ADDENDUM #1 TO
REQUEST FOR PROPOSALS
Providing Website Design, Maintenance and Hosting Services for the
South Brunswick Township Municipal Website

Affirmative Action Questionnaire

November 30, 2021

From:

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To All Potential Respondents:

The Township of South Brunswick hereby issues this Addendum #1 in the above referenced matter:

Respondents shall complete and submit the attached Affirmative Action Questionnaire at the time responses to the RFP are submitted. Any Federal or State letters, or existing AA-302 forms, upon which the respondent shall rely shall also be submitted at the time responses are submitted. If the respondent requires a copy of an AA-302 form, same shall be provided upon request.

Other than as set forth above, all specifications, requirements and deadlines set forth in the RFP shall remain in effect.

Thank you for your considerations in this matter.

/s/ Angela Socio, Purchasing Agent
Township of South Brunswick
AFFIRMATIVE ACTION QUESTIONNAIRE

No firm may be issued a contract unless they comply with the Affirmative Action Regulations of P.L. 1975, C. 127 (N.J.A.C.17:27).

All firms: An employee information report must be completed and returned prior to or at the time of an award. An Affirmative Action Plan approved by the Federal Government or the State of New Jersey Treasurer is an acceptable alternate.

FILL IN THE APPLICABLE BOX BELOW. IF YOU HAVE NOT YET COMPLIED WITH THE AFFIRMATIVE ACTION REGULATIONS, YOU MUST COMPLETE AND FILE THE AFFIRMATIVE ACTION DOCUMENT PRIOR TO AWARD. YOU MUST RETURN THE COMPLETED DOCUMENT TO THE TOWNSHIP PRIOR TO AWARD.

ALL FIRMS:

☐ A FEDERAL LETTER OF APPROVAL HAS BEEN RECEIVED.  
  (PROOF MUST BE SUBMITTED)

OR

☐ A CURRENT STATE OF NEW JERSEY "CERTIFICATE OF EMPLOYEE INFORMATION REPORT OF APPROVAL" HAS BEEN RECEIVED.  
  (COPY OF SAME MUST BE SUBMITTED)

OR

☐ AN AFFIRMATIVE ACTION EMPLOYEE INFORMATION REPORT (FORM AA-302 MUST BE SUBMITTED, AS INDICATED ON SAID FORM.  
  (SOUTH BRUNSWICK TOWNSHIP WILL FORWARD YOU THIS FORM, IF YOU ARE A CONTRACTOR.)

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE.

Firm Name ______________________________

Signature ______________________________

Title ________________________________

Date ________________________________