constitute a material breach of my agreement(s) with the State of New Jersey and the Township of Shrewsbury and that the State and the Township of Shrewsbury at its option may declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print): _____ **Signature:** _____
Title: _____ **Date:** _____

TOWNSHIP OF SHREWSBURY

CHECKLIST

The following items, as indicated below (X), shall be provided with the receipt of sealed submissions:

1. Non-Collusion Affidavit
 X
2. Disclosure of Ownership Form
 X
3. Insurance Requirement Acknowledgement Form Including Title Page of Existing
Professional Liability Insurance Policy
..... X
- 4 .Mandatory Equal Employment Opportunity Notice Acknowledgement Including attached
certificate of Employee Information
report..... X
5. Copy of your **Business Registration Certificate** as issued by the State of New Jersey,
Department of Treasury, Division of Revenue (Strongly suggested that this be submitted
with submission)
 X
- 6.Submission of Resume of Qualification and Educational experience and proposed
Contract for Services Form
 X
7. Disclosure of Investment Activities in
Iran..... X

Reminder

Please submit one (1) original, one (1) copy of your proposal and all required documents, labeled ON THE SEALED ENVELOPE with your name & the title of submission.