

ROUTE DESCRIPTION
SPECIAL EDUCATION STUDENTS

ROUTE NO. - BB1

DESTINATION(S) Bankbridge Regional North and South
870 Bankbridge Rd, Sewell NJ 08080

ARRIVAL TIME AT FIRST STOP 7:30 A.M.

- | | |
|---------|--------------------|
| STOP #1 | 522 Florence Ave |
| 2 | 428 West Holly Ave |
| 3 | 502 Boulevard Ave |
| 4 | 159 North Ave |
| 5 | 22 Pitman Ave |
| 6 | 327 Harding Court |

The direction of the vehicle from the last stop shall be along the safest most direct route to the destination.

NOTE: Within 10 days of the start of the contract, the contractor must submit to the district board of education a description of the actual streets traveled.

Vehicle shall arrive at the destination no earlier than _____ or later than _____.

P.M. Run begins at the Bankbridge Regional school at 2:20 P.M. and shall be the reverse of the A.M. run unless so indicated.

Minimum Vehicle Capacity _____

Equipment _____

Special Instructions Aide on Bus, Air Conditioning,

THE STARTING DATE OF THIS ROUTE IS September 2, 2020 (if other than the first day of school according to the calendar)

ROUTE DESCRIPTION
SPECIAL EDUCATION STUDENTS

ROUTE NO. BB -1

DESTINATION(S) Bankbridge Elementary
850 Bankbridge Rd, Sewell NJ 08080

ARRIVAL TIME AT FIRST STOP 8:00 A.M.

STOP #1 119 Kenton Ave

The direction of the vehicle from the last stop shall be along the safest most direct route to the destination.

NOTE: Within 10 days of the start of the contract, the contractor must submit to the district board of education a description of the actual streets traveled.

Vehicle shall arrive at the destination no earlier than _____ or later than _____.

P.M. Run begins at the Bankbridge Elementary school at 2:50 P.M. and shall be the reverse of the A.M. run unless so indicated.

Minimum Vehicle Capacity _____

Equipment _____

Special Instructions Aide on Bus
Seatbelt _____

THE STARTING DATE OF THIS ROUTE IS September 2, 2020 (if other than the first day of school according to the calendar)

ROUTE DESCRIPTION
SPECIAL EDUCATION STUDENTS

ROUTE NO. – BB -1

DESTINATION(S) Bankbridge Development Center _
550 Salina Road, Sewell NJ 08080

ARRIVAL TIME AT FIRST STOP 7:50 A.M.

STOP #1	412 Carew Ave
2	826 Long Ave
3	147 Oakcrest Ave

The direction of the vehicle from the last stop shall be along the safest most direct route to the destination.

NOTE: Within 10 days of the start of the contract, the contractor must submit to the district board of education a description of the actual streets traveled.

Vehicle shall arrive at the destination no earlier than _____ or later than _____.

P.M. Run begins at the Bankbridge Development Center school at 2:50 P.M. and shall be the reverse of the A.M. run unless so indicated.

Minimum Vehicle Capacity _____

Equipment _____

Special Instructions Car Seat, Aide on Bus, Seizure Protocol,
Seatbelt _____

THE STARTING DATE OF THIS ROUTE IS September 2, 2020 (if other than the first day of school according to the calendar)

LEGAL NOTICE

The School Business Administrator/Board Secretary of the Pitman Board of Education, in the County of Gloucester, State of New Jersey, by authority of said Board, solicits sealed bids for 2020-2021 student transportation. Bids to be received at the Business Office of the Pitman Board of Education, located at 420 Hudson Ave, Pitman, NJ 08071 or email to Kelly Brazelton at kbrazelton@pitman.k12.nj.us up to **2:00 pm prevailing time on September 2, 2020.**

STUDENT TRANSPORTATION SERVICES
2020-2021 School Year

Bid Number(s) BB -1

Specifications are available upon request at the Business Office of the Pitman Board of Education, located at 420 Hudson Ave, Pitman, NJ 08071.

All bids must be submitted on the bid form contained in the specifications. Bids which are not submitted on such form may be rejected.

Specifications and proposal forms may be secured upon written request to:

Mrs. Kelly Brazelton
Business Administrator/Board Secretary
Pitman Board of Education
420 Hudson Avenue
Pitman, NJ 08071
Fax: 856-582-5465
Email: kbrazelton@pitman.k12.nj.us

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 Affirmative Action.

The Board of Education reserves the right to reject any or all bids.

By order of the Pitman Board of Education

School Business Administrator/Board Secretary

DATE: _____

STATEMENT OF ASSURANCE

OMNIBUS TRANSPORTATION EMPLOYEE TESTING ACT COMPLIANCE
(To accompany bid)

The following firm

_____ is currently under contract

_____ will be contracted with

to provide a controlled substance testing program to our company as required by the Omnibus Transportation Employee Testing Act:

Name of Firm: _____

Address: _____

Contact Person: _____

Telephone: _____

Authorized Bidder's Name and Title _____
(Print or Type)

Authorized Signature _____

Company Name _____

Address _____

STATEMENT OF ASSURANCE

**SCHOOL BUS DRIVER ANNUAL CERTIFICATION TO THE EXECUTIVE COUNTY
SUPERINTENDENT OF SCHOOLS**

(To accompany bid)

I certify compliance with the requirements of *N.J.S.A.* 18A:39-17 through 20 governing criminal history background checks, and shall annually submit required documents to the Executive County Superintendent of Schools on or before August 31 or upon employment for newly hired drivers.

I also certify that prior to assigning a newly hired, currently approved school bus driver to a bus route, a school bus driver transmittal form is completed and submitted to the New Jersey Department of Education Criminal History Review Unit.

Authorized Bidder's Name and Title _____
(Print or Type)

Authorized Signature _____

Company Name _____

Address _____



**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF PURCHASE AND PROPERTY**

33 WEST STATE STREET, P.O. BOX 230
TRENTON, NEW JERSEY 08625-0230

DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN FORM

BID SOLICITATION #: _____ **VENDOR/BIDDER:** _____

PART 1

CERTIFICATION

**VENDOR/BIDDER MUST COMPLETE PART 1 BY CHECKING ONE OF THE BOXES
FAILURE TO CHECK ONE 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 nor entity, nor any of its parents, subsidiaries, or affiliates, is identified on the Department of the Treasury's Chapter 25 list as a person or entity engaged in investment activities in Iran. The Chapter 25 list is found on the Division's website at <http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf>. Vendors/Bidders must review this list prior to completing the below certification. Failure to complete the certification will render a Vendor's/Bidder's proposal non-responsive. If the Director of the Division of Purchase and Property finds a person or entity to be in violation of the law, s/he 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.

CHECK THE APPROPRIATE BOX

A. I certify, pursuant to Public Law 2012, c. 25, that neither the Vendor/Bidder listed above nor any of its 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"). Disregard Part 2 and complete and sign the Certification below.

OR

B. I am unable to certify as above because the Vendor/Bidder and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's 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 information will result in the proposal being rendered as nonresponsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.

PART 2

PLEASE PROVIDE ADDITIONAL INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN

If you checked Box "B" above, provide a detailed, accurate and precise description of the activities of the Vendor/Bidder, or one of its parents, subsidiaries or affiliates, engaged in the investment activities in Iran by completing the boxes below.

ENTITY NAME: _____
RELATIONSHIP TO VENDOR/BIDDER: _____
DESCRIPTION OF ACTIVITIES: _____
DURATION OF ENGAGEMENT: _____
ANTICIPATED CESSATION DATE: _____
VENDOR/BIDDER CONTACT NAME: _____
VENDOR/BIDDER CONTACT PHONE No.: _____

Attach Additional Sheets If Necessary.

CERTIFICATION

I, the undersigned, certify that I am authorized to execute this certification on behalf of the Vendor/Bidder, that the foregoing information and any attachments hereto, to the best of my knowledge are true and complete. I acknowledge that the State of New Jersey is relying on the information contained herein, and that the Vendor/Bidder is under a continuing obligation from the date of this certification through the completion of any contract(s) with the State to notify the State 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. If I do so, I will be subject to criminal prosecution under the law, and it will constitute a material breach of my agreement(s) with the State, permitting the State to declare any contract(s) resulting from this certification void and unenforceable.

Signature _____ Date _____

Print Name and Title _____

PRESCRIBED FORM OF QUESTIONNAIRE

(To accompany bid)

SURETY BOND

_____ CORPORATE – Consent of Surety Attached

_____ PERSONAL – Consent of Surety Attached

FAMILIARITY WITH CONDITIONS OF CONTRACT

Have you read carefully the applicable New Jersey Statutes, regulations, procedures, the rules of the local board of education pertaining to student transportation, the specifications upon the basis of which the accompanying bid is submitted, and the contract which the successful bidder will be required to execute? Yes _____ No _____

EXPERIENCE OF BIDDER

1. Have you had previous experience in school or other bus transportation? ___ Yes ___ No

2. If yes, how many years experience? _____

3. Briefly state the nature of this experience. _____

Company Name _____

Address _____

Authorized Bidder's Name and Title _____

(Print or Type)

Authorized Signature _____

CONSENT OF SURETY – PERSONAL BONDS

(To accompany the bid – if applicable)

Issued to the _____ Board of Education

On behalf of _____, as contractor

Bid Date _____ Bid Number _____

We hereby agree to issue the required Personal Surety Bond for the transportation services to be provided by the award of a mutually agreed upon contract between the referenced Board of Education and Contractor.

Two Bondspersons Required

(Please print or type.)

1. Name _____

Address _____

State location and value over all encumbrances thereon of real estate owned in the county of

_____ Property Value \$ _____

Location _____

If you are providing a personal bond in any other school district, list all school districts in which you are bonding contracts and the amount of the contracts bonded.

Bondsperson Signature _____

2. Name _____

Address _____

State location and value over all encumbrances thereon of real estate owned in the county of

_____ Property Value \$ _____

Location _____

If you are providing a personal bond in any other school district, list all school districts in which you are bonding contracts and the amount of the contracts bonded.

Bondsperson Signature _____

STATEMENT OF OWNERSHIP DISCLOSURE
N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

This statement shall be completed, certified to, and included with all bid and proposal submissions. Failure to submit the required information is cause for automatic rejection of the bid or proposal.

Name of Organization: _____

Organization Address: _____

Part I Check the box that represents the type of business organization:

- Sole Proprietorship (skip Parts II and III, execute certification in Part IV)
- Non-Profit Corporation (skip Parts II and III, execute certification in Part IV)
- For-Profit Corporation (any type) Limited Liability Company (LLC)
- Partnership Limited Partnership Limited Liability Partnership (LLP)
- Other (be specific): _____

Part II

- The list below contains the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be. **(COMPLETE THE LIST BELOW IN THIS SECTION)**

OR

- No one stockholder in the corporation owns 10 percent or more of its stock, of any class, or no individual partner in the partnership owns a 10 percent or greater interest therein, or no member in the limited liability company owns a 10 percent or greater interest therein, as the case may be. **(SKIP TO PART IV)**

(Please attach additional sheets if more space is needed):

Name of Individual or Business Entity	Home Address (for Individuals) or Business 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	Home Address (for Individuals) or Business Address

Part IV Certification

I, being duly sworn upon my oath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I acknowledge: that I am authorized to execute this certification on behalf of the 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):		Title:	
Signature:		Date:	

Coordinated Transportation Services Agency Membership Form

(To accompany the bid – CTSA only)

BOARD OF EDUCATION

CHIEF SCHOOL ADMINISTRATOR

Agency Name _____

Address _____

Authorized Representative Name and Title _____
(Print or Type)

Authorized Signature _____

AFFIRMATIVE ACTION
QUESTIONNAIRE
(To accompany bid)

COMPANY NAME _____

1. Our company has a federal Affirmative Action Plan approval.

____ YES ____ NO

A. If yes, a copy of said approval shall be submitted to the board of education within seven (7) working days of the notice of intent to award the contract or the signing of the contract.

2. Our company has a New Jersey State Certificate of Approval.

____ YES ____ NO

A. If yes, a copy of the New Jersey State Certificate shall be submitted to the board of education within seven (7) working days of the notice of intent to award the contract or the signing of the contract.

3. If you answered NO to both questions above, an Affirmative Action Employee Information Report (AA-302) will be mailed to you. Complete the form and forward it to the Affirmative Action Office, Department of Treasury, Division of Purchase & Property, Contract Compliance Audit Unit, EEO Monitoring Program P.O. Box 206, Trenton, NJ 08625. A copy shall be submitted to the board of education within seven (7) days of the notice of the intent to award the contract or the signing of the contract.

I certify that the above information is correct to the best of my knowledge.

AUTHORIZED BIDDER _____
(Print or Type)

TITLE _____ DATE _____
(Print or Type)

SIGNATURE _____

FORM OF NON-COLLUSION AFFIDAVIT

(To accompany the bid)

STATE OF NEW JERSEY, COUNTY OF _____

I, _____ of the _____,
(city, town, borough)

of _____, in the County of _____,

State of _____, of full age, being duly sworn according to law on

my oath depose and say that:

I am _____ of the firm/agency of _____, the bidder making the Proposal for the Student Transportation Contracts, and that I executed the said Proposal with full authority to do so, that said bidder has not, directly or indirectly, entered into any agreement, participated in any collusion, participated in drafting these specifications or route descriptions, or otherwise taken any action in restraint of free, competitive bidding in connection with the above bid and that all statements contained in said Proposal and in this affidavit are true and correct, and made with full knowledge that the State of New Jersey 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.

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

Company/Agency Name (Print or Type)

Authorized Representative - Name and Title (Print or Type)

(N.J.S.A. 52:34-15)

Authorized Signature

Bid Number _____

Subscribed and sworn before me this _____ day of _____, 20____

Notary Public of New Jersey
(Seal)

My commission expires _____, 20____

BID SHEET
 Pitman
 Board of Education
Student Transportation Services

- Bids which do not include an adjustment amount will not be accepted.
- In the event bid submissions for a route cost result in a tie bid, the award shall be based on the lowest aide cost (if applicable). If there is no aide cost, or if that cost also results in a tie bid, the award shall be based on the lowest increase/decrease adjustment cost unless otherwise specified by the board.
- Alternate bids not solicited by the Board of Education will not be accepted.
- The following routes and aide (if applicable) are to be bid on a PER DIEM basis.
- Routes which require an aide are so indicated by an asterisk (*).

I hereby submit the following bid(s) to transport students during the 20__-20__ school year in accordance with your advertisement, specifications and route description.

<u>Tier Number</u>	<u>Route Number</u>	<u>Route Cost</u>	<u>Tier Cost (without aide)</u>	<u>Increase/Decrease Adjustment Cost</u>	<u>Per Diem Per Aide Cost (if applicable)</u>	<u>Tier Cost including Aide (if applicable)</u>
_____	_____	\$ _____		\$ _____	\$ _____	
	_____	\$ _____		\$ _____	\$ _____	
	_____	\$ _____		\$ _____	\$ _____	
			\$ _____			\$ _____
_____	_____	\$ _____		\$ _____	\$ _____	
	_____	\$ _____		\$ _____	\$ _____	
	_____	\$ _____		\$ _____	\$ _____	
			\$ _____			\$ _____
_____	_____	\$ _____		\$ _____	\$ _____	
	_____	\$ _____		\$ _____	\$ _____	
	_____	\$ _____		\$ _____	\$ _____	
			\$ _____			\$ _____

BID SHEET (continued)

<u>Tier Number</u>	<u>Route Number</u>	<u>Route Cost</u>	<u>Tier Cost</u> (without aide)	<u>Increase/Decrease Adjustment Cost</u>	<u>Per Diem Per Aide Cost</u> (if applicable)	<u>Tier Cost including Aide</u> (if applicable)
_____	_____	\$ _____		\$ _____	\$ _____	
	_____	\$ _____		\$ _____	\$ _____	
	_____	\$ _____		\$ _____	\$ _____	
			\$ _____			\$ _____
_____	_____	\$ _____		\$ _____	\$ _____	
	_____	\$ _____		\$ _____	\$ _____	
	_____	\$ _____		\$ _____	\$ _____	
			\$ _____			\$ _____
_____	_____	\$ _____		\$ _____	\$ _____	
	_____	\$ _____		\$ _____	\$ _____	
	_____	\$ _____		\$ _____	\$ _____	
			\$ _____			\$ _____

