

CITY COUNCIL

The City of Orange Township, New Jersey

DATE May 16, 2023

NUMBER 217-2023

TITLE: A RESOLUTION AUTHORIZING AN ADDENDUM TO RESOLUTION #335-2022 TO INCREASE THE CONTRACT AMOUNT FOR ADDITIONAL EMERGENCY PLUMBING SERVICES TO CITY OWNED BUILDING FROM MAGIC TOUCH CONSTRUCTION CO., INC., 59 W. FRONT STREET, KEYPORT, NEW JERSEY 07735 IN THE AMOUNT NOT TO EXCEED \$1,129.72.

WHEREAS, there exist a need for additional emergency plumbing services to City owned buildings; and

WHEREAS, as per Resolution #335-2022, Magic Touch Construction Co., Inc. was previous authorized to provide emergency plumbing services; and

WHEREAS, the current request to increase the contract amount of \$1,129.72 is for additional emergency plumbing services to City building on "as needed" basis; and

WHEREAS, the Chief Financial Officer of the City of Orange Township has prepared the necessary Certificate of Availability of Funds, a copy of which is attached hereto and made part hereof, certifying that monies are available in the Account No. 2-01-26-310-000-528.

NOW, THEREFORE, BE IT RESOLVED that the proper officers of the City of Orange Township are hereby authorized to enter into an addendum agreement with aforesaid vendor for additional parts and repairs in an amount not to exceed \$1,129.72.

Adopted: **May 16, 2023**

Joyce L. Lanier
City Clerk

Tency A. Eason
Council President

ADDENDUM AGREEMENT

This Addendum Agreement, made and entered into this ____ day of _____ 2023, between the City of Orange Township and **Magic Touch Construction Co., Inc., 59 W. Front Street, Keyport, New Jersey 07735.**

WHEREAS, the City Council of the City of Orange Township has, by **Resolution # ____-2023** dated _____ 2023, authorized **Magic Touch Construction Co., Inc, 59 W. Front Street, Keyport, New Jersey 07735 for additional plumbing services to City owned buildings;**

NOW, THEREFORE, BE IT AGREED by and between the parties, for the mutual covenants set forth herein below:

1. The amount of the additional services shall not exceed in the amount of \$1,129.72.
2. This addendum agreement shall be effective commencing on July 1, 2022 through December 31, 2022 approved by resolution of the City Council of the City of Orange Township.
3. This addendum agreement shall not be assigned nor shall any duties under this agreement be delegated by **Magic Touch Construction Co., Inc.** without prior written consent of the City.
4. The City may terminate this Agreement upon three days notice to **Magic Touch Construction Co., Inc.** In the event that this agreement is deemed to be terminated, the City shall pay **Magic Touch Construction Co., Inc.** for those services and supplies provided as of the effective date of termination.

IN WITNESS WHEREOF, the parties hereto have set their hands and seals the day and year first above written.

ATTEST:

Joyce L. Lanier
Municipal Clerk

CITY OF ORANGE TOWNSHIP:

Dwayne D. Warren, Esq.
Mayor

ATTEST:

Print Name

Signature

Magic Touch Construction Co., Inc.

Print Name

Signature
59 W. Front Street
Keyport, New Jersey 07735

Approved as to Form and Sufficiency

Gracia R. Montilus, City Attorney

CITY COUNCIL

The City of Orange Township, New Jersey

DATE August 3, 2022

NUMBER 335-2022

TITLE: A RESOLUTION AUTHORIZING A CONTRACT TO MAGIC TOUCH CONSTRUCTION CO., INC., 59 WEST FRONT STREET, KEYPORT, NEW JERSEY 07735 TO PROVIDE EMERGENCY PLUMBING SERVICES TO ALL CITY OWNED PROPERTIES UNDER THE ESCNJ CO-OP #20/21-18 COMMENCING JULY 1, 2022 THROUGH DECEMBER 31, 2022 IN AN AMOUNT NOT TO EXCEED \$40,000.00.

WHEREAS, the City of Orange Township requires a company to provide emergency plumbing services to City owned properties; and

WHEREAS, the City of Orange Township entered into a voluntary cooperative pricing agreement with the ESCNJ; and

WHEREAS, the City of Orange Township wishes to obtain Magic Touch Construction Co., Inc. to provide emergency plumbing services to all City owned properties under the ESCNJ Co-Op #20/21-18, a copy of which is attached hereto and made part hereof; and

WHEREAS, the Chief Financial Officer of the City of Orange Township has prepared the necessary Certificate of Availability of funds, a copy of which is attached hereto, certifying that funds are available for this purpose in Account No. 2-01-26-310-000-528.

NOW, THEREFORE, BE IT RESOLVED that the proper officers of the City of Orange Township are hereby authorized to enter into an agreement with Magic Touch Construction Co., Inc. to provide emergency plumbing services to all City owned properties in an amount not to exceed \$40,000.00.

Adopted: August 3, 2022


Joyce L. Vanter
City Clerk


Tency A. Fason
Council President

*Rec'd
11.17.22*

Invoice

MAGIC TOUCH CONSTRUCTION CO., INC.
EDWARD C. BURLEW
59 W FRONT ST, KEYPORT, NJ 07735
Phone: 732-888-9625 Fax: 732-888-9624
mtc@magictouchconstruction.com
Plumbing License#7124 Fire Sprinkler License# P00526
Electrical License# 34EI01543800 HVAC#19hc00176300
***CONSTRUCTION*PLUMBING*HVAC*FIRE SPRINKLER**
SYSTEMS*UNDERGROUND UTILITY*ELECTRICAL*

Invoice #:	28834A-M
Job Location	
Colgate Park 27 New Street Orange, NJ	
Date	11/4/2022
P.O. No.	
Date of Service	11/3/2022

Customer

City of Orange Township
 29 North Day Street
 Orange, NJ 07050

Visit us at: www.magictouchplumbingheating.com

hours-Qty	Description	Unit Price	Total
6	ESCNJ T&M 20/21-18 2 Journeyman @ 3 hours each	98.51	591.06
	Subtotal		591.06
3	Antifreeze bottle gallon	39.95	119.85
1	Consumable truck stock	35.00	35.00
	5% Material Charge	5.00%	1.75
	Subtotal		156.60
1	Tow behind compressor	650.00	650.00
	Winterize colgate field house.		
	We arrived on site and we winterized both bathrooms and field house.		

Terms	Net 30
Due Date	12/4/2022

Payments/Credits	<u>\$0.00</u>	Balance Due	\$1397.66
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NOTE
 We specialize in construction, plumbing, electrical, underground utility, boilers and HVAC.

STATE OF NEW JERSEY
BUSINESS REGISTRATION CERTIFICATE

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

TAXPAYER NAME:
MAGIC TOUCH CONSTRUCTION COMPANY, INC.

TRADE NAME:

ADDRESS:
50 W FRONT ST
KEYPORT NJ 07735

SEQUENCE NUMBER:
0007270

EFFECTIVE DATE:
03/23/90

ISSUANCE DATE:
09/23/08



Director
New Jersey Division of Revenue

FORM BRC

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

10-9-08 02078-07

Request for Taxpayer Identification Number and Certification

Give Form to the
 requester. Do not
 send to the IRS.

Print or type
 See Specific instructions on page 2.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Magic Touch Construction Co., Inc.

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

3 Check appropriate box for federal tax classification; check only one of the following seven boxes:
 Individual/sole proprietor or single-member LLC
 C Corporation
 S Corporation
 Partnership
 Trust/estate
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____
 Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single member owner.
 Other (see instructions) ▶ _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)
69 West Front Street

6 City, state, and ZIP code
Keyport, NJ 07735

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number									
OR									
Employer identification number									
2	2	-	1	9	6	8	6	3	4

Part II Certification

Under penalties of perjury, I certify that:

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

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person ▶ Date ▶ **1/28/2021**

General Instructions

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

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/ffw9.

Purpose of Form

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

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest, 1098-E (student loan interest), 1098-T (tuition))
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

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

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.