

**CITY COUNCIL**

**The City of Orange Township, New Jersey**

**DATE** August 7, 2024

**NUMBER** 376-2024

**TITLE:** A RESOLUTION AUTHORIZING THE EXTENSION OF THE AWARDED CONTRACT WITH T&M ASSOCIATES, 11 TINDALL ROAD, MIDDLETOWN, NEW JERSEY 07748 TO PROVIDE PROFESSIONAL ENGINEERING CONSTRUCTION ADMINISTRATION SERVICES FOR THE WELL #5 REHABILITATION PROJECT IN THE AMOUNT NOT TO EXCEED \$9,487.36.

**WHEREAS**, the Award of Professional Engineering, Construction Administration and Inspection Services, Resolution 261-2023(WO), expired on June 20, 2023; and

**WHEREAS**, the project is continuous, ongoing, and still being completed; and

**WHEREAS**, as a result, the award needs to be extended so the services can be completed; 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 monies are available in Account No. 4-05-55-502-192-519.

**NOW, THEREFORE, BE IT RESOLVED**, that the Municipal Council of the City of Orange Township does authorize the extension of Awarded Contract with T&M Associates, in the amount not to exceed \$9,487.36.

**Adopted: August 7, 2024**

\_\_\_\_\_  
Joyce L. Lanier  
City Clerk

\_\_\_\_\_  
Adrienne K. Wooten  
Council President

 A. MIZRAHI

CITY OF ORANGE TOWNSHIP  
FINANCE DEPARTMENT  
  
CERTIFICATION OF FUNDS  
NEXT WATER OPERATING 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: T & M Associates

Address: 11 Tindall Road

City: Middletown

State: New Jersey

Zip Code: 07748-2792

Purpose: Engineering for Well #5 rehabilitation  
contract extension

Vendor ID: TM000010

Fund: Water Operating Fund

Line Description	WTR - Water Operating - Professional Services		
Account Numbers(s):	CY'24	4-05-55-502-192-519	\$ 9,487.36

Purchase Order # : 24-01492

Amount not to exceed: \$ 9,487.36

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Division Head

Date

*Nile Clements*

7/23/2024

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Chief Financial Officer

Date

**CITY COUNCIL****The City of Orange Township, New Jersey**DATE June 20, 2023NUMBER 261-2023 (WO)

**TITLE: A RESOLUTION AUTHORIZING T&M ASSOCIATES, 11 TINDALL ROAD, MIDDLETOWN, NEW JERSEY 07748 TO PROVIDE PROFESSIONAL ENGINEERING, DESIGN AND CONSTRUCTION ADMINISTRATION SERVICES FOR THE WELL #5 REHABILITATION PROJECT IN AN AMOUNT NOT TO EXCEED \$32,500.00.**

**WHEREAS**, the City of Orange Township did duly advertise on November 22, 2022 for Request for Qualifications for Consulting Engineering Services; and

**WHEREAS**, on December 7, 2022 the City of Orange Township received ten (10) qualification proposals; and

**WHEREAS**, the Qualified Purchasing Agent and the Director of Public Works & Engineering evaluated all proposals submitted based upon qualifications, experience with similar projects, and project understanding; and

**WHEREAS**, the City Council of the City of Orange Township did hereby approve by Resolution #508-2022 the ten (10) bidders to provide professional consulting engineering services to the City of Orange Township on an "as needed" basis for the period of January 1, 2023 through December 31, 2023; and


**WHEREAS**, a separate resolution is needed to enter into a contract for Professional Environmental Services; and

**WHEREAS**, the Director of Public Works & Engineering have agreed to select T&M Associates from the approved list of qualified professionals to provide Professional Engineering, Design and Construction Administration Services for the Well #5 Rehabilitation Project; 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 will be available for this purpose in Account CY'23 2-01-20-155-000-519 contingent upon Council approval and inclusion of said item in the Temporary Budget adopted 2023 Budget, there will be sufficient funds to contract T&M Associates.


**NOW, THEREFORE, BE IT RESOLVED** by the City Council of the City of Orange Township, New Jersey as follows:


1. The Mayor is hereby authorized and directed to execute the attached Agreement with T&M Associates in an amount not to exceed \$32,500.00.
2. Notice of this action shall be printed in the Orange Transcript as required by law within ten (10) days of its passage.

  
2023/6/20

3. The agreement herein and this resolution are contingent upon certification of funds appropriate funding to render payment for services provided within.

Adopted: June 20, 2023

  
\_\_\_\_\_  
Joyce L. Lanier  
City Clerk

  
\_\_\_\_\_  
Tency A. Eason  
Council President

09/13/01

**T & M ASSOCIATES  
ELEVEN TINDALL RD  
MIDDLETOWN NJ 07748**

Taxpayer Identification# 221-806-708/000

Dear Business Representative:

Recently enacted State law (Public Law 2001, c.134) requires all contractors and subcontractors with State, county and municipal agencies to provide proof of their registration with the Department of the Treasury, Division of Revenue. The law became effective September 1, 2001.

Our records indicate that you are currently registered with the Division of Revenue, and accordingly, we have attached a Proof of Registration Certificate for your use. If you are currently under contract or entering into a contract with a State, county or local agency, you must provide a copy of the certificate to the contracting agency.

Please note that the law sets forth penalties for non-compliance with the provisions above. See N.J.S.A. 54:52-20.

Finally, please note that the new law amended Section 92 of the Casino Control Act, which deals with the casino service industry.

Should you have any questions or require more information about the attached certificate, or are involved with the casino service industry, call (609) 292-1730.

Thank you in advance for your consideration and cooperation.

Sincerely,



Patricia A. Chiacchio  
Director, Division of Revenue

**STATE OF NEW JERSEY  
BUSINESS REGISTRATION CERTIFICATE  
FOR STATE AGENCY AND CASINO SERVICE CONTRACTORS**

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

TAXPAYER NAME:

**T & M ASSOCIATES**

TRADE NAME:

TAXPAYER IDENTIFICATION#

**221-806-708/000**

CONTRACTOR CERTIFICATION#

**0063800**

ADDRESS

**ELEVEN TINDALL RD  
MIDDLETOWN NJ 07748**

ISSUANCE DATE:

**09/13/01**

EFFECTIVE DATE:

**03/21/88**



Director, Division of Revenue

FORM-BRC(08-01)

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

**Request for Taxpayer  
 Identification Number and Certification**

Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

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

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) <b>T &amp; M Associates</b>		
	2 Business name/disregarded entity name, if different from above.		
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) . . . . . <b>Note:</b> Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> 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 Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____	
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions . . . . . <input type="checkbox"/>		(Applies to accounts maintained outside the United States.)
	5 Address (number, street, and apt. or suite no.). See instructions. <b>11 Tindall Road</b>	Requester's name and address (optional)	
	6 City, state, and ZIP code <b>Middletown, NJ 07748</b>		
	7 List account number(s) here (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.

Social security number									
				-					
or									
Employer identification number									
2	2	-	1	8	0	6	7	0	8

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

**Part II Certification**

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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 *Susan M. Murillo*    Date 4/9/24

**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](http://www.irs.gov/FormW9).

**What's New**

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

**Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they