



HAGC FINANCE DEPARTMENT

**PROPOSAL/BID  
COVER SHEET****Form PO 501**  
(rev. November 2015)**HOUSING AUTHORITY OF THE  
BOROUGH OF GLASSBORO****REQUEST For PROPOSAL (RFP)**Direct Questions concerning this RFP/IFB to:PERSON/TITLE: Nelly Rojas Executive Assistant  
PHONE/FAX: 856/845-4959 ext. 221  
E-MAIL ADDRESS: nrojas@hagc.org**RFP NUMBER: 23-004****DESCRIPTION OF GOODS AND SERVICES****PROFESSIONAL AUDIT SERVICES**

CONTRACT TERM

**1 year**

BEGINNING

**1/1/2024**

ENDING

**12/31/2024****The Authority reserves the right to reject any and all offers and to waive non-material deficiencies.****GENERAL PROPOSAL/BID REQUIREMENTS**

- 1)
- SUBMISSION DEADLINE:**
- (no later than this date & time)

**DATE: November 3, 2023 TIME: 2:45 PM****NOTE: TIME IS OF THE ESSENCE. LATE OFFERS WILL BE REJECTED.**

- 2)
- Mailing Address**
- Attention: Kimberly Gober, Executive Director**
- 
- c/o: Housing Authority of Gloucester County**
- 
- 100 Pop Moylan Boulevard, Deptford, NJ 08096**

\*The Proposal Opening shall be held at the same location.

- 3) The Proposal/Bid must conform to specifications as outlined in the **RFP/IFB**
- 4) Proposals/ Bids must be enclosed in a sealed envelope addressed to the above.
- 5) ALL Respondents must indicate the **RFP/IFB NO.** on the outside envelope.
- 6) Proposals/Bids must include all price information, typed or written in **ink**.
- 7) Proposal/Bid prices must remain valid and firm for **60** days after bid deadline.
- 8) The Respondent must sign the Proposal/Bid in **ink** and all corrections or alterations in units or prices must be initialed by the respondent in **ink**.
- 9) If Proposal/Bid Amount exceeds the State Bid Threshold of: \$ **17,500.00**  
Then the following items, a. and b., will apply if indicated here: **n/a**
- a. A **Bid Guaranty/Bond** will be required at **10%** of Bid, but not to exceed **\$20,000** (max), presented in a **Certified Check** or executed **Bid Bond**.  
If a Construction Contract exceeds \$100,000, then **5%** is required. And,
- b. A **Consent of Surety** is required equal to **100%** of the contract price.
- 10) Regarding Only -- **Invitation for Bids: n/a**
- a. A **Performance & Payment Bond** totalling **100%** of the **Bid** is required at the awarding from all contractors & subcontractors collectively.
- b. A **Maintenance Bond** is required prior to final payment (**Construction Only**).
- 11) An **Affirmative Action Cert. & Project Workforce Report** (form-AA201) may be required at contract awarding & during term of contract.

- 12.)
- REQUIRED FORMS & CERTIFICATES**

Failure to properly execute &amp; sign the following documents shall result in the rejection of the proposal or bid.

↓ [PLEASE INITIAL TO ACKNOWLEDGE COMPLIANCE]

- a. **Form PO 501--Proposal Cover Sheet**
- b. **IRS Form W-9**
- c. **Owner Disclosure Statement**
- d. **"Debarment" Certification**
- e. **Certificate for Contracts, etc.**
- f. **Non-Collusion Affidavit**
- g. **Affirmative Action Statement & Affidavit**
- h. **Disclosure of Lobbying Activities**
- i. **Drug-Free Workplace Affidavit**
- j. **Non-Default Affidavit**
- k. **HUD-5369-B, Instructions to Offerors**
- l. **NJ Business Registration Cert.**
- m. **Professional License (if applicable)**
- n. **Affidavit of Moral Integrity**
- o. **General Terms and Conditions**
- p. **Certificate of Professional Liab. Insur.**
- q. **Iranian Certification**
- r. **Mandatory Equal Opportunity**
- s. **HUD 50071 Certification of Payments**
- t. **Certificate(s) of Liability Insurance**
- u. **Certificate(s) of Workers Comp Insurance**
- v. **Acknowledgement of Addenda Sheet**

Required DOCs must also be filed by authorized subcontractors.

**PROPOSAL/BID - TO BE COMPLETED BY RESPONDENT**

PLEASE TYPE OR PRINT IN INK.

- 13) Firm Name and Address

- 14) Federal Taxpayer ID Number

- 15) Telephone Number

- 16) E-Mail Address, if any

- 17) Fax Number

**PROPOSAL/BID**

- 18a.)
- Proposal/Bid Amount In Words (BASE BID)**

Please Type or Print Legibly

Dollars

- 18b.)
- Proposal/Bid Amount in Numbers**
- 
- (BASE BID)
- U.S. Currency Format**

\$

Please Type or Print Legibly

- 19)
- Date Price Guarantee Expires**

- 18c.)
- 
- Alternates

ALTERNATE 1 -- if applicable

**N/A**

ALTERNATE 2 -- if applicable

**N/A**

ALTERNATE 3 -- if applicable

**N/A**

ALTERNATE 4 -- if applicable

**N/A****NOTE: DETAILED PRICING SHOULD BE REPORTED ON THE PROPOSAL/BID DETAIL SHEET***Signature of the Respondent attests that the Respondent has read, understands and agrees to all terms, conditions, and specifications set forth in this Request For Proposal/Invitation For Bid, including all addenda.*

- 20)
- ORIGINAL Signature of Respondent**

- 21)
- Print/Type Name and Title**

- 22)
- Date**

SUBMIT ON ORIGINAL FORM

REQUEST FOR PROPOSAL FOR

**PROFESSIONAL  
AUDIT SERVICES FYE 12/31/23**

RFP  
**GHA 23-004**

**HOUSING AUTHORITY OF THE BOROUGH OF  
GLASSBORO**

**SUBMISSION DEADLINE**

**2:45 P.M.  
NOVEMBER 3, 2023**

HOUSING AUTHORITY  
OF  
THE BOROUGH OF GLASSBORO

**ADDRESS ALL PROPOSALS TO:**

**KIMBERLY GOBER  
EXECUTIVE DIRECTOR  
HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO  
100 POP MOYLAN BLVD.  
DEPTFORD, NEW JERSEY 08096**

# **The Housing Authority of the Borough of Glassboro**

## **REQUEST FOR PROPOSAL FOR** **PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004**

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# **The Housing Authority of the Borough of Glassboro**

## **REQUEST FOR PROPOSAL FOR PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004**

### **SECTION 1**

#### **GENERAL INFORMATION**

##### **NAME OF ORGANIZATION AND ADDRESS**

HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO  
100 POP MOYLAN BLVD.  
DEPTFORD, NEW JERSEY 08096

##### **TELEPHONE**

(856) 845-4959 X 218

##### **CONTACT PERSON**

**KIMBERLY GOBER**  
**Executive Director**

##### **SERVICES REQUESTED**

The Housing Authority of the Borough of Glassboro is requesting proposals from qualified certified public accounting firms to perform the fiscal year (FY) 2023 audit of the Authority. Solicitation is subject to the satisfactory negotiation of terms and availability of funding.

##### **PERIOD OF CONTRACT**

The contract that results from this RFP will commence on the award of the contract, terminating after oversight agencies have accepted and approved the audited Financial Statements for the specified period.

##### **METHOD OF PAYMENT**

Payment made subsequent to the detailed listing of invoices/vouchers for payment on the bill list of the Authority, itemized by project, with certification that the billing is for work completed, as specified, and delivered to the GHA and as may otherwise be convenient to the Authority. Payment vouchers must be received no later than Tuesday of the week before the Board of Commissioners meeting in order to be listed for Payment.

# **The Housing Authority of the Borough of Glassboro**

## **REQUEST FOR PROPOSAL FOR PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004**

### **SECTION 2**

#### **☑ PURPOSE**

The Housing Authority of the Borough of Glassboro (the Authority) hereby solicits, by virtue of this Request for Proposal (RFP), an offer by your firm to perform the annual audit of the Housing Authority of the Borough of Glassboro (including the Single Audit) which will involve the expression of your opinion on the fairness of presentation of the Authority's financial statements and supplemental information for the fiscal year ending December 31, 2023. The procedures followed in auditing these financial statements are to be within the framework of generally accepted auditing standards and **Government Auditing Standards**, issued by the Comptroller General of the United States, and audit requirements as prescribed by the Local Finance Board, Department of Community Affairs and the State of New Jersey. The selection of auditing procedures within the framework of the standards is a matter of the auditor's professional judgment, guided by your firm's policies and preferences, with due regard to the significance and materiality of individual items, account balances, and classes of transactions.

**The successful offeror will be hereinafter referred to as the Auditor.**

#### **DISCREPANCIES, ERRORS, AND OMISSIONS**

- ☐ Any discrepancies, errors, or ambiguities in the RFP or addenda (if any) should be reported in writing to the Authority. Should it be found necessary, a written addendum shall be incorporated into the RFP and shall become part of the contract documents. The Authority shall not be responsible for any oral instructions, clarifications, or other communications.

#### **ADDENDUM AND SUPPLEMENT TO REQUEST FOR PROPOSAL**

- ☐ If it becomes necessary to revise any part of this RFP, or if additional data is necessary to enable an exact interpretation of the provisions of this RFP, revisions shall be provided to all individuals and firms who receive or request this RFP.

#### **QUESTIONS AND INQUIRIES**

- ☐ Questions and inquiries which must be written, shall be accepted from any and all individuals and firms. Questions shall be answered in writing, and both questions and answers shall be distributed to all individuals and firms who receive this RFP provided that all questions are received at least seven (7) days in advance of the proposal acceptance date.
- ☐ Please note receiving a bid package via the Authority's website is NOT recognized by law as a certified means of receiving a bid package and in the event that addenda are issued it is the obligation of the prospective bidder receiving a bid package from the website, to contact GHA no later than 7 days prior to the receipt of bids (weekends and holidays excepted) to determine if any addenda were issued by the Authority. All proposals must include an Acknowledgement of Receipt of Addenda(s), if issued.

#### **COMPETITION INTENDED**

- ☐ It is the Authority's intent that this RFP permit competition. It shall be the proposer's responsibility to advise the Authority if any language, requirements, etc., or any combinations thereof, inadvertently restricts or limits the requirements stated in this RFP to a single source. Such notification shall be submitted in writing and must be received by the Authority not later than ten (10) days prior to the proposal acceptance date. A review of such notifications shall be made.

# **The Housing Authority of the Borough of Glassboro**

## **REQUEST FOR PROPOSAL FOR PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004**

### **☑ BACKGROUND INFORMATION**

#### **GOVERNING BODY**

- The governing body of the Housing Authority of the Borough of Glassboro is comprised of seven Commissioners who serve five-year terms. An Executive Director is appointed by the Authority's Board to manage the day-to-day operations of the Authority.

#### **REPORTING ENTITY**

- The financial statements include all the programs of the Authority and entities over which the Board of Commissioners exercises operating control or provides oversight management.

#### **ORGANIZATION AND ACTIVITY**

- The Housing Authority of the Borough of Glassboro (the "Authority") was created under federal and state housing laws as defined by state statute (N.J.S.A. 40A:12A-1, et seq., the "Housing Authority Act"). The governing Board is autonomous but is responsible to the U.S. Department of Housing and Urban Development and the New Jersey State Department of Community Affairs. The Authority is responsible for administering housing assistance programs and for the development, maintenance, and management of Housing Assistance Programs for low- and moderate-income families residing in the Borough of Glassboro, New Jersey. The Housing Authority of Gloucester County serves as the managing agent for the Authority through a Management Agreement. GHA activities include the ownership and/or management or oversight management of the following subsidized housing programs:

#### **PROGRAMS**

S8 Housing Choice Vouchers  
Project Based Vouchers  
Rental Assistance Demonstration (RAD)

- The Housing Assistance Payments Programs includes tenant and project-based vouchers. This program provides housing assistance payments to participating owners on behalf of eligible program participants to provide decent, safe, sanitary, and affordable housing for extremely low and very low-income families as defined by the Housing Act of 1998. The U.S. Department of Housing and Urban Development (HUD) provides assistance for approximately 160 tenant-based vouchers to the Authority. Additionally, HUD also provides tenant-based relocation voucher assistance for approximately 21 units related to the demolition and disposition of a former Public Housing Project.
- The Rental Assistance Demonstration (RAD) program was created to assist housing authorities with preserving and/or improving public housing properties. The RAD program allows housing authorities to leverage public housing stock and public and private debt to make these improvements in the absence of federal funding for this purpose. In addition, converting to RAD provides for a more stable funding stream. Effective November 30, 2017, the Authority converted the Public Housing portfolio to RAD, converting 104 Public Housing units to project-based vouchers.

#### **RELATED ENTITY:**

**The Affordable Housing Corporation of Glassboro ("AHCG"):** AHCG is a 501c (3) entity incorporated September 12, 2017. AHCG is separate from the Housing Authority of the Borough of Glassboro but related by common management. AHCG is a blended component unit which is included in the financial statements of the Authority. The purpose of AHCG is to provide low- and moderate-income

# **The Housing Authority of the Borough of Glassboro**

## **REQUEST FOR PROPOSAL FOR PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004**

individuals with affordable housing opportunities and without limitation, providing, developing, building, managing, promoting, constructing, operating, selling, leasing, rehabilitating, renovating, and disposing of safe and affordable housing.

### **MANAGEMENT:**

- ❑ The Housing Authority of Gloucester County (HAGC) is the Managing Agent for the Housing Authority of the Borough of Glassboro (GHA). HAGC is autonomous from GHA and obtains its own Audit Services.

### **LOCATION OF RECORDS**

- ❑ Computerized files, accounting records, documents, vouchers, reports, etc. will be found at the following locations:
  - 1) **Housing Authority of the Borough of Glassboro - Administrative Offices**  
**100 Pop Moylan Blvd**  
**Deptford, New Jersey 08096**
  - 2) **Housing Authority of the Borough of Glassboro**  
**181 Delsea Manor**  
**Glassboro, NJ 08028**

### **ASSISTANCE AVAILABLE**

- ❑ **Administrative Office** - The Authority has a limited number of personnel in the administrative office that prepare books of original entry, bank reconciliation's, maintain the general ledger, and perform purchasing and personnel functions. Audit assistance from these personnel is minimal, and contact may be made by appointment only so as not to disrupt their daily activities.
- ❑ **Furniture and Office Space**-The Auditor shall be provided with a workspace suitable for no more than three persons at a time. The Auditor shall furnish all necessary supplies and equipment. No working papers or other supplies of the Auditor shall be left on the Authority's premises when the Auditor is absent. The Auditor's personnel shall be physically located in space provided by the Authority for the duration of the engagement.
- ❑ **The Auditor's Personnel** shall perform all necessary tasks in the space provided. All work conducted on the Authority's premises shall be accomplished between the hours of 8:00 a.m. and 5:00 p.m., Mondays through Fridays, exclusive of holidays.  
While Auditor personnel are at the Authority's site, they are required to comply with all rules and regulations of the Authority, specific mention being made of complying with rules and regulations governing conduct with respect to health and safety, not only as they relate to themselves, but also to Authority personnel.  
Nothing in this section is intended to prohibit auditor's personnel from performing remote work as long as auditor's personnel recognize and protect the identity of participants in the Authority's programs. Auditor's personnel are aware of the Authority's obligations under the Federal Privacy Act and other HUD requirements.

### **MISCELLANEOUS INFORMATION**

- ❑ Approximate number of Authority employees – 3
- ❑ Approximate number of payroll checks issued - 52
- ❑ Approximate number of expenditure checks issued (2022) – 540
- ❑ Total expenses (including component units) (2022) - \$3,631,980

### **MAJOR FEDERAL FINANCIAL ASSISTANCE PROGRAMS**

# **The Housing Authority of the Borough of Glassboro**

## **REQUEST FOR PROPOSAL FOR** **PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004**

- ❑ Housing Choice Voucher Program
- ❑ Federal Cognizant Audit Agency - US Department of Housing and Urban Development



# **The Housing Authority of the Borough of Glassboro**

## **REQUEST FOR PROPOSAL FOR** **PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004**

### **SECTION 3**

#### **CONTRACT PROVISIONS**

##### **CONTRACT PERIOD**

- The contract that results from this RFP will commence on the award of the contract, terminating after oversight agencies have accepted and approved the audited Financial Statements for the specified period.

##### **SCOPE OF SERVICES**

- The scope of the successful proposer's work will encompass performing a financial and compliance audit of the financial statements of the Housing Authority of the Borough of Glassboro, New Jersey for calendar year 2023 in accordance with generally accepted auditing standards, **Government Auditing Standards**, the Single Audit Act of 1984, OMB Circular A-133, US Department of Housing and Urban Development and the State of New Jersey requirements. The Auditor will perform such tests of the accounting records and such other auditing procedures as are considered necessary.
- The auditor must comply with HUD requirements regarding the expression of an opinion concerning closeout of Capital Fund Grant Program years. One or more programs years may be closed out in 2023.

# The Housing Authority of the Borough of Glassboro

## REQUEST FOR PROPOSAL FOR PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004

### **SECTION 4**

#### **DELIVERABLES**

**THE CONTRACTOR WILL BE REQUIRED TO PROVIDE THE FOLLOWING PRODUCTS IN THE PERFORMANCE OF THE CONTRACT.**

- ❑ **Audit Report** - Upon completion of the audit, an Audit Report consisting of those elements required by the Single Audit Act and the US Department of Housing and Urban Development shall be simultaneously submitted to HUD and the Authority (one copy for each Commissioner and required copies for the Executive Director), **before HUD's deadline of September 30, 2024.**
  - The audit report shall be addressed to the Board of Commissioners.
  - The Auditors shall review the Financial Data Schedule (FDS) electronically submitted to HUD for accuracy and make all Attachments of financial Notes and other Audit Documents as required.
- ❑ **Management Letter** - The Auditor will prepare and deliver a management letter suggesting improvements in controls and other recommendations noted during the audit.
- ❑ **Entrance and Exit Conferences** - An Entrance and Exit conference will be held upon commencement and completion of the fieldwork.
- ❑ **Acceptance of Offer**-The signed proposal shall be considered an offer on the part of the offeror. Such an offer shall be deemed accepted upon execution of a contract in a form prepared by the Authority.
- ❑ **Compliance with Laws**-The Auditor shall comply with all local, State, and Federal directives, orders, laws, rules and regulations as applicable to the Contract.
- ❑ **Termination for Convenience** - In the event that this contract is terminated or canceled upon request and for the convenience of the Authority, without the required thirty days advance written notice, then the Authority shall negotiate reasonable termination costs, if applicable.
- ❑ **Termination for Cause** - Termination by the Authority for cause on the part of the Auditor shall be excluded from the foregoing provisions. In the case of such termination, the Authority shall be entitled to all remedies available to it at law or in equity.

#### **MISCELLANEOUS CONTRACT PROVISIONS**

- ❑ **No Assignment or Transfer** - The Auditor shall not assign or transfer any interest in this contract except that claims for monies due or to become due from the Authority under the contract may be assigned to a bank, trust company, or other financial institution. If the Auditor is a partnership, this contract will inure to the benefit of the surviving or remaining member of such partnership.

# **The Housing Authority of the Borough of Glassboro**

## **REQUEST FOR PROPOSAL FOR PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004**

- ❑ **Examination of Records** - For a period of three years from the date of the auditor's report, the Auditor shall make his work papers, records, and other evidence of audit available to the US Department of Housing and Urban Development and to the Comptroller General of the United States or their duly authorized representatives during normal working hours upon written request of the US Department of Housing and Urban Development or of the Comptroller General or their representatives.
- ❑ **Independent Contractor** - The Auditor is, for all purposes arising out of this RFP, an independent contractor and shall not be deemed an employee of the Authority. It is expressly understood and agreed that the auditor shall in no event as a result of the contract arising from this RFP be entitled to any benefits to which Authority employees are entitled, including, but not limited to overtime compensation, any retirement benefits, worker's compensation benefits, and injury leave, or other leave benefits.
- ❑ **Indemnification and Hold Harmless Clause** - Auditor shall be responsible for, shall keep, save and hold GHA harmless from, and shall indemnify GHA against any claim, loss, liability, expense (specifically including but not limited to costs, counsel fees and/or experts' fees), or damage resulting from all mental or physical injuries or disabilities, including death, to employees or recipients of Auditor's services or to any other persons, or from any damage to any property sustained in connection with this contract which results from any acts or omissions, including negligence or malpractice (including the failure to safeguard the work) of any of its officers, directors, employees, agents, servants or independent contractors, or from Contractor's failure to provide for the safety and protection of its employees, or from Contractor's performance or failure to perform pursuant to the terms and provisions of this Contract, whether or not due solely to the negligence, fault, or default of Auditor. Auditor's liability under this agreement shall continue after the termination of this contract for the applicable period of limitations with respect to any liability, loss, expense, or damage resulting from acts occurring prior to termination.
- ❑ **Invoicing and Payment** - The Auditor shall submit an invoice and Payment Voucher which shall be payable after submission of the Audit Report to the Authority and after submission of copies of the report to the US Department of Housing and Urban Development and the Department's subsequent review and acceptance of the report. The Authority may pay up to fifty percent of the fee upon submission of the Audit Report copies and the bill from the Auditor without the Department's authorization.
- ❑ **Confidentiality and Safeguarding of Information** - The Auditor agrees to protect the confidentiality of files, data, and other materials provided by the Authority and to restrict their use to the purposes of performing this contract only. The Auditor shall take all steps necessary to safeguard any data, files, reports or other information from loss, destruction, or erasure. Any costs or expenses of replacing, or damages resulting from the loss of such data, shall be borne by the Auditor when such loss or damage occurred partly or entirely through its negligence or intentional act or omission.

# The Housing Authority of the Borough of Glassboro

## REQUEST FOR PROPOSAL FOR PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004

### **SECTION 5**

#### **QUALIFICATIONS**

##### **LICENSING**

- ❑ The Auditor must be either a Certified Public Accountant, or registered public accountants licensed on or before December 31, 1970 by the Board of Accountancy of the State of New Jersey and meet any legal requirements concerning registration in the State. The Auditor shall attach to the proposal a copy of such state license or registration, which shall be current, in good standing, and shall not be subject to any current action to revoke or suspend. A condition of any contract to be awarded shall be that the license or registration shall remain in such good standing throughout the term of the contract.
- ❑ Any contract entered into by the Authority with the Auditor shall provide that the Auditor shall notify the Authority immediately in the event of suspension, revocation, or any change in status (or in the event of the initiation of any action to accomplish such suspension, revocation and/or change in status) of license or registration held by Auditor or its agents.

##### **INDEPENDENCE**

- ❑ The Auditor must be independent of the Authority in appearance, as well as in fact, in accordance with generally accepted auditing standards, **Government Auditing Standards**, and US Department of Housing and Urban Development policies and procedures.
- ❑ The Auditor may not provide accounting, bookkeeping, or management services to the Authority during the period covered by the audit or the contract.

##### **PEER REVIEW**

- ❑ The Auditor must have had a Peer Review of its accounting and auditing practice within the previous three-year period. The Report of Peer Review must be unqualified. A copy of the report, letter of comments, and letter of response must be submitted with the proposal. Failure to provide these documents will result in rejection of the proposal.

##### **CONTINUING PROFESSIONAL EDUCATION**

- ❑ The Auditor, and all professional staff assigned to the audit of the Authority, must meet the continuing professional education requirements of **Government Auditing Standards**, issued by the Comptroller General of the United States. The Auditor must provide an affirmation that the partner responsible for the engagements and all staff members has completed 40 hours of continuing professional education per year within the past two years, with 12 hours per year in governmental accounting and auditing. A copy of the continuing professional education records for each firm member to be assigned to the audit must be submitted with the proposal.

##### **EXPERIENCE IN GOVERNMENTAL ACCOUNTING AND AUDITING**

- ❑ The Auditor must demonstrate sufficient familiarity with the auditing and reporting provisions of the applicable HUD Handbook, **Audits of Public Housing Agencies by Independent Public Accountants**, and OMB Circular A-133, "Audits of State and Local Governments", and other HUD and state requirements. To this end, the Auditor shall submit a statement detailing experience in performing audits of public housing authorities and other governmental units.

# **The Housing Authority of the Borough of Glassboro**

## **REQUEST FOR PROPOSAL FOR PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004**

### **NONDISCRIMINATION**

- ❑ The offeror shall not discriminate against any employee or applicant for employment because of race, color, religion, sex, age, handicap, or national origin. The offeror shall take affirmative action to ensure that all applicants are employed without regard to race, color, religion, sex, age, handicap, or national origin. Such action shall include, but not be limited to, the following: employment, upgrading, demotion or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; selection for training, including apprenticeship; and familial status.

### **CONFLICT OF INTEREST**

- ❑ The Auditor agrees to inform the Authority of all of the Auditor's interests, if any, which are or which the Auditor believes to be in conflict with any interest of the Authority.
- ❑ No member, officer, or employee of the Authority, no member of the governing body of the locality in which any of the Authority's projects are situated, no member of the governing body of the locality in which the Authority was activated, and no other public official of such locality or localities who exercises any responsibilities or functions with respect to the Authority during his tenure, or for one year thereafter, shall have any interest, direct or indirect, in this contract or the proceeds thereof.
- ❑ No member of or Delegate to Congress of the United States or Resident Commissioner shall be admitted to any share or part of this contract or to any benefit that may arise there from.
- ❑ The Auditor may not employ any person to solicit or secure this contract upon any agreement for a commission, percentage, brokerage, or contingent fee. Breach of this warranty shall give the Authority the right to terminate this contract, or, at its discretion, to deduct from the Auditor's fees the amount of such commission, percentage, brokerage, or contingent fee.
- ❑ The Auditor shall not use personal gain or make other improper use of privileged information, which is acquired in connection with the award of a contract as a result of this RFP.

### **INSURANCE**

- ❑ The Auditor shall provide and maintain the following minimum limits of insurance coverage during the period of performance required under the contract resulting from this RFP:
  - ✓ **Professional Liability** - \$1,000,000 errors and omissions per occurrence
  - ✓ **Workers Compensation and Employers Liability** - Statutory coverage for New Jersey and \$500,000 employers' liability.
  - ✓ **General Liability Insurance**  
Prior to commencing work under a resultant contract, the Auditor shall furnish the Authority with a certificate of insurance naming the Authority as additional insured, giving a sixty-day notice of cancellation, nonrenewable, or change in the insurance coverage.

### **OTHER QUALIFICATIONS**

- ❑ The Auditor must provide a positive affirmation that the firm and its professional staff members have no record of substandard audit work with the State of New Jersey (or any other state) or any Federal agency or department.
- ❑ The Auditor must provide a positive affirmation that the firm and its professional staff members meet all other qualification requirements imposed by Federal and State law.
- ❑ The Auditor must provide a positive affirmation that the firm and its professional staff members have not been the subject of any disciplinary actions by any Federal or State agency or department relating to the firm's audit practice.

# The Housing Authority of the Borough of Glassboro

## REQUEST FOR PROPOSAL FOR PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004

### **SECTION 6**

#### **FORMAT**

**TO ASSURE CONSISTENCY, PROPOSALS MUST CONFORM TO THE FOLLOWING FORMAT:**

- ❑ Cover letter
- ❑ Table of contents
- ❑ Sections
  - A. Introduction
  - B. Audit specifications
  - C. Performance
  - D. Resumes
  - E. Facilities
  - F. Other information
  - G. Fees and basis for charges

**ALL SECTIONS ARE TO BE ADDRESSED AND SPECIFICALLY REFERENCED. THE FOLLOWING EXPLAINS WHAT IS EXPECTED IN EACH OF THE MAJOR SECTIONS:**

#### **Section A - Introduction**

- ❑ This section should contain your understanding of the Authority's needs and objectives. You should indicate your familiarity with our environment and your qualifications for providing the required service.

#### **Section B - Audit Specifications**

- ❑ This section should contain your understanding of the scope of services to be provided.
- ❑ A summary of your audit plan, which describes how the audit will be completed in a timely and cost-effective manner.

#### **Section C - Performance**

- ❑ This section should detail the performance standards you will meet and the deliverables to be provided under the contract.

#### **Section D - Resume**

This section shall address areas as outlined below:

- ❑ Name and address of your firm and the contact individual or corporate officer authorized to execute agreements as the Auditor for the Authority.
- ❑ Briefly describe your firm's history, ownership, organizational structure, location of its management, and licenses to do business in the State of New Jersey.
- ❑ Include a statement of the firm's experience in governmental accounting and auditing and the following:
  - ✓ An affirmation that the proposer is properly licensed for public practice as a Certified Public Accountant/Licensed Public Accountant in the State of New Jersey. Attach a copy of such license(s) to the proposal.
  - ✓ An affirmation that the proposer meets the independence requirements of generally accepted auditing standards, **Government Auditing Standards**, and US Department of Housing and Urban Development policies.

# **The Housing Authority of the Borough of Glassboro**

## **REQUEST FOR PROPOSAL FOR PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004**

- ✓ An affirmation that the proposer participates in Peer Review, indicating the last year a peer review was conducted and the year in which the firm's next review is scheduled. A copy of the latest Report of Peer Review, including letter of comments and letter of response, must be attached to the proposal.
  - ✓ An affirmation that the partner(s) responsible for the engagement and all staff members have completed continuing professional education courses in accordance with the requirements of **Government Auditing Standards**. Attach Continuing Professional Education records to the proposal for all professional staff assigned to the engagement.
  - ✓ An affirmation that the proposer does not discriminate against any employee or applicant for employment because of race, color, religion, sex, age, handicap, or national origin. A copy of the proposer's Certificate of Employee Information Report must be attached to the proposal.
  - ✓ Affirmations regarding the conflict-of-interest issues addressed in this RFP.
  - ✓ A description of the firm's professional liability, general liability and worker's compensation and employer's liability policies, including certificate of insurance.
  - ✓ Provide a statement of assurance that the firm and its professional staff members have no record of substandard audit work with the State of New Jersey (or any other state) or any Federal agency or department.
  - ✓ Provide a statement of assurance that the firm and its professional staff members meet all other qualification requirements imposed by Federal or State law.
  - ✓ Provide a statement of assurance that the firm and its professional staff members have not been the subject of any disciplinary actions by any Federal or State agency or department relating to the firm's audit practice.
- ❑ **COMPLETE EXHIBIT B, "CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION, LOWER TIER COVERED TRANSACTIONS," APPLICABLE FOR PROVIDERS OF FEDERALLY REQUIRED AUDIT SERVICES.**
- ✓ Complete certification regarding lobbying in accordance with attached form.
  - ✓ Complete non-collusion affidavit in accordance with the attached form
- ❑ Provide certification that the proposer has a drug-free workplace policy in substantial compliance with the Federal Drug-Free Workplace Act and that such policy is in place and communicated to all employees.

### **Section E - Facilities**

- ❑ For your firm's facilities, which are located closest to Deptford, New Jersey, provide the location, firm personnel assigned to this location, and the activities of the firm performed at this location.
- ❑ For those facilities and activities located elsewhere, please explain activities performed and why they are best performed at a different office. Firms where all activities are performed at one location should leave this paragraph blank.

### **Section F - Other Information**

- ❑ This section is for any further pertinent data and information not included elsewhere in this RFP and found necessary by your firm to include.

### **Section G - Fees and Basis for Charges** (under separate cover)

- ❑ Please quote a not-to-exceed fee for FYE 2023.
- ❑ Please disclose the worker hours by staff level (i.e. partner, manager, senior, junior, etc.) allocated to complete the audit.

# The Housing Authority of the Borough of Glassboro

## REQUEST FOR PROPOSAL FOR PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004

### **SECTION 7**

#### **☑ PROPOSAL REQUIREMENTS**

##### **PREPARATION AND SUBMISSION OF PROPOSALS**

- ❑ All proposals, both technical and price, shall be signed in ink by the individual or authorized principles of the firm.
- ❑ It is the obligation of the prospective bidder receiving a bid package from the website, to contact GHA no later than 7 days prior to the receipt of bids (weekends and holidays excepted) to determine if any addenda were issued by the Authority. All proposals must include an Acknowledgement of Receipt of Addenda(s), if issued.
- ❑ Proposals are to be returned in a sealed envelope containing the price and all other information. The face of the envelope shall indicate the RFP number, time, and date of public acceptance, and the title of the proposal (i.e., Audit Services).
- ❑ The Authority shall receive proposals no later than **2:45 P.M., NOVEMBER 3, 2023**. Requests for extensions of time shall not be granted. Firms mailing their proposals should allow for normal time to ensure receipt of their proposals by the Authority prior to the time and date fixed for the acceptance of the proposals. Proposals or unsolicited amendments to proposals received by the Authority after the acceptance date shall not be considered.
- ❑ Each firm shall submit **three (3) copies** of its proposal to the Authority, in a sealed envelope, as indicated on the cover sheet of this RFP.
- ❑ All responses, inquiries, or other correspondence relating to or in reference to this RFP, and all other reports, charts, displays, schedules, exhibits, and other documentation submitted by the proposers, shall become the property of the Authority when received.
- ❑ Only information which is received in response to this RFP shall be evaluated. Reference to information previously submitted shall not be considered.
- ❑ Any firm which receives a copy of this RFP, but which declines to submit a proposal is requested to send a formal "Decline to Propose" to the Authority. Failure to respond as requested may subject the firm to removal from consideration on future RFPs.
- ❑ Failure to follow the instructions in this RFP may be cause for rejection of offer.
- ❑ All proposals submitted shall be valid for a minimum period of ninety (90) calendar days following the date established for acceptance.
- ❑ Proposals may be withdrawn by written request from the proposer at the address shown in this RFP prior to the time of acceptance.
- ❑ Negligence on the part of the proposer in preparing the proposal confers no right of withdrawal after the time fixed for the acceptance of proposals.



# **The Housing Authority of the Borough of Glassboro**

## **REQUEST FOR PROPOSAL FOR PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004**

### **MISCELLANEOUS PROPOSAL REQUIREMENTS**

- ❑ The Housing Authority of the Borough of Glassboro shall not be responsible for any expenses incurred by any firm in preparing and submitting a proposal. All proposals shall provide a straightforward, concise delineation of the firm's capabilities to satisfy the requirements of this RFP. Emphasis should be on completeness and clarity of content.
- ❑ The contents of the proposal submitted by the successful firm and this RFP shall become part of any contract awarded as a result of this RFP. The successful firm shall be expected to sign said contract with the Authority.
- ❑ The Authority reserves the right to reject any and all proposals received by reason of this request, or to negotiate separately in any manner necessary to serve the best interests of the Authority. Firms whose proposals are not accepted shall be notified in writing.

# The Housing Authority of the Borough of Glassboro

## REQUEST FOR PROPOSAL FOR PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004

### **SECTION 8**

#### **EVALUATION OF PROPOSALS**

GHA shall determine the most qualified proposer(s) based on the following evaluation factors. However, cost is important to GHA. GHA shall attempt to negotiate an acceptable fee with the most qualified proposer(s). If negotiations do not produce a fee proposal in the best interest of GHA, GHA shall negotiate with the next most qualified proposer(s) and so forth until an agreement is reached with a proposer(s) that is in the best interest of GHA. GHA may determine to contract with more than one firm. **NOTE:** An interview may be required

- ✓ Proposal contains all required information **(0-5 points)**
  - ✓ Relevancy, Quality and Quantity of Qualifications, Experience, and Training of Personnel to be assigned **(0-30 points)**
  - ✓ Relevancy, Quality and Quantity of Engagements performed. **(0-25 points)**
  - ✓ Plan for performing engagement is realistic, thorough, and demonstrates knowledge of requirements. **(0-20 points)**
  - ✓ Cost of services for contract period. **(0-20 points)**
- 
- ❑ At its option, the evaluators may request oral presentations or discussions with any or all proposers for the purpose of clarification or to amplify the material presented in any part of the proposal. However, proposers are cautioned that this provision is not mandatory; therefore, all proposals should be complete and concise and reflect the most favorable terms available from the proposer. Furthermore, the Authority shall use other evaluation criteria, which, in its sole judgment, are necessary for selecting the best proposer.
  - ❑ Upon completion of the proposal evaluation, the "not-to-exceed" cost offered shall then become a matter of public record. Proposers are cautioned, however, that these costs and their components are subject to further evaluation and possible negotiation and, therefore, may not be an exact indicator of a proposer's pricing position.  
The award of the contract to one proposer does not mean that the other proposals lacked merit, but that the proposal was deemed to provide the best value to the Authority
  - ❑ HAGC shall structure an Evaluation Panel that shall rank order all submitted proposals using the Ranking Criteria described above. The Evaluation Panel may, at its option, interview one or more proposers depending on whether they are considered, according to the Ranking Criteria, to have a reasonable chance of eventually obtaining an award. The interviews would serve to clarify each interviewee's submittal and could lead to a refinement of the ranking by the Evaluation Panel.
  - ❑ The Evaluation Panel may, at its option, seek supplemental submissions from one or more interviewees, termed a Best and Final Offer ("BAFO"). The BAFO would serve to further clarify each BAFO invitee's proposals and could lead to a refinement of the invitee's technical ranking by the Evaluation Panel.
  - ❑ GHA's Review Committee shall make a recommendation to the HAGC's Board of Commissioners for the Executive Director to enter into a contract with the selected firm.
  - ❑ GHA reserves the right to reject all proposals.

# The Housing Authority of the Borough of Glassboro

## REQUEST FOR PROPOSAL FOR PROFESSIONAL AUDIT SERVICES FYE 12/31/23 RFP 23-004

### **SECTION 9**

## **ATTACHMENTS**

### ☐ **Affirmative Action**

A proposer must certify that it does not discriminate in the hiring or promotion of any minorities, as designated by the Equal Employment Opportunity Commission of the United States of America, or the Department of Civil Rights of the State of New Jersey; and that it does not discriminate against any person or persons on the basis of race, creed, age, color, sex, national origin, ancestry, marital status and affectional or sexual orientation or handicap.

### ☐ **Public Records**

This RFP constitutes a public document that shall be made available to the public upon request. The proposer may request to deem certain sections of its proposal non-disclosable, as permitted by *N.J.A.C. 19:9-4.2(a)4* and the New Jersey Open Public Records Act (OPRA), *N.J.S.A. 47:1A-1 et seq.*, which determination shall be in the sole discretion of the Authority's Solicitor and designated OPRA custodian of records. Each page that the proposer believes to be non-disclosable because of the applicability of an OPRA exception or for another reason (such as Federal law) shall be specifically identified with a stamp or other notation indicating that the page is to be deemed confidential and not disclosed. The proposer shall also identify the specific OPRA exception or other law or regulation that it believes to exempt the designated information from public disclosure. OPRA exceptions are listed at *N.J.S.A. 47:1A-1.1* through *1A-3*.

Notwithstanding any such request or determination, the Authority cannot and does not provide any assurance that any information provided to the Authority shall remain confidential. All proposers are deemed to have submitted their proposals and all information provided to the Authority shall remain confidential. All proposers are deemed to have submitted their proposals and all information within or relating to same, the understanding that the New Jersey Government Records Council or a court of competent jurisdiction may direct that any or all such information be released to the public without restriction.

### ☐ **Division of Revenue Registration**

Pursuant to the terms of *N.J.S.A. 52:32-44*, the successful proposer is required to provide to the Authority proof of valid business registration with the Division of Revenue in the Department of the Treasury, prior to entering into a contract with the Authority. No contract shall be entered into by the Authority unless the proposer first provides proof of valid business registration. In addition, the successful proposer is required to receive from any subcontractor and/or sub-consultant it uses for goods and services under this contract proof of valid business registration with the Division of Revenue. No subcontract shall be entered into by any contractor with the Authority unless the subcontractor and/or sub-consultant first provide proof of valid business registration. Please include a copy of the proposer's Certificate of Registration with the proposal submission.

### ☐ **Affidavit of Moral Integrity**

Together with the Proposal, the proposer must submit an Affidavit of Moral Integrity on the form attached hereto for review by the Authority.

### ☐ **In addition to the Proposal Cover Sheet, the Proposer shall include ALL required information/forms listed on the Proposal Cover Sheet (initials, amounts, signatures, etc.)**

# Request for Taxpayer Identification Number and Certification

Give Form to the  
requester. Do not  
send to the IRS.

► Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ► _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
				-				-	
or									
Employer identification number									
				-					

## Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ►	Date ►
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting*, later, for further information.

**Note:** If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

**Nonresident alien who becomes a resident alien.** Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

## Backup Withholding

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

**Payments you receive will be subject to backup withholding if:**

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the instructions for Part II for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships*, earlier.

## What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

## Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

## Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.



**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

## Specific Instructions

### Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

**Note: ITIN applicant:** Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C corporation, or S corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

### Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

### Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

IF the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation
• Individual • Sole proprietorship, or • Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	Individual/sole proprietor or single-member LLC
• LLC treated as a partnership for U.S. federal tax purposes, • LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or • LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
• Partnership	Partnership
• Trust/estate	Trust/estate

### Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

#### Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 5 <sup>2</sup>
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

<sup>1</sup> See Form 1099-MISC, Miscellaneous Income, and its instructions.

<sup>2</sup> However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

**Exemption from FATCA reporting code.** The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

**Note:** You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

## Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

## Line 6

Enter your city, state, and ZIP code.

## Part I. Taxpayer Identification Number (TIN)

**Enter your TIN in the appropriate box.** If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note:** See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at [www.SSA.gov](http://www.SSA.gov). You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/Businesses](http://www.irs.gov/Businesses) and clicking on Employer Identification Number (EIN) under Starting a Business. Go to [www.irs.gov/Forms](http://www.irs.gov/Forms) to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to [www.irs.gov/OrderForms](http://www.irs.gov/OrderForms) to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note:** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

## Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

**Signature requirements.** Complete the certification as indicated in items 1 through 5 below.

**1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.**

You must give your correct TIN, but you do not have to sign the certification.

**2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

**3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

**4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

**5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

**What Name and Number To Give the Requester**

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee <sup>1</sup>
b. So-called trust account that is not a legal or valid trust under state law	The actual owner <sup>1</sup>
6. Sole proprietorship or disregarded entity owned by an individual	The owner <sup>3</sup>
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee

For this type of account:	Give name and EIN of:
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

**\*Note:** The grantor also must provide a Form W-9 to trustee of trust.

**Note:** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

**Secure Your Tax Records From Identity Theft**

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

**Protect yourself from suspicious emails or phishing schemes.**

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.



The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to [phishing@irs.gov](mailto:phishing@irs.gov). You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at [spam@uce.gov](mailto:spam@uce.gov) or report them at [www.ftc.gov/complaint](http://www.ftc.gov/complaint). You can contact the FTC at [www.ftc.gov/idtheft](http://www.ftc.gov/idtheft) or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see [www.IdentityTheft.gov](http://www.IdentityTheft.gov) and Pub. 5027.

Visit [www.irs.gov/IdentityTheft](http://www.irs.gov/IdentityTheft) to learn more about identity theft and how to reduce your risk.

## Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

# THE HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

## **STATEMENT OF OWNERSHIP DISCLOSURE**

N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

This statement shall be completed, certified to, and included with all bid and proposal submissions. Failure to submit the required information is cause for automatic rejection of the bid or proposal.

**Name of Organization:** \_\_\_\_\_

**Organization Address:** \_\_\_\_\_

### **Part I** Check the box that represents the type of business organization:

- ☐ Sole Proprietorship (skip Parts II and III, execute certification in Part IV)
- ☐ Non-Profit Corporation (skip Parts II and III, execute certification in Part IV)
- ☐ For-Profit Corporation (any type)    ☐ Limited Liability Company (LLC)
- ☐ Partnership    ☐ Limited Partnership    ☐ Limited Liability Partnership (LLP)
- ☐ Other (be specific): \_\_\_\_\_

### **Part II**

- ☐ The list below contains the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be. **(COMPLETE THE LIST BELOW IN THIS SECTION)**

**OR**

- ☐ No one stockholder in the corporation owns 10 percent or more of its stock, of any class, or no individual partner in the partnership owns a 10 percent or greater interest therein, or no member in the limited liability company owns a 10 percent or greater interest therein, as the case may be. **(SKIP TO PART IV)**

(Please attach additional sheets if more space is needed):

Name of Individual or Business Entity	Home Address (for Individuals) or Business Address

# THE HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

## **Part III DISCLOSURE OF 10% OR GREATER OWNERSHIP IN THE STOCKHOLDERS, PARTNERS OR LLC MEMBERS LISTED IN PART II**

If a bidder has a direct or indirect parent entity which is publicly traded, and any person holds a 10 percent or greater beneficial interest in the publicly traded parent entity as of the last annual federal Security and Exchange Commission (SEC) or foreign equivalent filing, ownership disclosure can be met by providing links to the website(s) containing the last annual filing(s) with the federal Securities and Exchange Commission (or foreign equivalent) that contain the name and address of each person holding a 10% or greater beneficial interest in the publicly traded parent entity, along with the relevant page numbers of the filing(s) that contain the information on each such person. **Attach additional sheets if more space is needed.**

Website (URL) containing the last annual SEC (or foreign equivalent) filing	Page #'s

**Please list** the names and addresses of each stockholder, partner or member owning a 10 percent or greater interest in any corresponding corporation, partnership and/or limited liability company (LLC) listed in Part II **other than for any publicly traded parent entities referenced above.** The disclosure shall be continued until names and addresses of every non-corporate stockholder, and individual partner, and member exceeding the 10 percent ownership criteria established pursuant to N.J.S.A. 52:25-24.2 has been listed. **Attach additional sheets if more space is needed.**

Stockholder/Partner/Member and Corresponding Entity Listed in Part II	Home Address (for Individuals) or Business Address

## **Part IV 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/proposer; that the **<name of contracting unit>** 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 **<type of contracting unit>** to notify the **<type of contracting unit>** 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, permitting the **<type of contracting unit>** to declare any contract(s) resulting from this certification void and unenforceable.

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

# HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

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## **“DEBARMENT” CERTIFICATION**

### **CERTIFICATION REGARDING THE DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION OF LOWER TIER COVERED TRANSACTIONS**

I am \_\_\_\_\_ of \_\_\_\_\_.

I certify that [\_\_\_\_\_] on behalf of \_\_\_\_\_, neither it nor its Principals are debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participating in this transaction by any Federal Department or Agency.

[\_\_\_\_\_] I am unable to certify to any statements set forth in this certification and I have attached an explanation to this form.

\_\_\_\_\_  
TYPED OR PRINTED NAME OR TITLE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SOCIAL SECURITY NUMBER

# HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

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## **CERTIFICATE FOR CONTRACTS, GRANTS, LOANS AND COOPERATIVE AGREEMENTS**

The undersigned certifies, to the best of his or her knowledge and belief that:

- (1) No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal Grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendments or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any other person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL **"Disclosure Form to Report Lobbying"**, in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contract under grants, loans and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

**This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.**

Executed this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ By: \_\_\_\_\_

\_\_\_\_\_  
(TYPED OR PRINTED NAME)

\_\_\_\_\_  
(TITLE IF ANY)

# HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

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## **NON-COLLUSION AFFIDAVIT**

**STATE OF NEW JERSEY**

**COUNTY OF** \_\_\_\_\_

I, \_\_\_\_\_ of the City/Town of \_\_\_\_\_ in the County of \_\_\_\_\_ and the State of \_\_\_\_\_ of full legal age, being duly sworn according to law on my oath depose and say that:

I am \_\_\_\_\_ (title) of the firm of \_\_\_\_\_, the bidder making the Proposal for the above named project, 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 to restraint the 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 Housing Authority of the Borough of Glassboro 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 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 \_\_\_\_\_ (N.J.S.A. 52:34-15)

By: \_\_\_\_\_

(TYPED OR PRINTED NAME OF AFFIANT)

\_\_\_\_\_  
Subscribed and sworn to before me

This \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_

# HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

## **AFFIRMATIVE ACTION INFORMATION SHEET**

**IN ACCORDANCE WITH THE TERMS OF THE ATTACHED AGREEMENT PROPOSERS ARE REQUIRED SUBMITTING ONE OF THE FOLLOWING FORMS RELATING TO COMPLIANCE WITH AFFIRMATIVE ACTION REGULATIONS. PLEASE COMPLETE AND RETURN THIS FORM WITH THE PROPOSAL.**

1. The proposer has submitted a Federal Affirmative Action Plan Approval which consists of a valid letter from the Office of Federal Contract Compliance Programs (Good for one year of the date of letter).

YES\_\_\_\_\_ NO\_\_\_\_\_

If yes, a photo copy of the Letter of Approval is to be submitted with the bid.  
(OR)

2. The proposer has submitted a Certificate of Employee Information Report pursuant to (N.J.A.C. 17.27-1.1) and The State Treasurer has approved said report.

YES\_\_\_\_\_ NO\_\_\_\_\_

If yes, a photo copy of the Certificate is to be submitted with the bid.  
(Expiration Date on Certificate)

Certificate of Approval Number \_\_\_\_\_  
(OR)

3. If Proposer has already submitted Form AA-302 to the States' Affirmative Action Office, please return a copy of it with the proposal.

If you are the successful proposer and have none of the above, please contact the Purchasing Department at **(856) 845-4959 ext. 219** within five (5) days of notification of award for an Affirmative Action Employee Information Report (AA-302). This form (AA-302) must be forwarded to the States' Affirmative Action Office.

The signature below certifies that one of the above forms of Affirmative Action evidence has been submitted, and all information contained above is correct to the best of my knowledge.

Signed \_\_\_\_\_ Date Signed \_\_\_\_\_

Print Name and Title \_\_\_\_\_

Proposers Company Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

# HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

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## **AFFIRMATIVE ACTION STATEMENT**

The undersigned confirms that the Contractor agrees that in the hiring of any employees, laborers, workmen and mechanics for the performance of work under this bid that said contractor or any person on their behalf shall not by reason of age, gender, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation discriminate against any employee in hiring who is qualified and available to perform the work to which the employment relates.

The contractor shall comply with all statutes relating to the contract on behalf of the Housing Authority of the Borough of Glassboro.

\_\_\_\_\_  
TYPED OR PRINTED NAME & TITLE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SOCIAL SECURITY NUMBER

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## **AFFIRMATIVE ACTION AFFIDAVIT**

Pursuant to the regulations promulgated by the Affirmative Action Laws of the State of New Jersey in accordance with laws of Public Law 1975, Chapter 127 and all its latest amendments stated in the Circular of the Secretary of the Treasury of the State of New Jersey, as are included with these specifications, contractors furnishing goods or services to the Authority must agree, where applicable, to the following:

During the performance of this contract, the contractor agrees as follows:

1. To comply with all regulations of Affirmative Action Laws of the State of New Jersey, Public Law 1975, Chapter 127.
2. To comply with all requirements stated in (N.J.A.C.17:27) a memorandum entitled "Affirmative Action Requirements for Public Agencies in the Awarding of Contracts".
3. To comply with all the requirements of the memorandum entitled "Mandatory Affirmative Action Language".

The undersigned hereby states, he/she has fully read and agrees to comply with the above, and is familiar with the regulations described therein and will furnish further information if requested by the Authority confirming the compliance with the above stated regulations. I am also aware that if the firm of \_\_\_\_\_ does not comply with Public Law 1975, Chapter 127 and the rules and regulations issued pursuant thereto, that no monies will be paid by the Authority and that the firm of \_\_\_\_\_ may be debarred from all public contracts for a period of up to five (5) years.

By: \_\_\_\_\_

\_\_\_\_\_  
(TYPED OR PRINTED NAME OF AFFIANT)

Subscribed and sworn to before me

This \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_



## Disclosure of Lobbying Activities

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352  
(See reverse for public burden disclosure)

<b>1. Type of Federal Action:</b> a. contract ___ b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	<b>2. Status of Federal Action:</b> a. bid/offer/application ___ b. initial award c. post-award	<b>3. Report Type:</b> a. initial filing ___ b. material change  <b>For material change only:</b> Year _____ quarter _____ Date of last report _____
<b>4. Name and Address of Reporting Entity:</b> ___ Prime     ___ Subawardee Tier _____, if Known:   <b>Congressional District, if known:</b>		<b>5. If Reporting Entity in No. 4 is Subawardee,</b> Enter Name and Address of Prime:     <b>Congressional District, if known:</b>
<b>6. Federal Department/Agency:</b>   	<b>7. Federal Program Name/Description:</b>   CFDA Number, if applicable: _____	
<b>8. Federal Action Number, if known:</b>  	<b>9. Award Amount, if known:</b> \$ _____	
<b>10. a. Name and Address of Lobbying Registrant</b> <i>(if individual, last name, first name, MI):</i>	<b>b. Individuals Performing Services</b> <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i>	
<b>11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.</b>		
<b>Signature:</b> _____  <b>Print Name:</b> _____  <b>Title:</b> _____  <b>Telephone No.:</b> _____ <b>Date:</b> _____		
<b>Federal Use Only</b>		<b>Authorized for Local Reproduction</b> <b>Standard Form - LLL (Rev. 7-97)</b>

## INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitations for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Included prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.  
  
(b) Enter the full names of the individual(s) performing services, and include full address if different from 10(a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

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According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503

# HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

## **DRUG FREE WORKPLACE CERTIFICATION**

\_\_\_\_\_, the party submitting the attached bid, and principal in the firm of \_\_\_\_\_  
\_\_\_\_\_, located at, \_\_\_\_\_, in the city of, \_\_\_\_\_  
\_\_\_\_\_, in the state of, \_\_\_\_\_, hereafter called the Proposer,

Certifies as stated in the following two (2) affidavits:

## **DRUG-FREE WORKPLACE AFFIDAVIT**

- A. Proposer will publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the Proposer's workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- B. Proposer will establish a Drug-Free Awareness Program to inform employees about:
  - a. The dangers of drug abuse in the workplace.
  - b. The Proposer's policy of maintaining a drug-free workplace.
  - c. Any available counseling, rehabilitation and employee assistance programs.
  - d. The penalties that may be imposed upon employees for violations occurring in the workplace.
- C. Proposer will make it a requirement that each employee to be engaged in the performance of the contract be given a copy of the statement required in Paragraph A.
- D. The Proposer will notify the employee in the statement required by Paragraph A. that as a condition of employment, the employee will:
  - a. Abide by the terms of the statement; and
  - b. Notify the Proposer of any criminal drug statute conviction for a violation occurring in the workplace no later than five (5) days after such conviction.
- E. **The Proposer will notify the Housing Authority within ten (10) days after receiving notice under Subparagraph D. b, from an employee or otherwise receiving actual notice of such conviction.**
- F, **The Proposer will one of the following actions, within thirty (30) days of receiving notice under Subparagraph D. b, with the respect to any employee who is convicted:**
  - a. Taking appropriate personnel action against such employee, up to and including termination; or
  - b. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purpose by a Federal, State, or a Local Health and/or Law Enforcement Agency, or other appropriate agency.
- G. The Proposer will make a good faith effort to maintain a Drug-Free workplace through implementation of the above paragraphs.
- H. The work-site regarding contracts between the Proposer and the Housing Authority of the Borough of Glassboro is at:  
**Bidder's Address.**

## **PLEASE SIGN AND DATE**

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

# HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

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## **NON-DEFAULT CERTIFICATIONS**

\_\_\_\_\_, the party submitting the attached bid, and principal in the firm of \_\_\_\_\_  
\_\_\_\_\_, located at, \_\_\_\_\_, in the city of, \_\_\_\_\_  
\_\_\_\_\_, in the state of, \_\_\_\_\_, hereafter called the Proposer,

Certifies as stated in the following two (2) affidavits:

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## **NON-DEFAULT AFFIDAVIT**

- A. All statements made by Proposer are true, complete, and correct to the best of its knowledge and belief.
- B. Proposer has never experienced defaults or non-compliance under any contract for the U.S. Department of Housing and Urban Development, hereafter referred to as HUD, nor any other Government Agency with which it has contacts.
- C. To the best of the Proposer's knowledge, there are no unresolved findings raised as a result of HUD audits, management reviews, or any other Governmental investigations concerning the Proposer or work under its contracts.
- D. There has not been a suspension or termination of payments under any HUD contract in which the Proposer has had a legal or beneficial interest attributable to its fault or negligence.
- E. The Proposer has not been convicted of a felony and is not presently, to its knowledge, the subject of a complaint or indictment charging a felony.
- F. The Proposer has not been suspended, debarred, or otherwise restricted by any Department or Agency of the Federal, State, or Municipal Government in New Jersey, nor a PHA in New Jersey, from doing business with such Department or Agency.
- G. Proposer has not defaulted on an obligation covered by a bond, nor has been the subject of a claim under a fidelity bond.
- H. All the names of the parties, known to the Proposer to be principals in this contract, in which it proposes to participate, are included on resumes submitted with this proposal.
- I. To the Proposer's knowledge, Proposer has not been found, to be in violation of any applicable Federal or State Civil Rights' Law.
- J. Proposer is not a member of Congress, or Resident Commissioner, nor otherwise prohibited or limited by law from contracting with the USA.
- K. Proposer is not an officer, employee, or Commissioner of any PHA who is prohibited or limited by from contracting with PHA's.
- L. Proposer has never been suspended, debarred, or otherwise disqualified by HUD or any other Governmental Agency with which it has contracted from doing business with any Governmental Agency.

## **PLEASE SIGN AND DATE**

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

# HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

## AFFIDAVIT OF MORAL INTEGRITY

STATE OF \_\_\_\_\_

Ss:

COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_ the \_\_\_\_\_ (Pres., Vice Pres., Owner/Partner) of \_\_\_\_\_ (Proposer), being first duly sworn, deposes and says:

1. That the \_\_\_\_\_ (Proposer) wishes its Proposal to be considered with respect to the Services outlined in this RFP as follows:
2. That the \_\_\_\_\_ (Proposer) wishes to demonstrate moral integrity in accordance with the Services to be rendered herein.
3. That in accordance with said Procedures as of the date of signing this Affidavit, neither the \_\_\_\_\_ Proposer, or any of its Principals, Owners, Officers, or Directors are involved in any Federal, State or other Governmental Investigation concerning criminal or quasi criminal violations, except as follows: **(If none, so state)**:
4. Proposer further states that neither the Proposer, nor any of its Principals, Owners, Officers or Directors, has ever engaged in any violation of a Federal or State Criminal Statute; or ever been indicted, convicted, or entered a plea of guilty, non vult or nolo contendere to any violation of a Federal or State Criminal Statute; or ever engaged in violation of any nature regarding work on contracts performed by it, except as follows: **(If none, so state)**:
5. That any depository, Proposer or other agency named (herein or later) is hereby authorized to supply the Authority with any information necessary to verify any statement made in this Proposer's Affidavit of Moral Integrity.
6. That as of the date of signing this Affidavit, outstanding liens filed against this Proposer are as follows: **(if none, so stated)**.
7. That the undersigned, being authorized to act on behalf of \_\_\_\_\_ Proposer, certified that I am personally acquainted with the operations of said Proposer, have full knowledge of the factual basis comprising the contents of this Affidavit of Moral Integrity and that the same are true to my knowledge.
8. That if a corporation, the Proposer \_\_\_\_\_ (is, is not) incorporated in the State of New Jersey. If not a New Jersey Corporation the Proposer \_\_\_\_\_ (is, is not) authorized to do business in the State of New Jersey (attach Certificate of Authorization from New Jersey Secretary of State).
9. That this Affidavit of Moral Integrity is made to induce the Authority to accept a Proposer as a qualified provider of the Services and be permitted to submit a response to the RFP knowing that the said GHA relies upon the truth of the statements herein contained.

**Proposer**

**Sworn and Subscribed to Before Me This**

\_\_\_\_\_ Day of \_\_\_\_\_ 20\_\_

**Signature**

\_\_\_\_\_  
**Notary Public Title**  
**(Corporate Seal)**

# HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

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## **GENERAL TERMS AND CONDITIONS**

### **1. Organization**

Contractor shall be organized under the laws of the State of New Jersey or licensed to do business in the State of New Jersey. The GHA may request a copy of documents evidencing such organization or license prior to the execution of a contract.

### **2. Cancellation by Contractor**

Contractor shall be given a ninety-day (90-day) written notice prior to cancellation of the contract.

### **3. Board Approval**

Any contract is subject to cancellation and rejection by GHA's Board of Commissioners without liability. Therefore, at their next regularly scheduled, properly convened meeting following the date hereof, notwithstanding any contrary statements or representations of any member, officer, or employee of the GHA, the Board of Commissioners has the power or authority to waive or limit the effect of this paragraph. In the event that the GHA Board of Commissioners cancels or rejects this contract at their aforesaid meeting, this contract shall be null and void and of no effect as to the GHA; and there shall be no liability on the part of the GHA hereunder.

### **4. Changes**

A. No changes, additions, or deletions shall be made to the contract the without prior written consent of the GHA. All amendments shall be signed by both parties.

B. Any changes in the Scope of Services agreed to by the parties shall not invalidate the contract, nor shall it release the contractor from any guaranty given by him pursuant to the contract, or release the contractor from any other obligations of the contract. All such work shall be executed under the conditions of the contract for an amount agreed to by the GHA and the contractor.

### **5. Insurance**

Contractor shall procure and require its agents, contractors, and subcontractors to procure and maintain, at their own cost and expense, during the entire period of performance/guarantee (including the maintenance/guarantee period or other applicable warranty period) the types of insurance specified in the RFP specification and as set forth. All insurance shall be procured from reputable insurers authorized to do business in the State of New Jersey. In no event shall work be performed until the required evidence of insurance has been furnished. The insurance shall provide for at least thirty (30) days prior written notice to be given to the GHA in the event coverage is materially changed, canceled, or not renewed. Prior to the inception of work, contractor shall provide to the GHA's Executive Director or his/her designee a Certificate of Insurance evidencing the following coverages:

#### ***A. Additional Insured Requirement***

The Housing Authority of the Borough of Glassboro shall be named as additional insured on all policies required hereunder, except for Workers Compensation and Employers Liability.

#### ***B. Workers Compensation and Employers Liability***

(1) **Workers Compensation** – Statutory Limits

(2) **Employers Liability**

# HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

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- a. Bodily Injury by Accident -- \$100,000 each accident
- b. Bodily Injury by Disease -- \$500,000 policy limit
- c. Bodily Injury by Disease -- \$100,000 each employee

## ***C. General Liability***

(1) **Limit of Liability** -- \$1,000,000 per occurrence, combined single limit for bodily injury (including death) and property damage liability

## **(2) Coverage**

Premises operation

Blanket contractual liability

Personal injury liability

Products and completed operations

Independent contractors

## **6. Equal Opportunity**

A. The contractor shall send to each labor union or representative of workers with which contractor has a collective bargaining agreement or other contract or understanding, a notice advising the labor union or workers' representative of the contractor's commitments under this Equal Opportunity clause, and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

B. In the event of the contractor's non-compliance with this clause or any of the Equal Opportunity clauses of the contract, this contract may be canceled, terminated, or suspended in whole or in part; and the contractor may be declared ineligible for further government contracts.

## **7. Substitution of Personnel**

The contractor shall not replace key personnel assigned to this contract and listed in the proposal submitted by the contractor without the prior written consent of the GHA.

## **8. Records**

The contractor shall keep adequate records of direct labor costs and other costs of performance of this contract and shall maintain such records for three (3) years after the GHA makes final payments and all other pending matters are closed.

## **9. Audit**

A. Records of the contractor shall be subject to audit by a Certified Public Accounting firm designated by the GHA in the event of termination for convenience or if any payment is based on time or cost of materials.

B. Because funds for this contract are provided by the federal government, contractor agrees to allow the federal agency, which provided funds, the Comptroller General of the United States, the GHA, or any of their duly authorized representatives to have access to any books, documents, papers, and records of the contractor, which are directly pertinent to this contract, for the purpose of making audit, examination, excerpts, and transcriptions.

## **10. Bankruptcy**

A. GHA may terminate this contract by written notice or email notice:

- (1) If the contractor shall become insolvent or make a general assignment for the benefit of creditors; or

## HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

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(2) If a petition under any bankruptcy act or similar statute is filed by or against the contractor and is not vacated within ten (10) days after it is filed.

B. Termination under this clause shall be in accordance with the “Termination of Default” clause.

### **11. Calendar Dates**

Time shall be measured in calendar days.

### **12. Clause Headings**

The headings contained herein and in the contract are for ease of reference and shall not limit the scope of intent of the clause.

### **13. Hold Harmless**

A. Contractor shall be considered an independent contractor in respect to the work covered by this contract shall assume all risk and responsibility for casualties of every description in connection with the work, which can be attributed either directly or indirectly to the contractor. Contractor, for itself, its successors, assigns, heirs, executors and administrators, agrees to indemnify, defend and save harmless the GHA, all its commissioners, officers, employees and agents from all suits and actions of every nature brought against the GHA or any of them for or on account of any damage or loss sustained by the GHA related to the performance of the work and does agree to pay any and all such damages including costs of litigation and counsel fees whether defended by the GHA or contractor.

B. If the contractor is required to enter premises owned, leased, or occupied by or under the control of the GHA during the performance of this contract, the contractor shall indemnify and hold harmless the GHA its commissioners, officers, employees and agents from any loss, cost, damage, expense, or liability by reason of property damage, or personal injury, including death, of whatsoever nature or kind arising out of or as a result of such performance, whether arising out of actions of the contractor or any of its employees, subcontractors, and lower-tier subcontractors. It is not the intention of this contract to confer third-party beneficiary right or action upon any person whatsoever and nothing herein before or herein after set forth shall be construed so as to confer upon any person other than the GHA a right of action either under this contract or in any manner whatsoever.

### **14. Taxes, Industrial Laws, and Benefits**

Contractor shall be acting as an independent contractor. Neither the contractor nor any of the persons furnishing materials or performing work or services, which are required by this contract, are employees of the GHA within meaning of or the application of any federal or state unemployment insurance law, or other social security, or any workmen’s compensation, industrial accident law, or other industrial or labor laws. At its own expense, the contractor shall comply with such laws and assume all obligations imposed by any one or more of such laws with respect to this contract. Contractor shall be liable for all federal, state, local taxes, and any special assessments.

### **15. No Waiver of Conditions**

Failure of the GHA to insist on strict performance shall not constitute a waiver of any of the provisions of this contract or waiver of any default of the contractor.



## HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

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### **16. Severability**

If any provision of this contract or any application thereof to any person or circumstance is held invalid, such invalidity shall not affect other provisions or applications of this contract, which can be given effect without the invalid provision or application and to this and the provisions of this contract are severable.

### **17. HUD**

The term "HUD" means the United States of America (acting through the Department of Housing and Urban Development) which, subject to the provision of a contract for financial aid with the GHA, has agreed to purchase certain obligations of the GHA to aid in financing the work to be performed under the contract. However, nothing contained in the contract shall be construed to create any contractual relationship between the contractor and HUD.

### **18. Subcontractors**

A. Any proposed subcontractor shall be disclosed in contractor's proposal. Contractor shall furnish such written information as the GHA may require concerning the proposed subcontractor, together with the proposed subcontractor's Non-Collusive Affidavit and Affidavit of Non-Default in the form prescribed by the GHA. Any objection shall be expressed in writing by the GHA effective if/when the GHA responds to contractor's proposal.

B. The GHA may, without claim for extra cost by the contractor, disapprove any subcontractor for cause on the basis of its own determination or because the proposed subcontractor is listed as ineligible to receive awards of contracts from the United States on a current list or list furnished by HUD or if the subcontractor is on the ineligible list maintained by the GHA.

C. The contractor shall cause provisions to be inserted in all subcontracts to bind subcontractors to the terms of the HUD Terms and Conditions, GHA General Terms and Conditions, and other documents comprising the contract insofar as they are applicable to the work of the subcontractor.

D. Nothing contained in the contract shall create any contractual relation between any subcontractor and the GHA.

### **19. Withholding for Liquidated Damages**

The GHA may withhold from any monies due to the contractor or subcontractor such sums as may administratively be determined to be necessary to satisfy any liabilities of such contractor or subcontractor for liquidated damages. The amount to be withheld as liquidated damages is \$300 per day.

### **20. Royalties and Patents**

The contractor shall pay all royalties and license fees. Contractor shall defend all suits or claims for infringement of any patent, trademark, or copyright, and shall save and hold harmless the GHA from loss on account thereof.

### **21. Permits and Licenses**

If any permits, licenses, or other approvals are necessary for the performance of this contract, then the contractor shall obtain all such permits, licenses, or approvals at no extra charge to the GHA.

### **22. Affirmative Action**

This contract is subject to compliance with HUD Minority and Women's Business Enterprise Opportunity goals. A minimum goal of 20% of the total dollar amount of all prime contracts, and/or materials and supplies purchased, should be awarded to minority business concerns. A minimum goal of 10% of the total dollar amount should be awarded to Women's Business concerns. These goals are not mandatory set-asides.

## HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

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### **23. Work Product**

All files and work product, finished and unfinished documents, data, studies and reports prepared by the contractor under this contract shall become the property of the GHA when created and shall be given to the GHA prior to completion or termination of this contract or when requested by the GHA.

### **GENERAL TERMS AND CONDITIONS CERTIFICATION**

The undersigned confirms that the proposer will comply with the General Terms and Conditions required by the Housing Authority of the Borough of Glassboro, as outlined above.

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**DATE**

**THE HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO  
DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN**

Quote Number: \_\_\_\_\_

Bidder/Offeree: \_\_\_\_\_

**PART 1: CERTIFICATION**

**BIDDERS MUST COMPLETE PART 1 BY CHECKING EITHER BOX.**

**FAILURE TO CHECK ONE OF THE BOXES WILL RENDER THE PROPOSAL NON-RESPONSIVE.**

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 neither the person or entity, nor any of its parents, subsidiaries, or affiliates, is identified on the Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran. The Chapter 25 list is found on the Division's website at <http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf>. Bidders must review this list prior to completing the below certification. Failure to complete the certification will render a bidder's proposal non-responsive. If the Director finds a person or entity to be in violation of 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 party.

**PLEASE CHECK THE APPROPRIATE BOX:**

☐ **I certify, pursuant to Public Law 2012, c.25, that neither the bidder listed above nor any of the bidder's parents, subsidiaries, or affiliates is listed on the NJ Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c.25 ("Chapter 25 List"). I further certify that I am the person listed above, or I am an officer or representative of the entity listed above and am authorized to make this certification on its behalf. **I will skip Part 2 and sign and complete below.****

**OR**

☐ **I am unable to certify as above because the bidder and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below. Failure to provide such will result in the proposal being rendered and 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 bidding person/entity, or one of its parents, subsidiaries or affiliates, engaging in the investment activities if Iran outlined above by completing the boxes below

**EACH BOX WILL PROMPT YOU TO PROVIDE INFORMATION RELATIVE TO THE ABOVE QUESTIONS. PLEASE PROVIDE THOROUGH ANSWERS TO EACH QUESTION. IF YOU NEED TO MAKE ADDITIONAL ENTRIES, PLEASE ATTACH ADDITIONAL ACTIVITIES TO THIS FORM**

Name \_\_\_\_\_ Relationship to Bidder/Offeree \_\_\_\_\_

Description of Activities \_\_\_\_\_

Duration of Engagement \_\_\_\_\_ Anticipated Cessation Date \_\_\_\_\_

Bidder/Offeree Contract Name \_\_\_\_\_ Contact Phone Number \_\_\_\_\_

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 Housing Authority of the Borough of Glassboro 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 Housing Authority to notify in writing 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 Housing Authority, permitting the Housing Authority to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print) \_\_\_\_\_ Signature \_\_\_\_\_

**Do Not Enter PIN as a Signature**

Title \_\_\_\_\_ Date \_\_\_\_\_

# HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

## **MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE**

**N.J.S.A. 10:5-31 et seq., N.J.A.C.17:27**

### **GOODS, PROFESSIONAL SERVICES AND GENERAL SERVICE CONTRACTS**

During the performance of this contract, the contractor agrees as follows:

- A. The Contractor or Subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will take affirmative action to ensure that such applicants are recruited and employed, and that employees are treated during employment without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such action shall include, but not limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.
- B. The Contractor or Subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity, or expression, disability, nationality or sex.
- C. The Contractor or Subcontractor, where applicable will send to each labor union or representative or workers with which it has a collective bargaining agreement or other contract or understanding a notice to be provided by the agency contracting officer advising the labor union or worker's representative of the Contractor's commitments under this act and shall post copies of the notice in conspicuous places available to employees and applicants for employment.
- D. The Contractor or Subcontractor where applicable agrees to comply with any regulations promulgated by the Treasurer pursuant to **N.J.S.A. 10:5-31 et seq.** as amended and supplemented from time to time and the Americans with Disabilities Act.
- E. The Contractor or Subcontractor agrees to make good faith efforts to employee minority and women workers consistent with the applicable county employment goals established in accordance with **N.J.A.C. 17:27-5.2** or a binding determination of the applicable county employment goals determined by the Division, pursuant to **N.J.A.C. 17:27-5.2**.
- F. The Contractor or Subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, labor unions, that it does not discriminate on the basis of age, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity, or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.
- G. The Contractor or Subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personal testing conforms to the principles of job-related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.
- H. In conforming with the applicable employment goals, the Contractor or Subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity, or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

# HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

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I. The Contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

- Letter of Federal Affirmative Action Plan Approval
- Certificate of Employee Information Report
- Employee Information Report form AA302

The Contractor and its Subcontractors shall furnish such reports or other documents to the Division of Contract Compliances & EEO as may be requested by the Division from time to time in order to carry out the purposes of these regulations, and Public Agencies shall furnish such information as may be requested by the Division of Contract Compliance & EEO for conducting a compliance investigation pursuant to **Subchapter 10 of the Administrative Code at N.J.A.C. 17:27**

The parties to this contract do hereby agree that the provision of **N.J.S.A. 10:5-31 et seq.** dealing with discrimination in employment on Public Contracts, and the rules and regulations promulgated pursuant thereunto, are hereby made a part of this contract and are binding upon them.

Submitted by:

**Broker Name:** \_\_\_\_\_

**By:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_

# Certification of Payments to Influence Federal Transactions

U.S. Department of Housing  
and Urban Development  
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 01/31/2017)

Applicant Name

Program/Activity Receiving Federal Grant Funding

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all sub recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.  
**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Signature	Date (mm/dd/yyyy)

# HOUSING AUTHORITY OF THE BOROUGH OF GLASSBORO

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## **ACKNOWLEDGEMENT OF RECEIPT OF ADDENDA**

Undersigned Bidder hereby acknowledges receipt of the following Addenda:

<b><u>Addendum Number</u></b>	<b><u>Dated</u></b>	<b><u>Acknowledge Receipt</u></b> <b><u>(Initial)</u></b>
_____	_____	_____
_____	_____	_____
_____	_____	_____

☐

**No Addenda were received**

Acknowledged for \_\_\_\_\_  
(Name of Bidder)

By \_\_\_\_\_  
(Signature of Authorized Representative)

Name \_\_\_\_\_  
(Print or Type)

Title \_\_\_\_\_

Date \_\_\_\_\_

**TO BE RETURNED WITH BID FORM**