Original

Sussex County
COMMUNITY COLLEGE

One College Hill Road, Newton, New Jersey 07860

BID SPECIFICATIONS AND PROPOSAL FORMS

SNOW REMOVAL SERVICES

BID # 23-08-0003

Documents included herein:

Notice to Bidders
Instructions to Bidders
Specification
Bid Form
Ownership Disclosure Certification
Equal Employment Opportunity Statement
Corporate Resolution
Non-Collusion Affidavit
NJ Business Registration Certificate – Sample
Disclosure of Investment Activities in Iran
Certification of Non-Involvement in Prohibited Activities In Russia or Belarus
Affirmative Action Compliance – Sample
Certificate of Insurance - Sample Company Information Questionnaire List of Available Personnel
W-9 Form

NOTICE TO BIDDERS

Notice is hereby given that sealed bids will be received at Sussex County Community College, One College Hill Road, Newton, NJ 07860 on Monday, August 21, 2023 at the following prevailing times in Building B, Room B300 for:

On-Call General Maintenance Contracting Bid # 23-08-0001, 1:00 p.m.
On-Call HVAC Contracting Bid # 23-08-0002, 1:30 p.m.
Snow Removal Services Bid # 23-08-0003, 2:00 p.m.
Vending Services Bid # 23-08-0004, 2:30 p.m.

Bid documents may be obtained by emailing bmormando@sussex.edu. All persons requesting bid documents will be required to provide the College with relevant contact information; name, company, address, phone, and fax if available.

Bid proposals must be submitted on the forms furnished by the College and may be hand delivered or mailed in a sealed envelope clearly marked with the Bid title and number to Sussex County Community College, Purchasing Department, One College Hill Road, Newton, NJ 07860 on or before the hour named on the date specified. No bid will be accepted after the designated time and date. Bids transmitted electronically will not be accepted. The College will not assume responsibility for bids forwarded by mail or delivery service. Bid proposals must also include the required forms as designated in the bid specifications. Bids may be rejected if the required documents are not included with the proposal.

By submitting a proposal, the bidder covenants and agrees that they have satisfied themselves from their own investigation of the conditions to be met, that they fully understand their obligations and that they will not make any claim for, or have right to cancellation or relief without penalty of the contract because of any misunderstanding or lack of information. If any discrepancies or omissions appear in the specifications, the bidder shall notify the College, in writing, of any such discrepancy or omission. Bidders are notified by this statement that all of the general terms and conditions applicable will be a part of any contract awarded as a result of this proposal as fully and to the same extent as if copied at the length therein.

Bidders are required to comply with the requirements of **N.J.S.A. 10:5-31 et seq. and N.J.A.C. 17:27 et seq.**

The College Board of Trustees reserves the right to reject any or all bids and to waive any minor irregularities or informalities in the bids and to accept the bid, which in their judgment will best serve the interest of the College.

SUSSEX COUNTY COMMUNITY COLLEGE
INSTRUCTIONS TO BIDDERS

These Instructions to Bidders are in addition to any other specifications included in this bid packet and should be read in conjunction with the same. Unless specifically instructed otherwise in the General Terms and Conditions, General Specifications, Scope of Work, Technical Specifications, or Bid Proposal Form, the following terms and conditions will apply to all contracts or purchases made with the College.

SITE INSPECTION

Bidders should familiarize themselves with the job site before submitting their bid proposal. Bidders shall conduct their evaluation in a manner that is not disruptive to the function of the College. Bidders may schedule a site visit by contacting the Chief Operating Officer by email at jgaddy@sussex.edu.

INTERPRETATION OR CORRECTIONS OF BID DOCUMENTS-ADDENDA

Questions regarding interpretation, clarification, or changes in the bid specifications must be directed in writing to:

Barbara Mormando
Purchasing
Sussex County Community College
One College Hill Road
Newton, New Jersey 07860
Fax: 973-300-2189
Email: bmormando@sussex.edu

Corrections to bid documents will be issued in the form of a written Addenda to the specifications as specified below.

Addenda are written or graphic instruments issued by the College before the bid opening which modify the bid with additions, deletions, or corrections. Notice of an addendum will be published in the New Jersey Herald, and addenda information will be provided to all bid package holders electronically. All addenda, so issued, shall become part of the contract documents.

Failure of any Bidder to receive an addendum because of not having provided the proper email address and the responsible person to whom the addendum should be transmitted shall not relieve the Bidder from any obligation required by the addendum.

BID FORM

All bids must be made on the Bid Proposal Form attached hereto and shall be properly filled out and duly executed. All bids must be submitted in an opaque sealed envelope bearing the name and address of the bidder, addressed to the Purchasing Department, Sussex County Community College, One College Hill, Newton, New Jersey 07860, and clearly marked with the caption "Sealed Bid" and the bid title and number. Number of copies of the bid: **One original, one copy, and one electronic copy (submitted on a disk or flash drive/jump drive) of the bid must be submitted in the sealed envelope.**

If the bid is to be hand-delivered on the day of the bid opening, the bid must be in the designated bid opening location by the designated time and date. The College will not assume responsibility for bids forwarded by mail or delivery service, and no bid will be accepted after the time specified.

Bids may be withdrawn by the bidder before but not after the time fixed for the bid opening.

SUSSEX COUNTY COMMUNITY COLLEGE
INSTRUCTIONS TO BIDDERS

SIGNATURE ON BID

To be considered, a bid must be signed in ink by the bidder. In the submission of a proposal by a corporation, the proposal must be made in the name of the corporation and signed by an executive officer, and attested by a secretary of the corporation. If the corporation is the successful bidder, the contract involved must be in the name of the corporation, signed by an executive officer, and attested by a secretary of the corporation with the seal of the corporation affixed thereto.

BIDDER'S REPRESENTATIONS

By submitting a bid at the specified bid opening date and time, each bidder represents that the bidder has become familiar with the site and the conditions relating to the project and has prepared the bid based on the materials, equipment, and systems specified herein.

The failure or neglect of any bidder to receive or examine any form, instrument, or document shall in no way relieve any bidder from any obligation with respect to the submitted bid. The bidder shall examine the contents of the specifications and any drawings to be assured that all pages of the specifications, drawings, and other contract documents are included in the documents obtained for bidding purposes.

BID PRICES

All prices quoted shall remain firm and not subject to increases during the contract period. In case of an error in extension, the unit price will prevail.

The bidder shall determine that they can secure the necessary labor and equipment and that the materials they propose will comply with the requirements contained in the specifications and can be obtained by him in the quantities and at the time requested.

CONTRACT AMOUNT

Any estimated amount of contracted materials or services shall not be construed as either the maximum or minimum amount which the College shall be obliged to order as the result of this bid or any contract entered into as a result of this bid.

TRANSPORTATION

Prices bid shall include all transportation charges, fully prepaid and insured by the contractor F.O.B. Sussex County Community College, One College Hill, Newton, New Jersey 07860, inside delivery to the location on campus specified by the college unless otherwise noted within the bid specifications. C.O.D. terms are not acceptable as part of this bid proposal and will be cause for rejection of a bid.

The contractor shall assume all responsibility for delivering merchandise in good condition to the College's facility. Delivered equipment/products must be properly packaged. Damaged equipment/products will not be accepted, or if the damage is not readily apparent at the time of delivery, the equipment/ products shall be returned at no cost to the College. The College reserves the right to

inspect equipment/products at a reasonable time subsequent to the delivery where circumstances or conditions prevent effective inspection of the equipment/products at the time of delivery.

Under normal conditions, the college accepts deliveries on normal business days, Monday through Friday, 8:00 am to 4:00 pm. During summer months and holiday periods, hours may vary. If deliveries are agreed to be made outside the above-noted times or days, the college requires advance notice of three business days so that appropriate arrangements can be made.

Vendors are authorized to ship only those items and quantities indicated by the College. Payment will not be issued for any items not ordered by the College.

TAXES

The College is established under the authority of the State of New Jersey and is entitled to exemption from State, Federal, and local taxes, including New Jersey Sales Tax.

PAYMENT

Invoices for goods and services purchased by the College will only be made upon satisfactory receipt of said goods or services. All invoices must be itemized and include an invoice number and a College purchase order number.

Invoices for service projects shall contain actual material receipts, signed time/labor sheets, equipment expenses, and corresponding project estimates. Invoices shall be submitted upon completion of each project to Accounts Payable. Payment will not be issued until the completion of each project. The College will issue payment within thirty (30) days of receipt of the invoice. No payments will be made for unauthorized services.

Bidders are encouraged to offer cash discounts based on expedited payment by the College. The College will try to take advantage of discounts, but discounts will not be considered in determining the lowest bid.

BRAND NAMES

Any manufacturer's names, trade names, brand names, or catalog numbers used in the specifications are for the purpose of describing and establishing general quality levels. Such references are not intended to be restrictive. Bids will be considered for any brand which meets or exceeds the quality of the specifications listed for any item.

Any item may be quoted based on manufacturers specified or by other manufacturers where items are of equivalent or greater quality. Sussex County Community College will determine equivalent or greater quality. The decision of the College as to whether an alternate or substitute is, in fact, "equal" shall be final.

DOMESTIC PRODUCTS

American goods and products shall be used wherever available for the services or products required in this specification. However, the decision of the College, after consultation with the Vice President of Administration & Finance, shall be final where the price discrepancy favors foreign goods or products and said the decision does not conflict with the law.

SUSSEX COUNTY COMMUNITY COLLEGE
INSTRUCTIONS TO BIDDERS

RIGHT TO KNOW

All containers shipped or delivered to the College in connection with this bid shall bear a label indicating the chemical name(s) and chemical abstract service number(s) (CAS number(s)) of all hazardous substances in the container and all other substances which are among the five most predominant substances in the container, or their trade secret registry number(s), pursuant to N.J.A.C. 8:59-5.

"Container" means a receptacle to hold a liquid, solid, or gaseous substance such as bottles, bags, barrels, boxes, cans, cylinders, drums, and shipping cartons. (N.J.A.C. 8:59-1.3)

ASSIGNMENTS

The successful bidder shall not assign, transfer, convey, sublet, or otherwise dispose of the contract or their rights, title, or interest in, or to the same or any part thereof without consent in writing by the College. If the bidder, without previous written consent, assigns, transfers, conveys, sublets, or otherwise disposes of the contract, in whole or in part, or of title or interest therein, the contract may, at the option of the College, be canceled or terminated.

COMPLIANCE WITH LAWS

The successful bidder shall keep informed of and shall comply with all Federal, State, and local laws as may be applicable. Bidder acknowledges that this bid and the contract award are governed by the County College Contracts Law, N.J.S.A. 18A:64A-25 et seq.

ACCIDENTS, INJURIES, DAMAGES

If it becomes necessary for the vendor, either as principal or by agent or employee, to enter upon the premise or property of the College to construct, erect, inspect, make delivery, or remove property hereunder, the vendor hereby covenants and agrees to take use, provide and make all proper necessary and sufficient precautions, safeguards and protections against the occurrence of happenings of any accidents, injuries, damages or hurt to any person or property during the progress of the work herein covered, and to be responsible for, and to indemnify and hold harmless the College from the payment of all sums of money by reason of all, or any, such accidents, injuries, damages or hurt that may happen or occur upon or about such work and all fines, penalties, and loss incurred for or by reason of the violation of any City or Borough ordinance regulation, or the laws of the State or the United States, while the said work is in progress.

PROTECTION OF WORK AND PROPERTY

The successful bidder shall continuously maintain insurance or other security for adequate protection for all their work from damage and shall protect the owner's property from damage, injury, or loss arising in connection with the contract. They shall make good any such damage, injury, or loss. The successful bidder shall take all necessary precautions for the safety of employees on the work site and shall comply with all applicable provisions of federal, state, and municipal safety laws and building codes to prevent accidents or injury to persons on, about, or adjacent to the premises where the work is being performed. They shall erect and properly maintain at all times, as required by the conditions and progress of the work, all necessary safeguards and protection of the workers and the public. The contractor agrees to provide personnel that have training requirements as required by the state of New Jersey, OSHA, and other applicable laws and regulations.

SUSSEX COUNTY COMMUNITY COLLEGE
INSTRUCTIONS TO BIDDERS

WORK RESTRICTIONS

The contractor will limit the use of premises to work in areas indicated and will not disturb portions of the site beyond the areas in which the work is indicated. Contractor shall:

1. Allow for owner occupancy of the site.
2. Perform work so as not to interfere with College operations. The schedule for coordination shall be agreeable to the owner.
3. Maintain existing buildings and grounds in a safe and useable condition throughout the contract period, repair damage caused by contracted operations, and protect the building and its occupants during the contract period, including maintaining exits.
4. Keep driveways and entrances serving premises clear and available to College, College's employees, and emergency vehicles at all times, and will not use these areas for parking or storing materials.
5. Schedule deliveries to minimize the use of driveways and entrances.

INSURANCE

The Contractor shall secure and maintain in force for the term of the contract liability insurance as provided herein. The Contractor shall provide the College with current certificates of insurance for all coverages and renewals thereof, naming the College as an Additional Insured and shall contain the provision that the insurance provided in the certificate shall not be canceled for any reason except after thirty days written notice to Sussex County Community College, Purchasing Department, with the Bid reference number.

The insurance to be provided by the contractor shall be as follows:

a. Comprehensive General Liability Insurance or its equivalent: The minimum limit of liability shall be $1,000,000.00 per occurrence as a combined single limit for bodily injury and property damage. The above-required Comprehensive General Liability Insurance policy or its equivalent shall name the College, its officers, and its employees as Additional Insureds. The coverage to be provided under these policies shall be at least as broad as that provided by the standard basic, unamended, and unendorsed Comprehensive General Liability Insurance occurrence coverage forms or its equivalent currently in use in the State of New Jersey, which shall not be circumscribed by any endorsement limiting the breadth of coverage,
b. Automobile Liability Insurance which shall be written to cover any automobile used by the insured. Limits of liability for bodily injury and property damage shall not be less than $1,000,000.00 per occurrence as a combined single limit.
c. Worker's Compensation Insurance applicable to the laws of the State of New Jersey and Employers Liability Insurance with limits not less than: $1,000,000.00 bodily injury each occurrence, $1,000,000.00 disease each employee, $1,000,000.00 disease aggregate limit.

EQUAL EMPLOYMENT OPPORTUNITY AND LAW AGAINST DISCRIMINATION

Bidders must comply with the requirements of **N.J.S.A. 10:2-1 et seq.,** the New Jersey Law Against Discriminations, **N.J.S.A. 10:5-1 et seq., N.J.S.A. 10:5-31 et seq. and N.J.A.C. 17:27-1.1 et seq.** (equal employment opportunity) and shall provide the required documentation. (Mandatory Equal Employment Opportunity Language and Affirmative Action Statement is provided in the specification set.)

BUSINESS REGISTRATION CERTIFICATE

Bidder must submit, before award, a valid copy of its New Jersey Business Registration Certificate.

"New Jersey Business Registration Requirements"

N.J.S.A. 52:32-44 imposes the following requirements on contractors and all subcontractors that **knowingly** provide goods or perform services for a contractor fulfilling this contract:

1) the contractor shall provide written notice to its subcontractors and suppliers to submit proof of business registration to the contractor;
2) subcontractors through all tiers of a project must provide written notice to their subcontractors and suppliers to submit proof of business registration and subcontractors shall collect such proofs of business registration and maintain them on file;
3) prior to receipt of final payment from a contracting agency, a contractor must submit to the contacting agency an accurate list of all subcontractors and suppliers or attest that none was used; and,
4) during the term of this contract, the contractor and its affiliates shall collect and remit, and shall notify all subcontractors and their affiliates that they must collect and remit, to the Director, New Jersey Division of Taxation, the use tax due pursuant to the Sales and Use Tax Act, (N.J.S.A. 54:32B-1 et seq.) on all sales of tangible personal property delivered into this State.

A contractor, subcontractor or supplier who fails to provide proof of business registration or provides false business registration information shall be liable to a penalty of $25 for each day of violation, not to exceed $50,000 for each business registration copy not properly provided or maintained under a contract with a contracting agency. Information on the law and its requirements are available by calling (609) 292-9292.

NON-COLLUSION AFFIDAVIT

Bidder shall submit with the bid a properly executed non-collusion affidavit, notarized by a Notary Public. (Form is provided in the specification set.)

OWNERSHIP DISCLOSURE

N.J.S.A. 52:25-24.2 provides that no corporation, partnership, or limited liability company shall be awarded any contract for the performance of any work or the furnishing of any materials or supplies, unless, prior to the receipt of the bid or accompanying the bid of said corporation, partnership, or limited liability company there is submitted a statement setting forth the names and addresses of all stockholders in the corporation who own ten percent or more of its stock, of any class, or of all individual partners in the partnership who own a ten percent or greater interest therein, or of all members in the limited liability company who own a ten percent or greater interest therein. The disclosure shall be continued until names and addresses of every non-corporate stockholder, and individual partner, and member, exceeding the ten percent ownership criteria established in said act, has been listed.

To comply with this section, a bidder with any direct or indirect parent entity which is publicly traded may submit the name and address of each publicly traded entity and the name and address of each person that holds a ten percent or greater beneficial interest in the publicly traded entity as of the last annual filing with the federal Securities and Exchanges Commission or the foreign equivalent, and, if there is any person that holds a ten percent or greater beneficial interest, also shall submit links to the websites containing the last annual filings with the federal Securities and Exchange Commission or the foreign equivalent and the relevant page numbers of the filings that contain the information on each person that holds a ten percent or greater beneficial interest. (Form is provided in the specification set.)

PROHIBITED INVESTMENT ACTIVITIES IN IRAN

Pursuant to N.J.S.A. 52:32-55 et seq., a person or entity listed on the Department of the Treasury's List

of Persons or Entities Engaging in Prohibited Investment Activities in Iran shall be ineligible to bid on, submit a proposal for, enter into or renew a contract with a State agency for goods or services.

Additionally, any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract shall certify at the time the bid is submitted that the person or entity is not identified on the above-mentioned list as person or entity engaging in investment activities in Iran. (Disclosure of Investment in Iran form is included in the specification set.)

PROHIBITED ACTIVITIES IN RUSSIA OR BELARUS In accordance with New Jersey P.L. 2022, c.3, persons or businesses that are engaged in prohibited activities in Russia or Belarus shall be ineligible enter into or renew a contract with a State agency "Engaged in prohibited activities in Russia or Belarus" means (1) companies in which the Government of Russia or Belarus has any direct equity share; (2) having any business operations commencing after the effective date of this act that involve contracts with or the provision of goods or services to the Government of Russia or Belarus; (3) being headquartered in Russia or having its principal place of business in Russia or Belarus, or (4) supporting, assisting or facilitating the Government of Russia or Belarus in their campaigns to invade the sovereign country of Ukraine, either through in-kind support or for profit. (Certification of Non-Involvement in Prohibited Activities in Russia or Belarus provided in this bid specification package).

CORPORATE RESOLUTION

In the submission of a proposal by a corporation, the proposal must be made in the name of the corporation and signed by an executive officer and attested by a secretary of the corporation, with the seal of the corporation affixed thereto, in which the secretary certified to the office held by the officer, signing the same, and that the seal was placed by such executive officer pursuant to the direction of the Board of Directors. (Form is provided in the specification set.)

W-9 FORM

Bidder must submit before award a copy of the Company's current completed and signed W-9 form consistent with IRS standards.

REFERENCES/QUALIFICATIONS

Bidder shall submit with the bid at least three businesses and all applicable information as requested on the Contractor Qualifications Questionnaire when provided in the specification set. Business references provided must be current and active. Bidder's references shall reflect similar services related to the Bid or similar services for an organization comparable to the College. (Form provided in the specification set.)

ADDITIONAL INFORMATION

The College 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 College reserves the right to request a bidder to explain, in detail, how the bid price was determined.

CONSIDERATION OF BIDS

At the bid opening date and time specified herein, all bids received will be publicly opened and read aloud.

The College has the right to award a contract in whole or in part if deemed to be in the best interest of

the College to do so. The contract will be awarded to the responsive and responsible bidder whose bid shall comply with all material conditions, who can furnish the goods and services required herein. The College reserves its rights to select the bids or particular alternates, or combinations of alternates, as may be in the best interest of the College. Determination of the apparent low bidder will be based on the base bid amount and the additions or deletions for those alternates, if any, selected by the College.

RIGHT TO REJECT

Sussex County Community College reserves the right to reject any or all bids, or to waive any minor irregularities or informalities in the bids if the best interest of the College will be served by such action. The College also reserves the right to reject the proposal of any bidder who fails to:

1. Return all pages of the specifications and proposal form on or before the time and location specified
2. Sign the proposal sheet
3. Complete all the enclosed forms as required in accordance with these instructions

TIME FOR CONTRACT AWARD

A decision on whether the contract will be awarded and to whom it will be awarded shall be made within sixty (60) days from the date the bids are opened. The contract, if awarded, shall be awarded to the lowest responsible bidder. Whenever two or more bids are equal, the Board has the absolute discretion to award the contract to the bidder whose bid is most advantageous to the College.

AVAILABILITY OF FUNDS

This contract is subject to the availability and annual appropriation of sufficient funds as may be required to meet the extended obligation. Therefore, this contract may be canceled at the end of the fiscal year if sufficient funds are not appropriated or available.

TERMINATION OF CONTRACT

Notwithstanding any provision or language in this contract to the contrary, the College may terminate at any time, in whole or in part, any contract entered into as a result of this bid for the convenience of the College upon no less than 30 days written notice to the contractor.

DAMAGES FOR BREACH

In case of default in the performance of the Contract by the successful bidder, the College may procure the articles or services from other sources and hold the successful bidder responsible for any excess cost occasioned thereby. The College shall notify the contractor, in writing, of its breach before securing the substituted performance necessary to complete the same.

INDEMNIFICATION

The contract shall provide that the successful bidders shall indemnify and hold the College harmless from any and all claims against the College of whatsoever nature arising from the successful bidder's performance or failure to perform the contract awarded pursuant to these bids and shall further indemnify and hold the College harmless from any and all loss, damage, and expense which the College might incur as a result of said performance or failure to perform including but not limited to attorney's fees and associated costs. This indemnification obligation is not limited by but is in addition to the insurance obligations contained in this agreement.

SNOW REMOVAL SERVICES SPECIFICATION
BID # 23-08-0003

Sussex County Community College hereby requests bids for snow removal contracting on a time and material basis at the following campuses:

- Main Campus - One College Hill, Newton, New Jersey
- McGuire Campus – 41-47 Main Street, Newton, New Jersey

The awarded Contractor will provide snow removal services for Sussex County Community College. Contractors submitting a bid on this work are expected to have qualified personnel and suitable tools, equipment, and materials to perform the above work. All materials and equipment provided and labor performed shall comply with all local, county, state, and federal codes having jurisdiction.

All Bidders must familiarize themselves with the campus and all grounds to be included in this contract. Any bidder unfamiliar with the campus may schedule a site visit with the Chief Operating Officer by emailing jgaddy@sussex.edu.

This bid will be an open-ended contract. There is no minimum expenditure guaranteed expressed or implied.

SCOPE OF WORK:

1. The Contractor shall be responsible to be on 24-hour call to remove snow and ice, and to plow, and salt at the prices stated in the submitted bid, and to be on-site within **one (1) hour** after Sussex County Department of Public Works announces a snow removal event, or being called by the College (whoever makes the announcement first), to commence snow removal operations.
2. The Contractor shall be responsible for snow and ice removal on all campus roadways, parking lots, steps, sidewalks, and crosswalks unless otherwise instructed by the College.
3. The Contractor shall clean all snow and ice from catch basins.
4. The Contractor shall clear snow from all safety devices, including fire hydrants and emergency communication phones.
5. The Contractor will not commence operations (snow removal, salting) until a snow event has been called by the Sussex County Department of Public Works or notified by the College's Chief Operating Officer or his designee (whoever makes the announcement first).
6. The Contractor shall maintain a force of qualified workers sufficient to perform the work specified herein.
7. The Contractor will have a designated representative, approved by the College, sign all time tickets daily verifying time, material, and equipment, which will be reviewed by the Chief Operations Officer or his designee.
8. The Contractor shall not store any equipment or supplies on campus without the Chief Operating Officer's or his designee's express written consent. The College shall not be responsible for damage to Contractor's equipment and materials.
9. Damage from snow clearing operations shall be the Contractor's responsibility to repair.
10. The Contractor will be notified to commence snow and ice removal before roads and parking lots become unsafe due to inclement weather.
11. Sussex County Community College reserves the right to perform snowplowing activities on roadways using in-house and/or municipal or County personnel and equipment.

12. The Contractor will use College furnished materials in conjunction with this contract.
    a. Salt and/or salt-grit mix, when purchased by the College, is to be picked up by the Contractor at an off-site Sussex County Roads and Bridges Department location and placed by the Contractor using Contractor's vehicles at the hourly rate stated in the awarded contract.
13. Unless the College requests, non-corrosive concrete-safe ice melt, or similar product may be used on sidewalks. Deicers may be used on sidewalks only at the College's request.
14. All coordination of activities, including approval of invoices, will fall under the jurisdiction of the Chief Operating Officer or his designee.
15. End-of-Season Clean-Up: The Contractor is to remove remaining materials and sidewalk chemicals and clean up utilized areas at no additional charge upon the end of the snow season as determined by the Chief Operating Officer or his designee.

CONTRACT TERM

Sussex County Community College, upon approval by the Board of Trustees, intends to award the contract for (1) year commencing from the date of award, renewable at the option of the College for two (2) additional one-year terms. The College's obligation is contingent upon the availability of funds and may be canceled at any time if sufficient funds are unavailable.

CONDITIONS

1. If any person employed on a project by the Contractor shall appear to the College to be incompetent or act in a disorderly manner, such person shall be removed immediately on the request of the College and shall not be re-employed on the College's premises except on written consent by the College.
2. The College may, at its discretion, seek additional quotes for services or use other suppliers for non-emergency work.
3. Materials and equipment shall be ordered and received by the contractor unless otherwise directed by the College. The College assumes no responsibility for the purchase, receipt, storage, or supply of materials the Contractor orders. The awarded contractor shall furnish actual receipts for material showing markup/discount percentage and attach them to the invoice for each project.
4. Upon award of the contract, the College will issue a Purchase Order for each fiscal year subject to the availability and annual appropriation of funds. The Contractor shall submit an invoice upon completion of each project. All invoices must reference the current Purchase Order number.
5. Should additional work be required that falls under the subject of the awarded contract during the contract term, the College reserves the right to procure the individual requirements separately and subsequently request the contractor to submit a written proposal, and upon approval, a purchase order will be issued to authorize the work.
6. In the case of repeated default in the performance required by these bid specifications or material breach of the terms and conditions during the contract period by the Contractor, the College reserves the right to terminate the contract with 7-day written notice to the Contractor.

PLEASE REFER TO INSTRUCTIONS TO BIDDERS FOR ADDITIONAL REQUIREMENTS.

SNOW REMOVAL BID 23-07-0001
BID PROPOSAL SHEET

Section A: Base Bid Description	Minimum Units Required	Number of Units Available	Hourly Rate per unit FY2023/2024	Hourly Rate per unit FY2024/2025	Hourly Rate per unit FY2025/2026
1. 4WD vehicle with 8' snowplow	5	8	125.00	125.00	125.00
2. Tandem dump truck (for trucking snow)	1	2	5.00	5.00	5.00
3. Bucket loader with 1 to 3 yard bucket	1	1	175.00	175.00	175.00
4. Salt/sanding vehicle (P/U)	2	3	125.00	125.00	125.00
5. Snowblowing of sidewalks	2	10	75.00	75.00	75.00
6. Additional Personnel for shoveling sidewalks at the College's Request	2	10	65.00	65.00	65.00

Optional Materials:		Price per Unit	Price per Unit	Price per Unit
7. Ice Melt (Magnesium Chloride)	50lb bag	26.00	26.00	26.00
8. Ice Melt (Calcium Chloride)	50lb bag	26.00	26.00	26.00
9. Sand/Grit Mix	Per ton	17.00	17.00	17.00
10. Salt	Per ton	98.00	98.00	98.00

Section B: Other Equipment Description	Number of Units Available	Hourly Rate per unit FY2023/2024	Hourly Rate per unit FY2024/2025	Hourly Rate per unit FY2025/2026
1. Dump truck with 10' snow plow	3	195.00	195.00	195.00
2. Skid Steer w/loader bucket	2	165.00	165.00	165.00
3. Utility tractor with 8' plow	1	165.00	165.00	165.00
4. Salt/Sanding vehicle (Single Axle)	3	195.00	195.00	195.00
5. Salt/Sanding vehicle (Tandem Axle)	2	275.00	275.00	275.00
Please list any other available equipment				
A. Loader/Backhoe with 10'-12' plow or pusher	5	275.00	275.00	275.00
B. Utility vehicle for sidewalks 570, RTV, tractor	3	165.00	165.00	165.00
C. large loader with 5YD bucket or clam shell bucket	4	275.00	275.00	275.00

Included with this Bid Proposal are the following documents as required and indicated with an X.

Required with Bid:
- [ ] Equal Employment Opportunity Statement
- [ ] Ownership Disclosure
- [ ] Disclosure of Investment Activities in Iran
- [ ] Corporate Resolution
- [ ] Non-Collusion Affadavit
- [ ] Company Information/Qualifications Questionnaire
- [ ] Certificate of Non-Involvement in Russia/Belarus

Required Prior to Award:
- [ ] New Jersey Business Registration Certificate
- [ ] W-9 Form
- [ ] Certificate of Insurance
- [ ] Affirmative Action Compliance Evidence

J. Kramer landscaping & Snowplowing LLC
Company Name

Signature of Authorized Representative

8/10/23
Date

Po box 541 Newton, NJ 07860
Address

Justin Kramer
Printed Name

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: J. Kramer landscaping & Snowplowing LLC

Organization Address: PO Box 541 Newton, NJ 07860

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 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.**

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 ***<name of contracting unit>*** 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 ***<type of contracting unit>*** to notify the ***<type of contracting unit>*** 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, permitting the ***<type of contracting unit>*** to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print):	Justin Kramer	Title:	owner
Signature:	Justin Kramer	Date:	8/10/23

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.

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

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; or

Employee Information Report Form AA-302 (electronically provided by the Division and distributed to the public agency through the Division's website at: http:// www.state.nj.us/treasury/contract_compliance.

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.

If awarded a contract, the bidder shall provide affirmative action evidence in the following form:

☐ Letter of Federal Approval indicating that the vendor is under an existing federally approved or sanctioned affirmative action program. A copy of the approval letter must be provided by the vendor to the Public Agency and the Division.; **OR**

☐ A Certificate of Employee Information Report, issued in accordance with N.J.A.C. 17:27 et seq,; **OR**

☒ Bidder shall complete an Initial Employee Report, Form AA-302 and submit it to the Division with a check or money order for $150.00 made payable to "Treasurer, State of NJ" and forward a copy of the Form to the Public Agency.

Submitted by:

J. Kramer landscaping & Snowplowing LLC
Company Name

Justin Kramer 8/10/23
Signature Date

Justin Kramer Owner
Name Title

CORPORATE RESOLUTION

Be it resolved that the following named officers:

Justin Kramer owner

be and are hereby authorized and empowered to sign and submit to Sussex County Community College the attached bid or proposal and further that said officers are authorized to execute the contract or any other agreement or bond or statement necessary for the fulfillment of obligations incurred by the acceptance of the bid or proposal by Sussex County Community College.

CERTIFICATION

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 _____.

_____
Secretary

(Corporate Seal)

RESOLUTION OF AUTHORIZATION MUST BE COMPLETED AND SUMBITED WITH BID IF BIDDER IS A CORPORATION

SUSSEX COUNTY COMMUNITY COLLEGE
NON-COLLUSION AFFIDAVIT
SNOW REMOVAL SERVICES SPECIFICATION BID # 23-08-0003

STATE OF Sussex New Jersey
COUNTY OF Sussex

I, Justin Kramer of the City of Newton

in the County of Sussex and the State of New Jersey of full age, being duly sworn according to law on my oath depose and say that:

I am 100% owner of the firm J. Kramer landscaping & snowplowing LLC the bidder making the proposal for the above named project, 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 project; and that all statements contained in said proposal and in this affidavit are true and correct, and made with full knowledge that the Sussex County Community College relies 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 project or item.

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

Justin Kramer / J. Kramer landscaping & Snowplowing LLC
Name of Contractor

Justin K
Signature

Justin Kramer
Type or print name of affidavit under signature

Subscribed and Sworn to
before me this day:
August 10, 2023 (Seal)

Dora E Rodriguez
Notary Public of

My Commission expires 4/6/28

DORA E RODRIGUEZ
Notary Public of New Jersey
Commission ID# 2457679
Commission Expires 4/6/2028

THIS FORM MUST BE COMPLETED, NOTORIZED, AND SUBMITTED WITH THE BID PROPOSAL

SUSSEX COUNTY COMMUNITY COLLEGE
DISCOSURE OF INVESMENT ACTIVITIES IN IRAN

PART 1: CERTIFICATION

BIDDERS MUST COMPLETE PART 1 BY CHECKING EITHER BOX

FAILURE TO CHECK ON OF THE BOXES WILL RENDER THE PROPOSAL NON-RESPONSIVE

Pursuant to Public Law 2012, c. 25, any person or entity that submits a bid or proposal 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 of its parents, subsidiaries, or affiliates, is identified on the State of New Jersey, Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran. The Chapter 25 list is found on the Department of Treasury's website at http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf. Bidders must review this list prior to completing the below certification. **Failure to complete the certification will render a bidder's proposal non-responsive.** If the Department of Treasury finds a person or entity to be in violation of this law, the Department of Treasury shall take 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.

PLEASE CHECK THE APPROPRIATE BOX:

☒ **I certify, pursuant to Public Law 2012, c. 25, that neither the bidder listed below nor any of the bidder's parents, subsidiaries, or affiliates 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 below, or I am an officer or representative of the entity listed below 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 bidder and/or one or more of its parents, subsidiaries, or affiliates is listed on the Departments Chapter 25 list. I will provide a detailed, accurate, and precise description of the activities in Part 2 below and sign and complete the Certification below.** Failure to provide such will result in the proposal being rendered as non-responsive and appropriate penalties, fines, and/or sanctions will be assessed as provided by law.

PART 2: PLEASE PROVIDE FURTHER INFROMATION RELATED TO INVESTMENT ACTIVIES IN IRAN

You must provide a detailed, accurate, and precise description of the activities of the bidding person/entity, or one of its parents, subsidiaries, or affiliates, engaging in the investment activities in Iran outlined above by completing the information below.

Please provide thorough answers to each question. If you need to make additional entries, use additional pages.

Person/Entity Name:		Relationship to Bidder/Offeror:	
Description of Activities:			
Duration of Engagement:		Anticipated Cessation Date:	
Bidder/Offeror Contact Name:		Contact Phone Number:	

Certification: I being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments thereto, to the best of my knowledge, are true and complete. I attest that I am authorized to execute this certification on behalf of the below-referenced person or entity. I acknowledge that Sussex County Community College is 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 College to notify the College 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 Sussex County Community College and that the College, at its option may, declare any contract(s) void and unenforceable.

Full Name (Print):	Justin Kramer	Signature:	Justin K
Title:	Owner	Date:	8/10/23

CERTIFICATION OF NON-INVOLVEMENT IN PROHIBITED ACTIVITIES IN RUSSIA OR BELARUS PURSUANT TO P.L.2022, c.3

ON-CALL CARPENTRY CONTRACTING SERVICES BID # 22-02-0128

CHECK THE APPROPRIATE BOX

☒ I, the undersigned , am authorized by the person or entity seeking to enter into or renew the contract identified above, to certify that the Vendor/Bidder is not engaged in prohibited activities in Russia or Belarus as such term is defined in P.L.2022, c.3,[1] section 1.e, except as permitted by federal law.

I understand that if this statement is willfully false, I may be subject to penalty, as set forth in P.L.2022, c.3, section 1.d.

OR

☐ I, the undersigned am unable to certify above because the person or entity seeking to enter to or renew the contract identified above, or one of its parents, subsidiaries, or affiliates may have engaged in prohibited activities in Russia or Belarus. A detailed, accurate and precise description of the activities is provided below.

Failure to provide such description will result in the Quote being rendered as non-responsive, and the Department/Division will not be permitted to contract with such person or entity, and if a Quote is accepted or contract is entered into without delivery of the certification, appropriate penalties, fines and/or sanctions will be assessed as provided by law.

Description of Prohibited Activity

Attach Additional Sheets If Necessary.

If you certify that the bidder is engaged in activities prohibited by P.L. 2022, c. 3, the bidder shall have 90 days to cease engaging in any prohibited activities and on or before the 90th day after this certification, shall provide an updated certification. If the bidder does not provide the updated certification or at that time cannot certify on behalf of the entity that it is not engaged in prohibited activities, the State shall not award the business entity any contracts, renew any contracts, and shall be required to terminate any contract(s) the business entity holds with the State that were issued on or after the effective date of P.L. 2022, c. 3.

Signature of Authorized Representative	Date 8/10/23
Print Name and Title of Authorized Representative	
Justin Kramer owner	
Vendor Name J. Kramer landscaping & Snowplowing LLC	

[1] Engaged in prohibited activities in Russia or Belarus" means (1) companies in which the Government of Russia or Belarus has any direct equity share;

(2) having any business operations commencing after the effective date of this act that involve contracts with or the provision of goods or services to the Government of Russia or Belarus; (3) being headquartered in Russia or having its principal place of business in Russia or Belarus, or (4) supporting, assisting or facilitating the Government of Russia or Belarus in their campaigns to invade the sovereign country of Ukraine, either through in-kind support or for profit.

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME:	
	PHONE (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	

INSURED	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A :	
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	GENERAL LIABILITY						EACH OCCURRENCE	$
	☐ COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	$
	☐ CLAIMS-MADE ☐ OCCUR						MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
							GENERAL AGGREGATE	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	$
	☐ POLICY ☐ PRO-JECT ☐ LOC							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	☐ ANY AUTO						BODILY INJURY (Per person)	$
	☐ ALL OWNED AUTOS ☐ SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	☐ HIRED AUTOS ☐ NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB ☐ OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB ☐ CLAIMS-MADE						AGGREGATE	$
	☐ DED ☐ RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N						☐ WC STATU-TORY LIMITS ☐ OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☐	N / A					E.L. EACH ACCIDENT	$
	(Mandatory in NH)						E.L. DISEASE - EA EMPLOYEE	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

INSTRUCTIONS FOR COMPLETING THE EMPLOYEE INFORMATION REPORT (FORM AA302)

IMPORTANT: READ THE FOLLOWING INSTRUCTIONS CAREFULLY BEFORE COMPLETING THE FORM. PRINT OR TYPE ALL INFORMATION. FAILURE TO PROPERLY COMPLETE THE ENTIRE FORM **AND TO SUBMIT THE REQUIRED $150.00 NON-REFUNDABLE FEE MAY DELAY ISSUANCE OF YOUR CERTIFICATE. IF YOU HAVE A CURRENT CERTIFICATE OF EMPLOYEE INFORMATION REPORT, DO NOT COMPLETE THIS FORM UNLESS YOUR ARE RENEWING A CERTIFICATE THAT IS DUE FOR EXPIRATION. DO NOT COMPLETE THIS FORM FOR CONSTRUCTION CONTRACT AWARDS.**

ITEM 1 - Enter the Federal Identification Number assigned by the Internal Revenue Service, or if a Federal Employer Identification Number has been applied for, or if your business is such that you have not or will not receive a Federal Employer Identification Number, enter the Social Security Number of the owner or of one partner, in the case of a partnership.

ITEM 2 - Check the box appropriate to your TYPE OF BUSINESS. If you are engaged in more than one type of business check the predominate one. If you are a manufacturer deriving more than 50% of your receipts from your own retail outlets, check "Retail".

ITEM 3 - Enter the total "number" of employees in the entire company, including part-time employees. This number shall include all facilities in the entire firm or corporation.

ITEM 4 - Enter the name by which the company is identified. If there is more than one company name, enter the predominate one.

ITEM 5 - Enter the physical location of the company. Include City, County, State and Zip Code.

ITEM 6 - Enter the name of any parent or affiliated company including the City, County, State and Zip Code. If there is none, so indicate by entering "None" or N/A.

ITEM 7 - Check the box appropriate to your type of company establishment. "Single-establishment Employer" shall include an employer whose business is conducted at only one physical location. "Multi-establishment Employer" shall include an employer whose business is conducted at more than one location.

ITEM 8 - If "Multi-establishment" was entered in item 8, enter the number of establishments within the State of New Jersey.

ITEM 9 - Enter the total number of employees at the establishment being awarded the contract.

ITEM 10 - Enter the name of the Public Agency awarding the contract. Include City, County, State and Zip Code. This is not applicable if you are renewing a current Certificate.

ITEM 11 - Enter the appropriate figures on all lines and in all columns. THIS SHALL ONLY INCLUDE EMPLOYMENT DATA FROM THE FACILITY THAT IS BEING AWARDED THE CONTRACT. DO NOT list the same employee in more than one job category. **DO NOT attach an EEO-1 Report.**

Racial/Ethnic Groups will be defined:
Black: Not of Hispanic origin. Persons having origin in any of the Black racial groups of Africa.
Hispanic: Persons of Mexican, Puerto Rican, Cuban, or Central or South American or other Spanish culture or origin, regardless of race.
American Indian or Alaskan Native: Persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.
Asian or Pacific Islander: Persons having origin in any of the original peoples of the Far East, Southeast Asia, the Indian Sub-continent or the Pacific Islands. This area includes for example, China, Japan, Korea, the Phillippine Islands and Samoa.
Non-Minority: Any Persons not identified in any of the aforementioned Racial/Ethnic Groups.

ITEM 12 - Check the appropriate box. If the race or ethnic group information was not obtained by 1 or 2, specify by what other means this was done in 3.

ITEM 13 - Enter the dates of the payroll period used to prepare the employment data presented in Item 12.

ITEM 14 - If this is the first time an Employee Information Report has been submitted for this company, check block "Yes".

ITEM 15 - If the answer to Item 15 is "No", enter the date when the last Employee Information Report was submitted by this company.

ITEM 16 - Print or type the name of the person completing the form. Include the signature, title and date.

ITEM 17 - Enter the physical location where the form is being completed. Include City, State, Zip Code and Phone Number.

TYPE OR PRINT IN SHARP BALL POINT PEN

THE VENDOR IS TO COMPLETE THE EMPLOYEE INFORMATION REPORT FORM (AA302) AND RETAIN A COPY FOR THE VENDOR'S OWN FILES. THE VENDOR SHOULD ALSO SUBMIT A COPY TO THE PUBLIC AGENCY AWARDING THE CONTRACT IF THIS IS YOUR FIRST REPORT; AND FORWARD ONE COPY **WITH A CHECK IN THE AMOUNT OF $150.00 PAYABLE TO THE TREASURER, STATE OF NEW JERSEY(FEE IS NON-REFUNDABLE)** TO:

NJ Department of the Treasury
Division of Public Contracts
Equal Employment Opportunity Compliance
P.O. Box 206
Trenton, New Jersey 08625-0206
Telephone No. (609) 292-5473

State of New Jersey

Division of Public Contracts Equal Employment Opportunity Compliance

EMPLOYEE INFORMATION REPORT

IMPORTANT- READ INSTRUCTIONS ON BACK OF FORM CAREFULLY BEFORE COMPLETING FORM. TYPE OR PRINT IN SHARP BALLPOINT PEN. FAILURE TO PROPERLY COMPLETE THE ENTIRE FORM AND **SUBMIT THE REQUIRED $150.00 FEE** MAY DELAY ISSUANCE OF YOUR CERTIFICATE. DO NOT SUBMIT EEO-1 REPORT FOR SECTION B, ITEM 11.

SECTION A - COMPANY IDENTIFICATION

1. FID. NO. OR SOCIAL SECURITY	2. TYPE OF BUSINESS	3. TOTAL NO. OF EMPLOYEES IN THE ENTIRE COMPANY.
20-8561281	☐ 1. MFG ☒ 2. SERVICE ☐ 3. WHOLESALE ☐ 4. RETAIL ☐ 5. OTHER	4

4. COMPANY NAME: J. Kramer landscaping & Snowplowing LLC | Newton, Sussex | NJ | 07860

5. STREET	CITY	COUNTY	STATE	ZIP CODE
PO box 541	Newton		NJ	07860

6. NAME OF PARENT OR AFFILIATED COMPANY (IF NONE, SO INDICATE) | CITY | STATE | ZIP CODE

7. CHECK ONE: IS THE COMPANY: ☒ SINGLE-ESTABLISHMENT EMPLOYER ☒ MULTI-ESTABLISHMENT EMPLOYER

8. IF MULTI-ESTABLISHMENT EMPLOYER, STATE THE NUMBER OF ESTABLISHMENTS IN NJ

9. TOTAL NUMBER OF EMPLOYEES AT ESTABLISHMENT WHICH HAS BEEN AWARDED THE CONTRACT: Snow removal 1-10

10. PUBLIC AGENCY AWARDING CONTRACT	CITY	COUNTY	STATE	ZIP CODE
Sussex County Community College	Newton	Sussex	NJ	07860

Official Use Only	DATE RECEIVED	INAUG DATE	ASSIGNED CERTIFICATION NUMBER

SECTION B - EMPLOYMENT DATA

11. Report all permanent, temporary and part-time employees ON YOUR OWN PAYROLL. Enter the appropriate figures on all lines and in all columns. Where there are no employees in a particular category, enter a zero. Include ALL employees, not just those in minority/non-minority categories, in columns 1, 2, & 3. *DO NOT SUBMIT* AN EEO-1 REPORT.

JOB Categories	All Employees	PERMANENT MINORITY/NON-MINORITY EMPLOYEE BREAKDOWN											
		********** MALE **********							********** FEMALE **********				
	Total (Cols. 2 & 3)	COL. 2 MALE	COL. 3 FEMALE	Black	Hispanic	Amer. Indian	Asian	Non Min	Black	Hispanic	Amer. Indian	Asian	Non Min
Officials/Managers													
Professionals													
Technicians													
Sales Workers													
Office & Clerical													
Craftworkers (Skilled)													
Operatives (Semi-Skilled)													
Laborers (Unskilled)													
Service Workers													
Total													
Total employment From previous Report (If any)													
Temporary & Part Time Employees	The data below shall NOT be included in the figures for the appropriate categories above.												

12. HOW WAS INFORMATION AS TO RACE OR ETHNIC GROUP IN SECTION B OBTAINED?

13. DATES OF PAYROLL PERIOD USED FROM: TO:

14. IS THIS THE FIRST Employee Information Report Submitted? ☒ YES ☐ NO

15. IF NO, DATE LAST REPORT SUBMITTED

SUSSEX COUNTY COMMUNITY COLLEGE
COMPANY INFORMATION AND QUALIFICATIONS QUESTIONNAIRE

COMPANY INFORMATION

Company Name: J. Kramer landscaping & Snowplowing LLC	
Company Address: PO box 541 Newton, NJ 07860	
Remit to Address:	
Phone: 973-945-4626	Fax:
Email: JKramerlandscaping@hotmail.com	Website: www.JKramerlandscaping.com
List any parent, subsidiary, DBA or former company names:	

Business Classification: (check all that apply)	Small Bus.: [X]	Women Owned: [ ]	Minority Owned: [ ]

QUALIFICATIONS

What is your organization's primary business?	landscaping & Snowplowing
How long have you been in business under the present name?	16 16
Have you ever failed to complete any work awarded to you?	NO
If so, give details:	
Have any liens or lawsuits of any kind been filed against any of your contracts?	NO
If so give details:	

REFERENCES - list 3 projects of similar size and scope

1. Project Date & Description:	2004-2023
Owner Name:	Kreiger & Smith
Owner Address:	64 Hillside Terrace Newton
Contact Person:	Zack
Telephone Number:	973-383-7705
Email:	
Total Contract Value:	85,000
2. Project Date & Description:	2009-2023
Owner Name:	Keith Mitchelle
Owner Address:	29 trinity street
Contact Person:	Keith Mitchelle
Telephone Number:	973-383-5900
Email:	
Total Contract Value:	45,000
3. Project Date & Description:	2012-2023
Owner Name:	Mark Devenzia
Owner Address:	194 Rt 94 Lafayette, NJ
Contact Person:	Mark
Telephone Number:	973-579-1540
Email:	
Total Contract Value:	150,000

SIGNATURE

I HEREBY CERTIFY THIS COMPANY HAS THE FINANCIAL STRENGTH TO FULLY PERFORM, SERVICE, AND WARRANT THE WORK AND MATERIALS REQUIRED FOR THIS CONTRACT.

Signature	Printed Name: Justin Kramer Title: Owner Date: 8/1

SUSSEX COUNTY COMMUNITY COLLEGE

LIST OF AVAILABLE PERSONNEL

List availability of on-call personnel.

Company Name: J. Kramer landscaping & Snowplowing LLC

Provide Main Office Telephone Number: 973-945-4626

Provide on call information:

Name: Justin Kramer
Position: owner/operator
Direct Contact Phone #: 973-945-4626

Name: Stephen Kyzer
Position: Driver/operator
Direct Contact Phone #: 862-268-6246

Name: Frank Klemn
Position: Driver/operator
Direct Contact Phone #:

Name: Rusty Bellis
Position: Driver/operator
Direct Contact Phone #:

Name: Jason Mills
Position: Driver/operator
Direct Contact Phone #:

TO BE SUBMITTED PRIOR TO AWARD OF CONTRACT

Form **W-9**
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

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.

Print or type. See **Specific Instructions** on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
J. Kramer landscaping & Snowplowing LLC

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☒ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
PO box 541

Requester's name and address (optional)

6 City, state, and ZIP code
Newton NJ 07860

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN,* later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number
___ - ___ - ____

or

Employer identification number
20-8561281

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here **Signature of U.S. person ▶** _____ **Date ▶** 8/10/23

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

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.*

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, *later.*

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting,* later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.

2. The treaty article addressing the income.

3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.

4. The type and amount of income that qualifies for the exemption from tax.

5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,

2. You do not certify your TIN when required (see the instructions for Part II for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code,* later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships,* earlier.

What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code,* later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of $50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a $500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note: ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C corporation, or S corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

IF the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation
• Individual • Sole proprietorship, or • Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	Individual/sole proprietor or single-member LLC
• LLC treated as a partnership for U.S. federal tax purposes, • LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or • LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
• Partnership	Partnership
• Trust/estate	Trust/estate

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)

2—The United States or any of its agencies or instrumentalities

3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

4—A foreign government or any of its political subdivisions, agencies, or instrumentalities

5—A corporation

6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession

7—A futures commission merchant registered with the Commodity Futures Trading Commission

8—A real estate investment trust

9—An entity registered at all times during the tax year under the Investment Company Act of 1940

10—A common trust fund operated by a bank under section 584(a)

11—A financial institution

12—A middleman known in the investment community as a nominee or custodian

13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over $600 required to be reported and direct sales over $5,000[1]	Generally, exempt payees 1 through 5[2]
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

[1] See Form 1099-MISC, Miscellaneous Income, and its instructions.

[2] However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See *What Name and Number To Give the Requester,* later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at *www.SSA.gov*. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at *www.irs.gov/Businesses* and clicking on Employer Identification Number (EIN) under Starting a Business. Go to *www.irs.gov/Forms* to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to *www.irs.gov/OrderForms* to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code,* earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account[1]
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor[2]
5. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee[1] The actual owner[1]
6. Sole proprietorship or disregarded entity owned by an individual	The owner[3]
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	**Give name and EIN of:**
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity[4]
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

[1] List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

[2] Circle the minor's name and furnish the minor's SSN.

[3] You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

[4] List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

***Note:** The grantor also must provide a Form W-9 to trustee of trust.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to *phishing@irs.gov*. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at *spam@uce.gov* or report them at *www.ftc.gov/complaint*. You can contact the FTC at *www.ftc.gov/idtheft* or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see *www.IdentityTheft.gov* and Pub. 5027.

Visit *www.irs.gov/IdentityTheft* to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

STATE OF NEW JERSEY

BUSINESS REGISTRATION CERTIFICATE

DEPARTMENT OF TREASURY/
DIVISION OF REVENUE
PO BOX 252
TRENTON, N J 08646-0252

TAXPAYER NAME:

J. KRAMER LANDSCAPING & SNOWPLOWING, L.L

TRADE NAME:

ADDRESS:

1028 FAIRVIEW LAKE ROAD
NEWTON NJ 07860

SEQUENCE NUMBER:

1307388

EFFECTIVE DATE:

02/27/07

ISSUANCE DATE:

03/06/07

James J. Fiusina

Acting Director
New Jersey Division of Revenue

FORM-BRC(08-01)

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

STATE OF NEW JERSEY

Certificate of Authority

DIVISION OF TAXATION
TRENTON, N J 08695

The person, partnership or corporation named below is hereby authorized to collect:

NEW JERSEY SALES & USE TAX

pursuant to: **N.J.S.A. 54:32B-1 ET SEQ.**

Carol A. Carrescia

Acting Director, Division of Taxation

This authorization is good ONLY for the named person at the location specified herein.
This authorization is null and void if any change of ownership or address is effected.

J. KRAMER LANDSCAPING & SNOWPL
1028 FAIRVIEW LAKE ROAD
NEWTON NJ 07860

Tax Registration No.: **XXX-XXX-281/000**

Tax Effective Date: **04-03-07**

Document Locator No.: **I0000314556**

Date Issued: **03-06-07**

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

NEW JERSEY CHAPTER
LICA
Land Improvement Contractors of America

New Jersey LICA

Expires
March 16, 2024

CERTIFICATE

OF PARTICIPATION

NJLICA Apprenticeship Education and Training Fund
ERISA Participation

J. Kramer Landscaping & Snowplowing LLC

Buddy Freund
Executive Director
NJLICA

CONSTRUCTION CRAFT LABORER
HEAVY EQUIPMENT OPERATOR
TRUCK DRIVER HEAVY

NJLICA APPRENTICESHIP EDUCATION AND TRAINING FUND
NEW JERSEY LAND IMPROVEMENT CONTRACTORS
NEW JERSEY LICA

J.KRLAN-01 MMONTAGUE

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 8/11/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Mitchell Insurance Agency
29 Trinity Street
Newton, NJ 07860

CONTACT NAME: Michael Montague
PHONE (A/C, No, Ext): (973) 383-5800 114 FAX (A/C, No): (973) 579-3916
E-MAIL ADDRESS: michael@themitchellagency.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Selective Casualty Insurance Company	14376
INSURER B : Harleysville Insurance Company of New Jersey	42900
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
J.Kramer Landscaping & Snow Plowing LLC
PO Box 541
Newton, NJ 07860

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE X OCCUR			S 2286598	12/5/2022	12/5/2023	DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 500,000
	X CG7300 01/16 Blanket						MED EXP (Any one person)	$ 15,000
							PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 3,000,000
	POLICY X PRO-JECT X LOC						PRODUCTS - COMP/OP AGG	$ 3,000,000
	OTHER:							$
B	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY X SCHEDULED AUTOS			BA 00000054270X	3/26/2023	3/26/2024	BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$
	DED RETENTION $							$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						X PER STATUTE OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y / N: Y	N / A		WC 9069543	4/12/2023	4/12/2024	E.L. EACH ACCIDENT	$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

Sussex County Community College
1 College Hill Rd
Newton, NJ 07860

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 08/18/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER

State Farm Insurance
Glenn Jones Insurance Agcy Inc
40 Route 15
Lafayette NJ 07848

CONTACT NAME: Glenn Jones
PHONE (A/C, No, Ext): 973-300-0009 FAX (A/C, No): 1-201-254-3957
E-MAIL ADDRESS: teresa@glennajones.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : State Farm Fire and Casualty Company	25143
INSURER B : State Farm Guaranty Insurance Company	12251
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED

J KRAMER LANDSCAPING &
SNOWPLOWING LLC
PO BOX 541
NEWTON NJ 07860-0541

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC OTHER:			90-CT-V629-8	11/28/2022	11/28/2023	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ 1,000,000 $ $ 5,000 $ $ $ 2,000,000
B	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY ☒ SCHEDULED AUTOS NON-OWNED AUTOS ONLY			129 9660-C23-30A	03/23/2023	03/23/2024	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ 1,000,000 $ $ $ 1,000,000
A	☒ UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ CLAIMS-MADE DED ☐ RETENTION $			90-CT-V630-0	11/28/2022	11/28/2023	EACH OCCURRENCE AGGREGATE	$ 5,000,000 $ 10,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y/N ☐ (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A					☐ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ $ $

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

SUSSEX COUNTY COMMUNITY COLLEGE
1 COLLEGE HILL RD
NEWTON NJ 07860

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE