

LITTLE EGG HARBOR TOWNSHIP
HOUSING REHABILITATION PROGRAM

NOTICE TO CONTRACTORS

NOTICE IS HEREBY GIVEN that on Tuesday, June 19, 2018, sealed solicitations for housing rehabilitation of the below listed properties will be received by Rehabco, Inc. 470 Mantoloking Rd. Brick, NJ 08723. Solicitations must be received by 11:30 a.m. prevailing time and place at which time bids will be opened and read in public for project:

LEH - 17-01

LEH - 17-02

Forms of solicitation may be obtained at the Clerk's Office located in the Little Egg Harbor, Municipal building located at 665 Radio Road, Little Egg Harbor, NJ 08087, (609-296-7241) or Rehabco, Inc. 470 Mantoloking Road, Brick, NJ, 08723, (732- 477-7750). Contractors are required to comply with PL 1975 C.127 regarding equal opportunity employment and with PL 1977 C.33 regarding corporate and/or partnership ownership. Or any other amendment/ ruling which supersedes the above.

THE HOUSING GRANTS ADMINISTRATOR reserves the right to reject any and all solicitations for any reason or for no reason whatsoever or to waive any informalities in the proposal received and to accept the bid which, in their judgement, will best serve the program and reserves the right to place a limitation on the amount of housing rehabilitation projects that a contractor may have at any one time.

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LITTLE EGG HARBOR TOWNSHIP
HOUSING REHABILITATION PROGRAM
SOLICITATION PACKAGE

I. PROPOSAL MUST BE RECEIVED BY:

11:30 a.m. on TUESDAY , JUNE 19, 2018

II. HAND DELIVER SEALED PROPOSALS TO:

REHABCO, INC.
470 Mantoloking Rd.
Brick, NJ 08723

732 - 477-7750

III. QUESTIONS REGARDING WORK WRITE-UP should be directed to:

REHABCO, INC.
Program Inspector
732 - 477-7750

IMPORTANT NOTE

This program WILL reject proposals...

- A. ... Not in compliance with the N.J.D.C.A . (New Jersey Department of Community Affairs. As it relates to the UHAC (Uniform Housing Affordability Controls).
- B. ... If an itemized work write-up is not enclosed. Each item MUST be priced.
- C. ... If the price proposed on the "Proposal Form" page DOES NOT equal the total itemization.
- D. ... If every page of the Solicitation Package is not completed. If a page does not apply to your company, note same and sign page.
- E. ... If each Proposal Form and applicable Work Write-up is not submitted in a separate sealed envelope. Each envelope must state the project number. The general solicitation forms should also be in a separate envelope.

INSTRUCTIONS TO CONTRACTORS

1. **GENERAL:** This instruction page shall be considered part of the solicitation package for all attached projects and work write-ups scheduled for solicitation opening on:

TUESDAY, JUNE 19, 2018

2. **PACKAGE CONTENTS & PREPARATION:** Complete & sign ALL forms in ink.
 - a) **WHAT IF I AM AWARDED A CONTRACT?** Please retain these Two (2) pages for future reference. This section will answer some more commonly asked questions when a contractor is awarded a project.
 - b) **AFFIRMATIVE ACTION AFFIDAVIT:** Read this document completely and carefully. **SIGN & RETURN.**
 - c) **STOCKHOLDERS DISCLOSURE STATEMENT:** Read, complete and sign this document whether it applies or not.
 - d) **INSURANCE LIABILITY AFFIDAVIT:** A copy of the Contractor's Insurance Certificate **WILL BE** required if the Contractor is awarded a project. Complete and sign this document.
 - e) **NON-COLLUSION AFFIDAVIT:** This form **MUST BE** notarized. Review and sign this document **IF** no collusion existed for this project.
 - f) **SOLICITATION PACKAGE ADDENDUM:** Additional **IMPORTANT** information the contractor **MUST** know with regard to the Brick Township Housing Rehabilitation Program and this Solicitation Package.
 - g) **PROPOSAL FORM:** **NO SUBSTITUTED FORMS WILL BE ACCEPTED.** Read, complete in its entirety the Proposal Form for EACH individual project. **SIGN & RETURN EACH** form in a separate envelope with the applicable itemized Work Write-up attached. The total work write-up itemization must total the price proposed on this form. (See item 2.h. below.)
 - h) **PROOF OF PROPERTY INSPECTION FORM:** Must be signed by homeowner. No form or signature on form will result in bid disqualification.
 - i) **WORK WRITE-UP:** **EVERY** work write-up item **MUST BE** individually priced and returned in a separate envelope with the applicable Proposal Form. (See item 2.f above.)
3. **PROPOSAL SUBMISSION:** **EACH PROPOSAL FORM & WORK WRITE-UP** submitted **MUST** be in its own individual **SEALED ENVELOPE** with the appropriate Project Number **NOTED ON ENVELOPE.** As specified in the Notice to Contractors, sealed bids will be received by: Rehabco, Inc. 470 Mantoloking Road, Brick, NJ 08723 until:

11:30 a.m. on TUESDAY, JUNE 19, 2018

Little Egg Harbor Township and/or Rehabco, Inc. will not be responsible for late mail deliveries and no bids will be accepted if received after the time stipulated above.

WHAT IF I AM AWARDED A CONTRACT???

* * PLEASE RETAIN THESE TWO (2) PAGES FOR FUTURE REFERENCE!! * *

WHEN WILL I SIGN THE REHABILITATION CONSTRUCTION CONTRACT?

1. Prior to scheduling a contract signing, a copy of the contractor's Certificate of Insurance, stating Little Egg Harbor Township and Rehabco, Inc. as a Certificate holder, must be on file in the Community Development Office. The contractor must have a minimum of \$500,000 liability coverage.
2. After receipt of the contractor's insurance certificate, a Pre-Construction Conference will be scheduled at Rehabco's Office with the contractor and the homeowner. The Rehabilitation Construction Contract and the Work Write-up will be reviewed in detail and signed at this meeting.

WHEN CAN I BEGIN WORK?

1. The contractor CANNOT begin work on the homeowner's project until he receives a "Proceed Order" from Rehabco's office.
2. A "Proceed Order" CANNOT be issued until copies of ALL permits are received in Rehabco's office. This includes, but is not limited to, building, electrical, plumbing, fire, etc.
3. A "Proceed Order" MUST be requested within 21 days of approval from Rehabco to begin the project.
4. Once a "Proceed Order" is issued, work is expected to commence within fifteen (15) days.

WHEN AND HOW WILL I RECEIVE PAYMENT?

There will be a 90% and 10% payment for each individual project which is under \$10,000.

There will be a two (2) 50% payments for each individual project which is over \$10,000. These payments will be mailed to the contractor the following conditions have been met:

PROGRESS (First 50%) PAYMENT WILL NOT be processed until...

1. ... Program Inspector has inspected and approved 50% of items listed in the work write-up.

FINAL 50% (90%) PAYMENT WILL NOT be processed until...

1. ...All Municipal Inspectors have inspected and approved all work for which a permit was required. Copies of the approvals must be on file with Little Egg Harbor Township and Rehabco. Once Municipal approval is received, the Program Inspector will then proceed with his inspection.
2. ...after the Program Inspector has inspected and approved all items listed in the Work Write-up, the inspector and the homeowner must approve and sign the "Release of Payment Forms".
3. ...the contractor MUST sign the "Contractor Warranty/Lien Form".

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4. ... ONLY after the above three (3) conditions have been met, will a 50%/ 90% voucher be processed.

10/% PAYMENT WILL NOT be processed until...

1. ...the homeowner has received the original warranties applicable to the project and Rehabco has received copies of same. This includes, but is not limited to, roof, windows, furnace, hot water heater, etc.
2. ...The 10% payment will not be released prior to 30 days after the "Final Inspection" approval after meeting all of the above conditions.

PLEASE BE REMINDED: That ALL payments (checks) will be MAILED from Little Egg Harbor Township.

WHAT IF THERE ARE PROBLEMS AFTER I RECEIVE MY FINAL 10% PAYMENT?

The Rehabilitation Construction Contract, which is signed by both the contractor and the homeowner, states the following:

"Contractor shall promptly repair, replace or rebuild any finished work or materials or equipment in which defects of materials or workmanship may appear within ONE (1) YEAR after Final inspection date. This warranty is exclusive of normal wear and tear or mistreatment of rehabilitated items. The Contractor shall furnish the Owner with all manufactures and suppliers' written guarantees and warranties covering material and equipment furnished by this Contract.

Notice by the Owner to the Contractor to repair, replace or rebuild such defective work shall be deemed timely if given no later than TEN (10) DAYS after the expiration of the ONE (1) YEAR period."

AFFIRMATIVE ACTION AFFIDAVIT

Indicate in the applicable boxes below whether you have met any criteria for compliance with the New Jersey Affirmative Action regulations. Your bid will be accepted even if you are not in compliance at this time. If, however, you are the lowest responsible bidder and have not yet complied with the Affirmative Action Regulation, we will send you the Affirmative Action Documents for completion. You must return the completed documents to us within seven (7) days after notice of award.

FIRMS OF 50 OR MORE EMPLOYEES

A vendor Affirmative Action Employee Information Report was submitted to the Township of Little Egg Harbor.

A Federal Certificate of Approval has been received. Proof of this will be required at the time of award.

A N.J. Affirmative Action Certificate of Approval has been received. The number is _____.

None of the above.

FIRMS OF LESS THAN 50 EMPLOYEES

An Affirmative Action Affidavit has been submitted to the Township Little Egg Harbor.

None of the above.

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE.

Firm Name (print): _____

Signature: _____

Title: _____

Date: _____

STOCKHOLDERS DISCLOSURE STATEMENT

Statement setting forth the names and addresses of Stockholders and Partners owning more than ten percent (10%) _____

(Name of Organization)

in compliance with Chapter 33 of the Laws of 1977.

The following constitute the names and addresses of all stockholders in the corporation if the corporation is a bidder, or partners if the bidder is a partnership who own ten percent (10%) or more of the corporation stock of the bidder of any class or of all individual partners in the partnership who own ten percent (10%) or greater interest therein.

In the event no stockholder or partner owns ten percent (10%) or greater, please indicate at the appropriate space on this form.

If one or more such stockholder or partner is itself a corporation or is a partnership, the stockholders holding ten percent (10%) or more of that corporation's stock or the individual partners owning ten percent (10%) or greater interest in that partnership are as follows:

NAME	ADDRESS	% of OWNERSHIP
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

_____ CHECK HERE IF no Stockholder or Partner owns ten percent (10%) or more of the Corporate stock or Ownership of the Solicitor.

I certify that the foregoing information is correct.

Secretary or Partner

of _____
Corporation or Partnership

INSURANCE LIABILITY AFFIDAVIT

I, _____, do solemnly swear that my insurance coverage covers any provisions herein listed:

A. COMPREHENSIVE GENERAL LIABILITY:

The Contractor's insurance coverage, minimum of \$500,000, must hold the owner, the Township and any of its agents free from any and all liability of whatever nature arising from the work performed at the aforementioned property in accordance with subsequent CDBG contract, including attorney's fees and costs in connection with the defense of such claims.

B. COMPREHENSIVE AUTOMOBILE LIABILITY:

The Contractor's insurance must include owned vehicles and non-owned vehicles and must hold harmless the homeowner and the Township and any of its agents from liability.

C. SPECIAL INSURANCE REQUIREMENTS:

Including WORKMAN'S COMPENSATION and Builder's Risk, if applicable.

I do solemnly swear that this insurance material is within the confines of my coverage.

SIGNATURE

DATE

Reminder: A copy of the Contractor's Insurance Certificate naming the Township of Little Egg Harbor and Rehabco as additional insured will be required IF the contractor is awarded a project.

NON-COLLUSION AFFIDAVIT

STATE OF NEW JERSEY
COUNTY OF _____

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

I am _____ of the Firm of _____
the bidder making the proposal for the above named project, and that I executed said proposal with full
authority to do so: that said bidder has not directly or indirectly entered into any agreement, participated in
any collusion or otherwise taken any action in restraint of free, competitive bidding in connection with the
above named project; and that all statements contained in said proposal and in this affidavit are true and
correct, and made with full knowledge that the Township of Little Egg Harbor relies upon the truth of the
statements contained in said proposal and in the statements contained in this affidavit in awarding to the
contract for said project.

I further warrant that no person or selling agency has been employed or retained to solicit or secure
such contract upon an agreement or understanding for a commission, percentage, brokerage or
contingent fee, except bona fide established commercial or selling agencies maintained by
_____ (N.J.S.A. 52:34-15).
(Name of Contractor)

SIGNATURE

PRINT NAME

Subscribed and sworn to
before me this _____
day of _____, 20__.

NOTARY PUBLIC

My commission Expires:

For Project #'s: LEH-17-01 & LEH-17-02

LITTLE EGG HARBOR TOWNSHIP HOUSING REHABILITATION PROGRAM

SOLICITATION PACKAGE
ADDENDUM

IMPORTANT NOTICE

CONTRACTOR: PLEASE BE ADVISED...

- ... the solicitation process is open to all eligible general contractors with the exception of debarred, suspended, or ineligible contractors or subrecipients as stated in the U.S. Department of Housing and Urban Development, Community Development Block Grant Programs, Entitlement Grant Regulations, Section 570.609. As well as abiding by the Department of Community Affairs as it pertains to the UHAC.
- ... if your total proposal is NOT within the Program Inspector's estimated bracket. OR if the Program Inspector deems it necessary, you WILL be required to attend a meeting at the Rehabco Office to discuss your price proposal submitted. The Program has the right to reject any and all bids.
- ... ANY DEVIATION FROM THE WORK WRITE-UP as it is written MUST BE reported to and approved by the Program Inspector prior to performing the change. This also includes requests by the homeowner. All changes must be noted on the Change order Form and signed by all concerned parties.
- ... As the General Contractor, YOU must read and understand each sub-section of the "CM" (Construction Manual) Section being specified in the Work Write-up. Many items are different from what has been approved in the past. If an item is unclear OR not applicable, the Contractor should check with the Program Inspector BEFORE proceeding with the work. If a Contractor proceeds with an installation, contrary to what is written, he/she shall bear the cost if compliance.
- ... All work to be performed in conjunction with and according to BOCA Code.

PREPARED BY:

REHABCO, INC.
470 Mantoloking Road
Brick, NJ 08723

PROPOSAL FORM
LITTLE EGG HARBOR TOWNSHIP HOUSING REHABILITATION PROGRAM

OWNER: Alfred Annibel PHONE: 609-812-5842

ADDRESS: 109 Valley Forge Dr. PROJECT #: LEH-17-01

CONTRACTOR: *Please complete the following:*

PRINT Firm's Name

AREA CODE & PHONE NUMBER

ADDRESS

DATE

CITY, STATE, ZIP

Contractor's Identification Number
(Federal I.D. or Social Security #)

1. I the undersigned Contractor, have inspected the property and familiarized myself with ALL conditions relating to the rehabilitation work and facilities involved, the Work Write-up, SPECIFICATIONS and DRAWINGS (if applicable) as well as any difficulties and restrictions, if any, attending to performance of the required work.
2. I, the undersigned Contractor, will make all necessary adjustments to estimated quantities and dimensions listed in the Work Write-up to assure all work will be completed as required in a workmanlike manner. There will be NO CHANGE ORDERS for ANY items listed on the work write-up, unless there is an unforeseen circumstance including, but not limited to, insect infestation.
3. I acknowledge it is the Contractor's responsibility to acquire and pay for all necessary permits and I propose to pay for and obtain all necessary permits, furnish all labor, materials and equipment necessary to accomplish all work called for in the Work Write-up for the sum of \$_____.
4. Copies of ALL permits **MUST** be on file in the Township office prior to receiving a "Notice to Proceed". Work cannot begin prior to receipt of this notice by the contractor. All work included in the Work Write-up shall be completed within sixty (60) days as stipulated in awarded contract.
5. All Bid Proposals shall be considered firm and without qualification for sixty (60) days.
6. Any contractor who declines more than two (2) projects, for which he submitted a proposal and was awarded said project within a six (6) month period, will not be permitted to submit any future proposals for a period of one (1) year.
7. Payment is subject to approval from Municipal and Program Inspectors and receipt of copies of all project warranties.

Contractor Signature

Date

Inspector: Michael Thullen

REHABCO, INC.
Work Write-Up (WWU) **

Page 1 of 2

Applicant: Alfred Annibel
Address: 109 Valley Forge Dr.

Project #: LEH-17-01

Phone #: 609-812-5842
Little Egg Harbor 08087

Municipality: Little Egg Harbor
Block: 325.422 Lot: 5

WWU # | CM-100 # | DESCRIPTION OF WORK | Item Price

1	1.A,B	GENERAL CONDITIONS - Permit Fees, Dumpster, Staging, etc.	\$
2	2.A,B	ELECTRICAL - Replace exhaust fans in main bathroom and master bathroom.	\$
		Total 2 exhaust fans.	
3	3.A,B,C 4.A,B	SMOKE / CARBON MONOXIDE DETECTORS - Install integrated combo units with battery back-up as per new construction code. - Min. <u>3</u> units at the placement of the Fire Official.	\$
4	7.A,B,G	HVAC - Replace existing 75,000 BTU heat plant (forced hot air system) properly sized complete to code.	\$
		- Replace existing AC condenser complete to code.	\$
5	6.A,C	WINDOWS - Replace bay window in Living room with solid vinyl, energy efficient, medium grade unit.	\$
6	10.D	DOORS - Replace rear entry storm door. Medium grade. H.O. choice of style.	\$
7	11.B	DOMESTIC HOT WATER - Replace existing 40 gal. hot water heater complete to code.	\$

* To be used in conjunction with CONSTRUCTION MANUAL (CM-100)

Inspector: M. Thulen

KENHABLU, INC.
Work Write-Up (WWU) **

Page 2 of 2

Applicant: A. Annibel

Project #: LEH-17-01

WWU # | CM-100 # |

DESCRIPTION OF WORK

Item Price

Item	Description	Price
8	12.A,B 14.B PLUMBING- KITCHEN/BATH - At main bath: Replace W/C with chair height (handicap) W/C. complete, replace 24" vanity, sink & faucet complete to code. - Replace ceramic tile floor (approx. 5' X 5' area) with medium grade, store stock tile. H.O. choice of style & color. H.O. may choose to upgrade at own expense. Contractor responsible for final measurements. - At master bath: Replace W/C with chair height (handicap) W/C. complete, replace 54" vanity, sink & faucet complete to code. - Replace ceramic tile floor (approx. 5' X 3' area) with medium grade, store stock tile. H.O. choice of style & color. H.O. may choose to upgrade at own expense. Contractor responsible for final measurements.	\$ _____ \$ _____ \$ _____ \$ _____
9	13.A,C WALLS/FLOORS/CEILINGS - Replace vinyl floor in utility room approx. 5' X 6'. H.O. choice of color & style. - Allowance for vinyl flooring: \$25 S. Y. retail. H.O. may choose to upgrade at own expense.	\$ _____ \$ _____

TOTAL CONTRACT PRICE: \$ _____

PROOF OF PROPERTY INSPECTION

I, the homeowner, hereby certify that the below contractor, or his representative, has inspected my property and familiarized him/herself with all conditions to the work write-up for my project.

Homeowner

Date

Alfred Annibel
109 Valley Forge Dr.
Little Egg Harbor, NJ 08087

Project #: LEH-17-01

CONTRACTOR:

Print Company Name

Contractor's Signature

PROPOSAL FORM
LITTLE EGG HARBOR TOWNSHIP HOUSING REHABILITATION PROGRAM

OWNER: Dorothy Servis PHONE: 609-384-2180

ADDRESS: 210 Twin Lakes Blvd. PROJECT #: LEH-17-02

CONTRACTOR: *Please complete the following:*

PRINT Firm's Name

AREA CODE & PHONE NUMBER

ADDRESS

DATE

CITY, STATE, ZIP

Contractor's Identification Number
(Federal I.D. or Social Security #)

1. I the undersigned Contractor, have inspected the property and familiarized myself with ALL conditions relating to the rehabilitation work and facilities involved, the Work Write-up, SPECIFICATIONS and DRAWINGS (if applicable) as well as any difficulties and restrictions, if any, attending to performance of the required work.
2. I, the undersigned Contractor, will make all necessary adjustments to estimated quantities and dimensions listed in the Work Write-up to assure all work will be completed as required in a workmanlike manner. There will be NO CHANGE ORDERS for ANY items listed on the work write-up, unless there is an unforeseen circumstance including, but not limited to, insect infestation.
3. I acknowledge it is the Contractor's responsibility to acquire and pay for all necessary permits and I propose to pay for and obtain all necessary permits, furnish all labor, materials and equipment necessary to accomplish all work called for in the Work Write-up for the sum of \$_____.
4. Copies of ALL permits **MUST** be on file in the Township office prior to receiving a "Notice to Proceed". Work cannot begin prior to receipt of this notice by the contractor. All work included in the Work Write-up shall be completed within sixty (60) days as stipulated in awarded contract.
5. All Bid Proposals shall be considered firm and without qualification for sixty (60) days.
6. Any contractor who declines more than two (2) projects, for which he submitted a proposal and was awarded said project within a six (6) month period, will not be permitted to submit any future proposals for a period of one (1) year.
7. Payment is subject to approval from Municipal and Program Inspectors and receipt of copies of all project warranties.

Contractor Signature

Date

Inspector: Michael Thulen

REHABCO, INC.
Work Write-Up (WWU) **

Page 1 of 2

Applicant: Dorothy Servis

Revised: 3/12/18

Project #: LEH-17-02

Address: 210 Twin Lakes Blvd.

Little Egg Harbor 08087

Phone #: 609-384-2180

Municipality: Little Egg Harbor
Block: 325.62 Lot: 7

WWU #	CM-100 #	DESCRIPTION OF WORK	Item Price
1	1.A,B	GENERAL CONDITIONS - Permit Fees, Dumpster, Staging, etc.	\$ _____
2	2.A,B	ELECTRICAL - Remove baseboard and circuit breakers for electrical heat system from panel. - Replace main breaker on circuit panel - Install electrical breakers for newly installed gas heat plant & A.C. unit. - Install fan in attic complete to code. (Not a roof fan.)	\$ _____ \$ _____ \$ _____
3	3,A,B,C 4.A,B	SMOKE / CARBON MONOXIDE DETECTORS - Install integrated combo units with battery back-up as per new construction code. - Min. <u>5</u> units at the placement of the Fire Official.	\$ _____ \$ _____
4	7.A,B,G	HVAC - Remove existing electric baseboard heating units throughout the house. Repair any/all damage from removed baseboard units. Give removed units to H.O. - Install new gas-fired forced hot air heat plant properly sized (min. 60,000 BTU) with A/C system complete to code. Connect to gas line at side of house, include all connections. - Install new duct system throughout house according to code.	\$ _____ \$ _____ \$ _____
5	11.B	DOMESTIC HOT WATER - Install energy efficient 40 gal. hot water heater complete to code.	\$ _____

* To be used in conjunction with CONSTRUCTION MANUAL (CM-100)

TOTAL CONTRACT PRICE: \$ _____

PROOF OF PROPERTY INSPECTION

I, the homeowner, hereby certify that the below contractor, or his representative, has inspected my property and familiarized him/herself with all conditions to the work write-up for my project.

Homeowner

Date

Dorothy Servis
210 Twin Lakes Blvd.
Little Egg Harbor, NJ 08087

Project #: LEH-17-02

CONTRACTOR:

Print Company Name

Contractor's Signature