

CC2022-07 EMERGENCY SHELTER FOR SINGLE INDIVIDUALS FOR THE DEPARTMENT OF HEALTH AND HUMAN SERVICES FOR A PERIOD OF ONE (1) YEAR WITH AN OPTION TO EXTEND TWO (2) ONE YEAR EXTENSIONS - PROPOSAL OPENING DATE 12-7-2022 AT 11:00AM

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NUMBER OF RESPONDENTS:	1
NAME OF BIDDER	RESCUE MISSION OF TRENTON
ADDRESS	98 CARROLL STREET
CITY, STATE, ZIP	TRENTON, NEW JERSEY 08609
CONTACT NAME	BARRETT YOUNG
TELEPHONE	609-396-2183
FAX	609-695-5199
E-MAIL	SJM@RMTRENTON.ORG
STATEMENT OF OWNERSHIP DISCLOSURE	INCLUDED
EQUAL EMPLOYMENT OPPORTUNITY	INCLUDED
REQUIRED EVIDENCE EEO/AFFIRMATIVE ACTION REGULATIONS QUESTIONNAIRE	INCLUDED
ACKNOWLEDGEMENT OF RECEIPT OF ADDENDA	INCLUDED
NJ BUSINESS REGISTRATION CERTIFICATE	INCLUDED
NON-COLLUSION AFFADAVIT	INCLUDED
AMERICANS WITH DISABILITIES ACT OF 1990 LANGUAGE	INCLUDED
ETHICS COMPLAINT DISCLOSURE	INCLUDED
STATE AND FEDERAL DEBARMENT CERTIFICATION	INCLUDED
CERTIFICATION AND DISCLOSURE OF POLITICAL CONTRIBUTIONS	INCLUDED
DISCLOSURE OF INVESTED ACTIVITIES IN IRAN	INCLUDED
CITY OF TRENTON RESIDENT EMPLOYMENT POLICY	INCLUDED
EIC	CERT#8228 EXP. 5/15/2025
CERTIFICATE OF INSURANCE	REQUIRED PRIOR TO AWARD OF THE CONTRACT
60-DAY EXTENSION COMPLIANCE	YES
PROVIDE PRIORITY EMERGENCY SERVICES	YES
REFERENCES	INCLUDED
W-9	N/A
EXCEPTIONS (IF ANY)	NONE
TOTAL AMOUNT FOR THE SERVICES FOR YEAR 1	\$275,000.00
OPTION TO EXTEND	
TOTAL AMOUNT FOR THE SERVICES FOR YEAR 2	\$275,000.00
TOTAL AMOUNT FOR THE SERVICES FOR YEAR 3	\$275,000.00
FATAL FLAW	NONE