

NEW JERSEY INTERGOVERNMENTAL INSURANCE FUND



REQUEST FOR PROPOSAL

**Position of: AUDITOR FOR THE
MULTI-LINE INSURANCE FUND**

Submission Deadline: October 28, 2020

**Submission Location: NJiif, Administrators
C/O Mr. John Serapiglia
Eric Nemeth, Esq.
Polaris Galaxy Insurance, LLC
777 Terrace Avenue, Suite 309
Hasbrouck Heights, New Jersey 07604**

RFP Number: 2021-003

New Jersey Intergovernmental Insurance Fund

GENERAL INFORMATION NOTICE (“GIN”)

**INTRODUCTION TO MULTI LINE INSURANCE FUND (“ML FUND”)
REQUEST for PROPOSALS (“RFP”s) FOR THE POSITION OF AUDITOR IN 2021**

AUDITOR for ML-Fund: RFP #2021-003

The NJIIF is soliciting proposals (“Proposal(s)”) for the following services for its Multi-Line Insurance Fund for 2021: **AUDITOR**. Interested Parties (“Applicant(s)”) may submit proposals for the listed position in accordance with the following requirements.

Sealed Proposals for RFP #2021-003 will be received by the New Jersey Intergovernmental Insurance Fund (NJIIF), C/O John A. Serapiglia and Eric J. Nemeth, P.C, Polaris Galaxy Insurance, LLC, 777 Terrace Ave., Suite 309, Hasbrouck Heights, NJ 07604 until 2:00 P.M. prevailing time, October 28, 2020. All proposals will be opened at 2 P.M. at the same address. In addition to submission of a physical copy of the Sealed Proposals for RFP 2021-003, the Applicant shall email a copy its Proposal contemporaneously to Maria Makos at mmakos@POLARISGALAXY.COM and Nancy DiMartino at ndimartino@ejcounsel.com.

Physical copies of Applicant’s Proposals must be provided in a sealed envelope bearing the name and address of the Applicant and shall be endorsed with the title of the Professional Service being quoted and the applicable RFP number, addressed to the “**New Jersey Intergovernmental Insurance Fund, Attention Administrators**” at the place and hour mentioned above.

Please note that Proposals received after the above date and time or which fail to comply with the Minimum Proposal Requirements set forth in this **RFP #2021-003** will not be considered.

All Proposals shall address the “Minimum Requirements for Applicant Response” in this RFP described below, but may also include such other information that the Applicant believes will assist the NJIIF in evaluating the Proposal.

The NJIIF’s selection of Applicant(s) for the above listed position will be based on review of the documentation and information submitted by the Applicant in its Proposal, as well as independent research performed by the NJIIF, such as review of references, an evaluation of performance with other governmental and non-governmental entities and/or all other available information. The NJIIF reserves the right to choose one or more professionals for each service, or to choose not to make a selection, or to post subsequent RFP’s for the same, similar or different services.



N.J. Pay to Play Compliance

Compliance with N.J.S. 19:44A-20.4 ET. Seq.

The NJIIF is a joint insurance fund whose whole operations fall within the ambit of legislation which became effective on January 1, 2006 known as the “Local Unit Pay to Play Law”, codified at N.J.S.A. 19:44A-20.4 et. Seq. (“PTP”). In Compliance with the PTP, the NJIIF has chosen to enter into contracts for its professionals in accordance with N.J.S.A. 19:44A-20.7, otherwise known as the “fair and open process”. In that regard, the NJIIF is soliciting proposals for the professional services listed herein.



**New Jersey Intergovernmental Insurance Fund
2021 RFP Background Information**

The New Jersey Intergovernmental Fund (NJIF) is a New Jersey approved self-insured, reinsured Public Entity Insurance Pool serving twenty one members statewide. The NJIF offers all New Jersey public entities multiple lines of insurance including; Workers Compensation, General Liability, Police Professional, Public Officials, Automobile, Property, Inland Marine, Boiler Machinery, Blanket Accident for Emergency employees and volunteers, Crime, Cyber and Environmental coverages.

2020 MEMBERSHIP

City of Asbury Park	Borough of Roseland
City of Bayonne	Borough of Teterboro
Township of Cedar Grove	City of Union City
Borough of Hasbrouck Heights	Union City Parking Authority
Borough of Mantoloking	Township of Verona
Township of Maplewood	Borough of Wanaque
Township of Mine Hill	County of Warren
Morristown Parking Authority	Warren County Mosquito Comm.
North Bergen Parking Authority	Township of Wayne
Borough of North Haledon	Borough of Woodland Park
Township of Old Bridge	

These public entities collectively form the following data:

Building Values:	\$1,071,808,483	Number of Vehicles:	2,054
Full Time Employees:	3,243	Part Time Employees:	1,444
Resident Population:	482,868	Seasonal:	1,287
Payroll Information:	\$285,795,868	Budget:	\$696,848.972



**REQUEST FOR PROPOSAL:
AUDITOR FOR MULTI LINE INSURANCE FUND**

RFP #2021-003

The NJIIF is soliciting Proposals for the position of Auditor to provide professional services to the Multi-Line Insurance Fund for calendar year 2021. Please note that in order to have its Proposal considered by the NJIIF, the Applicant must satisfy the minimum requirements for the position of Auditor as set forth in Section III hereof and shall demonstrate that it complies with the proposal requirements set forth in the preceding GIN and the balance of this RFP.

- I.) **Appointment of AUDITOR:** The NJIIF anticipates that the appointment of an Auditor for the Multi-Line Insurance Fund shall be for a term of one year, with two, one year extension options. The NJIIF may select individual or firm for this position, so long as they are satisfied that the Minimum Requirements set forth in Section III hereof will be satisfied. No substitution may be made without the express written consent of the NJIIF Executive Board, which consent may be withheld in its sole discretion.
- II.) **Scope of Services:** The Auditor shall perform the following minimum duties as well as those prescribed by applicable law, subject to the review and approval of the NJIIF:
- A.) Prepare certified audits of the NJIIF's Multi Line Program for submission to the NJ Department of Banking and Insurance as of December 31, 2020 and June 30, 2021.
 - B.) Attend no less than two meetings of the NJIIF, when requested by the Fund's Executive Board or Administrators.
 - C.) Provide consulting support on an hourly basis for special projects, such as the assessment of possible closure of the NJIIF's books for certain operation years.
 - D.) Acknowledge and agree that in the event it is awarded a contract for service by the NJIIF for 2021 or any portion thereof, it shall be prohibited from receiving payment, reimbursement or any form of compensation from any person for services provided by Applicant on behalf of the NJIIF or its members without first obtaining the prior, written consent of the NJIIF.
- III.) **Minimum Qualifications and Applicant Response to this Solicitation of Proposals:** In order for its proposal to be considered by the NJIIF, Applicants submitting proposals in response to this solicitation must meet the following minimum requirements:
- A.) **Minimum Qualifications:** In order to fulfill the duties of Auditor, it must be demonstrated to the satisfaction of the NJIIF that the Applicant:
 - 1.) Has served in the role of Auditor for a New Jersey joint insurance fund for no less than seven (7) years.



- 2.) Has sufficient staff to satisfy the scope of services described in Section II hereof.
 - 3.) Has a high degree of knowledge of (a) finance and operation of local government units in New Jersey, (b) workers compensation matters involving NJ governmental entities, (c) the regulations and other requirements of the NJ Dept. of Banking and Insurance and NJDCA pertaining to joint insurance funds, and (d) financial matters relating to joint insurance funds such as budgets, assessments, monitoring reports, investments, audit controls, fund year accounting and closed year accounting.
 - 4.) Is a Certified Public Accountant licensed to practice in the State of New Jersey.
 - 5.) Carries professional liability insurance in an amount and with a carrier reasonably satisfactory to the NJIIF.
- B.) Minimum Requirements for Applicant Response to the NJIIF's Solicitation of Proposals: In order to have its proposal by the NJIIF, Applicants shall complete and submit Exhibits A through F attached hereto. In addition each Applicant shall provide the following minimum information in its proposal:
- 1.) Applicant's New Jersey Business Registration Certificate
 - 2.) A Statement that the Applicant complies with N.J.S.A. 10:5-1 et. seq. (Law Against Discrimination) and P.L. 1975, C. 127 (Affirmative Action). (Exhibit A)
 - 3.) Completed Stockholder Disclosure Certification (Exhibit B)
 - 4.) Non-Collusion Affidavit (Exhibit C)
 - 5.) Respondent's Information Sheet (Exhibit D)
 - 6.) Proposed cost to provide the services set forth in Section II hereof during 2021. If the services are to be billed on an hourly basis, the proposal shall include the hourly rates to be charged as well as the cost of all estimated disbursements. (Please use the NJIIF proposal form, Exhibit E)
 - 7.) Proposals for second and third years of services should the NJIIF elect to exercise options to contract with the Applicant for calendar years 2022 and 2023.(Exhibit E)
 - 8.) In submitting its response to this RFP, the Applicant shall make the affirmative representation that other than as set forth in Schedule FD (Exhibit F) within the last twelve months, it has received no payment, compensation or reimbursement in any form from any person, company or entity for the referral or assignment of work, business or services provided to or on behalf of the NJIIF or any of its members. Applicant shall complete Schedule FD providing therein a detailed list of all individuals that have paid or reimbursed Applicant during the past twelve months and the amounts of all such payments where such payment(s), compensation or reimbursement was/were derived from, based upon or related to the NJIIF.
 - 9.) Full name, Federal I.D. number, business address, phone and fax number of entity or person submitting the proposal.



- 10.) List of all individuals who, if selected, will provide services to the NJIIF, along with a summary of the post-high school education and licenses held by each person.
- 11.) Number of years each person providing services has worked for New Jersey joint insurance funds, the identities of those funds and the services provided, including name, title and phone number of the appropriate contact person within the entity.
- 12.) A description of the services to be provided in addition to those set forth in Section II hereof.
- 13.) A copy or description of a current professional liability insurance policy maintained covering the individual or individuals providing service to the NJIIF.
- 14.) The name and address of at least three (3) references consisting of clients for which the Applicant has provided services, in the past five (5) years.
- 15.) A list and description of all professional liability claims, if any, brought against the Applicant during the past five (5) years.
- 16.) A copy or description of your Disaster Recovery Plan.
- 17.) A list of all subcontractors or vendors through which Applicant intends on providing service to the NJIIF.
- 18.) The Applicant shall provide the NJIIF with five (5) copies of its proposal.
- 19.) Applicants are encouraged to submit any supplemental information deemed important to the evaluation of the proposal and the reason why it should be considered in the NJIIF's evaluation thereof.

IV.) **Basis for Award of Professional Services Contract:** The NJIIF shall award the agreement for the professional services described herein at its sole discretion, based upon numerous factors, including by way of example and not limitation, Applicant qualifications, merit, proposal cost, references and experience with issues confronting the NJIIF. The NJIIF reserves the right to select an Applicant and negotiate with said Applicant the compensation to be paid for its services and other terms of the contract pursuant to which said services will be rendered to the Fund. A final award shall be made by Resolution adopted by the Executive Board of the NJIIF based upon the proposal made to the NJIIF that has been determined to be **the most advantageous to the NJIIF, price and other factors considered.** The specific criteria will include, by way of example and not limitation:

- 1.) Responsiveness to this RFP.
- 2.) Organization of the proposal.
- 3.) Experience, reputation, and qualifications of principal assigned to service the NJIIF.
- 4.) History and experience with similar types of governmental entities.
- 5.) Knowledge of the operations of JIF's, Pools, the NJIIF and the services to be provided.
- 6.) Favorable references from public sector clients for which similar services provided.
- 7.) Proposed annual and hourly fee as applicable.



- 8.) Supplemental information provided as part of the proposal.
- 9.) Other factors the NJIIF Executive Board deems to be in the best interest of the NJIIF.
- 10.) The NJIIF reserves the right to reject any proposal(s), to waive any irregularities or technicalities and to accept the proposal, as same may be subsequently negotiated and deemed most advantageous to the NJIIF.
- 11.) All awards are and shall be subject to the availability of funds.



Exhibit A

**AFIRMATIVE 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 bidder's requirement to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27.

The successful bidder 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:

(a) 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);

OR

(b) A photocopy of a Certificate of Employee Information Report approval, issued in accordance with N.J.A.C. 17:27-4;

OR

(c) 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 undersigned Applicant 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 and agrees to furnish the required forms of evidence.

The undersigned Applicant 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.

COMPANY: _____ SIGNATURE: _____

PRINT NAME: _____ TITLE: _____ DATE: _____



N.J.S.A. 10:5-31 and N.J.A.C. 17:27
MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE
Goods, Professional Services and General Service Contracts
(Mandatory Affirmative Action Language)

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 or sex. Except with respect to affectional or sexual orientation, 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 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 for the 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 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 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 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 and its subcontractors shall furnish such reports or other documents to the Division of Contract Compliance and EEO as may be requested by the Division 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 Contract Compliance & EEO for conducting a compliance investigation pursuant to Subchapter 10 of the Administrative Code at N.J.A.C. 17:27.



Exhibit B

STOCKHOLDER DISCLOSURE CERTIFICATION

Name of Business _____

I certify that the list below contains the names and home addresses of all stockholders holding 10% or more of the issued and outstanding stock of the undersigned.

OR

I certify that no one stockholder owns 10% or more of the issued and outstanding stock of the undersigned.

Check the box that represents the type of business organization:

- Partnership Corporation Sole Proprietorship
Limited Partnership Limited Liability Corporation Limited Liability Partnership
Subchapter S Corporation

Sign and notarize the form below, and, if necessary, complete the stockholder list below.

(copy if need more space)

Stockholders:

Name: _____

Name: _____

Home Address: _____

Home Address: _____

Name: _____

Name: _____

Home Address: _____

Home Address: _____

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

(Affiant)

(Notary Public)

(Print name & title of affiant)

My Commission expires:

(Corporate Seal)



Exhibit C

NON-COLLUSION AFFIDAVIT

State of New Jersey
County of _____

ss:

I, _____ residing in _____
(name of affiant) (name of municipality)
in the County of _____ and State of _____ of
full age, being duly sworn according to law on my oath depose and say that:

I am _____ of the firm of _____
(title or position) **(name of firm)**
_____ the bidder making this Proposal for the bid

entitled _____, and that I executed the said proposal with
(title of bid proposal)

full authority to do so 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 named project; and that all statements contained in said proposal and in this affidavit are true and correct, and made with full knowledge that the _____ 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 _____.

Subscribed and sworn to

before me this day _____ of

Signature

_____, 2 _____

(Type or print name of affiant)

Notary Public

My commission expires: _____
(Seal)

Exhibit D
RESPONDENTS INFORMATION SHEET

Please fill in the following information and submit with your proposal:

COMPANY NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

FAX NUMBER: _____

FEDERAL I.D. NUMBER: _____

NAME OF PERSON PREPARING BID: _____

PHONE NUMBER _____ EXT. _____

CONTACT PERSON FOR CORRESPONDANCE REGARDING THE PROPOSAL

NAME: _____

ADDRESS: _____

PHONE: _____ FAX NUMBER: _____

E-MAIL ADDRESS _____

PROJECT COORDINATOR

COMPANY NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

CELL PHONE NUMBER: _____

FAX NUMBER: _____

PERSON TO CONTACT: _____

EMAIL ADDRESS: _____



Exhibit E

NJIIF PROPOSAL FORM

Name: _____

Signature: _____

Address: _____

Phone: _____ Fax: _____

Title/Number of RFP - _____

The following as applicable:

	Year 1	Year 2	Year 3
Flat/Annual rate for services outlined herein	\$ _____	\$ _____	\$ _____
Hourly Rate for providing services outlined herein ...	\$ _____	\$ _____	\$ _____
Hourly Rate for additional services/personnel:	\$ _____	\$ _____	\$ _____
Description: _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

Any other anticipated expenses/costs:

Description: _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____



