NEW JERSEY HOUSING AND MORTGAGE FINANCE AGENCY

MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE
N.J.S.A. 10:5-31 et seq. (P.L. 1975, C. 127)
N.J.A.C. 17:27

GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS
EXHIBIT A

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, civil union status, domestic partnership status, affectional or sexual orientation, genetic information, pregnancy or breastfeeding, sex, gender identity or expression, disability or atypical hereditary cellular or blood trait of any individual, or because of the liability for service in the Armed Forces of the United States or the nationality of any individual, or because of the refusal to submit to a genetic test or make available the results of a genetic test to an employer, or any other characteristic of a protected class as set forth in N.J.S.A. 10:5-12, *et seq.* and 10:5-31 as the same may be amended from time to time. The Contractor will ensure employment opportunity is afforded to such Applicants in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, civil union status, domestic partnership status, affectional or sexual orientation, genetic information, pregnancy or breastfeeding, sex, gender identity or expression, disability or atypical hereditary cellular or blood trait of any individual, or because of the liability for service in the Armed Forces of the United States or the nationality of any individual, or because of the refusal to submit to a genetic test or make available the results of a genetic test to an employer, or any other characteristic of a protected class as set forth in N.J.S.A. 10:5-12, *et seq.* and 10:5-31 as the same may be amended from time to time. Such equal employment opportunity 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 forth 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, civil union status, domestic partnership status, affectional or sexual orientation, genetic information, pregnancy or breastfeeding, sex, gender identity or expression, disability or atypical hereditary cellular or blood trait of any individual, or because of the liability for service in the Armed Forces of the United States or the nationality of any individual, or because of the refusal to submit to a genetic test or make available the results of a genetic test to an employer, or any other characteristic of a protected class as set forth in N.J.S.A. 10:5-12, *et seq.* and 10:5-31 as the same may be amended from time to time.

The Contractor or Subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency Contracting officer advising the labor union of the Contractor's commitments under this chapter 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 meet targeted county employment goals established in accordance with 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, and labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, civil union status, domestic partnership status, affectional or sexual orientation, genetic information, pregnancy or breastfeeding, sex, gender identity or expression, disability or atypical hereditary cellular or blood trait of any individual, or because of the liability for service in the Armed Forces of the United States or the nationality of any individual, or because of the refusal to submit to a genetic test or make available the results of a genetic test to an employer, or any other characteristic of a protected class as set forth in N.J.S.A. 10:5-12, *et seq.* and 10:5-31 as the same may be amended from time to time, and that it will immediately 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, race, creed, color, national origin, ancestry, marital status , civil union status, domestic partnership status, affectional or sexual orientation, genetic information, pregnancy or breastfeeding, sex, gender identity or expression, disability or atypical hereditary cellular or blood trait of any individual, or because of the liability for service in the Armed Forces of the United States or the nationality of any individual, or because of the refusal to submit to a genetic test or make available the results of a genetic test to an employer, or any other characteristic of a protected class as set forth in N.J.S.A. 10:5-12, *et seq.* and 10:5-31 as the same may be amended from time to time and applicable Federal law and applicable Federal court decisions.

The Contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services Contract, one of the following three documents:

Letter of Federal Affirmative Action Plan Approval

Certificate of Employee Information Report

Employee Information Report Form AA302 (electronically provided by the Division and distributed to the public agency through the Division's website at www.state.nj.us/treasury/Contract_compliance)

The Contractor and its Subcontractors shall furnish such reports or other documents to the Division of Purchase & Property, CCAU, EEO Monitoring Program as may be requested by the office 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 Purchase & Property, CCAU, EEO Monitoring Program for conducting a compliance investigation pursuant to **Subchapter 10 of the Administrative Code at N.J.A.C. 17:27**.

NEW JERSEY HOUSING AND MORTGAGE FINANCE AGENCY

AFFIRMATIVE ACTION COMPLIANCE NOTICE
N.J.S.A. 10:5-31 and N.J.A.C. 17:27

GOODS, PROFESSIONAL SERVICES AND SERVICE CONTRACTS

This form is a summary of the successful vendor's requirement to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27-1 et seq.

The successful vendor 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) electronically provided by the Division and distributed to the public agency through the Division's website at www.state.nj.us/treasury/Contract_compliance to be completed by the Contractor in accordance with N.J.A.C. 17:27-4.

The successful vendor(s) must submit the copies of the AA302 Report to the Division of Contract Compliance and Equal Employment Opportunity in Public Contracts (Division). The Public Agency copy is submitted to the public agency, and the vendor copy is retained by the vendor.

The undersigned vendor 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. 17:27.1 et seq. and agrees to furnish the required forms of evidence.

The undersigned vendor further understands that his/her proposal 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. 17:27-1 et seq.

COMPANY: _____ SIGNATURE: _____

PRINT NAME: _____ TITLE: _____

DATE: _____

NEW JERSEY HOUSING AND MORTGAGE FINANCE AGENCY

NEW JERSEY FORECLOSURE MEDIATION ASSISTANCE PROGRAM

COMPANY CERTIFICATION AND QUESTIONNAIRE
EXHIBIT B

Corporation, Partnership, Limited Liability Company, Other: _____
(Circle or Select One)

State of Formation: _____

This information is necessary to obtain the approval of the NJHMFA, and it will be expressly relied upon. Complete each item, using ***NONE*** or ***NOT APPLICABLE*** where necessary. If more space is needed to answer any specific item, use a separate sheet.

A. Applicant (use official names without abbreviations):

_____
Name

_____ _____
Street City

_____ _____ _____
County State Zip Code

_____ _____
Telephone # Employer's I.D. No.

_____
Organizational ID No. (from State of Formation)

B. Is the Applicant a subsidiary or direct or indirect affiliate of any other organization? If so, indicate name of related organization and relationship.

NEW JERSEY FORECLOSURE MEDIATION ASSISTANCE PROGRAM
COMPANY CERTIFICATION AND QUESTIONNAIRE
EXHIBIT B *(Cont.)*

C. Management: List all owners, officers, directors, partners of Applicant, and any stockholders that have a 10% interest or more in Applicant. **For Non-Profits: List all officers of the Board, the Executive Director and the person responsible for oversight of day-to-day operations of the Applicant.** If the Applicant is a publicly held corporation, please provide the latest proxy statement indicating stock ownership. Complete all columns for each such person showing the percentage of ownership interest. (Use additional sheet if necessary).

NAME	HOME ADDRESS	BIRTH PLACE & DATE OF BIRTH	OFFICE HELD	PERCENTAGE OWNERSHIP

D. For all individuals named in Item C above list all other companies, partnerships or associations in which such persons have **more than 10% interest** or in which such person is an officer, director or partner. Complete all columns for each person showing the percentage of ownership interest. (If none, so state. Use additional sheets if necessary).

NAME	COMPANY	PARTNERSHIP	ASSOCIATION HELD	PERCENTAGE INTEREST

NEW JERSEY FORECLOSURE MEDIATION ASSISTANCE PROGRAM
COMPANY CERTIFICATION AND QUESTIONNAIRE
EXHIBIT B *(Cont.)*

E. Has the Applicant or any person listed in Items C and D above, entered into any agreement, participated in a collusion, or otherwise taken any action in restraint of free and competitive bidding or negotiation in connection with the services to be provided?

☐ yes ☐ no If yes, furnish details on separate attachment

F. Have any of the above parties, within the last five years, been a party defendant in litigation or administrative proceedings involving laws governing hours of labor, minimum wage standards, discrimination in wages, child labor, worker's compensation, payroll or withholding taxes, employment discrimination or occupational safety and health?

☐ yes ☐ no If yes, furnish details on separate attachment

G. Is Applicant or management of Applicant or any of the persons listed in Items C or D now a plaintiff or defendant in any civil or criminal litigation?

☐ yes ☐ no If yes, furnish details on separate attachment

H. Have any of the persons listed in Items C or D been subject to any disciplinary action, past or pending, by any administrative, governmental or regulatory body?

☐ yes ☐ no If yes, furnish details on separate attachment

I. Have any of the persons listed in Items C or D been or are they now subject to any order resulting from any criminal, civil or administrative proceedings brought against them by any administrative, governmental, or regulatory agency?

☐ yes ☐ no If yes, furnish details on a separate attachment

J. Have any of the persons listed in Items C or D been denied any license by any administrative, governmental, or regulatory agency on the grounds of moral turpitude?

☐ yes ☐ no If yes, furnish details on a separate attachment

K. Has the Applicant or management of Applicant or any of the persons listed in Items C or D been informed of any current or on-going investigation of the Applicant or management of the Applicant for possible violation of State or Federal laws, or has the Applicant or management of the Applicant been indicted or subpoenaed by any grand jury or investigative body or had any records subpoenaed by any grand jury investigative body?

☐ yes ☐ no If yes, furnish details on a separate attachment

NEW JERSEY FORECLOSURE MEDIATION ASSISTANCE PROGRAM
COMPANY CERTIFICATION AND QUESTIONNAIRE
EXHIBIT B *(Cont.)*

L. Has the Applicant or any person listed in Items C or D above or any concern with which any person(s) listed in Items C or D has been connected, ever been in receivership or adjudicated a bankrupt?

☐ yes ☐ no If yes, furnish details on a separate attachment

M. Has the Applicant or any person listed in Items C or D above been denied a business-related license or had it suspended or revoked by an administrative governmental or regulatory agency?

☐ yes ☐ no If yes, furnish details on a separate attachment

N. Has the Applicant or any person listed in Items C or D above been debarred, suspended or disqualified from Contracting with any federal, state or municipal agency?

☐ yes ☐ no If yes, furnish details on a separate attachment

O. Has the Applicant, if a corporation, had its charter revoked or suspended in the State of New Jersey?

☐ yes ☐ no If yes, furnish details on a separate attachment

P. Are any of the persons listed in Items D and E above, or any of the Applicant's supervisory employees or any members of their respective families, employed with the NJ Housing and Mortgage Finance Agency?

☐ yes ☐ no If yes, furnish details on a separate attachment

Q. Does any employee or member of the NJ Housing and Mortgage Finance Agency have any interest, direct or indirect, in the Applicant's business?

☐ yes ☐ no If yes, furnish details on a separate attachment

R. Are any of the persons listed in Items C or D, or any of the Applicant’s supervisory employees or any member of their respective families, employed with the NJ Housing and Mortgage Finance Agency?

☐ yes ☐ no If yes, furnish details on a separate attachment

S. Does any employee or member of the NJ Housing and Mortgage Finance Agency have any interest, direct or indirect, in the Applicant’s business?

☐ yes ☐ no If yes, furnish details on a separate attachment

NEW JERSEY HOUSING AND MORTGAGE FINANCE AGENCY

NEW JERSEY FORECLOSURE MEDIATION ASSISTANCE PROGRAM

COMPANY CERTIFICATION AND QUESTIONNAIRE
EXHIBIT B *(Cont.)*

CERTIFICATION: I, being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments thereto, to the best of my knowledge, are true and complete. I acknowledge that the New Jersey Housing and Mortgage Finance Agency is relying on the information contained herein and thereby acknowledge that the undersigned entity is under a continuing obligation, from the date of this Certification through the completion of any Contracts with the Owner of subject Project, to notify the NJHMFA in writing of any changes to the answers or information contained herein. I acknowledge that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I recognize that I am and/or the undersigned entity is subject to criminal prosecution under the law and that it will also constitute a material breach of any agreement between the undersigned entity and the Owner of the subject Project and that either the Owner or the New Jersey Housing and Mortgage Finance Agency, at its option, may declare all such Contracts associated with the subject Project void and unenforceable.

The undersigned entity authorizes the New Jersey Housing and Mortgage Finance Agency to verify any answer(s) contained herein, to investigate the background and credit worthiness of the undersigned entity and to enlist the aid of third parties including State police checks which may be completed by the New Jersey Housing and Mortgage Finance Agency in its investigative process. The undersigned entity further authorizes the New Jersey Housing and Mortgage Finance Agency to disclose any of the foregoing information and any information discovered in any investigation pursuant to this certification to any party which has entered or is entering into any Contract with the undersigned entity in connection with the subject Project.

COMPANY NAME: _____

SIGNATURE: _____

NAME (PRINT): _____

TITLE: _____

DATE: _____

BE IT REMEMBERED, that on this____day of_____,20 before me personally appeared_____, who, I am satisfied is the person named in the within instrument and who, being duly sworn upon his/her oath has executed the same as his/her voluntary act and deed.

_____
Notary Public

NEW JERSEY HOUSING AND MORTGAGE FINANCE AGENCY

NEW JERSEY FORECLOSURE MEDIATION ASSISTANCE PROGRAM

SOURCE DISCLOSURE CERTIFICATION FORM
EXHIBIT C

CONTRACTOR:

I hereby certify and say:

I have personal knowledge of the facts set forth herein and am authorized to make this certification on behalf of the Contractor.

The Contractor submits this Certification in response to the referenced Contract issued by New Jersey Housing and Mortgage Finance Agency, in accordance with the requirements of Executive Order 129 and Public Law 2005, Chapter 92.

Instructions:
List every location where services will be performed by the Contractor and all Subcontractors.
If any of the services cannot be performed within the United States, the Contractor shall state, with specificity, the reason why the services cannot be so performed. Attach additional page(s) if necessary.

Contractor and/or Subcontractor	Description of Services	Performance Location(s)	If applicable, reason why services cannot be performed in the United States

Any changes to the information set forth in this Certification during the term of any Contract awarded under the referenced solicitation or extension thereof will be immediately reported by the Contractor to the NJHMFA.

The Director shall determine whether sufficient justification has been provided by the Contractor to form the basis of his/her certification that the services cannot be performed in the United States and whether to seek the approval of the Treasurer.

I understand that if, after award of a Contract to the Contractor, it is determined that the Contractor has shifted services, unless declared by the Director that extraordinary circumstances require the shift of services or that the failure to shift the services would result in economic hardship to the NJHMFA, the Contractor shall be deemed in breach of Contract, which Contract will be subject to termination for cause.

I certify that, to the best of my knowledge, the foregoing statements by me are true. I am aware that if any of the statements are willfully false, I am subject to punishment.

By: _____ **Print Name:** _____

Contractor: _____ **Date:** _____

NEW JERSEY HOUSING AND MORTGAGE FINANCE AGENCY

NEW JERSEY FORECLOSURE MEDIATION ASSISTANCE PROGRAM

SOURCE DISCLOSURE CERTIFICATION FORM
EXHIBIT C

SAMPLE – VENDOR MUST COMPLETE EXHIBIT E AS SHOWN BELOW

CONTRACTOR:

I hereby certify and say:

I have personal knowledge of the facts set forth herein and am authorized to make this certification on behalf of the Contractor.

The Contractor submits this Certification in response to the referenced Contract issued by New Jersey Housing and Mortgage Finance Agency, in accordance with the requirements of Executive Order 129 and Public Law 2005, Chapter 92.

Instructions:
List every location where services will be performed by the Contractor and all Subcontractors.
If any of the services cannot be performed within the United States, the Contractor shall state, with specificity, the reason why the services cannot be so performed. Attach additional page(s) if necessary.

Contractor and/or Subcontractor	Description of Services	Performance Location(s)	If applicable, reason why services cannot be performed in the United States
ABC Company	ABC Services	1 ABC Road, Trenton, NJ 08611	

Any changes to the information set forth in this Certification during the term of any Contract awarded under the referenced solicitation or extension thereof will be immediately reported by the Contractor to the Agency.

The Director shall determine whether sufficient justification has been provided by the Contractor to form the basis of his/her certification that the services cannot be performed in the United States and whether to seek the approval of the Treasurer.

I understand that if, after award of a Contract to the Contractor, it is determined that the Contractor has shifted services, unless declared by the Director that extraordinary circumstances require the shift of services or that the failure to shift the services would result in economic hardship to the Agency, the Contractor shall be deemed in breach of Contract, which Contract will be subject to termination for cause.

I certify that, to the best of my knowledge, the foregoing statements by me are true. I am aware that if any of the statements are willfully false, I am subject to punishment.

By: _____ **Print Name:** _____

Contractor: _____ **Date:** _____

NEW JERSEY HOUSING AND MORTGAGE FINANCE AGENCY

NEW JERSEY FORECLOSURE MEDIATION ASSISTANCE PROGRAM
VENDOR CODE OF ETHICS
EXHIBIT D

The New Jersey Housing and Mortgage Finance Agency ("NJHMFA") considers the maintenance of public trust and confidence essential to its proper functioning, and accordingly has adopted this Code of Ethics for Vendors. Vendors who do business with NJHMFA must avoid all situations where proprietary or financial interests, or the opportunity for financial gain, could lead to favored treatment for any organization or individual. Vendors must also avoid circumstances and conduct which may not constitute actual wrongdoing, or a conflict of interest, but might nevertheless appear questionable to the general public, thus compromising the integrity of the NJHMFA.

This Code is based upon the principles established in Executive Order 189 (Kean, 1988); ethical standards established by the NJHMFA pursuant to N.J.A.C. 5-80-18.8, and laws governing the Executive Commission on Ethical Standards, N.J.S.A. 52:13D-12 et seq., which, while not strictly applicable to Contractors, provides general guidance in this area. Also, this code has been established pursuant to the authority embodied in
N.J.S.A. 55:14K-1 et seq., and for good cause.

This Code of Ethics will be made part of each Request for Proposal (RFP) issued by the NJHMFA and will be attached to every Contract and agreement to which NJHMFA and, to the extent feasible, to all those parties anticipating doing business with the NJHMFA.

No person shall pay, offer to pay, or agree to pay, either directly or indirectly, any fee, commission, compensation, gift, gratuity, or other thing of value of any kind to any NJHMFA member or employee or to any member of the immediate family, as defined by N.J.S.A. 52:13D-13 (i), of any such member or employee, or to any partnership, firm, or corporation with which such member, employee or member of their immediate family is employed or associated, or in which such member or employee has an interest within the meaning of N.J.S.A. 52:13D-13 (g).

Note: This section would permit an NJHMFA officer or employee to accept food or refreshment of relatively low monetary value provided during the course of a meeting, conference or other occasion where the employee is properly in attendance (for example, coffee, danish, tea or soda served during a conference break). Acceptance of unsolicited advertising or promotional material of nominal value (such as inexpensive pens, pencils or calendars) would also be permitted.

No person may, directly or indirectly, undertake any private business, commercial or entrepreneurial relationship with, whether or not pursuant to employment, Contract or other agreement, express or implied, or sell any interest in such person to, any NJHMFA member employee having any duties or responsibilities in connection with the purchase, acquisition or sale of any property or services by or to the NJHMFA. No person may, directly or indirectly, undertake any private business, commercial or entrepreneurial relationship with, whether or not pursuant to employment Contract or other agreement, express or implied, or sell any interest in such person to any individual, firm or entity with which such member or employee is employed or associated or has an interest within the meaning of N.J.S.A. 52:13D-13 (g). Any relationships subject to this provision shall be reported in writing forthwith to the Executive Commission on Ethical Standards, which may grant a waiver of this restriction upon application of the member or employee upon a finding that the present or proposed relationship does not present the potential, actuality or appearance of a conflict of interest.

No person shall influence, or attempt to influence or cause to be influenced, any NJHMFA member or employee in his/her official capacity in any manner which might tend to impair the objectivity or independence of judgment of said member or employee.

No person shall cause or influence, or attempt to cause or influence, any NJHMFA member or employee to use, or attempt to use, his/her official position to secure unwarranted privileges or advantages for the person or any other individual or entity.

All persons shall report to the Attorney General of New Jersey and the Executive Commission on Ethical Standards the solicitation of such persons of any fee, commission, compensation, gift, gratuity or other thing of value by an NJHMFA member or employee. Any questions as to what is or is not acceptable or what constitutes proper conduct for an NJHMFA officer or employee should be referred to the NJHMFA Ethics Liaison Officer or his/her designee.

This code is intended to augment, not to replace, existing administrative orders and the current NJHMFA Code of Ethics.

NJHMFA is defined as the New Jersey Housing and Mortgage Finance Agency.

Immediate Family is defined as a person's spouse, child, parent, or sibling residing in the same household. N.J.S.A. 52:13D-13 (i).

Vendor is defined as any general Contractor, Subcontractor, consultant, person, firm, corporation or organization engaged in or seeking to do business with the NJHMFA.

This is to acknowledge that I received and read the New Jersey Housing and Mortgage Finance Agency's Vendor Code of Ethics, and I understand the terms of the Vendor Code of Ethics.

_____ _____

Name of Firm (print or type) Date

_____ _____

Officer's Name (print or type) Title

_____

Signature

NJHMFA SUMMARYADDENDUM TO CONTRACT
EXHIBIT E

WHEREAS, the New Jersey Housing and Mortgage Finance Agency ("NJHMFA" or the "Agency") is a body corporate and politic created in, but not of, the Department of Community Affairs pursuant to the New Jersey Housing and Mortgage Finance Agency Law of 1983, as amended, N.J.S.A. 55:14K-1, *et seq*., with a place of business at 637 South Clinton Avenue, P.O. Box 18550, Trenton, New Jersey 08650-2085 and

WHEREAS, ("Contractor") whose address is , entered into a Contract dated , 202_ (the "Contract"); and

WHEREAS, the Agency and the Contractor desire to amend the Contract as described in this Summary Addendum and to incorporate by reference certain provisions of law and policy as they relate to contracts with the Agency; and

WHEREAS, the Contractor represents that it has read, understood and agreed to each of the provisions of law or policy described below and as the same are more fully set forth in the NJHMFA Contract Addendum (the "Contract Addendum"), attached as Exhibit "A" and/or which are available for inspection on the NJHFMA website at: https://www.nj.gov/dca/hmfa/about/procurement/index.shtml .

NOW THEREFORE, it is agreed that the Contract is amended to include and to incorporate by reference each of the aforementioned NJHMFA Contract Addendum provisions, which are summarized generally below.
The following provisions, which are set forth more fully in the NJHFMA Contract Addendum, are hereby added to the Contract and fully incorporated therein:

1.0 **CONFLICTS OF INTEREST**; **Ethical Standards**: *No Gifts, Gratuities or Undue Influence;* N.J.S.A. 52:34-19; E.O. 189 (1988); 31 U.S.C. 1352.

2.0 **COMPLIANCE**:

2.1 **Equal Employment Opportunity**; **Law Against Discrimination**: N.J.S.A. 10:5-31, *et seq*.
2.2 **New Jersey Business Registration Required**: N.J.S.A. 52:32-44; **Sales Tax**, N.J.S.A. 54:32B-1.
2.3 **Small Businesses, Minority/Women/Veteran-Owned Businesses**: E.O. 34 (2006), E.O. 151 (2009); (Set-aside Contracts Only) N.J.A.C. 17:13-4.2, *et seq.* and 17:14-4.2, *et seq.*
2.4/2.5 **Prevailing Wages** (Building Services Only): **State Building Services Contracts Act**, N.J.S.A. 34:11–56.58, *et seq.* & N.J.A.C. 12:64-1.1, *et seq*.; **New Jersey Prevailing Wage Act**, N.J.S.A. 34:11-56.25, *et seq.* (Maintenance and Other Public Works).
2.6 **Public Works Contractor Registration Act, Contractor and Subcontractors**: N.J.S.A. 34:11-56.48, *et seq.;* N.J.S.A. 34:11-56.55.
2.7 **Worker & Community Right to Know Act**: N.J.S.A. 34:5A-1, *et seq*., N.J.A.C. 8:59-1.1, *et seq.*
2.8/2.9 **Equal Opportunity**: **Veterans**, 41 CFR 60-300; **Persons with Disabilities**, 41 CFR 60-741; **Americans with Disabilities Act**, 42 U.S.C. 12101, *et seq*.
2.10 **Buy American**: N.J.S.A. 52:32-1.
2.11 **Pay to Play Prohibitions**: N.J.S.A.19:44A-20.13, *et seq.*; N.J.S.A.19:44A-20.21; E.O. 333 (2023)
2.12 **Political Contribution Disclosure**: N.J.S.A. 19:44A-20.27.
2.13 **Services to be Performed in the U. S.**: N.J.S.A. 52:34-13.2; E.O. 129 (2004).
2.14 **Small Business Enterprises**: E.O. 151 (2009).
2.15 **Certification of Non-Involvement in Prohibited Activities in Iran, Russia or Belarus**: N.J.S.A. 52:32-58; P.L. 2022, c.3.
2.16 **Debarment/Suspension**: *Contractors/Subs not debarred or suspended.* E.O.34 (1976); E.O. 189 (1988).
2.17 **No Modification Unless in Writing**.
2.18 **Compliance – Laws/Regulations/Policies**: *Contractor must comply with all Agency policies, local, State and Federal laws, rules and regulations*.
2.19 **NJ State Law**: *N.J. Law governs; All litigation to occur in NJ.*
2.20 **Arbitration**: *The Agency shall not be required to arbitrate any disputes*.
2.21 **Contract Construction**: *Award Letter governs. In the event of a conflict between this Summary Addendum and the Standard Contract Addendum, the Standard Contract Addendum shall govern. In the event of a conflict between the NJHMFA Standard Contract Addendum and the underlying Contract, or with other documents prepared by Contractor, the NJHMFA Standard Contract Addendum shall govern.*

3.0/3.1/4.0 **EQUAL EMPLOYMENT OPPORTUNITY**: **Non-Discrimination**: N.J.S.A. 10:5-31, *et seq.*; N.J.A.C. 17:27; (Contracts for Goods and Services); **Equal Pay**: N.J.S.A. 10:5-12; **Affirmative Action**: N.J.S.A. 10:5-31 and N.J.A.C. 17:27.

5.0 **SET-OFF FOR TAXES**: N.J.S.A. 54:49-19**.**

6.0 **DISCRIMINATION, TERMINATION OF CONTRACT, PENALTIES**: N.J.S.A. 10:2-1, *et seq*.

7.0 **DOCUMENTS AND DOCUMENT RETENTION**: *All documents are, with limited exception, subject to public disclosure under OPRA (N.J.S.A. 47:1A-1, et seq.). Documents must be retained for five years.*

8.0 **Reserved**

9.0 **CLAIMS**: **Applicability of N.J. Contractual Liability Act**, N.J.S.A. 59:13-1, *et seq*. *(except § 9*) notwithstanding "sue and be sued" status"; **N.J. Tort Claims Act,** N.J.S.A. 59:1-1, *et seq*.; Statute of Limitations applies unaltered. *No indemnification by NJHMFA.*

10.0 **OWNERSHIP DISCLOSURE BY CONTRACTOR**: N.J.S.A 52:25-24.2.

The Contractor acknowledges and understands that this Summary Addendum is a summary only of the terms and conditions more fully set forth in the NJHMFA Standard Contract Addendum attached as Exhibit "A" and/or which is available for inspection on the NJHMFA website at: https://www.nj.gov/dca/hmfa/about/procurement/index.shtml

By signing this Summary Addendum, *Contractor expressly agrees to the specific provisions set forth more fully in the NJHMFA Standard Contract Addendum, which are hereby fully incorporated by reference in any contract with the Agency*. This Addendum may be signed in counterparts.

IN WITNESS WHEREOF, the undersigned have executed this Summary Addendum as of _____, 202__

Date:

CONTRACTOR: _____

WITNESS/ATTEST:

By: _____

_____
(Title)

Date:

WITNESS/ATTEST: NEW JERSEY HOUSING AND MORTGAGE FINANCE AGENCY

_____ By: _____

(Rev. 7/2023)

NEW JERSEY HOUSING AND MORTGAGE FINANCE AGENCY

NEW JERSEY FORECLOSURE MEDIATION ASSISTANCE PROGRAM

FEE SCHEDULE & AFFIRMATION
EXHIBIT F

The FMAP allows for four (4) levels of counseling (See below requirements). Level A must have occurred in order to perform Level B counseling. Level A and B must occur to perform Level B1 counseling; however, Level B and/or B1 do not have to occur in order to perform and bill for Level C. Total billing cannot exceed $1,000. NJHMFA reserves the right to request additional documentation to justify payments, if deemed necessary.

Level A = (Compensation: $200 per completed service and documentation)

Applicant Intake: Collect intake information that includes name, address, demographic information, lender/ loan information and reason for delinquency. Collect up-to-date third party authorizations that include appropriate disclosures and shared privacy policy. Intake documentation must be kept on file and submitted to NJHMFA for audit and/or payment purposes.

Budget and Action Plan: Develop a detailed budget and a written action plan agreed upon with the client outlining follow-up activities for the client to pursue. Budget and Action Plan must be kept on file and submitted to NJHMFA for audit and/or payment purposes.

Level B = (Compensation: $550 per completed service and documentation)

Measurable Action: Counselor must have performed Level A (see above), budget verification, (i.e., pulled credit report, copies of expenses), Verification of Action Plan (i.e., communication with Lender, application for local resources or assistance, hardship letter). Budget verification and steps taken toward Action Plan must be documented, kept on file and submitted to NJHMFA for audit and/or payment purposes.

Level B1 = (Compensation: $100 per completed service and documentation)

Mediation Assistance: Counselor must have performed Levels A and B (see above). Client must be in foreclosure, has been served with a Summons and Complaint and qualifies for the NJ Judiciary Foreclosure Mediation Program. Counselor must help homeowner prepare for Mediation, including mediation form preparation. Communication between Counselor and lender, copy of mediation request and documented outcomes, including but not limited to a successful mediation or unsuccessful result after Mediation. Action Plan implementation must be kept on file and submitted to NJHMFA for audit and/or payment purposes.

Level C = (Compensation: $150 per completed service and documentation)

Transition Assistance: Counselor must have performed Level A at a minimum. Identify and strategize alternative courses of action including transition into rental, short sale or cash for keys. Communication with regard to transition and/or notes describing actions taken must be kept on file and submitted to NJHMFA for audit and/or payment purposes.

*In the case of a declaration of a state of emergency, levels A, B and B1 services will be applicable to renters seeking housing counseling and/or application assistance for disaster relief. Levels A and B will apply as described above. Level B1 would be applied to disaster application assistance.

☐ **ACCEPT** ☐ **DECLINE**

FEE SCHEDULE & AFFIRMATION
EXHIBIT F *(Cont.)*

Although, an Applicant may request one or more regions, the counties that comprise a region may not be altered or amended in any way. Applicants must be able to provide services in all counties included in the defined regions.

Please provide a check in the box next to the region(s) in which you are requesting:

Region Number	Regions	Service to the Region
1.	Bergen, Hudson, Passaic and Sussex	
2.	Essex, Morris, Union and Warren	
3.	Hunterdon Middlesex and Somerset	
4.	Mercer, Monmouth and Ocean	
5.	Burlington, Camden and Gloucester	
6.	Atlantic, Cape May, Cumberland and Salem	

Signature of the Applicant attests that the Applicant has read, understands, and agrees to all terms, conditions, and specifications set forth in the Application including all addenda. Furthermore, signature by the Applicant signifies that the Application and the responsive submission constitutes a Contract immediately upon notice of acceptance of the submission by the New Jersey Housing and Mortgage Finance Agency for any and all of the services requested and for the length of time indicated in the Application. Failure to accept the Contract within the time period indicated or failure to hold prices or to meet any other terms and conditions as defined in the Application during the term of the Contract, shall constitute a breach and may result in suspension or debarment from further NJHMFA bidding.

_____ _____
Name of Firm (print or type) Address

_____ _____
Telephone Number City, State ZipCode

_____ _____
Name (print or type) Title

_____ _____
Signature E-mail

_____
Date

NEW JERSEY HOUSING AND MORTGAGE FINANCE AGENCY

APPLICATION FOR
COUNSELING SERVICES FOR

NEW JERSEY FORECLOSURE MEDIATION ASSISTANCE PROGRAM

RECORD CERTIFICATION FORM
EXHIBIT G

COMPANY:

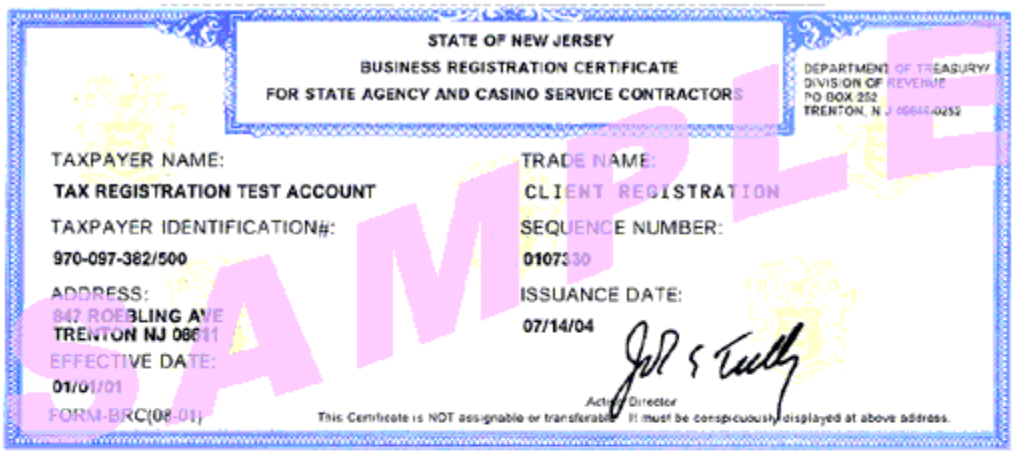
I hereby certify and say:

Information and reports shall be provided as and when required by the New Jersey Housing and Mortgage Finance Agency.

COMPANY: _____ SIGNATURE: _____

PRINT NAME: _____ TITLE: _____

DATE: _____



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

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

TAXPAYER NAME:
TAX REGISTRATION TEST ACCOUNT

TRADE NAME:
CLIENT REGISTRATION

TAXPAYER IDENTIFICATION#:
970-097-382/500

SEQUENCE NUMBER:
0107330

ADDRESS:
847 ROEBLING AVE
TRENTON NJ 08611

ISSUANCE DATE:
07/14/04

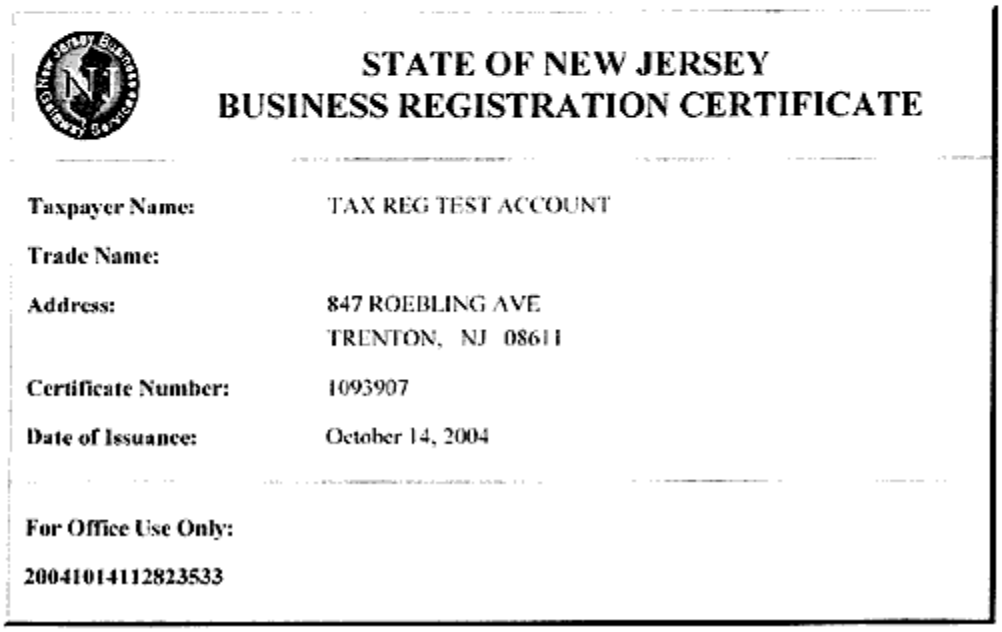
EFFECTIVE DATE:
01/01/01

Acting Director

FORM-BRC(08-01)

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

SAMPLE



STATE OF NEW JERSEY
BUSINESS REGISTRATION CERTIFICATE

Taxpayer Name: TAX REG TEST ACCOUNT

Trade Name:

Address: 847 ROEBLING AVE
TRENTON, NJ 08611

Certificate Number: 1093907

Date of Issuance: October 14, 2004

For Office Use Only:

20041014112823533

SAMPLE

PROVIDED FOR INFORMATIONAL PURPOSES ONLY