

CITY COUNCIL

The City of Orange Township, New Jersey

DATE February 6, 2024

NUMBER 71-2024

TITLE: A RESOLUTION AUTHORIZING A CONTRACT FOR THE PURCHASE OF MOTOR FUEL (REGULAR UNLEADED GAS) FOR THE CITY OF ORANGE CITY OWNED VEHICLES AND EQUIPMENT THROUGH THE MORRIS COUNTY CO-OPERATIVE PRICING COUNCIL CONTRACT #1 FROM GRIFFITH-ALLIED TRUCKING, LLC, dba ALLIED OIL, 25 OLD CAMPLAIN ROAD, HILLSBOROUGH, NEW JERSEY 08844 COMMENCING JANUARY 1, 2024 THROUGH DECEMBER 31, 2024 IN THE AMOUNT NOT TO EXCEED \$300,000.00.

WHEREAS, the City of Orange Township requires a firm to provide motor fuel (regular unleaded gas) to the City of Orange Township; and

WHEREAS, the City of Orange Township entered into a cooperative pricing agreement with the Morris County Co-Operative Pricing Council , a copy of which is attached hereto and made part hereof, for the purchase of motor fuel (regular unleaded gas); 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. 4-01-26-315-000-303 contingent upon Council approval and inclusion of said item in the Temporary Budget and adopted 2024 Budget, there will be sufficient funds to contract with Griffith-Allied Trucking, LLC, dba Allied Oil.

NOW, THEREFORE, BE IT RESOLVED that the proper officers of the City of Orange Township are hereby authorized to enter into an agreement with aforesaid vendor for the purchase of motor fuel (regular unleaded gas) commencing January 1, 2024 through December 31, 2024 in an amount not to exceed \$300,000.00.

Adopted: **February 6, 2024**

Joyce L. Lanier
City Clerk

Tency A. Eason
Council President


A MIZRAH

CITY OF ORANGE TOWNSHIP
FINANCE DEPARTMENT

CERTIFICATION OF FUNDS
NEXT BUDGET

I, Nile Clements, Chief Financial Officer for the City of Orange Township, do hereby confirm that based on the Quote or RFP, RFQ, bid results or "extraordinary unspecifiable services" without competitive bids for 2024 service contract, and the resolution to be presented to the Council for approval, and contingent upon Council approval and inclusion of said item in the Temporary Budget and adopted 2024 Budget, there will be sufficient funds to contract with:

Vendor Name: Griffith-Allied Trucking, LLC.
Address: 25 Old Camplain Road

City: Hillsborough
State: New Jersey
Zip Code: 08844

Purpose: Purchase unleaded gasoline
Vendor ID: GRIFF021

Temporary Budget: \$ 75,000.00
Fund: Current Fund
Line Description EVM - Equipment & Vehicle Maint. - Motor Fuel
Account Numbers(s): CY'24 4-01-26-315-000-303

The remainder of: \$ 225,000.00
will be provided in
Fund: Current Fund
Line Description EVM - Equipment & Vehicle Maint. - Motor Fuel
Account Numbers(s): CY'24 4-01-26-315-000-303

Purchase Order # : 24-00068

Amount not to exceed: \$ 300,000.00

Division Head

Date

Nile Clements

1/8/2024

Chief Financial Officer

Date

AGREEMENT

This Agreement, made and entered into this _____ day of **January 2024**, between the City of Orange Township and **Griffith-Allied Trucking, LLC dba Allied Oil, 25 Old Camplain Road, Hillsborough, New Jersey 08844.**

WHEREAS, the City of Orange Township wishes to retain a firm for the purpose of **purchasing regular unleaded fuel under the MCCPC #1** for the City of Orange Township, as specifically set forth in the attached proposal in the amount not to exceed **\$300,000.00 for the period of January 1, 2024 through December 31, 2024.**

WHEREAS, the City of Orange Township wishes to retain **Griffith-Allied Trucking, LLC, dba Allied Oil** with offices located at **25 Old Camplain Road, Hillsborough, New Jersey 08844.**

WHEREAS, this firm and the individuals of the firm are to be retained pursuant to the Agreement as specified under the **MCCPC #1**; and

WHEREAS, the City Council of the City of Orange Township has, by **Resolution No. ____-2024** dated _____, **2024**, authorizes **Griffith-Allied Trucking, LLC, dba Allied Oil, 25 Old Camplain Road, Hillsborough, New Jersey 08844** for the purpose of **purchasing regular unleaded fuel** as specified in the attached proposal.

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

1. **Griffith-Allied Trucking, LLC, dba Allied Oil** is hereby contracted by the City of Orange Township to provide services as specified in the attached proposal.

2. This agreement shall be effective commencing on **January 1, 2024** and terminating on **December 31, 2024**.
3. This agreement shall not be assigned nor shall any duties under this agreement be delegated by **Griffith-Allied Trucking, LLC dba Allied Oil** without prior written consent of the City.
4. The validity of this agreement and its terms or provisions, as well as the rights and duties of the contracting parties, shall be governed by and construed in accordance with the laws of the State of New Jersey.
5. This agreement shall be binding on and inure to the benefit of the contracting parties and their respective heirs, executors, administrators, legal representatives, successors, and assigns when not expressly prohibited by this agreement.
6. In case any one or more of the provisions contained in this agreement shall for any reason be held to be invalid, illegal or unenforceable in any respect, the invalidity, illegality, or unenforceability shall not affect any other provision of it this agreement shall for any reason be held to be invalid, illegal, or unenforceable provision had never been contained in it.
7. This agreement constitutes the sole agreement of the contracting parties and supersedes any prior understandings or written or oral agreements between the parties respecting its subject matter.
8. All notices and other communications shall be sent by certified mail, return receipt requested, and shall be deemed to have been given when sent to the parties at their respective addresses as set forth above, unless a different

address has been selected after the execution of this agreement and has been duly communicated to the party giving notice.

9. The City may terminate this Agreement upon three days notice with **Griffith-Allied Trucking, LLC dba Allied Oil**. In the event that this agreement is deemed to be terminated, the City shall pay **Griffith-Allied Trucking, LLC dba Allied Oil** for those services provided as of the effective date of termination. This agreement is final and cannot be amended, supplemented, changed or modified without said being in writing.

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

ATTEST:

CITY OF ORANGE TOWNSHIP:

Joyce L. Lanier Date
City Clerk

Dwayne D. Warren, Esq. Date
Mayor

ATTEST:

Griffith-Allied Trucking, LLC
dba Allied Oil
25 Old Camplain Road
Hillsborough, New Jersey 08844

Print Name

Print Name

Signature Date

Signature Date

Approved as to Form and Sufficiency

Gracia R. Montilus Date
City Attorney

Request for Taxpayer Identification Number and Certification

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

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Griffith-Allied Trucking, LLC DBA

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

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. 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) ▶ **C**

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its 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 established outside the USA)

5 Address (number, street, and apt. or suite no.) See instructions.
25 OLD CAMPLAIN ROAD

6 City, state, and ZIP code
HILLSBOROUGH, NJ 08844

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 instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
or									
Employer identification number									
8	2	-	5	0	9	3	0	5	7

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 for Part II, later.

Sign Here Signature of U.S. person ▶ *[Handwritten Signature]* Date ▶ **6/21/18**

General Instructions

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

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

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 1098-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, later.

**STATE OF NEW JERSEY
BUSINESS REGISTRATION CERTIFICATE**

DEPARTMENT OF TREASURY
DIVISION OF REVENUE
PO BOX 282
TRENTON, N J 08646-0282

**TAXPAYER NAME:
GRIFFITH-ALLIED TRUCKING LLC**

**ADDRESS:
26 OLD CAMPLAIN ROAD
HILLSBOROUGH NJ 08844**

EFFECTIVE DATE:

04/23/16

**TRADE NAME:
ALLIED OIL**

**SEQUENCE NUMBER:
2227814**

**ISSUANCE DATE:
07/02/16**



Director
New Jersey Division of Revenue

(04-08), D205846V

NOTIFICATION OF AWARD

CONTRACT #1: MOTOR GASOLINE

Contract Period: (One Year) January 1, 2024 – December 31, 2024

Notes:

- Delivery must be by metered truck
- Octane rating must be not less than 87.0 for regular unleaded, 89.0 for mid-grade unleaded, and 93.0 for premium unleaded
- Members may have gasoline analyzed at an independent laboratory and, if it fails to meet the octane rating required by the specifications, the expense of such testing may be deducted from money due or owed to vendor
- **Up-charge consists of all costs associated with the delivery of fuel to the site, including but not limited to labor, profit, delivery charges, any fees or taxes**
- **Fuel delivery must be made within 2 working days or portion thereof from the time of initial notification**
- Members will make individual arrangements with the vendor for automatic deliveries
- **Automatic deliveries scheduled with members will expire and cease with the expiration of the contract**
- It is the responsibility of the vendor to check and verify that storage tanks (underground and above-ground) are properly registered in compliance with the DEP before making deliveries
- Each invoice for gasoline must certify the OPIS posted price on the day of delivery – pricing can be verified by contacting the MCCPC (jlambert@randolphnj.org).
- **Members must be afforded up to 45 days to pay invoices**

Vendor: Griffith-Allied Trucking, LLC (dba Allied Oil)

Address: 25 Old Camplain Road, Hillsborough, New Jersey 08844

Contact Person: Josefina Marquez

Title: Bid Manager

Tel #: 908-575-7577, Ext. 4101

Fax #: 908-575-8833

E-Mail: jmarquez@alliedoilco.com

Vendor: Riggins, Inc.

Address: 3938 South Main Road, Vineland, New Jersey 08360

Contact Person: Steven Riggins

Title: President

Tel #: 856-825-7600

Fax #: 856-825-2270

E-Mail: jmerlino@riginsoil.com

Trucking and delivery price per gallon added to cost of gasoline.

Category A: Tankwagon Deliveries: under 7,500 gallons per delivery to one location Vendor: Allied Oil	Trucking & Delivery Price Per Gallon
1. Regular Unleaded Gas:	\$0.1806 / gallon
2. Mid-Grade Unleaded Gas:	\$0.1806 / gallon
3. Premium Unleaded Gas:	\$0.1806 / gallon

Category B: Bulk Deliveries: 7,500 gallons minimum delivery to one location Vendor: Riggins, Inc.	Trucking & Delivery Price Per Gallon
1. Regular Unleaded Gas:	\$0.094 / gallon
2. Mid-Grade Unleaded Gas:	\$0.094 / gallon
3. Premium Unleaded Gas:	\$0.084 / gallon