

Hudson Regional Health Commission  
595 County Avenue, Building 1  
Secaucus, New Jersey 07094

REQUEST FOR BIDS  
for  
COVID VACCINES

BID# 24-003

ISSUED DATE: August 02, 2024

DUE DATE: August 15, 2024

Marisol Leguizamon, QPA

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## **1.0 INFORMATION FOR BIDDERS**

### **1.1 PURPOSE AND INTENT**

This Request for bids is issued by the Hudson Regional Health Commission. The purpose is to solicit bids for COVID-19 vaccines, delivered F.O.B. Destination to the Hudson Regional Health Commission.

The intent of this bid is to award contracts to a minimum of two (2) responsible Bidder(s) whose proposal(s) are most advantageous to the Commission, price and other factors considered. The Commission, however, reserves the right to separately procure individual requirements that are the subject of the contract during the contract term, when deemed by the Commission to be in the Commission's best interest.

### **1.2 BACKGROUND**

The Commission administered approximately 86,000 doses of Covid-19 vaccine since its release of which approximately 2,000 were in the past 12 months. The Commission, however, offers no guarantee of a quantity that will be ordered under the contract.

### **1.3 KEY EVENTS**

#### **1.3.1 QUESTIONS/INQUIRES**

Any questions or inquiries regarding this Request for bids must be made in writing no later than August 9, 2024 to Marisol Leguizamon, the Hudson Regional Health Commission Qualified Purchasing Agent, 595 County Avenue, Building 1, Secaucus NJ 07094 or to the following email address: [inforequest@hudsonregional.gov](mailto:inforequest@hudsonregional.gov). Please make sure to include the name and solicitation number for this request for bids in the subject line of the email.

#### **1.3.2 SUBMISSION OF BID**

Bids should be addressed to Hudson Regional Health Commission, 595 County Avenue, Building 1, Secaucus, New Jersey 07094. The bid must be enclosed in a SEALED ENVELOPE, properly endorsed with the name of the Bidder, with the designation "Hudson Regional Health Commission, SEALED BID, PURCHASE OF COVID-19 Vaccines, August 15, 2024 at 11:00AM. Any envelope that is received that is not properly marked causing it to be opened prior to the bid will be invalidated. Bids may be received by the Purchasing Agent before the hour designated, if they are mailed or hand delivered in person. The Hudson Regional Health Commission will not be responsible for any bid that is sent by mail or other form of carrier which is lost or which arrives after the bid date and time, August 15, 2024 at 11:00AM

## **1.4 ADDITIONAL INFORMATION**

### **1.4.1 ADDENDA**

In the event that it becomes necessary to revise the specifications such revision will be by addendum. Any addendum will become part of the bid and part of any contract awarded.

### **1.4.2 BIDDER RESPONSIBILITY**

The Bidder assumes sole responsibility for the complete effort required in submitting a bid. No special consideration will be given after bids are opened because of a bidder's failure to be knowledgeable as to all of the requirements of the specifications

### **1.4.3 COST LIABILITY**

The Commission assumes no responsibility and bears no liability for costs incurred by a bidder in the preparation and submittal of a proposal.

### **1.4.4 CONTENTS OF BID**

Your bid can be released to the public under the New Jersey Open Public Records Act, ("OPRA"), N.J.S.A. 47:1A-1 et seq., or the common law right to know.

Subsequent to the bid opening all information submitted by bidders in response to a solicitation is considered public information, notwithstanding any disclaimers to the contrary submitted by a bidder, except as may be exempted from public disclosure by OPRA and the common law.

A bidder may designate specific information as not subject to disclosure pursuant to the exceptions to OPRA found at N.J.S.A. 47:1A-1.1, when the Bidder has a good faith legal and or factual basis for such assertion. The Commission reserves the right to make the determination as to what is proprietary or confidential, and will advise the Bidder accordingly. The location in the proposal of any such designation should be clearly stated in a cover letter. **The Commission will not honor any attempt by a bidder to designate its entire proposal as proprietary, confidential and/or to claim copyright protection for its entire proposal.** In the event of any challenge to the Bidder's assertion of confidentiality with which the Commission does not concur, the Bidder shall be solely responsible for defending its designation.

### **1.4.5 BID SUBMISSION**

On the date and time bids are due, all information concerning the bids submitted will be publicly announced and those proposals, except for information appropriately designated as proprietary and/or confidential, shall be available for inspection and copying.

#### **1.4.6 PRICE ALTERATION IN HARD COPY PROPOSALS**

Proposal prices must be typed or written in ink. Any price change (including "white-outs") must be initialed. Failure to initial price changes shall preclude a contract award from being made to the Bidder.

#### **1.4.7 WITHDRAWAL OF BID**

A bidder may withdraw his bid at any time prior to the scheduled time for opening bids. However, no bid shall be withdrawn for a period of sixty (60) days from the opening of the bids.

#### **1.4.8 PROPOSAL ACCEPTANCES AND REJECTIONS**

The Hudson Regional Health Commission reserves the right to reject any or all bids and to waive any informalities therein and to accept any bid that will be in the best interest of the Commission in accordance with N.J.S.A. 40A:11-1 et seq.

### **2.0 COMMODITY DESCRIPTION/SCOPE OF WORK**

The scope of work consists of providing COVID-19 vaccines for people six (6) months of age and older.

#### **2.1 FOOD AND DRUG ADMINISTRATION (FDA) APPROVAL**

All COVID-19 vaccines shall be approved by the U.S. Food and Drug Administration's Vaccines and Related Biological Products Advisory Committee.

#### **2.2 RECORD KEEPING**

The Contractor(s) shall maintain on file proof of appropriate licensure.

### **3.0 PROPOSAL PREPARATION AND SUBMISSION**

#### **3.1 GENERAL**

Bids including supplemental terms and conditions may be accepted, but supplemental terms or conditions that conflict with those contained in this request for bids or that diminish the Commission's rights under any contract resulting from this request for bids will be considered null and void and may result in rejection of the bid. The Commission is not responsible for identifying conflicting supplemental terms and conditions before issuing a contract award.

The Bidder is advised to thoroughly read and follow all instructions in preparing and submitting its proposal.

## **3.2 PROPOSAL CONTENT**

### **3.2.1 FORMS, REGISTRATIONS AND CERTIFICATIONS**

#### **3.2.2 AFFIRMATIVE ACTION REQUIREMENTS**

Bidders are required to comply with the provisions of N.J.S.A. 10:5-36 and N.J.A.C. 17:27 et seq. No firm may be issued a contract unless it complies with these affirmative action provisions. The Mandatory Equal Employment Opportunity/Affirmative Action Language for Goods, Professional Services and General Service Contract, Exhibit A summarizes the full required regulatory text.

Goods and services (including professional services) consultants/contractors 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:

- a. A photo copy of a valid letter that the contractor is operating under an existing Federally approved sanctioned affirmative action programs (good for one year from the date of the letter); or
- b. A photocopy of a Certificate of Employee Information Report approval, issued in accordance with N.J.A.C. 17:27-4; or
- c. A photocopy of an Employee Information Report (Form AA302) provided by the Division and distributed to the public agency to be completed by the contractor, in accordance with N.J.A.C. 17:27-4.

#### **3.2.3 NON-COLLUSION**

The bidder must sign the attached affidavit on non-collusion certifying that the price(s) and amount of its proposal have been arrived at independently and without consultation, communication or agreement with any other contractor.

#### **3.2.4 OWNERSHIP DISCLOSURE FORM**

Pursuant to N.J.S.A. 52:25-24.2, in the event the Bidder is a corporation, partnership or sole proprietorship, the Bidder must complete and sign the attached Ownership Disclosure Form. A current completed Ownership Disclosure Form must be received prior to or accompany the submitted bid. A bidder's failure to submit the completed and signed form with its bid will result in the rejection of the bid as non-responsive and preclude the award of a contract to said Bidder.

#### **3.2.5 DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN FORM**

Pursuant to N.J.S.A. 52:32-58, the Bidder must utilize this Disclosure of Investment Activities in Iran form to certify that neither the Bidder, nor one of its parents, subsidiaries, and/or affiliates (as defined in N.J.S.A. 52:32-56(e)(3)), is listed on the Department of the Treasury's List of

Persons or Entities Engaging in Prohibited Investment Activities in Iran and that neither the Bidder, nor one of its parents, subsidiaries, and/or affiliates, is involved in any of the investment activities set forth in N.J.S.A. 52:32-56(f).

### **3.2.6 PRICING**

The bidder must submit its pricing on the bid proposal form. All prices for items in proposals shall be submitted F.O.B. Destination. Proposals submitted other than F.O.B. Destination may not be considered. The Contractor shall assume all costs, liability and responsibility for the delivery of vaccines in good condition to the Commission.

### **3.2.7 BUSINESS REGISTRATION**

In accordance with N.J.S.A. 52:32-44(b), a bidder and its named subcontractors must have a valid Business Registration Certificate (“BRC”) issued by the Department of Treasury, Division of Revenue and Enterprise Services prior to the award of a contract. To facilitate the proposal evaluation and contract award process, the Bidder should submit a copy of its valid BRC with its bid.

### **3.2.8 LETTER OF AUTHORIZATION**

If Bidder is not a manufacturer of COVID-19 vaccines, then a letter of authorization from the manufacturer is to be submitted with your bid proposal for each brand bid. This letter must indicate whether you are the manufacturer, distributor or have any other special arrangement to sell the brand bid.

### **3.2.9 FEDERAL NON-DEBARMENT CERTIFICATION**

Pursuant to state law any natural person, company, firm, association, corporation, or other entity prohibited, or “debarred,” from contracting with the federal government agencies shall also be prohibited from contracting for public work in the state of New Jersey. This prohibition also extends to any affiliate organization(s) held by or subject to the control of an entity of that prohibited person or entity.

Prior to awarding a contract for public work, the Commission must obtain written certification from the contracting person or entity through the form below, attesting to their non-debarment from contracting with federal government agencies.

## **4.0 SPECIAL CONTRACTUAL TERMS AND CONDITIONS**

### **4.1 CONTRACT TERM AND EXTENSION OPTION**

The term of the contract shall be for a period of one (1) year from November 1, 2023 through



October 31, 2024. The contract may be extended for one 2 year extension or two 1 year extensions in accordance with the Local Public Contracts Law and by the mutual consent of the Contractor and the Commission at the same terms, conditions, and pricing.

#### **4.2 CONTRACT TRANSITION**

In the event that a new contract has not been awarded prior to the contract expiration date, as may be extended herein, it shall be incumbent upon the Contractor to continue the contract under the same terms and conditions until a new contract can be completely operational.

#### **4.3 CONTRACT AMENDMENT**

Any changes or modifications to the terms of the contract shall be valid only when they have been reduced to writing and signed by the Contractor and the Commission.

#### **4.4 CONTRACTOR RESPONSIBILITIES**

The Contractor shall have sole responsibility for the complete effort specified in the contract. Payment will be made only to the Contractor. The Contractor shall have sole responsibility for all payments due any subcontractor.

The Contractor is responsible for the professional quality, technical accuracy and timely completion and submission of all deliverables, services or commodities required to be provided under the contract. The Contractor shall, without additional compensation, correct or revise any errors, omissions, or other deficiencies in its deliverables and other services. The approval of deliverables furnished under this contract shall not in any way relieve the Contractor of responsibility for the technical adequacy of its work. The review, approval, acceptance or payment for any of the services shall not be construed as a waiver of any rights that the Commission may have arising out of the Contractor's performance of this contract.

#### **4.5 CLAIMS AND REMEDIES**

##### **4.5.1 CLAIMS**

All claims asserted against the Commission by the Contractor shall be subject to the New Jersey Tort Claims Act, N.J.S.A. 59:1-1, et seq., and/or the New Jersey Contractual Liability Act, N.J.S.A. 59:13-1, et seq.

##### **4.5.2 REMEDIES**

Nothing in the contract shall be construed to be a waiver by the State of any warranty, expressed or implied, of any remedy at law or equity, except as specifically and expressly stated in a writing executed by the Commission.

### **4.5.3 REMEDIES FOR FAILURE TO COMPLY WITH MATERIAL CONTRACT REQUIREMENTS**

In the event that the Contractor fails to comply with any material contract requirements, the Commission may take steps to terminate the contract, authorize the delivery of contract items by any available means, with the difference between the price paid and the defaulting contractor's price being deducted from any monies due the defaulting contractor or take any other action or seek any other remedies available at law or in equity.

### **4.6 ITEMS ORDERED AND DELIVERED**

The contract involves items which are necessary for the continuation of ongoing critical services. Any delay in delivery of these items would disrupt services and would force the Commission to immediately seek alternative sources of supply on an emergency basis. Timely delivery is critical to meeting the Commission's needs.

### **4.7 MANUFACTURING/PACKAGING REQUIREMENTS**

All products must conform in every respect to the standards and regulations established by Federal and New Jersey State laws.

All products shall be manufactured and packaged under modern sanitary conditions in accordance with federal and state law and standard industry practice.

All products are to be packaged in such a manner as to ensure delivery in first class condition and properly marked for identification. All shipments must be comprised of original cartons associated with the commercial industry represented by the actual product contained within each carton. Deliveries containing re-used, re-labeled, re-worked or alternate cartons are subject to rejection by the Commission at the Contractor's expense.

Storage and maintenance of the vaccine prior to delivery and during shipment shall be under conditions and at temperatures necessary to retain maximum shelf-life in accordance with the manufacturer's guidance.

Pfizer-BioNtech vaccine must be stored and maintained between -90 to -60 degrees C prior to and during shipment or between 2°C and 8°C prior to and during shipment, depending on the specific product ordered.

Moderna vaccine must be stored and maintained between -50°C and -15°C prior to and during shipment.

Novavax vaccine must be stored and maintained between 2°C and 8°C prior to and during shipment.

The supplier shall maintain appropriate temperature monitoring of shipments until received by the Commission.

### **5.0 BID EVALUATION**

## **5.1 RIGHT TO WAIVE**

The Commission reserves the right to waive minor irregularities, including any requirement that is not mandated by law, or to reject any or all bids or to award in whole or in part if deemed to be in the best interest of the Commission to do so.

## **5.2 COMMISSION'S RIGHT TO INSPECT BIDDER'S FACILITIES**

The Commission reserves the right to inspect the Bidder's establishment before making an award, for the purposes of ascertaining whether the Bidder has the necessary facilities for performing the contract.

The Commission may also consult with clients of the Bidder during the evaluation of bids. Such consultation is intended to assist the Commission in making a contract award which is most advantageous to the Commission.

## **5.3 COMMISSION'S RIGHT TO REQUEST FURTHER INFORMATION**

The Commission reserves the right to request all information which may assist in making a contract award, including factors necessary to evaluate the Bidder's financial capabilities to perform the contract. Further, the Commission reserves the right to request a bidder to explain, in detail, how the proposal price was determined.

## **5.4 EVALUATION CRITERIA**

The following criteria will be used to evaluate all proposals that meet the requirements of this RFP. The criteria are not necessarily listed in order of importance:

- a) Price
- b) Delivery time
- c) Experience of the Bidder

## **5.5 PROPOSAL DISCREPANCIES**

In evaluating proposals, discrepancies between words and figures will be resolved in favor of words. Discrepancies between unit prices and totals of unit prices will be resolved in favor of unit prices. Discrepancies in the multiplication of units of work and unit prices will be resolved in favor of the unit prices. Discrepancies between the indicated total of multiplied unit prices and units of work and the actual total will be resolved in favor of the actual total. Discrepancies between the indicated sum of any column of figures and the correct sum thereof will be resolved in favor of the correct sum of the column of figures.

HUDSON REGIONAL HEALTH COMMISSION  
BID PROPOSAL FORM FOR  
COVID-19 VACCINES  
AUGUST 15, 2024

THE UNDERSIGNED, as bidder, declares that the only person or parties interested in this proposal as principals are as named below, that this proposal is in all respects fair and without collusion or fraud; that he/she has carefully examined the Specifications and Instructions to Bidders and that he/she proposes and agrees that, if this proposal is accepted, he/she will enter into a Contract with the Hudson Regional Health Commission to furnish and deliver COVID-19 vaccines in the manner and time specified, and according to the requirements of the Commission

\$ \_\_\_\_\_ DOLLARS  
(Unit Price) (Unit Price in Words)

Basis of Award: Unit price of the lowest responsive, responsible bidder.

It is understood and agreed that all prices bid are firm and not subject to any increase during the life of the contract.

Delivery Date: \_\_\_\_\_

EXCEPTIONS TO SPECIFICATIONS INCLUDED? [ ] YES / [ ] NO

If Yes, include detailed explanation as required on the following page

The undersigned hereby acknowledges that the following information and/or documents are contained within the bid submittal:

- Statement of Individual(s) Owning 10% or More of Stock or Interest in the Bidder's Business Entity (Statement of Ownership Disclosure)

The bidder is [ ] an individual; [ ] any form of a Corporation; [ ] any form of a Partnership (check one). If a Corporation or Partnership, give exact name of firm, also full name of Officer or Partner authorized to sign for it.

\_\_\_\_\_  
Type or Print Legibly Bidder's Name

By \_\_\_\_\_  
Authorized Signature and Title

\_\_\_\_\_  
Type or Print Legibly Name of Authorized Signature

Bidder's Business Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone Number (        ) \_\_\_\_\_ Fax Number (        ) \_\_\_\_\_

Email address: \_\_\_\_\_

Dated at: \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

**INDICATE ANY EXCEPTIONS TO THE SPECIFICATIONS BELOW:**

**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	Address

**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	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 Hudson Regional Health Commission 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 Commission to notify the Commission 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 Commission, permitting the Commission to declare any contract(s) resulting from this certification void and unenforceable.

<b>Full Name (Print):</b>		<b>Title:</b>	
<b>Signature:</b>		<b>Date:</b>	

## BUSINESS REGISTRATION OF PUBLIC CONTRACTORS

### New Jersey Business Registration Requirements

Effective September 1, 2004, all business organizations that do business with a local contracting agency are required to be registered with the State of New Jersey and provide proof of that registration to the contracting agency before the contracting agency may enter into a contract with the business.

All named contractors and subcontractors in a proposal performing work for a local contracting agency must be registered with the State of New Jersey, Department of Treasury, Division of Revenue and must provide proof of all registrations prior to the time a contract or purchase order is authorized or awarded by the Hudson Regional Health Commission. Failure to submit proof of registration(s) for all named contractors and subcontractors with the bid package may delay the award of a contract until the required proof of registrations are received by the Commission.

The contractor shall provide written notice to its subcontractors of the responsibility to submit proof of business registration to the contractor.

Before final payment on the contract is made by the contracting agency, the contractor shall submit an accurate list and the 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 a 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 on all sales of tangible personal property delivered into this State, regardless of whether the tangible personal property is intended for a contract with a contracting agency.

A business organization that fails to provide a copy of a business registration as required pursuant to section 1 of P.L.2001, c.134 (C.52:32-44 et al.) or subsection e. or f. of section 92 of P.L.1977, c.110 (C.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 for each day of violation, not to exceed \$50,000 for each business registration copy not properly provided under a contract with a contracting agency.

Any contractor wishing to register should do the following:

Businesses must complete Form **NJ-REG** and submit it to the Division of Revenue. The form can be filed online or by mailing a paper form to the Division. Online filing is strongly encouraged.

- Register online at [www.nj.gov/treasury/revenue/taxreg.htm](http://www.nj.gov/treasury/revenue/taxreg.htm). Click the "online" link and then select "Register for Tax and Employer Purposes."
- Download the paper form and instructions at [www.nj.gov/treasury/revenue/revprnt.htm](http://www.nj.gov/treasury/revenue/revprnt.htm).
- Call the Division at 609-292-9292 to have a form mailed to you.
- Write to the Division at: Client Registration Bureau, PO Box 252, Trenton, NJ 08646-0252.

**Registering as an individual:** There is a simplified registration process for individuals doing business with any New Jersey government agency. The form (NJ-REG-A) can be downloaded from the web at [www.nj.gov/treasury/revenue/pdforms/regA.pdf](http://www.nj.gov/treasury/revenue/pdforms/regA.pdf). To obtain a copy by mail, call 609-292-1730, or write to the Division at the Client Registration Bureau, PO Box 252, Trenton, NJ 08646-0252.



Questions about the registration process? Call 609-292-9292.

A Company official's signature is required below to acknowledge that this requirement is read, understood and complied with:

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

SIGNATURE: \_\_\_\_\_

PRINT NAME & TITLE: \_\_\_\_\_

## SAMPLES OF THE ONLY TWO ACCEPTABLE BUSINESS REGISTRATION CERTIFICATES

STATE OF NEW JERSEY  
BUSINESS REGISTRATION CERTIFICATE  
FOR STATE AGENCY AND CASINO SERVICE CONTRACTORS

DEPARTMENT OF TREASURY  
DIVISION OF REVENUE  
PO BOX 252  
TRENTON, NJ 08646-0252

TAXPAYER NAME: TAX REGISTRATION TEST ACCOUNT  
TRADE NAME: CLIENT REGISTRATION  
TAXPAYER IDENTIFICATION#: 970-097-382/500  
SEQUENCE NUMBER: 0107330  
ADDRESS: 847 ROEBLING AVE  
TRENTON NJ 08611  
ISSUANCE DATE: 07/14/04  
EFFECTIVE DATE: 01/01/01  
FORM-BRC(08-01)

Acting Director  
This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.

STATE OF NEW JERSEY  
BUSINESS REGISTRATION CERTIFICATE

Taxpayer Name: TAX REG TEST ACCOUNT  
Trade Name:  
Address: 847 ROEBLING AVE  
TRENTON, NJ 08611  
Certificate Number: 1093907  
Date of Issuance: October 14, 2004

For Office Use Only:  
20041014112823533

### NON-COLLUSION AFFIDAVIT

STATE OF NEW JERSEY )

COUNTY OF \_\_\_\_\_ ) ss:  
\_\_\_\_\_ )

I, \_\_\_\_\_, of 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 the \_\_\_\_\_ of the firm of \_\_\_\_\_, the bidder making the Proposal for **COVID-19 VACCINES**, and that I executed the said Proposal with full authority so to do; 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 Hudson Regional Health Commission and the State of New Jersey rely 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 service.

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 employees or bona fide established commercial or selling agencies maintained by \_\_\_\_\_ (Name of Contractor) (N.J.S.A. 52:34-15).

\_\_\_\_\_  
**Affiant Signature**

\_\_\_\_\_  
Type or Print Legibly Affiant Name and Title

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public of

My Commission expires:

**AMERICANS WITH DISABILITIES ACT**  
**Equal Opportunity for Individuals with Disability**

The Contractor and the Hudson Regional Health Commission do hereby agree that the provisions of Title II of the Americans with Disabilities Act of 1990 (the "ACT") (42 U.S.C. S12101 et seq.), which prohibits discrimination on the basis of disability by public entities in all services, programs, and activities provided or made available by public entities, and the rules and regulations promulgated pursuant thereto, are made a part of this contract. In providing any aid, benefit, or service on behalf of the Hudson Regional Health Commission pursuant to this contract, the Contractor agrees that the performance shall be in strict compliance with the Act. In the event that the Contractor, its agents, servants, employees, or subcontractors violate or are alleged to have violated the Act during the performance of this contract, the Contractor shall defend the Hudson Regional Health Commission in any action or administrative proceeding commenced pursuant to this Act. The Contractor shall indemnify, protect, and save harmless the Hudson Regional Health Commission, its agents, servants, and employees from and against any and all suits, claims, losses, demands, or damages of whatever kind or nature arising out of or claimed to arise out of the alleged violation. The Contractor shall, at its own expense, appear, defend, and pay any and all charges for legal services and any and all costs and other expenses arising from such action or administrative proceeding incurred in connection therewith. In any and all complaints brought pursuant to the Hudson Regional Health Commission grievance procedure, the Contractor agrees to abide by any decision of the Hudson Regional Health Commission which is rendered pursuant to said grievance procedure. If any action or administrative proceeding results in an award of damages against the Hudson Regional Health Commission or if the Hudson Regional Health Commission incurs any expense to cure a violation of the ADA which has been brought pursuant to its grievance procedure, the Contractor shall satisfy and discharge the same at its own expense.

The Hudson Regional Health Commission shall, as soon as practicable after a claim has been made against it, give written notice thereof to the Contractor along with full and complete particulars of the claim. If any action or administrative proceedings is brought against the Hudson Regional Health Commission or any of its agents, servants, and employees, the Hudson Regional Health Commission shall expeditiously forward or have forwarded to the Contractor every demand, complaint, notice, summons, pleading, or other process received by the Commission or its representatives.

It is expressly agreed and understood that any approval by the Hudson Regional Health Commission of the services provided by the Contractor pursuant to this contract will not relieve the Contractor of the obligation to comply with the Act and to defend, indemnify, protect, and save harmless the Hudson Regional Health Commission pursuant to this paragraph.

It is further agreed and understood that the Hudson Regional Health Commission assumes no obligation to indemnify or save harmless the Contractor, its agents, servants, employees and subcontractors for any claim which may arise out of their performance of this Agreement. Furthermore, the contractor expressly understands and agrees that the provisions of this indemnification clause shall in no way limit the Contractor's obligations assumed in this Agreement, nor shall they be construed to relieve the Contractor from any liability, nor preclude the Hudson Regional Health Commission from taking any other actions available to it under any other provisions of the Agreement or otherwise at law.

Acknowledgement:

Name of Contractor (Type or Print Legibly)\_\_\_\_\_

Signature/Title\_\_\_\_\_

\_\_\_\_\_  
Type or Print Legibly Name of Affiant

STANDARD BID DOCUMENT REFERENCE						
<b>Name of Form</b>	<b>DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN</b>					
<b>Statutory Reference</b>	N.J.S.A. 52:32-55 et seq. N.J.S.A. 40A:11-2.1 N.J.S.A. 18A:18A-49.4					
<b>Applicability</b>		<b>Y/N</b>		<b>Mandatory</b>	<b>Optional</b>	<b>N/A</b>
	<b>LPCL</b>	<b>Y</b>	Goods and Services	<b>X</b>		
	<b>PSCL</b>	<b>Y</b>	Construction			<b>X</b>
<b>Instructions Reference</b>						
<b>Description</b>	P.L. 2012, c.25 and P.L. 2021, c.4 prohibits the awarding of State and local public contracts for goods and services with persons or entities engaging in certain investment activities in energy or finance sectors of Iran. Prior to contract award, vendors and contractors must certify that neither they nor any parent entity, subsidiary, or affiliate is listed on the New Jersey 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").					

The Certification form requires the insertion of contracting unit identification information which should be filled in (in italics on the form) prior to its use.

## Disclosure of Investment Activities in Iran

Person or Entity

### Part 1: Certification

#### COMPLETE PART 1 BY CHECKING EITHER BOX.

Pursuant to Public Law 2012, c. 25, and P.L. 2021, c.4, any person or entity that is a successful bidder or proposer, 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 parent entity, subsidiary, or affiliate is identified on the State Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran. The list is found on Treasury's website at [www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf](http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf).

The Chapter 25 list must be reviewed prior to completing the below certification. If a vendor or contractor is found to be in violation of law, action may be taken as appropriate and as may 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.

*I certify, pursuant to Public Law 2012, c. 25, and P.L. 2021, c.4 that neither the person or entity listed above, nor any parent entity, subsidiary, or affiliate thereof is listed on the N.J. 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 the Certification below.*

OR

*I am unable to certify as above because the person or entity and/or a parent entity, subsidiary, or affiliate thereof is listed on the N.J. Department of the Treasury's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below sign and complete the Certification below.*

## Part 2: Additional Information

**PLEASE PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN.**

You must provide a detailed, accurate and precise description of the activities of the person or entity, or a parent entity, subsidiary, or affiliate thereof engaging in investment activities in Iran below and, if more space is needed, on additional sheets provided by you.

## Part 3: Certification of True and Complete Information

*I, being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments there to the best of my knowledge are true and complete. I attest that I am authorized to execute this certification on behalf of the above-referenced person or entity.*

*I acknowledge that the State of New Jersey and the Hudson Regional Health Commission are relying on the information contained herein and thereby acknowledge that I am under a continuing obligation from the date of this certification through the completion of any contracts with the State of New Jersey and Hudson Regional Health Commission to notify the State of New Jersey and Hudson Regional Health Commission in writing of any changes to the answers of information contained herein.*

*I acknowledge 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 recognize that I am subject to criminal prosecution under the law and that it will also constitute a material breach of my agreement(s) with the State of New Jersey and/or the Hudson Health Commission and that the State of New Jersey and/or Hudson Regional Health Commission at its option may declare any contract(s) resulting from this certification void and unenforceable.*

Full Name (Print)		Title	
Signature		Date	

**CERTIFICATION OF NON-INVOLVEMENT IN PROHIBITED ACTIVITIES  
IN RUSSIA OR BELARUS**

Pursuant to N.J.S.A. 52:32-60.1, et seq. ([L. 2022, c. 3](#)) any person or entity (hereinafter “Vendor”) that seeks to enter into or renew a contract with a State agency or local unit for the provision of goods or services, or the purchase of bonds or other obligations, must complete the certification below indicating whether or not the Vendor is identified on the Office of Foreign Assets Control (OFAC) Specially Designated Nationals and Blocked Persons list, available here: <https://sanctionssearch.ofac.treas.gov/>. If the Department of the Treasury finds that a Vendor has made a certification in violation of the law, it shall take any 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.

I, the undersigned, certify that I have read the definition of “Vendor” below, and have reviewed the Office of Foreign Assets Control (OFAC) Specially Designated Nationals and Blocked Persons list, and having done so certify:

*(Check the Appropriate Box)*

A. That the Vendor is not identified on the [OFAC Specially Designated Nationals and Blocked Persons list on account of activity related to Russia and/or Belarus](#).

**OR**

B. That I am unable to certify as to “A” above, because the Vendor is identified on the [OFAC Specially Designated Nationals and Blocked Persons list on account of activity related to Russia and/or Belarus](#).

**OR**

C. That I am unable to certify as to “A” above, because the Vendor is identified on the [OFAC Specially Designated Nationals and Blocked Persons list](#). However, the Vendor is engaged in activity related to Russia and/or Belarus consistent with federal law, regulation, license or exemption. A detailed description of how the Vendor’s activity related to Russia and/or Belarus is consistent with federal law is set forth below.

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*(Attach Additional Sheets If Necessary.)*

Signature of Vendor’s Authorized Representative	Date
Print Name and Title of Vendor’s Authorized Representative	Vendor’s FEIN
Vendor’s Name	Vendor’s Phone Number
Vendor’s Address (Street Address)	Vendor’s Fax Number
Vendor’s Address (City/State/Zip Code)	Vendor’s Email Address

<sup>i</sup> Vendor means: (1) A natural person, corporation, company, limited partnership, limited liability partnership, limited liability company, business association, sole proprietorship, joint venture, partnership, society, trust, or any other nongovernmental entity, organization, or group; (2) Any governmental entity or instrumentality of a government, including a multilateral development institution, as defined in Section 1701(c)(3) of the International Financial Institutions Act, 22 U.S.C. 262r(c)(3); or (3) Any parent, successor, subunit, direct or indirect subsidiary, or any entity under common ownership or control with, any entity described in paragraph (1) or (2).

## EXHIBIT A

### **MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE N.J.S.A. 10:5-31 et seq. (P.L. 1975. c. 127)**

**N.J.A.C. 17:27 et seq.**

#### **GOODS, GENERAL SERVICES AND PROFESSIONAL SERVICES 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 ensure that equal employment opportunity is afforded to such applicants in recruitment and employment, 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 equal employment opportunity 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 will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union of the contractor's commitments under this chapter 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 meet targeted county employment goals established in accordance with 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, and labor unions, that it does not discriminate on the basis of age, race, 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 targeted 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, race, 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 AA-302

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Purchase & Property, CCAU, EEO Monitoring Program 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 Division of Purchase & Property, CCAU, EEO Monitoring Program for conducting a compliance investigation pursuant to N.J.A.C. 17:27-1.1 et seq.

**THE HUDSON REGIONAL HEALTH COMMISSION**

**ACKNOWLEDGEMENT OF RECEIPT OF CHANGES TO BID DOCUMENTS**

Pursuant to N.J.S.A. 40A:11-23.1a, the undersigned bidder hereby acknowledges receipt of the following notices, revision, or addenda to the bid advertisement, specifications or bid documents. By indicating date of receipt, bidder acknowledges the submitted bid takes into account the provisions of this notice, revision or addendum. Note that the local unit's record of notice to bidders shall take precedence and that failure to include provisions of changes in a bid proposal may be subject for rejection of the bid.

<b>Local Unit Reference Number or Title of Addendum/Revision</b>	<b>How Received (mail, fax, pick up, etc.)</b>	<b><u>Date Received</u></b>

Check this box if there have been **NO** notices, revision, or addenda to the bid advertisement, specifications or bid documents.

**Acknowledgement by Bidder:**

Name of Bidder: \_\_\_\_\_

By Authorized Representative:

Signature: \_\_\_\_\_

Print Legibly or Type Name and Title: \_\_\_\_\_

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

**CERTIFICATION OF NON-DEBARMENT  
FOR FEDERAL GOVERNMENT CONTRACTS**

N.J.S.A. 52:32-44.1 (P.L. 2019, c.406)

**This certification shall be completed, certified to, and submitted to the contracting unit prior to contract award, except for emergency contracts where submission is required prior to payment.**

PART I: VENDOR INFORMATION	
Individual or Organization Name	
Physical Address of Individual or Organization	
Unique Entity ID (if applicable)	
CAGE/NCAGE Code (if applicable)	
<b>Check the box that represents the type of business organization:</b>	

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

PART II – CERTIFICATION OF NON-DEBARMENT: Individual or Organization			
<p>I hereby certify that the <b>individual or organization listed above in Part I</b> is not debarred by the federal government from contracting with a federal agency. I further acknowledge: that I am authorized to execute this certification on behalf of the above-named organization; that the <i>Hudson Regional Health Commission</i> is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the date of contract award by <i>the Commission</i> to notify the <i>Commission</i> 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 <i>Commission</i>, permitting the Commission to declare any contract(s) resulting from this certification void and unenforceable.</p>			
Full Name (Print):		Title:	
Signature:		Date:	

**PART III – CERTIFICATION OF NON-DEBARMENT: Individual or Entity Owning Greater than 50 Percent of Organization**

**Section A (Check the Box that applies)**

<input type="checkbox"/>	Below is the name and address of the stockholder in the corporation who owns more than 50 percent of its voting stock, or of the partner in the partnership who owns more than 50 percent interest therein, or of the member of the limited liability company owning more than 50 percent interest therein, as the case may be.
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<b>Name of Individual or Organization</b>	
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<b>Physical Address</b>	
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**OR**

<input type="checkbox"/>	No one stockholder in the corporation owns more than 50 percent of its voting stock, or no partner in the partnership owns more than 50 percent interest therein, or no member in the limited liability company owns more than 50 percent interest therein, as the case may be.
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**Section B (Skip if no Business entity is listed in Section A above)**

<input type="checkbox"/>	Below is the name and address of the stockholder in the corporation who owns more than 50 percent of the voting stock of the organization’s parent entity, or of the partner in the partnership who owns more than 50 percent interest in the organization’s parent entity, or of the member of the limited liability company owning more than 50 percent interest in organization’s parent entity, as the case may be.
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<b>Stockholder/Partner/Member Owning Greater Than 50 Percent of Parent Entity</b>	
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<b>Physical Address</b>	
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**OR**

<input type="checkbox"/>	No one stockholder in the parent entity corporation owns more than 50 percent of its voting stock, no partner in the parent entity partnership owns more than 50 percent interest therein, or no member in the parent entity limited liability company owns more than 50 percent interest therein, as the case may be.
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**Section C – Part III Certification**

I hereby certify that no individual or organization that is debarred by the federal government from contracting with a federal agency owns greater than 50 percent of the **Organization listed above in Part I** or, if applicable, owns greater than 50 percent of a parent entity of **<name of organization>**. I further acknowledge: that I am authorized to execute this certification on behalf of the above-named organization; that the Hudson Regional Health Commission is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the date of contract award to notify the Commission 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 Commission, permitting the Commission to declare any contract(s) resulting from this certification void and unenforceable.

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

**Part IV – CERTIFICATION OF NON-DEBARMENT: Contractor – Controlled Entities**

**Section A**

<input type="checkbox"/>	Below is the name and address of the corporation(s) in which the <b>Organization listed in Part I</b> owns more than 50 percent of voting stock, or of the partnership(s) in which the <b>Organization listed in Part I</b> owns more than 50 percent interest therein, or of the limited liability company or companies in which the <b>Organization listed above in Part I</b> owns more than 50 percent interest therein, as the case may be.
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Name of Business Entity	Physical Address

**\*\*Add additional sheets if necessary\*\***

**OR**

<input type="checkbox"/>	The <b>Organization listed above in Part I</b> does not own greater than 50 percent of the voting stock in any corporation and does not own greater than 50 percent interest in any partnership or any limited liability company.
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<b>Section B (skip if no business entities are listed in Section A of Part IV)</b>			
<input type="checkbox"/>	Below are the names and addresses of any entities in which an entity listed in Part III A owns greater than 50 percent of the voting stock (corporation) or owns greater than 50 percent interest (partnership or limited liability company).		
<b>Name of Business Entity Controlled by Entity Listed in Section A of Part IV</b>		<b>Physical Address</b>	
**Add additional Sheets if necessary**			
<b>OR</b>			
<input type="checkbox"/>	No entity listed in Part III A owns greater than 50 percent of the voting stock in any corporation or owns greater than 50 percent interest in any partnership or limited liability company.		
<b>Section C – Part IV Certification</b>			
<p>I hereby certify that the Organization listed above in Part I does not own greater than 50 percent of any entity that that is debarred by the federal government from contracting with a federal agency and, if applicable, does not own greater than 50 percent of any entity that in turns owns greater than 50 percent of any entity debarred by the federal government from contracting with a federal agency. I further acknowledge: that I am authorized to execute this certification on behalf of the above-named organization; that the <i>Hudson Regional Health Commission</i> is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the date of contract award by &lt;Commission&gt; to notify the <i>Commission</i> 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 Commission permitting the Commission to declare any contract(s) resulting from this certification void and unenforceable.</p>			
Full Name (Print):		Title:	
Signature:		Date:	