

Township of Toms River PURCHASING

CASSIE CAPPARELLI, PURCHASING AGENT

33 Washington Street, Toms River, NJ 08753

[LAW OFFICE OF DONALD F. BURKE] RESPONSE DOCUMENT REPORT

PROPOSAL No. PROPOSAL-2024-155

LEGAL SERVICES IN RELATION TO THE CIBA GEIGY SUPERFUND SITE

RESPONSE DEADLINE: April 30, 2024 at 10:30 am Report Generated: Wednesday, May 1, 2024

Law Office of Donald F. Burke Response

CONTACT INFORMATION

Company:

Law Office of Donald F. Burke

Email:

dfburkejr@gmail.com

Contact:

Donald Burke

Address:

45 Gale Road Brick, NJ 08723

Phone:

N/A

Website:

N/A

Submission Date:

Apr 22, 2024 11:40 AM

ADDENDA CONFIRMATION

No addenda issued

QUESTIONNAIRE

1. PRICE CERTIFICATION*

PLEASE DOWNLOAD THE BELOW DOCUMENT, COMPLETE AND UPLOAD.

NOTE: THIS IS MANDATORY; FAILURE TO SIGN SHALL BE CAUSE FOR REJECTION

PRICE_CERTIFICATION.pdf

TR_Price_Certification.pdf

2. CORPORATE RESOLUTION

PLEASE DOWNLOAD THE BELOW DOCUMENT, COMPLETE AND UPLOAD.

NOTE: THIS IS MANDATORY

• <u>CORPORATE_RESO.pdf</u>

TR_Resolution.pdf

3. MANDATORY AFFIRMATIVE ACTION*

PLEASE DOWNLOAD THE BELOW DOCUMENT, COMPLETE AND UPLOAD.

NOTE: THIS IS MANDATORY

• MANDATORY_EQUAL_EMPLOYMENT_...

TR_Mandatory_Equal_Employment_Opportunity.pdf

4. STATEMENT OF OWNERSHIP*

PLEASE DOWNLOAD THE BELOW DOCUMENT, COMPLETE AND UPLOAD.

NOTE: THIS IS MANDATORY

• STATEMENT_OF_OWNERSHIP_DISC...

TR_Statement_of_Ownership_Disclosure.pdf

NON-COLLUSION AFFIDAVIT*

PLEASE DOWNLOAD THE BELOW DOCUMENTS, COMPLETE AND UPLOAD.

NOTE: THIS IS MANDATORY

NON_COLLUSION_AFFIDAVIT.pdf

TR_Non-Collusion_Affidavit.pdf

6. EXCEPTIONS SHEET*

PLEASE DOWNLOAD THE BELOW DOCUMENT, COMPLETE AND UPLOAD.

NOTE: THIS IS MANDATORY; PLEASE LIST ANY EQUIVALENT PRODUCTS HERE OR CHECK "NO EXCEPTIONS"

EXCEPTIONS.pdf

TR_Notice_of_Exceptions.pdf

7. RUSSIA-BELARUS DISCLOSURE

PLEASE DOWNLOAD THE BELOW DOCUMENT, COMPLETE AND UPLOAD.

NOTE: THIS IS REQUIRED PRIOR TO AWARD OF CONTRACT, BUT BIDDERS ARE STRONGLY URGED TO INCLUDE WITH THEIR BID SUBMISSION

• <u>2024_RUSSIA_BELARUS.pdf</u>

No response submitted

8. IRAN DISCLOSURE

PLEASE DOWNLOAD THE BELOW DOCUMENT, COMPLETE AND UPLOAD.

NOTE: THIS IS REQUIRED PRIOR TO AWARD OF CONTRACT, BUT BIDDERS ARE STRONGLY URGED TO INCLUDE WITH THEIR BID SUBMISSION

• IRAN DISCLOSURE FORM.docx

No response submitted

9. ADA COMPLIANCE

PLEASE DOWNLOAD THE BELOW DOCUMENT, COMPLETE AND UPLOAD.

NOTE: THIS IS REQUIRED PRIOR TO AWARD OF CONTRACT, BUT BIDDERS ARE STRONGLY URGED TO INCLUDE WITH THEIR BID SUBMISSION

ADA COMPLIANCE FORM.pdf

No response submitted

10. BUSINESS REGISTRATION CERTIFICATE

PLEASE UPLOAD A COPY OF YOUR BUSINESS REGISTRATION CERTIFICATE. NOTE: APPLICATION MUST BE DONE BY BID OPENING.

NOTE: THIS IS REQUIRED PRIOR TO AWARD OF CONTRACT, BUT BIDDERS ARE STRONGLY URGED TO INCLUDE WITH THEIR BID SUBMISSION

No response submitted

11. W-9

PLEASE UPLOAD A COPY OF YOUR W-9.

NOTE: THIS IS REQUIRED PRIOR TO AWARD OF CONTRACT, BUT BIDDERS ARE STRONGLY URGED TO INCLUDE WITH THEIR BID SUBMISSION

W-9.pdf

12. CERTIFICATE OF INSURANCE

PLEASE UPLOAD A COPY OF YOUR CERTIFICATE NAMING THE TOWNSHIP AS THE CERTIFICATE HOLDER AND AS AN ADDITIONAL INSURED ON A PRIMARY AND NON-CONTRIBUTORY BASIS.

NOTE: THIS IS REQUIRED PRIOR TO AWARD OF CONTRACT, BUT BIDDERS ARE STRONGLY URGED TO INCLUDE WITH THEIR BID SUBMISSION

No response submitted

13. AFFIRMATIVE ACTION/AA302/EMPLOYEE INFORMATION REPORT

PLEASE UPLOAD YOUR AA302 AND COPY OF THE CHECK OR EMPLOYEE INFORMATION REPORT CERTIFICATE.

NOTE: THIS IS REQUIRED PRIOR TO AWARD OF CONTRACT, BUT BIDDERS ARE STRONGLY URGED TO INCLUDE WITH THEIR BID SUBMISSION; AN AA302 SHALL ONLY BE ACCEPTED IF THE VENDOR HAS NEVER BEEN AWARDED A CONTRACT WITH THE TOWNSHIP.

No response submitted

14. ADDITIONAL DOCUMENTATION

PLEASE UPLOAD ANY ADDITIONAL DOCUMENTATION HERE.

NOTE: THIS IS NOT REQUIRED

No response submitted

15. CHECKLIST*

PLEASE DOWNLOAD THE BELOW DOCUMENT, COMPLETE AND UPLOAD.

• BID_CHECKLIST.pdf

TR_Bid_Checklist.pdf

TOWNSHIP OF TOMS RIVER PRICE CERTIFICATION

The signature provided on this document certifies that the specifications within were carefully reviewed and all pricing submitted or provided by the Township is approved. The bidder agrees to provide the goods or services specified and inclusive of all terms and conditions.

The optional prompt payment discount shall have no e	ffect on the making of the award.
PROMPT PAYMENT DISCOUNT% AU	THORIZED INITIALS
FAILURE TO SIGN THIS SHEET SHALL B	E REASON FOR REJECTION.
BIDDER NAME: (MUST MATCH W-9 PROVIDED)	
Donald F. Burke, Esq. Digitally signed by Donald F. Burke, Esq. Date: 2024.04.22 10:22:17 -04'00'	7329664922
SIGNATURE:	_ PHONE #:
Donald F. Burke PRINTED NAME:	Proprietor TITLE:
donaldburkeesq@gmail.coi	m
45 Gale Road ADDRESS: Brick, New Jersey 08723	
Dilok, New Jeisey 00123	
BIDDER'S FEDERAL TAX ID #	

Redacted Pursuant N.J.S.A. 47:1A-1.1 Personal Identifying Information

CORPORATE RESOLUTION

To be completed by all business entities. Individuals listed under Section 1 shall be the only authori ed signatories on the Price Certification and any other submitted documentation.

RESOL ED that the following named officers
Donald F. Burke, Esq.
Be and hereby are authori ed and empowered to sign and submit to the Township of Toms River the attached proposal and further that said officers are authori ed to e ecute the Contract or any other agreement or bond o statement necessary for the fulfillment of obligations incurred by the acceptance of the Township of Toms River of the bid.
I hereby certify that the above constitutes a true copy of a Resolution passed and approved by the Board of Directors
at a meeting held on <u>Date 4/22/24</u>
Affi Corporate Seal: if applicable
Signature of Secretary:
Print name of Secretary:

MANDATORY EQUAL EMPLOYMENT OPPORTUNITY

N.J.S.A. 10:5-31 et seq. (P.L. 1975, C. 127) and N.J.A.C. 17:27
GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS

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

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 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; 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.

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.

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 workers' 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.

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.

The contractor or subcontractor agrees to make good faith efforts to employ minority and women workers consistent with the applicable county employment goals established in accordance with

N.J.A.C. I7:27-5.2, or a binding determination of the applicable county employment goals determined by the Division, pursuant to N.J.A.C. 17:27-5.2.

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.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with 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.

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.

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 Div. of Contract Compliance & EEO as may be requested by the office 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 Div. of Contract Compliance & EEO for conducting a compliance investigation pursuant to <u>Subchapter 10 of the Administrative Code at N.J.A.C. 17:27</u>.

	4/22/24		
SIGNATURE	DATE		

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 quote or proposal.

<u>Nam</u>	e of Organization:	Law Office of Dona	ald F. Bu	ırke
Orga	nization Address:	45 Gale Road, Brick	k, NJ 087	723
			Marian Harrison (and	
<u>Part</u>	I Check the box tha	at represents the type of bu	usiness orga	anization:
	Sole Propries	torship (skip Parts II and III	, execute c	ertification in Part IV)
	Non-Profit Co	orporation (skip Parts II and	d III, execut	e certification in Part IV)
	For-Profit Corp	ooration (any type)		Limited Liability Company (LLC)
	Partnership			mited Partnership
	Limited Liabilit	y Partnership (LLP)		
	Other (Be Spe	ecific)	,	
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 shall be. (COMPLETE THE LIST BELOW IN THIS SECTION) OR				
•				
	(Please attach addi	tional sheets if more space	is needed	<u>:</u>
	Name of Individua	l or Business Entity	Ві	usiness Address

STATEMENT OF OWNERSHIP DISCLOSURE (CONT'D)

Part III Disclosure of 10% or greater ownership in the stockholders, partners or LLC members listed in part II

If a vendor 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.

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 noncorporate 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.

Business Address	
	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 vendor/proposer; that the Township of Toms River 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 Township of Toms River to notify the Township of Toms River 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 shall constitute a material breach of my agreement(s) with the, permitting the Township of Toms River to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print):	Donald F. Burke	Title:	Proprietor	
Signature:	hallen	Date:	4/22/24	

TOWNSHIP OF TOMS RIVER NON-COLLUSION AFFIDAVIT

State of New Jersey	
County of Ocean	SS
Donald F. Burke res	iding in _Brick
(name of affiant)	(name of municipality)
in the County of Ocean	and State of New Jerseyof full
age, being duly sworn according to law on my	oath depose and say that:
I am Proprietor	of the firm of Law Office of Donald F. Burke (name of firm)
(title or position)	(name of firm)
l am	the bidder making this proposal for the bid
	O THE 🔒 and that I executed the said proposal with
participated in any collusion, or otherwise take connection with the above named project; and affidavit are true and correct, and made with fupon the truth of the statements contained in affidavit in awarding the contract for the said publication. I further warrant that no person or selling ages such contract upon an agreement or understated.	directly or indirectly entered into any agreement, en any action in restraint of free, competitive bidding in a that all statements contained in said proposal and in this will knowledge that the Township of Toms River relies said Proposal and in the statements contained in this project. The proposal and in the statements contained in this project. The proposal and in the statements contained in this project. The proposal and in the statements contained in this project. The proposal and in the statements contained in this project.
before me this day	Signature
April 22 , 2 024	Donald F. Burke
Estal 5 Bah /	(Type or print name of affiant under signature)
Notary public of Donald F. Burke Jr., Esq.	
Attorney at Law of the State of New Jersey	
My Commission expires	
(Seal)	

NOTICE OF EXCEPTIONS

BIDDERS EXCEPTIONS TO SPECIFICATIONS OR PROVISION OF 'EQUAL' PRODUCTS

2)
3)
4)
5)
Please use additional pages, if necessary.
No exceptions to the specifications.
Acknowledged for: Law Office of Donald F. Burke (Name of Bidder)
By: (Signature of Authorized Representative)
Name: Donald F. Burke (Print or Type)
Title:
Date:



Request for Taxpayer **Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

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

Befor	re you begin. For guidance related to the purpose of Form W-9, see Purpose of Form, below.				
	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the centity's name on line 2.)	wner's name on line	1, and enter the business/disregarded		
	Donald F. Burke				
Print or type. See Specific Instructions on page 3.	2 Business name/disregarded entity name, if different from above.				
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered only one of the following seven boxes. ✓ Individual/sole proprietor	Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):			
	LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead che box for the tax classification of its owner.	Exempt payee code (if any) Exemption from Foreign Account Tax Compliance Act (FATCA) reporting			
rint	Other (see instructions)		code (if any)		
P _I Specific	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions		(Applies to accounts maintained outside the United States.)		
See	5 Address (number, street, and apt. or suite no.). See instructions.45 Gale Road	Requester's name a	and address (optional)		
	6 City, state, and ZIP code	Pedac	ted Pursuant N.J.S.A.		
	Brick, New Jersey 08723		•		
	7 List account number(s) here (optional)		-1.1 Personal Identifying		
		Inforn	nation		
Pa	Taxpayer Identification Number (TIN)	To-state.			
back	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to all up withholding. For individuals, this is generally your social security number (SSN). However, the alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other es, it is your employer identification number (EIN). If you do not have a number, see How to get ater.	for a et a or	curity number		
			ridentification number		
	: If the account is in more than one name, see the instructions for line 1. See also What Name ber To Give the Requester for guidelines on whose number to enter.	and	_		
Pai	t II Certification				
Unde	er penalties of perjury, I certify that:				
2. I a Se no	e number shown on this form is my correct taxpayer identification number (or I am waiting for m not subject to backup withholding because (a) I am exempt from backup withholding, or (b) rvice (IRS) that I am subject to backup withholding as a result of a failure to report all interest longer subject to backup withholding; and	I have not been n	otified by the Internal Revenue		
3. I am a U.S. citizen or other U.S. person (defined below); and					
	e FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting				
beca	fication instructions. You must cross out item 2 above if you have been notified by the IRS that use you have failed to report all interest and dividends on your tax return. For real estate transactisition or abandonment of secured property, cancellation of debt, contributions to an individual rethan interest and dividends, you are provided you to sign the certification, but you must provide you	ons, item 2 does no tirement arrangeme	ot apply. For mortgage interest paid, ent (IRA), and, generally, payments		
Sign Her		Date 4/22/2024			
Ge	neral Instructions	peen added to this	form. A flow-through entity is		
	required to complet		ate that it has direct or indirect ries when it provides the Form W-9		

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.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

TOWNSHIP OF TOMS RIVER CHECKLIST

FAILURE TO SUBMIT THE BELOW DOCUMENTATION WITH YOUR BID SHALL RESULT IN THE MANDATORY REJECTION OF YOUR BID.

\checkmark	COMPLETED AND SIGNED STATEMENT OF OWNERSHIP DISCLOSURE
\checkmark	COMPLETED, SIGNED AND NOTORIZED WITH SEAL AFFIXED TO NON-COLLUSION AFFIDAVIT
✓	COMPLETED AND SIGNED EXCEPTIONS SHEET
\checkmark	COMPLETED CORPORATE RESOLUTION
\checkmark	COMPLETED ACKNOWLEDGEMENT OF RECEIPT OF ADDENDA
\checkmark	COMPLETED AND SIGNED PRICE CERTIFICATION
	VALID COPY OF YOUR PUBLIC WORKS CONTRACTOR REGISTRATION CERTIFICATE, WHEN APPLICABLE
	COMPLETE CONSENT OF SURETY, WHEN APPLICABLE
	COMPLETE BID SECURITY, WHEN APPLICABLE
	COMPLETED FEDERAL NON-DEBARMENT CERTIFICATION, WHEN APPLICABLE

THE BE	ELOW DOCUMENTATION SHALL BE SUBMITTED PRIOR TO AWARD, BUT BIDDERS ARE STRONGLY URGED TO INCLUDE WITH THEIR SUBMITTAL.
	COMPLETED AND SIGNED DISCLOSURE OF INVESTMENT ACTIVITIES IN RUSSIA-BELARUS & IRAN
	COPY OF BUSINESS REGISTRATION CERTIFICATE ISSUED BY THE NEW JERSEY DEPARTMENT OF THE TREASURY
	CURRENT AFFIRMATIVE ACTION DOCUMENTATION
П	CERTIFICATE OF INSURANCE NAMING THE TOWNSHIP AS AN ADDITIONAL INSURED
	COMPLETED AND SIGNED W-9
	COMPLETED AND SIGNED ADA COMPLIANCE FORM
	COMPLETED AND SIGNED FEDERAL TRANSIT ADMINISTRATION (FTA) LOBBYING CERTIFICATION
	COMPLETED AND SIGNED DISCLOSURE OF LOBBYING ACTIVITIES (LLL FORM)
	A COPY OF YOUR BUSINESS ENTITY ANNUAL STATEMENT (FORM BE), IF APPLICABLE
Law	Office of Donald F. Burke
	Company Name Signature

Donald F. Burke

Printed Name