

THE MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY

**1 Park Drive, PO Box 486, Mount Holly, New Jersey 08060
(609) 267-0015**

REQUEST FOR PROPOSALS

FOR

AUDITOR

CONTRACT: 2026-14

Date Issued: May 19, 2026

Responses Due: June 9, 2026

REQUEST FOR PROPOSAL (RFP)
CONTRACT: 2026-14
FOR AUDITOR

I. PURPOSE AND INTENT

Through this Request for Proposals (RFP), the Mount Holly Municipal Utilities Authority (hereinafter the "OWNER") seeks to engage a licensed Auditor for the year **2026** commencing upon approval and formal appointment by the Owner Board at the regularly scheduled Board meeting, **Thursday June 11, 2026**, at 6pm, or upon appointment at an alternate date. This appointment will be awarded through a fair and open process pursuant to N.J.S.A. 19:44A-20.4, *et seq.*

The Owner is seeking sealed proposals in response to a Public Notice for the Solicitation of a Professional Service Contract. It is understood by the proposer that this proposal is provided based on standardized submission requirements prepared by the Owner. All proposers shall become familiar with these standardized submission requirements or conditions. A proposer's failure to do the same will not be accepted as an excuse.

This professional service contract is awarded for a one (1) year contract for services, **from 12:00A.M. Wednesday July 1, 2026, through midnight Wednesday June 30, 2027.***

Potential bidders/proposers may obtain a copy of the RFP by completing the Contract/Bid Form at: www.mhmua.com (click on Documents, then Forms, then Bid Documents). Upon receipt of the **COMPLETED** Contract/Bid Form, the Owner will email a copy of the requested document to the person whose information appears on the form. Below is the information required by the form:

Name:	Email:	Phone:
Contract/Bid Name & Contract Number:		
Company/Firm Name:		
Address:	City:	State: Zip:

II. PROPOSAL SUBMISSION

Submittal Type	A. One (1) original hardcopy and one (1) unbound copy in a sealed envelope marked " <u>Submission of Qualifications/Proposal for Contract 2026-14 for Auditor</u> " clearly marked on the outside of the envelope. a. Facsimiles, E-mails, or other forms of electronic filing are unacceptable and will not be considered by the Owner.
Address Sealed Proposals to	Anthony G. Stagliano, Sr., QPA, Mount Holly Municipal Utilities Authority 1 Park Drive, P.O. Box 486, Mount Holly, NJ 08060-0486
Receipt Date	A. All sealed proposals must be received by the Owner no later than Tuesday June 9, 2026, at 10:00 A.M. prevailing time. a. Proposals received after 10:00 A.M. prevailing time will be returned to the proposer unopened.
Receipt, Opening, & Announcement	Proposals meeting the above criteria will be opened and announced at 300 Rancocas Road, Mount Holly, NJ, Tuesday June 9, 2026, at 10:00 A.M. prevailing time
New Jersey Open Public Records Act	All documents/information submitted in response to this solicitation shall be available to the public as required by N.J.S.A. 47: 1A-1, <i>et seq.</i>
Proposer Costs	The Owner will not be responsible for any costs associated with the oral or written and/or presentation of the proposals.
Owner's Rights Reserved	A. The Owner reserves the right to reject all proposals, with or without cause, and waive any irregularities or informalities in the proposals in accordance with the Fair and Open Public Solicitation Process for Professional Service(s), pursuant to P.L. 2004, c.19 (N.J.S.A. 19:44A-20.4, <i>et seq.</i>). a. If all proposals are rejected, the Owner reserves the right to re-solicit proposals. B. The Owner further reserves the right to make such investigations as it deems necessary as to the qualifications of all vendors submitting proposals.
Record Retention	A. The Owner shall maintain all documentation for a period of five years from the date of final payment. a. Such records shall be made available to the New Jersey Office of the State Comptroller upon request.

III. MINIMUM QUALIFICATIONS

General Criteria	The Professional Qualifications for the Auditor shall include but may not be limited to the following: A. Experience generally in the proposer's profession, including exposure to issues likely to be of assistance in serving as Auditor. B. Knowledge of the Owner. C. The ability of the assigned Auditor to attend meetings of the Owner, usually on the second Thursday of each month at 6:00 p.m. and/or at the time and place published by the Owner. D. Absence from client base of any client(s) who is currently or has in the past five years done business with the Owner: a. In the alternative, the proposer can articulate the name(s) of such clients and the nature of that client's business with the Owner.
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	<p>1. For purposes of this subparagraph, "doing business with the Owner" includes vending or other contractual obligations to the Owner or being an applicant before the Owner.</p> <p>2. Attachment G, Conflict of Interest Certification, must be executed.</p> <p>E. Compensation proposal, set forth in detail, including requests for benefits, if any.</p> <p>F. Other factors if demonstrated to be in the best interest of the Owner.</p> <p>G. Must maintain a bona fide office in the State of New Jersey.</p> <p>H. Must have sufficient support staff to provide all services required by the Owner.</p> <p>I. Must list past and present public entities represented as Auditor.</p>
Duties	<p>The Duties of the Auditor shall include but may not be limited to the following:</p> <p>A. Performing an annual audit of the accounts of the Owner using Generally Accepted Accounting Principles.</p> <p>B. Preparing and submitting a summary of findings to the Owner.</p> <p>C. Updating and/or reviewing the Owner's connection fee calculation as directed by the Finance Administrator or Executive Director.</p> <p>D. Preparing secondary market disclosure reports.</p> <p>E. Advising the Owner in all matters relating to accounting issues including but not limited to compliance with Local Public Contracts Law, the New Jersey Environmental Infrastructure Trust, and establishment and updates to the Owner's rate schedule.</p> <p>F. As required or requested, attend meetings of the Owner and give opinions, suggestions and advice on issues that may arise at Owner meetings.</p> <p>G. Other assigned duties within the overall expertise of the Auditor.</p>

IV. BID PROPOSAL

The undersigned individual, firm, or corporation hereby proposes to serve the Owner's Auditor based upon the following compensation as listed on the enclosed Bid Proposal Form/Auditor Fee Structure.

Mandatory Contents	<p>A. The name and address of the firm, including the name, telephone number, fax number, and e-mail address of the individual responsible for the preparation of the proposal.</p> <p>B. An executive summary of not more than three pages identifying and substantiate why the proposer is best qualified to provide the requested services.</p> <p>C. A staffing plan listing those people who will be assigned to the engagement if the proposer is selected:</p> <p>a. Including the designation of the person who would be the proposer's officer responsible for all services required under the engagement.</p> <p>b. The relevant resume information for the individuals who will be assigned includes:</p> <p>i. A description of the person's relevant professional experience</p> <p>ii. Years and type of experience, and</p> <p>iii. Number of years with the proposer.</p> <p>D. A description of the proposer's experience in performing services of the type described in this RFP.</p> <p>a. Specifically identify client size and specific examples of similarities with the scope of services required under this RFP.</p> <p>E. A description of resources of the proposer:</p> <p>a. Background</p> <p>b. Location</p> <p>c. Experience</p> <p>d. Staff resources</p> <p>e. Financial and other resources</p> <p>F. The location of the office, if other than the proposer's main office, at which the vendor plans to perform services required under this RFP.</p> <p>G. A description of proposer's presence in New Jersey.</p> <p>a. Specifically, the proposer must state whether the proposer is registered as a small business enterprise ("SBE") with the New Jersey Commerce and Economic Growth Commission New Jersey's Set-Aside Program.</p> <p>H. Reference information:</p> <p>a. References including contact names, titles, and phone numbers.</p> <p>I. Conflict of Interest Certification</p> <p>a. Identification of any existing or potential conflicts of interest and disclose any representation of parties or other relationships that might be considered a conflict of interest regarding this engagement, or the Owner.</p> <p>J. Additional information</p> <p>a. Standard forms (a through p below) shall be completed in their entirety and submitted with the sealed proposal:</p> <table border="1" data-bbox="418 1810 1528 1963"> <tr> <td>a. Bid Proposal Form – Licensed Architect Fee Structure</td> <td>b. Biographical Information</td> </tr> <tr> <td>c. 2025 Summary</td> <td>d. Statement of Ownership Disclosure</td> </tr> <tr> <td>e. Disclosure of Investigations and Actions Involving Service Entity</td> <td>f. Proposer Survey Forms: Reference Information</td> </tr> <tr> <td>g. Conflict of Interest Certification</td> <td>h. Non-Collusion Affidavit</td> </tr> <tr> <td>i. Proof of Business Registration</td> <td>j. Acknowledgement of Receipt of Addenda,</td> </tr> </table>	a. Bid Proposal Form – Licensed Architect Fee Structure	b. Biographical Information	c. 2025 Summary	d. Statement of Ownership Disclosure	e. Disclosure of Investigations and Actions Involving Service Entity	f. Proposer Survey Forms: Reference Information	g. Conflict of Interest Certification	h. Non-Collusion Affidavit	i. Proof of Business Registration	j. Acknowledgement of Receipt of Addenda,
a. Bid Proposal Form – Licensed Architect Fee Structure	b. Biographical Information										
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g. Conflict of Interest Certification	h. Non-Collusion Affidavit										
i. Proof of Business Registration	j. Acknowledgement of Receipt of Addenda,										

		Corrections, Additions or Deletions Form
	k. Insurance Requirement Acknowledgement Form	l. Affirmative Action Compliance Notice
	m. Affirmative Action Acknowledgement Form	n. Political Contribution Disclosure Forms
	o. Disclosure of Investment Activities in Iran Form	p. Disclosure of Prohibited Activities in Russia or Belarus
Withdrawal of Proposals	<p>A. Proposals forwarded to the Owner's QPA and/or designated representative before the time of opening may be withdrawn upon written application of the proposer.</p> <p>a. The Proposer shall be required to produce evidence showing that they are, or they represent the principal, or principals involved in the proposal.</p> <p>B. Proposals may not be withdrawn within twenty-four (24) hours of the stipulated time of opening.</p>	
Errors in Proposals	<p>A. In the event there is a discrepancy between the unit prices and the extended totals:</p> <p>a. The unit prices shall govern.</p> <p>B. If between the correct sum of the extended totals and the total sum submitted:</p> <p>a. The correct sum shall govern.</p> <p>C. Amounts written in words shall govern over the amounts written in numerals.</p>	
Time for Award of Contract	<p>A. The Owner shall award the contract or reject all proposals within such time as may be specified in the RFP, but in no case more than 60 days:</p> <p>a. Except that the proposals of any proposer who consents thereto may, at the request of the Owner, be held for consideration for such longer period as may be agreed.</p> <p>B. The Owner shall award the contract or reject all proposals on or about Thursday June 11, 2026, at the Owner's monthly Board meeting.</p> <p>C. The award of the contract for this service will not be made unless the Chief Financial Officer has certified the necessary funds in a lawful manner.</p>	
Modification of Proposals	<p>A. Any proposer may modify his/her proposal by mail, courier, or hand delivery at any time.</p> <p>a. Said communication must be received by the Owner prior to the scheduled closing as specified in the RFP.</p> <p>b. The communication should not reveal the proposal price but should provide the addition to or subtraction from or other modification so that the Owner will not know the final price(s) or term(s) until the sealed proposal is opened.</p>	
Rejection of Proposals	<p>A. <u>MULTIPLE PROPOSALS NOT ALLOWED</u></p> <p>a. More than one proposal from an individual, a firm or partnership, a corporation or association of principals under the same or different names shall not be considered.</p> <p>B. <u>UNBALANCED PROPOSALS</u></p> <p>a. Proposals which are obviously unbalanced may be rejected at the option of the Owner.</p> <p>C. <u>RIGHT TO REJECT PROPOSALS</u></p> <p>a. The right is reserved to reject any or all proposals in whole or in part if not in compliance with the standardized proposal requirements.</p>	

V. INTERVIEW

Owner's Right	<p>A. The Owner reserves the right to interview any or all proposers.</p> <p>a. Although interviews may take place, the proposal should be comprehensive and complete on its face.</p> <p>B. The Owner reserves the right to request clarifying information after submission of the proposal.</p>
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VI. SELECTION PROCESS AND CRITERIA

Determination of Responsiveness	<p>A. All proposals will be reviewed to determine responsiveness.</p> <p>a. Non-responsive proposals will be rejected without further evaluation.</p> <p>B. For proposers that satisfy the minimum requirements, the Owner will evaluate proposals based on the following evaluation criteria, separate, or combined in some manner, and not necessarily listed in order of significance:</p> <p>a. The proposer's general approach to providing the services required under this RFP.</p> <p>b. The qualifications and experience of the proposer's management, supervisory or other key personnel assigned to the engagement, with emphasis on documented experience in successfully completing work on contracts of similar size and scope to the services required by this RFP.</p> <p>c. The overall ability of the proposer to mobilize, undertake and successfully complete the engagement within the timeline.</p> <p>d. This criterion will include, but not be limited to the following factors:</p> <p>i. The number and qualifications of management, supervisory and other staff proposed to perform the services required by this RFP,</p> <p>ii. The availability and commitment to the engagement of the proposer's management, supervisory and other staff, and</p> <p>iii. The proposer's contract management plan, including the proposer's contract organizational chart.</p> <p>iv. Cost consideration - including, but not limited to:</p> <p>1. Historical costs for similar professional services,</p> <p>2. Expertise involved and</p>
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	<p>3. Comparable costs for comparable public entities.</p> <p>v. The Owner will primarily judge responses based on the qualifications and years of experience of the vendor and not only on hourly rate or set fees because of its belief that more experienced professionals, although commanding a higher rate, may save the Owner money by virtue of their advice and experience.</p>
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VII. METHOD OF AWARD OF PROPOSALS

Award	The Owner reserves the right to award proposals on a “service by service” basis, “per project” basis, in part or in whole as determined by the Owner.
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VIII. RIGHT TO WAIVE INFORMALITIES RESERVED

Owner’s Right to Waive	The Owner expressly reserves the right to waive any informality in any proposal, and to accept the proposal, which in the Owner’s judgment serves its best interests.
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IX. PROFESSIONAL SERVICES ENTITY REFERRED TO LAWS

Referred to Laws	The attention of the proposer is directed at the provisions of Federal, State, County and Local Government statutes and regulations that may apply to the work.
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X. PAYMENT

Requests for Payment	<p>A. Requests for payment must be submitted no later than the 1st day of the month.</p> <p>a. Requests for payment must include the required purchase order or voucher, complete with the claimant certification & declaration (signature) and invoice.</p> <p>b. Only complete payment requests will be presented to the Board for review and approval at the monthly Board meeting usually held on the second Thursday of the month.</p> <p>c. Payment checks are processed only after Board approval.</p> <p>d. <i>NO MINIMUM PAYMENT IS IMPLIED OR GUARANTEED!</i></p>
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XI. TRANSITIONAL PERIOD*

Delay in Contract Award	<p>If a new contract has not been awarded prior to the contract’s expiration date, it shall be incumbent upon the professional services entity to continue the contract under the same terms and conditions until a new contract(s) can be completely operational.</p> <p>A. At no time shall this transition period extend more than ninety (90) days beyond the expiration date of the contract.</p>
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XII. DOCUMENTS PROVIDED IN A PROPOSAL

Documents Not Acceptable to Owner	The Owner WILL NOT accept submission documents requiring original authorized signatures through facsimile machines, email, etc.)
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XIII. GENERAL REQUIREMENTS/INFORMATION

Defective/Inferior Materials or Services	<p>A. The contractor shall guarantee any or all materials and services supplied as part of a contract awarded under these specifications.</p> <p>a. Materials or services that in the opinion of the Owner are defective or inferior items shall be replaced to the satisfaction of the Owner at the expense of the contractor.</p>
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**Mount Holly Municipal Utilities Authority
CONTRACT: 2026-14 – AUDITOR**

CHECKLIST

SUBMISSION DATE: TUESDAY, JUNE 9, 2026, AT 10:00 A.M. PREVAILING TIME.

The following items, as indicated below (X), shall be provided with the receipt of sealed proposals:

Required by OWNER		Initial each required entry and if required submit the item
X	Bid Proposal Form: Solicitor Fee Structure	
X	Biographical Information	
X	Summary	
X	Statement of Ownership Disclosure	
X	Disclosure of Investigations and Actions Involving Service Entity	
X	Reference Information	
X	Conflict of Interest Certification	
X	Non-Collusion Affidavit	
X	Proof of New Jersey Business Registration	
X	Acknowledgement of Receipt of Addenda, Corrections, Additions or Deletions	
X	Insurance Requirement Acknowledgement	
X	Affirmative Action Compliance Notice	
X	Affirmative Action Acknowledgement	
X	Political Contribution Disclosure	
X	Disclosure of Investment Activities in Iran	
X	Disclosure of Prohibited Activities in Russia or Belarus	

MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY
CONTRACT: 2026-14 - AUDITOR
PROPOSED FEE PROPOSAL

The undersigned proposes to furnish and deliver the goods/services pursuant to the RFP and made part hereof.

The proposed fee schedule includes attendance at regular monthly or special meetings, or other basis for compensation requested. Where applicable, indicate hourly rates, monthly or other retainers, per project fees, or such other manners of compensation deemed appropriate to the services to be provided.

Please provide the hourly rate for services in each of the following categories. Any fee or cost not specified in your proposal is to be included within the hourly fee proposed.

**NAME OF EMPLOYEE WHO WILL PERFORM SERVICES **	TITLE	HOURLY RATE

*****Please use additional sheets if necessary.***

The undersigned hereby declares that they have carefully examined the requirements of the specifications contained herein and propose the following for the position of Auditor, and if awarded the contract, he/she will provide services as required by the specifications.

TOTAL COST, where appropriate, total cost "not to exceed" amount:

In numbers \$ _____ In words: \$ _____

 Company Name

 Federal I.D. # or Social Security #

 Address

 Signature and Title of Authorized Agent

 Print or Type Name

 Date

 Telephone Number

 Fax Number

 E-mail

****Please include on a separate sheet the definition of the title used. The definition should reference the level of experience, licensing, and/or parameters of the job function.**

This contract will be awarded by price and other factors considered.

**Mount Holly Municipal Utilities Authority
 CONTRACT: 2026-14 – AUDITOR
BIOGRAPHICAL INFORMATION**

(Print or Type)

Name of Proposer Firm:			
Address:	City:	State:	Zip:

In connection with the above-named company, I hereby make representations and supply information about myself as hereinafter set forth. (Attach addendum or separate sheet if space hereon if insufficient to answer any question fully)
 IF ANSWER IS "NONE" or "NO EXCEPTION", SO STATE

1.	Affiant's Full Name:		
2.	Other Names Used at any Time:		
3.	Date of Birth:	Place of Birth:	
4.	Tax Identification Number:		
5.	For the last 10 years, I have lived at the following address or addresses:		
	Address:	City:	State: Zip:
	Address:	City:	State: Zip:
	Address:	City:	State: Zip:
6.	Schooling	College Graduate or Professional Degree (List)	

(ATTACH LIST OF ALL EDUCATIONAL INSTITUTIONS AND LOCATION-CITY AND STATE)

7. Member of Professional Societies or Associations (List):

8. I presently hold or have held, in the past, the following professional, occupational, and vocational licenses issued by public or governmental licensing agencies or authorities (state date license issue, issuer of license, date terminated, and reason for termination):

9.	Present Chief Occupation			
	Position or Title			
	Employer's Name			
	Address:	City:	State:	Zip:
How long in this position?		How long with this employer?	Where?	

10. Other jobs, positions, directorates concurrently held at present.

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11. Complete Employment record for Past 20 Years:

DATES	EMPLOYER & ADDRESS	TITLE

12. I control directly or indirectly or own legally or beneficially 10% or more of the outstanding capital stock (in voting power) of the following companies:

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13. If any of the above stock is pledged or hypothecated in any way, please detail fully:

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14. I have never been adjudicated as bankrupt, except as follows:

15. I have never been convicted or had a sentence imposed or suspended, or had pronouncement of a sentence suspended, or been pardoned for conviction of, or pleaded guilty of an nolo contendere to an information an indictment charging a felony for embezzlement, theft or larceny, mail fraud, or violating any corporate securities statute or any insurance law, nor have I been the subject of a cease and desist order or consent order of any federal or state regulatory agency, except as follows:

16. During the last 10 years, I have not been refused a professional, occupational vocational license by any public or governmental licensing agency or regulatory Authority, nor has such a license held by me ever been suspended or revoked, except as follows:

17. I have never been an officer, director, key employee or controlling stockholder of a company which, while I occupied any such position or capacity with respect to it, became insolvent or was enjoined from or ordered to cease and desist from violating any law, except as follows:

18. Neither I nor any company of which I was an officer, director or key management person at the time has ever been subject to any civil action alleging fraud, negligence, or violation of any applicable racketeering statutes (state or federal), except as follows:

I hereby certify under penalty of perjury that the foregoing statements are true and correct to the best of my knowledge and belief and further, by the affixation of my signature herein, I hereby give my certified consent to the New Jersey Department of Insurance to verify the representations and information supplied in response to all questions on the biographical data form, with any Federal, State, municipal or other agency which may have knowledge and/or information thereon.

Signature and Title of Authorized Agent

Print or Type Name

Date

State of _____

County of _____

_____ personally appeared before me, personally known to me, who, being duly sworn, deposes and says that affiant executed the above instrument and that the statements and answers contained therein are true and correct to the best of affiant's knowledge and belief.

Subscribed and sworn to before me this ____ day of _____, 2026.

Notary Public: _____ My Commission Expires: _____

(SEAL)

Mount Holly Municipal Utilities Authority
CONTRACT: 2026-14 – AUDITOR
YEAR 2025 SUMMARY

Firm Name:		
Address:	City:	State: Zip:
Phone:	Email:	Fax:

1.) List all parties having or deriving any interest, right or benefit in the firm.

NAME	ADDRESS	INTEREST

2.) List all senior officers and directors who will be servicing the OWNER, along with a description of professional qualifications.

NAME	TITLE	QUALIFICATIONS

I hereby certify that the information in this disclosure is accurate and complete and that I am an officer of the firm and am duly authorized to supply this information on behalf of the firm.

 Signature and Title of Authorized Agent

 Print or Type Name

 Date

Mount Holly Municipal Utilities Authority
CONTRACT: 2026-14 – AUDITOR
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:

Address:

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

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

Part II

- The list below contains the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be. **(COMPLETE THE LIST BELOW IN THIS SECTION)**
OR
 No one stockholder in the corporation owns 10 percent or more of its stock, of any class, or no individual partner in the partnership owns a 10 percent or greater interest therein, or no member in the limited liability company owns a 10 percent or greater interest therein, as the case may be. **(SKIP TO PART IV)**

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

Name of Individual or Business Entity	Address

Part III Disclosure of 10% or greater ownership in the Stockholders , Partners, or LLC Members listed in Part II

*If a bidder has a direct or indirect parent entity which is publicly traded, and any person holds a 10 percent or greater beneficial interest in the publicly traded parent entity as of the last annual federal Security and Exchange Commission (SEC) or foreign equivalent filing, ownership disclosure can be met by providing links to the website(s) containing the last annual filing(s) with the federal Securities and Exchange Commission (or foreign equivalent) that contain the name and address of each person holding a 10% or greater beneficial interest in the publicly traded parent entity, along with the relevant page numbers of the filing(s) that contain the information on each such person. **Attach additional sheets if more space is needed.***

Website (URL) containing the last annual SEC (or foreign equivalent) filing	Page #'s

Please list the names and addresses of each stockholder, partner or member owning a **10 percent or greater interest** in any corresponding corporation, partnership and/or limited liability company (LLC) listed in Part II **other than for any publicly traded parent entities referenced above**. The disclosure shall be continued until names and addresses of every non-corporate stockholder, and individual partner, and member exceeding the 10 percent ownership criteria established pursuant to N.J.S.A. 52:25-24.2 has been listed. **Attach additional sheets if more space is needed.**

Stockholders:

Name:	Name:
Home Address:	Home Address:
Name:	Name:
Home Address:	Home Address:
Name:	Name:
Home Address:	Home 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 I am 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 Mount Holly Municipal Utilities Authority to notify the Mount Holly Municipal Utilities Authority 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 Mount Holly Municipal Utilities Authority to declare any contract(s) resulting from this certification void and unenforceable.

Signature & Title of Authorized Agent

Printed or Type Name

Date

Subscribed and sworn to before me this ___ day of _____, 2026

Notary Public of: _____

My Commission Expires: _____

SEAL

MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY
CONTRACT: 2026-14 – AUDITOR
DISCLOSURE OF INVESTIGATIONS AND OTHER ACTIONS INVOLVING THE PROPOSER

The proposer shall provide a detailed description of any investigation, litigation, including administrative complaints or other administrative proceedings, involving any public-sector client during the past five (5) years including the nature and status of the investigation, and, for any litigation, the caption of the action, a brief description of the action, the date of inception, status, and, if applicable, disposition.

There are NO current ongoing investigations, nor were there any pursuant to the five-year period indicated above.

Signature of Authorized Agent and Title	Print or Type Name	Date
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PART 1: Please complete the following by checking either "YES" OR "NO". Refer to the people listed on the Ownership Disclosure Form when answering.

QUESTION	YES	NO
Has any person listed on the Ownership Disclosure Form or attachments ever been:		
Arrested, charged, indicted, or convicted in a criminal or disorderly persons matter by the State of New Jersey (or political subdivision thereof), or by any other state or the U.S. Government?		
Suspended, debarred, or otherwise declared ineligible by any government agency from bidding or contracting to provide services, labor, materials, or supplies?		
Denied any license, permit or similar authorization required to engage in the work herein applied for, or has any such license, permit or similar authorization been revoked by any agency of federal, state, or local government?		
Does any person listed on the Ownership Disclosure Form, or its attachments have current or pending criminal matters or debarment proceedings in which the firm and/or its officers and/or managers are involved?		

If "YES" please provide the requested information in Part 2

PART 2: Please provide the requested information for any "YES" answer from Part 1, including but not limited to administrative complaints or other administrative proceedings involving public sector clients during the past five (5) years. The description must include the nature and status of the investigation, and for any litigation, the caption of the action, a brief description of the action, the date of inception, status, and if applicable, disposition.

Name:	Title:
Address (street, city, state, zip):	
Contact Name:	Phone No.:
Case Captioned:	
Inception of the Investigation:	Current Status: <input type="checkbox"/> Closed <input type="checkbox"/> Open/Ongoing <input type="checkbox"/> In litigation <input type="checkbox"/> Other: _____
Summary of Investigation:	

Name:	Title:
Address (street, city, state, zip):	
Contact Name:	Phone No.:
Case Captioned:	
Inception of the Investigation:	Current Status: <input type="checkbox"/> Closed <input type="checkbox"/> Open/Ongoing <input type="checkbox"/> In litigation <input type="checkbox"/> Other: _____
Summary of Investigation:	

CERTIFICATION

I, the undersigned, certify that I am authorized to execute this certification on behalf of the Bidder/Proposer, and that the foregoing information and any attachments hereto, to the best of my knowledge, are true and complete. I acknowledge that the Mount Holly Municipal Utilities Authority (Owner) is relying on the information contained herein, and that the Bidder/Proposer is under a continuing obligation from the date of this certification through the completion of any contract(s) with the Owner to notify the Owner 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 Owner, permitting the Owner to declare any contract(s) resulting from this certification void and unenforceable.

Signature and Title of Authorized Agent	Print or Type Name	Date
Telephone: _____	Fax Number: _____	E-mail: _____

MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY
CONTRACT: 2026-14 – AUDITOR
CLIENT REFERENCE FORM

Proposers shall provide a list of three (3) clients for whom similar services have been provided.

Reference 1

Client Name:			
Address:		City:	State: Zip:
Contact Person:		Title:	
Telephone:	Fax:	Email:	
Briefly describe the services provided by the Proposer:			

The Contact Person should be the responsible party of the Client for which the work was performed and have comprehensive knowledge about the project and the Proposer's role and responsibilities within the project.

Reference 2

Client Name:			
Address:		City:	State: Zip:
Contact Person:		Title:	
Telephone:	Fax:	Email:	
Briefly describe the services provided by the Proposer:			

The Contact Person should be the responsible party of the Client for which the work was performed and have comprehensive knowledge about the project and the Proposer's role and responsibilities within the project.

Reference 3

Client Name:			
Address:		City:	State: Zip:
Contact Person:		Title:	
Telephone:	Fax:	Email:	
Briefly describe the services provided by the Proposer:			

The Contact Person should be the responsible party of the Client for which the work was performed and have comprehensive knowledge about the project and the Proposer's role and responsibilities within the project.

Signature and Title of Authorized Agent

Print or Type Name

Date

MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY
CONTRACT: 2026-14 – AUDITOR
CONFLICT OF INTEREST CERTIFICATION

The undersigned certifies to the Mount Holly Municipal Utilities Authority (“OWNER”), County of Burlington, State of New Jersey that in performing services to the Owner he/she is aware of no circumstance that would constitute a conflict of interest, financial or otherwise, between himself/herself (or his/her firm) and the interests of the Owner. The undersigned certifies that he/she has made a search of his/her firm’s client base and has executed this certification after such search.

The undersigned acknowledges this is a continuing certification and shall remain in effect for the term of the services contained in the solicited request for proposal. I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are false, the Owner is free to terminate any professional service agreement entered with the undersigned and/or his or her firm.

COMPANY/FIRM: _____

Signature and Title of Authorized Agent

Print or Type Name

Date


MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY
CONTRACT: 2026-14 – AUDITOR
PROOF OF BUSINESS REGISTRATION


N.J.S.A. 52:32-44 requires that each proposer submit proof of business registration with the proposal. Proof of registration shall be a copy of the proposer’s Business Registration Certificate (BRC). A BRC is obtained from the New Jersey Division of Revenue.

Information on obtaining a BRC is available on the internet at www.nj.gov/nibgs or by phone at (609) 292-1730. 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) Prior to receipt of final payment from a contracting agency, a contractor must submit to the contacting agency an accurate list of all subcontractors or attest that none was used;
- 3) 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 not properly provided or maintained under a contract with a contracting agency. Information on the law and its requirements is available by calling (609) 292-1730.

 <p style="margin: 0;">STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE</p>										
<table style="width: 100%; border: none;"> <tr> <td style="width: 20%;">Taxpayer Name:</td> <td>TAX REG TEST ACCOUNT</td> </tr> <tr> <td>Trade Name:</td> <td></td> </tr> <tr> <td>Address:</td> <td>847 ROEBLING AVE TRENTON, NJ 08611</td> </tr> <tr> <td>Certificate Number:</td> <td>1093907</td> </tr> <tr> <td>Date of Issuance:</td> <td>October 14, 2004</td> </tr> </table>	Taxpayer Name:	TAX REG TEST ACCOUNT	Trade Name:		Address:	847 ROEBLING AVE TRENTON, NJ 08611	Certificate Number:	1093907	Date of Issuance:	October 14, 2004
Taxpayer Name:	TAX REG TEST ACCOUNT									
Trade Name:										
Address:	847 ROEBLING AVE TRENTON, NJ 08611									
Certificate Number:	1093907									
Date of Issuance:	October 14, 2004									
<p>For Office Use Only:</p> <p>20041014112823533</p>										

<p style="margin: 0;">STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE</p>		DEPARTMENT OF TREASURY DIVISION OF REVENUE PO BOX 292 TRENTON, N.J. 08646-0292
TAXPAYER NAME:	TRADE NAME:	
TAXPAYER IDENTIFICATION#:	SEQUENCE NUMBER:	
ADDRESS:	ISSUANCE DATE:	
EFFECTIVE DATE:	 <small>Acting Director</small>	
FORM-BRC(08-01)	This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.	

MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY

CONTRACT: 2026-14 – AUDITOR

ACKNOWLEDGEMENT OF RECEIPT OF ADDENDA, CORRECTIONS, ADDITIONS AND DELETIONS FORM

Addendum Number	Dated	Acknowledge Receipt (Initials)

I, _____ of the firm _____
hereby acknowledge that any corrections, additions and/or deletions have been initialed and dated in this Proposal.

Signature and Title of Authorized Agent

Print or Type Name

Date

NO ADDENDA WERE RECEIVED

I, _____ of the firm _____
hereby acknowledge that to the best of my knowledge, I/WE were not notified or informed of or received any documentation of corrections, additions and/or deletions made to this Proposal.

Signature and Title of Authorized Agent

Print or Type Name

Date

MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY
CONTRACT: 2026-14 – AUDITOR
INSURANCE REQUIREMENTS AND ACKNOWLEDGEMENT FORM

Certificate(s) of Insurance shall be filed with the OWNER upon award of contract by the Owner's Board.

The minimum amount of insurance to be carried by the successful contractor shall be as follows:

Professional Liability Insurance

Limits shall be a minimum of \$1,000,000.00 for each claim and \$1,000,000.00 aggregate each policy period.

***The Contractor shall not commence operations until OWNER has been furnished with the original certificate(s) of Insurance and certified original copies of endorsements or policies of insurance in the amounts and/or minimum coverage(s) required in this proposal.**

Acknowledgement of Insurance Requirement:

COMPANY/FIRM: _____

Signature and Title of Authorized Agent

Print or Type Name

Date

MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY
CONTRACT: 2026-14 – AUDITOR
AFFIRMATIVE ACTION COMPLIANCE NOTICE
N.J.S.A. 10:5-31 and N.J.A.C. 17:27
GOODS AND SERVICES CONTRACTS (INCLUDING PROFESSIONAL SERVICES)

This form is a summary of the successful contractor's requirement to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27-1 et seq.

The successful contractor shall submit to the public agency, after notification of award but prior to execution of this contract, one of the following three documents as forms of evidence:

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

The successful contractor may obtain the Affirmative Action Employee Information Report (AA302) from the OWNER during normal business hours.

The successful contractor(s) must submit the copies of the AA302 Report to the Division of Contract Compliance and Equal Employment Opportunity in Public Contracts (Division). The Public Agency copy is submitted to the OWNER, and the Vendor copy is retained by the contractor.

The undersigned contractor certifies that he/she is aware of the commitment to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27.1 et seq. and agrees to furnish the required forms of evidence.

The undersigned contractor further understands that his/her bid shall be rejected as non-responsive if said contractor fails to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27-1 et seq.

COMPANY/FIRM: _____

Signature and Title of Authorized Agent

Print or Type Name

Date

**MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY
CONTRACT: 2026-14 – AUDITOR
AFFIRMATIVE ACTION ACKNOWLEDGEMENT**

The following questions must be answered by all proposers:

1. Do you have a federally approved or sanctioned Affirmative Action Program?

YES _____ NO _____

If yes, please submit a copy of such approval.

2. Do you have a State Certificate of employee Information Report approval?

YES _____ NO _____

If yes, please submit a photo static copy of such approval.

The undersigned proposer certifies that he/she is aware of the commitment to comply with the requirements of P.L. 1975, Chapter 127, and agrees to furnish the required documentation pursuant to law.

COMPANY/FIRM: _____

Signature and Title of Authorized Agent

Print or Type Name

Date

Note: A proposal must be rejected as non-responsive if the proposer fails to comply with the requirements of P.L. 1975, chapter 127, within the time frame stipulated.

MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY
CONTRACT: 2026-14 – AUDITOR
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
GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS

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

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality, or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will take affirmative action to ensure that such applicants are recruited and employed, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality, or sex. Such action shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor, where applicable, will send to each labor union or representative or workers with which it has a collective bargaining agreement or other contract or understanding, a notice, to be provided by the agency contracting officer advising the labor union or workers' representative of the contractor's commitments under this act and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to employ minority and women workers consistent with the applicable county employment goals established in accordance with N.J.A.C. 17:27-5.2, or a binding determination of the applicable county employment goals determined by the Division, pursuant to N.J.A.C. 17:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, labor unions, that it does not discriminate on the basis of age, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job-related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

In conforming with the applicable employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

- Letter of Federal Affirmative Action Plan Approval
- Certificate of Employee Information Report
- Employee Information Report Form AA302

The contractor and its subcontractors shall furnish such reports or other documents to the Div. of Contract Compliance & EEO as may be requested by the office from time to time to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Div. of Contract Compliance & EEO for conducting a compliance investigation pursuant to **Subchapter 10 of the Administrative Code at N.J.A.C. 17:27.**

COMPANY/FIRM: _____

Signature and Title of Authorized Agent

Print or Type Name

Date

**MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY
C. 271 POLITICAL CONTRIBUTION DISCLOSURE FORM**

Required Pursuant to N.J.S.A. 19:44A-20.26

**List of Agencies with Elected Officials Required for Political Contribution Disclosure
N.J.S.A. 19:44A-20.26**

County Name: BURLINGTON

Body		Elected Officials		
State		Governor		
Legislative District #s: 6, 7, 8, 9, & 12		State Senator and two members of the General Assembly per district		
County	County Commissioners {County Executive}	County Clerk	Sheriff	Surrogate
Municipalities	Mayor and members of governing body, regardless of title			
	Bass River Township	Fieldsboro Borough	Palmyra Borough	
	Beverly City	Florence Township	Pemberton Borough	
	Bordentown City	Hainesport Township	Pemberton Township	
	Bordentown Township	Lumberton Township	Riverside Township	
	Burlington City	Mansfield Township	Riverton Borough	
	Burlington Township	Maple Shade Borough	Shamong Township	
	Chesterfield Township	Medford Lakes Borough	Southampton Township	
	Cinnaminson Township	Medford Township	Springfield Township	
	Delanco Township	Moorestown Township	Tabernacle Township	
	Delran Township	Mount Holly Township	Washington Township	
	Eastampton Township	Mount Laurel Township	Westampton Township	
	Edgewater Park Township	New Hanover Township	Willingboro Township	
	Evesham Township	North Hanover Township	Woodland Township	
			Wrightstown Borough	
Boards of Education	Members of the Board			
	Bass River Township	Hainesport Township	Palmyra Borough	
	Beverly City	Lenape Regional	Pemberton Borough	
	Bordentown Regional	Lumberton Township	Pemberton Township	
	Burlington City	Mansfield Township	Rancocas Valley Regional	
	Burlington Township	Maple Shade Township	Riverside Township	
	Chesterfield Township	Medford Lakes Borough	Riverton	
	Cinnaminson Township	Medford Township	Shamong Township	
	Delanco Township	Moorestown Township	Southampton Township	
	Delran Township	Mount Holly Township	Springfield Township	
	Eastampton Township	Mount Laurel Township	Tabernacle Township	
	Edgewater Park Township	New Hanover Township	Washington Township	
	Evesham Township	North Hanover Township	Westampton	
Florence Township	Northern Burlington Regional	Willingboro Township		
		Woodland Township		
Fire Districts	Board of Fire Commissioners			
	Beverly City Fire District No. 1		Edgewater Park Township Fire District No. 1	
	Bordentown Township Fire District No. 1		Evesham Township Fire District No. 1	
	Bordentown Township Fire District No. 2		Florence Township Fire District No. 1	
	Burlington Township Fire District No. 1		Moorestown Township Fire District No. 1	
	Chesterfield Township Fire District No. 1		Moorestown Township Fire District No. 2	
	Cinnaminson Township Fire District No. 1		Mount Holly Township Fire District No. 1	
	Delanco Township Fire District No. 1		Mount Laurel Township Fire District No. 1	
	Delran Township Fire District No. 1		Riverside Township Fire District No. 1	
Eastampton Township Fire District No. 1		Tabernacle Township Fire District No. 1		

MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY

STATE OF NEW JERSEY -- DIVISION OF PURCHASE AND PROPERTY DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN

Quote Number: _____

Bidder/Offeror: _____

PART 1: CERTIFICATION

BIDDERS MUST COMPLETE PART 1 BY CHECKING EITHER BOX

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 or entity, nor any of its parents, subsidiaries, or affiliates, is identified on the 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 Division's website at

<http://yywww.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 Director finds a person or entity to be in violation of law, s/he shall act 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 above 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 above, or I am an officer or representative of the entity listed above and am authorized to make this certification on its behalf. I will skip Part 2 and sign and complete the Certification below.

I am unable to certify the above because the 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 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 INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN

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

EACH BOX WILL PROMPT YOU TO PROVIDE INFORMATION RELATIVE TO THE ABOVE QUESTIONS. PLEASE PROVIDE THOROUGH ANSWERS TO EACH QUESTION. ADDITIONAL ENTRIES CAN BE ADDED ON ANOTHER SHEET IF REQUIRED AS PART ON THIS DISCLOSURE.

Name: _____ Relationship to Proposer: _____

Description of Activities: _____

Duration of Engagement: _____ Anticipated Cessation Date: _____

Proposer Contact Name: _____ Contact Phone Number _____

Name: _____ Relationship to Proposer: _____

Description of Activities: _____

Duration of Engagement: _____ Anticipated Cessation Date: _____

Proposer Contact Name: _____ Contact Phone Number _____

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; that the State of New Jersey is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the completion of any contracts with the 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, 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 State, permitting the State to declare any contract(s) resulting from this certification void and unenforceable.

Signature of Authorized Agent and Title _____

Print or Type Name _____

Date _____

Do not enter PIN as a signature.

Mount Holly Municipal Utilities Authority

CONTRACT: 2026-14 – AUDITOR

STATE OF NEW JERSEY DISCLOSURE OF PROHIBITED ACTIVITIES IN RUSSIA OR BELARUS

Bid Spec. #:	Quote #:	RFP #:
---------------------	-----------------	---------------

CHECK THE APPROPRIATE BOX:

· I, the undersigned, am authorized by the person or entity seeking to enter 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 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 Activities:

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.

Vendor Name & Address:		
Authorized Agent's:	Email:	Office #:
	Office #:	Fax #:

Signature and Title of Authorized Agent

Print or Type Name

Date

<p>1 Engaged in prohibited activities in Russia or Belarus¹ means:</p> <p>(1) Companies in which the Government of Russia or Belarus has any direct equity share</p> <p>(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</p> <p>(3) Being headquartered in Russia or having its principal place of business in Russia or Belarus, or</p> <p>(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.</p>

**MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY
CONTRACT: 2026-14 – AUDITOR
BIDDER AFFIDAVIT**

AUDITOR

I HEREBY CERTIFY THE INFORMATION CONTAINED IN THIS PROPOSAL IS CORRECT AND ACCURATE TO MY PERSONAL KNOWLEDGE. I AM MAKING THIS CERTIFICATION IN GOOD FAITH.

CERTIFYING OFFICIAL:

Signature and Title of Authorized Agent Print or Type Name Date

Subscribed and sworn before me this _____ day of _____, 2026.

Notary Public of: _____ My Commission Expires: _____

SEAL