**STABILIZATION AND ASSESSMENT SERVICES**

**Exhibit C Checklist**

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| ▶ | **contract documents to be submitted once with the RFP response:** | |
| 1 |  | **Signed Standard Language Document** (SLD) [Version: Rev. June 6, 2014]  Form: <http://www.nj.gov/dcf/documents/contract/forms/StandardLanguage.doc> |
| 2 |  | **Business Associate Agreement/HIPAA**, with signature under Business Associate [Version: Rev. 9-2013]  Form: <http://www.nj.gov/dcf/providers/contracting/forms/HIPAA.doc> |
| 3 |  | **Source Disclosure Certification** Form [P.L. 2005, c 92-formerly Executive Order 129]  Website: <http://www.state.nj.us/treasury/purchase/forms.shtml>  Form: <http://www.state.nj.us/treasury/purchase/forms/SourceDisclosureCertification.pdf> |
| 4 |  | Dated List of Names, Titles, Addresses & Terms of **Board of Directors** --or-- **Managing Partners**, if an LLC or Partnership |
| 5 |  | **Disclosure of Investigations & Other Actions Involving Bidder Form** (PDF) Signed and all appropriate boxes checked.  <http://www.state.nj.us/treasury/purchase/forms/DisclosureofInvestigations.pdf> |
| 6 |  | **Disclosure of Investment Activities in Iran** (PDF) Signed and all appropriate boxes checked  <http://www.state.nj.us/treasury/purchase/forms/DisclosureofInvestmentActivitiesinIran.pdf> |
| 7 |  | For Profit: **Statement of Bidder/Vendor Ownership Form** (PDF)  <http://www.state.nj.us/treasury/purchase/forms/OwnershipFinal12-14.pdf> |
| 8 |  | **Subcontract/Consultant Agreements** related to this RFP/RFQ - If not applicable, include a written statement |
| 9 |  | Document showing **Data Universal Numbering System** (**DUNS**) Number [2006 Federal Accountability & Transparency Act (FFATA)]  Website: <http://www.dnb.com> Helpline: 1-866-705-5711 |
| 10 |  | **Certificate of Incorporation**  Website: <http://www.nj.gov/treasury/revenue/filecerts.shtml> |
| 11 |  | For Profit: **NJ Business Registration** Certificate with the Division of Revenue. See instructions for applicability to your organization. If not applicable, include a written statement.  Website: <http://www.nj.gov/njbusiness/registration/> |
| 12 |  | **Agency By Laws** or **Management Operating Agreement** if an LLC |
| 13 |  | **Tax Exempt Certification**  Website: <http://www.state.nj.us/treasury/taxation/exemption.shtml> |
| 14 |  | **Statement of Assurances** -Use the RFP forms found directly under the Notices section on  Website: [www.nj.gov/dcf/providers/notices/](http://www.nj.gov/dcf/providers/notices/)  Form: <http://www.nj.gov/dcf/providers/notices/Statement.of.Assurance.doc> |
|  | **contract documents to be submitted once with the RFP response:** (continued) | |
| 15 |  | **Safe-Child Standards Description** – Submit a brief statement demonstrating ways in which your agency will implement the “Standards” (2 pgs. max. double spaced)  Policy: <http://www.state.nj.us/dcf/SafeChildStandards.pdf> |
| 16 |  | For Profit: Two-Year **Chapter 51/Executive Order 117** Vendor Certification --and--  Disclosure of Political Contributions [Version: Rev 4/17/15]  See instructions for applicability to your organization. If not applicable, include a written statement.  Website: <http://www.state.nj.us/treasury/purchase/forms.shtml> |
| 17 |  | **Chapter 271/Vendor Certification and Political Contribution Disclosure Form**  Website: <http://www.state.nj.us/treasury/purchase/forms.shtml>  Form: <http://www.state.nj.us/treasury/purchase/forms/CertandDisc2706.pdf> |
| 18 |  | Proposed **Annex B Budget Form** documenting anticipated budget (Include Signed Cover Sheet)  Annex B: <http://www.nj.gov/dcf/documents/contract/forms/AnnexB.xls>  Note: Expense Summary Form is auto populated. Begin data input on Personnel Detail Tab. |
| 19 |  | Proposed **Program Implementation Status Update Form** documenting anticipated implementation schedule  Website: <http://nj.gov/dcf/providers/contracting/forms/csoc.html> |
| ▶ | **contract documents to be submitted with the RFP response & annually updated thereafter:** | |
| 20 |  | **System for Award Management** (**SAM**) printout showing "active" status (free of charge)  Website: <https://www.sam.gov/portal/public/SAM> Helpline: 1-866-606-8220 |
| 21 |  | **Tax Forms:**  Non Profit **Form 990** Return of Organization Exempt from Income Tax --or--  For Profit **Form 1120** US Corporation Income Tax Return --or--  LLC **Applicable Tax Form** and may delete or redact any SSN or personal information |
| 22 |  | **Affirmative Action Certificate** --or-- **Renewal Application** [AA302] sent to Treasury  Website: <http://www.state.nj.us/treasury/purchase/forms.shtml>  Form: <http://www.state.nj.us/treasury/purchase/forms/AA_%20Supplement.pdf> |
| 23 |  | Most recent **Audit or Financial Statement** (certified by accountant or accounting firm)  Audit: For agencies expending over $100,000 in combined Federal/State Awards --or--  Financial Statement: For agencies expending under $100,000  Policy: <http://www.nj.gov/dcf/documents/contract/manuals/CPIM_p7_audit.pdf> |
| 24 |  | **Annual Report to Secretary of State**  Website: <https://www1.state.nj.us/TYTR_COARS/JSP/page1.jsp> |
| 25 |  | Certification Regarding **Debarment**  Form: <http://www.state.nj.us/dcf/providers/notices/Cert.Debarment.pdf> |
| 26 |  | Non Profit: Annual Report - **Charitable Organizations**  -If not applicable, include a written statement  Website: <http://www.njpublicsafety.org/ca/charity/charfrm.htm> |
| 27 |  | **Professional Licenses** related to job responsibilities for this RFP - If not applicable, include a written statement |
| 28 |  | Proposed **Organizational Chart** for Services Required by this RFP |
| 29 |  | Proposed **Program Staffing Summary Report (PSSR)** documenting anticipated staff levels and assignments  Form: OOH Program Staffing Summary Report April 2015.xls  Website: <http://nj.gov/dcf/providers/contracting/forms/csoc.html> |