

**TOWNSHIP OF NEPTUNE
COUNTY OF MONMOUTH
STATE OF NEW JERSEY
REQUESTS FOR PROPOSALS/QUALIFICATIONS
TRANSCRIPT REPORTING SERVICES
NT 2018-15**

Sealed proposals will be received by the Township Clerk of the Township of Neptune, New Jersey and opened and read in public in the Executive Conference Room, located on the First Floor, in the Township of Neptune Municipal Complex, 25 Neptune Boulevard, Neptune, New Jersey, on **December 7, 2017 at 10:30 A.M.** for the following:

Request for Qualifications from Individuals and/or Firms interested in providing "Transcript Reporting Services" to the Township of Neptune for the period January 1, 2018 through December 31, 2018.

BID/PROPOSAL # NT2018-15

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

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

By order of the Township Committee of the Township of Neptune

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

**Request for Qualifications from Individuals and/or Firms
Interested in providing “Transcript Reporting Services” to the
Township of Neptune for the Period
January 1, 2018 through December 31, 2018
BID/PROPOSAL # NT2018-15**

Introduction

Pursuant to the Fair and Open Process established by N.J.S.A. 19:44A-1, et seq., the Township of Neptune seeks Requests for Qualifications (“RFQ”) from Individuals and/or Firms Certified to provide Transcript Reporting Services in the State of New Jersey. The successful individual/firm must have significant experience in providing such transcript reporting services. The successful individual/firm will provide the Township with services relating to, but not necessarily limited to:

All transcript reporting services requested by the Township or as directed by the Township for any of the Township Boards, including but not limited to the Township’s Planning Board, Board of Adjustment, Historic Preservation Committee or any other Board meeting as directed by the Township. Such services shall include attendance at requested hearings or meetings, marking of exhibits, swearing in witnesses, preparation of transcripts as may be requested, and other usual services provided by transcript reporting service in the normal course of their business.

The Township has adopted the following rate schedule for transcript reporting services rendered pursuant to this RFQ:

Attendance Fee at meetings from 7:00 – 11:00 pm (Max 4 hours):	\$230.00
After 11:00 pm:	\$105.00/hr.
Transcript – original & 1 (No charge for transcript if ordered by an applicant/petitioner)	\$4.75/page
Normal Delivery Time—2 weeks (No Charge)	
Daily delivery – overnight:	\$9.50/page
Expedited Delivery – 3 days	\$7.14/page

Professional Information and Qualifications

Each interested firm shall submit the following information:

1. Name of Firm;
2. Address of principal place of business for all certified shorthand reporters or firm's offices and corresponding telephone and fax numbers. Please note specifically which certified shorthand reporters or other individuals will be assigned to work with the Township, and in what capacity;
3. Description of education, experience, qualifications, number of years with the firm, for the firm's certified shorthand reporters and other individuals who will work with the Township. Include a descriptive narrative of their experience;
4. Experience related to services provided to Municipalities and other public entities;
5. At least four references, three of which must have knowledge of your representation of a public entity;
6. The firm's ability to provide the services in a timely fashion (including staffing, familiarity and location of key staff);
7. Any other information which the interested firm deems relevant;
8. A copy of your New Jersey Business Registration Certificate.
9. A completed Statement of Ownership form (Attached below).

Selection Criteria

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

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

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

1. Each job for which services are requested will be based upon an estimate from the professional consultant;
2. Based upon the estimate and/or proposal a Purchase Order will be issued for which services are required prior to commencement of work;
3. The Purchase Order number shall be referenced on all jobs and on all billing;
4. If for any reason, the professional consultant believe that there are additional services that will be required to complete the job, the obligation is on the part of the professional to notify the Township of the potential additional services and costs for same;
5. No additional work shall commence or prior to authorization and issuance of an additional Purchase Order or amendment to original Purchase Order;
6. Jobs that are billed on an hourly basis may have monies left in the Purchase Order upon completion;
7. Professional Consultants are required to invoice the Township of Neptune on a monthly basis for the previous month's work. If no work has been completed no bill shall be presented;
8. Professional Consultants are to provide monthly billing that provides the name of the person, title of person, hours spent, hourly rate and a description of work;
9. The Township of Neptune will not pay invoices that have a cumulative amount of work for numerous months; Billing shall be on a monthly basis;
10. The Township of Neptune based on the availability of funds shall pay consultants for work that has been completed in the prior month at the next available meeting, provided that the Purchase Order is in place and the funds have not been exceeded;
11. Unless a specific Purchase Order is issued, consultations with staff members, members of the Board or the Governing body under one hour shall not be billable to the Township;
12. The Township of Neptune shall not be charged and will not pay interest on any invoices;

Submission Requirements

Responses to this RFQ must be delivered in a sealed envelope bearing the title And Bid/Proposal Number no later than 10:00 am on **December 7, 2017** to:

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

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

NEW JERSEY BUSINESS REGISTRATION REQUIREMENTS – NON-CONSTRUCTION

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

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

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

A Business Organization that fails to provide a copy of a registration as required pursuant to section 1 of P.L. 2001, c.144 (N.J.S.A. 52:32-44 et seq.) or subsection e. or f. of section 92 of P.L. 1977, c. 110 (N.J.S.A. 5:12-92), or that provides false business registration information under the requirements of either of those sections, shall be liable for a penalty of \$25.00 for each day of violation, not to exceed \$50,000.00 for each business registration copy not properly provided under a contract with a contracting agency.

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

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

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

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

STATEMENT OF OWNERSHIP

The Contractor is (check one): Individual: [] Partnership: [] P.A. [] L.L.C. []
Corporation: [] Joint Venture: [] Other: [] Specify: _____

NAMES:

ADDRESSES:

- | | |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |
| 5. _____ | _____ |

NAME OF CONTRACTOR: _____

SIGNED BY: _____

PRINT NAME & TITLE: _____

DATE: _____

NOTES:

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

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

Sample Business Registration Certificate (for example purposes only)

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