

**TOWNSHIP OF SHREWSBURY
COUNTY OF MONMOUTH
STATE OF NEW JERSEY
REQUESTS FOR PROPOSALS/QUALIFICATIONS
FROM AN INDIVIDUAL OR FIRM TO SERVE
AS TOWNSHIP SEWER COLLECTION OPERATOR
ST2025-07**

Sealed proposals will be received by the Township Clerk of the Township of Shrewsbury, New Jersey and opened and read in public in the Township Committee Meeting Room, in the Township of Shrewsbury Municipal Complex, 1979 Crawford Street, Shrewsbury, New Jersey, on **January 23, 2025 at 10:30 A.M.** for the following:

Request for Qualifications from an Individual or firm to serve as
" Township Licensed Water Operator" to the Township of Shrewsbury from
January 1, 2025 – December 31, 2025. **BID/PROPOSAL #ST2025-07**

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 (P.L. 1975, c. 127) (Equal Employment Opportunity) and N.J.S.A. 52:32-44, et seq. (New Jersey Business Registration).

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

By order of the Township Committee of the Township of Shrewsbury

LESTER J. JENNINGS, Mayor, Township of Shrewsbury
KATRINA THORNTON, Acting Municipal Clerk, Township of Shrewsbury
CATHERINE LAPORTA, Chief Financial Officer, Township of Shrewsbury

**Request for Qualification from an Individual or firm
Interested in Serving as “Township Sewer Collector Operator” to the
Township of Shrewsbury
From January 1, 2025 – December 31, 2025
BID/PROPOSAL # ST 2025-07**

Introduction

Pursuant to the Fair and Open Process established by N.J.S.A. 19:44A-1, et seq., the Township seeks Requests for Qualifications (“RFQ”) from individuals or firms licensed to provide sewer collection service operation in the State of New Jersey and wish to serve as Township Sewer Collection Operator for the Township of Shrewsbury. The successful person or firm must have significant experience in representing New Jersey public entities and organizations in sewer collection services. The successful individual or firm service will provide licensed sewer operator services for the Township’.

SEWAGE COLLECTION SYSTEM OPERATOR – C-2 OPERATOR - The Township requires services of a Licensed Sewage Collection System Operator for the sewage collection services in the Township. The minimum threshold criteria that will be utilized for the evaluation of the responses shall be as follows:

- 1) Licensed as a professional C-2 License Operator by the State of New Jersey for a minimum of five (5) years.
- 2) Evidence of professional liability insurance.
- 3) Representation of governmental entities in the field of sewage collection, with particular emphasis on municipal authorities, for a minimum of five (5) years.
- 4) Knowledge of the Township and its operations.
- 5) Experience with NJDEP interaction with regards to municipal systems.
- 6) Experience with requirements and submittal of reports submitted to the TRWRA on the systems operations; and
- 7) Experience reviewing the data on sewage quality and quantity, and the quarterly charges from the TRWRA and qualified to propose recommended improvements to the collection system and pumping station to improve operations and reduce infiltration and inflow.

Licensed Operating Services shall be provided for a fee of \$3,000.00 annually.

Professional Information and Qualifications

Each interested firm shall submit the following information:

1. Name of Firm;
2. Address of principal place of business and all Licensed Members or firm's offices and corresponding telephone and fax numbers. Please note specifically which Licensed Members will be assigned to work with the Township;
3. Qualifications for Service
4. Description of firm's members education, experience, qualifications, number of years with the firm and a descriptive narrative of their experience with projects similar to those described above;
5. Experience related to representation of Municipalities and other public entities;
6. Examples of your record of success representing public entities;
7. The firm's ability to provide the services in a timely fashion (Including staffing, familiarity, and location of key staff);
8. Any other information which the interested firm deems relevant;
9. A copy of your New Jersey Business Registration Certificate.
10. A completed Statement of Ownership form (Attached below).
11. A copy of State license as to water operation.

Selection Criteria

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

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

Submission Requirements

Responses to this RFQ must be delivered in a sealed envelope bearing the title And Bid/Proposal Number no later than 10:30 am on January 23, 2025 to:

Township Clerk, Shrewsbury Township
Shrewsbury Township Municipal Complex
1979 Crawford St
Shrewsbury Township, New Jersey 07724

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

NEW JERSEY BUSINESS REGISTRATION REQUIREMENTS– NON-CONSTRUCTION

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

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

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

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

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

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

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

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

STATEMENT OF OWNERSHIP

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

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

NAMES:

ADDRESSES:

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

NAME OF CONTRACTOR: _____

SIGNED BY: _____

PRINT NAME & TITLE: _____

DATE: _____

NOTES:

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

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

Sample Business Registration Certificate (for example purposes only)

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