

12

**RESOLUTION OF THE BOARD OF COUNTY COMMISSIONERS  
COUNTY OF ESSEX**

**RESOLUTION NO.** \_\_\_\_\_ **AUTHORITY FOR RESOLUTION:** N.J.S.A. 40:41A-38(n)

**PROPOSED BY:** COUNTY EXECUTIVE **AUTHORITY FOR ACTION:** N.J.S.A. 40:41A-36(i)

**SUBJECT:**

**OFFICE OF THE COUNTY ADMINISTRATOR, OFFICE OF RISK MANAGEMENT –  
CONTRACT AWARD TO INSERVCO INSURANCE SERVICES TO PROVIDE THIRD PARTY  
ADMINISTRATOR SERVICES FOR GENERAL LIABILITY INSURANCE CLAIMS –  
EXERCISING 12 MONTH CONTRACT EXTENSION OPTION – AMOUNT NOT TO EXCEED  
\$100,786.00**

**WHEREAS**, the County of Essex has a need for a vendor to provide Third Party Administrator Services for General Liability Insurance Claims (the “Services”) for the Office of Risk Management; and

**WHEREAS**, the Board of County Commissioners awarded a three (3) year contract for the Services to Inservco, with twelve-month Contract extension option, via Resolution #2020-00209 (Bid #19-253); and

**WHEREAS**, the County’s Office of Risk Management, through the Office of Purchasing recommends the Board of County Commissioners exercise its 12-month option to the contract with Inservco Insurance Services per N.J.S.A. 40A:11-15(45); and

**WHEREAS**, it has been determined that the vendor has been performing its services in an effective and efficient manner; and

**WHEREAS**, the Chief Financial Officer has certified that he will further certify the availability of funds to pay such contract when Services are ordered (which certification is attached hereto): and

**WHEREAS**, the New Jersey Public Contracts Law (N.J.S.A. 40a: 11-1 et. seq.) requires that the Board of County Commissioners by resolution approve the awarding of a contract for the provision or performance of any goods or services, the cost of which in the aggregate exceed the statutory bidding threshold; now, therefore, be it.

**RESOLVED**, by the Essex County Board of County Commissioners as follows:

1. That the award of a Contract for the Services at a cost not to exceed \$100,786.00 to Inservco Insurance Services, exercising the twelve-month contract extension option in accordance N.J.S.A. 40A:11-15 (45) with the recommendation of the County's Office of Purchasing, be and hereby is approved, and that the County Administrator be and hereby is authorized to enter into and execute said contract as aforesaid together with such other documents incident thereto as may be necessary.
2. That the Clerk of the Board of County Commissioners forward two (2) certified copies of this resolution and agreement to the Office of Purchasing and one (1) to the Office of Risk Management.

Approved as to form and legality  Date 2/23/23  
 ESSEX COUNTY COUNSEL

RECORD OF VOTE (X=Vote N.V.=Abstention ABS=Absent)

Moved by Commissioner \_\_\_\_\_  
 Second by Commissioner \_\_\_\_\_

Commissioner	Yes	No	N.V.	ABS	Commissioner	Yes	No	N.V.	ABS
Cooper					Mercado				
Gill					Pomares, V.P.				
Graham					Richardson, Pres.				
Johnson					Sebold				
Luciano									

It is hereby certified that the foregoing Resolution was ( ) adopted ( ) defeated ( ) tabled by roll call vote at a \_\_\_\_\_ meeting of the Board of County Commissioners of the County of Essex, New Jersey held on \_\_\_\_\_.

Is Publication Required ( ) Yes ( ) No

Date Published \_\_\_\_\_  
 \_\_\_\_\_  
 Wayne L. Richardson, President

Inservco Insurance  
 2/23/2023



**TO:** Honorable Robert Jackson  
County Administrator

**DEPARTMENT:** Office of \_\_\_\_\_

**FROM:** Julius N. Coltre, MPA, OPA  
Director of Purchasing

**DIVISION:** Risk Management

**DATE:** February 9, 2023

**INTRODUCTION AND OVERVIEW:**

**TITLE:** Third Party Administrator for Liability Insurance (Contract Extension)  
(N.J.S.A. 40A:11-15)

**SOLICITATION NUMBER:** 19-253

**SOLICITATION TYPE:** Bid: RFP: Comp. Contract: X Non-Fair & Open: Other:

**REQUESTING AGENCY:** Office of the County Administrator / Risk Management

**ADVERTISEMENT DATE:** December 24, 2019 **OPENING DATE:** January 14, 2019

**POTENTIAL BIDDERS FROM:** Advertisement: 0 Portal: 0 Purchasing: 0 Small Business: 0

**BIDDERS(s) REJECTED:** 0 **REASON:** N/A

**NUMBER OF SUBMITTED PROPOSALS:** N/A One (1) year extension N.J.S.A. 40A:11-15

**ASPIRATION GOAL ACKNOWLEDGEMENT FORM (Completed & Returned):** Yes: No:

**CONTRACT PERIOD:** Extension Period: April 1, 2023 to March 24, 2024

**MINORITY STATUS OF RECOMMENDED VENDOR:**  
(WBE): (MGM): (SBE): (MBE) (VOB): (Other): X

<u>VENDOR NAME</u>	<u>One (1) Year Contract Extension Price:</u>
Inservco Insurance Services, Inc. (Harrisburg, PA.)	Total Price: \$100,786.00

FEB 14 PM 1:23

**RECOMMENDATION:**

Based upon the recommendation of Robert D. Jackson, County Administrator, which is attached hereto and after reviewing the one (1) year optional contract extension, it is recommended that the Board of Commissioners award by resolution a contract to: **Inservco Insurance Services, Inc. Two North Second Street, Harrisburg, PA. 17101.**

**REASON FOR RECOMMENDATION:**

The Essex County Office of the County Administrator / Risk Management Office has determined that this vendor has met the requirements of the original advertised specifications from competitive contract# 19-253 and is qualified to complete the tasks as outlined in the one (1) year contract extension period.

**FISCAL IMPACT:**

Funding for these services will be from various operating accounts. The total amount of this contract extension shall not exceed \$100,786.00 for the one (1) year contract extension term.

**ALTERNATIVE:**

There alternative would be to procure this through a new advertised competitive contract which would most likely result in a much higher price.

**HISTORY:**

To date, this vendor has been paid \$124,514.50 to provide third party liability insurance services for the risk management office that was awarded by the governing body.

**ADVERTISEMENT FOR BIDS:**

N/A (one (1) year contract extension)

**ATTACHMENTS:**

- 1) Memorandum of agreement (3 originals signed & attested)
- 2) Price page for the one (1) year option
- 3) Political Contribution Disclosure Form
- 4) Business Registration Certificate
- 5) Affirmative Action Requirements & Documents
- 6) Recommendation letter from the Office of the County Administrator.
- 7) Certificate of Insurance

JNC: cmc



**MEMORANDUM OF AGREEMENT**

**BETWEEN**

**VENDOR**

**COUNTY**

NAME: Inservco Insurance Services, Inc.  
ADDRESS: Two North Second Street  
Harrisburg, PA. 17101

County of Essex  
Hall of Records  
465 Dr. Martin Luther King Blvd.  
Newark, New Jersey 07102

Competitive Contract #: 19-253 (optional one (1) year contract extension)  
DATE ADVERTISED: December 24, 2019  
DATE RECEIVED: January 14, 2020  
CONTRACT PERIOD: April 1, 2023, to March 31, 2024  
BASIS OF AWARD: One (1) year contract extension as per: N.J.S.A.40A: 11-15  
COMMODITY: To Provide a Third Party Administrator (TPA) for Liability Insurance  
DESCRIPTION: Claims for the County of Essex Risk Manager.

**CONDITIONS:**

The award of this contract is subject to the approval of the Essex County Board of County Commissioners by resolution and such resolution will be prepared and presented to the Board at its regularly scheduled meeting. This contract becomes effective & binding upon adoption by resolution by the Essex County Board of County Commissioners.

The vendor identified above hereby agrees to comply with the terms and conditions of the bid specifications, advertisement, and vendor's proposal, as submitted by the vendor listed above under the bid number stated above, which are incorporated herein and made part hereof, and to faithfully perform the obligations therein to furnish & deliver the good or service listed above. This vendor has agreed to participate in the Voluntary Cooperative Purchasing System extending exact pricing & equipment specifications to all County Cooperative Agencies for the term of this contract. YES \_\_\_\_\_ NO \_\_\_\_\_ DOES NOT APPLY  X

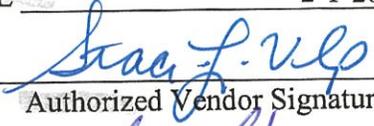
**PAYMENT TERMS:**

CONTRACT PERIOD: Contract Extension: April 1, 2023 to March 31, 2024  
AWARDED ITEMS: Contract Extension Price: \$100,786.00 (see attached)  
AMOUNT NOT TO EXCEED: \$100,786.00  
MONTHLY PAYMENT: N/A  
ANNUAL PAYMENT: \$100,786.00  
TOTAL AWARD TO VENDOR \$100,786.00 for a one (1) year contract extension.

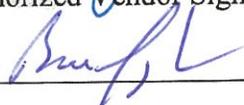
**ESSEX COUNTY**

**VENDOR**

DATE \_\_\_\_\_  
  
\_\_\_\_\_  
Joseph N. DiVincenzo, Jr.

DATE 2-1-2023  
  
\_\_\_\_\_  
Authorized Vendor Signature Staci L. Ulp

ATTEST: \_\_\_\_\_  
Deborah Davis Ford: Clerk of the Board

WITNESS:  \_\_\_\_\_

**PROPOSAL PRICE & SIGNATURE FORM**

To Provide:

**Claims Administrator for General Liability Insurance Claims:**

The undersigned has read and fully understands the specifications and requirements, and proposes to provide the above services for the Essex County Administrator / Risk Manager as specified herein for a three (3) year period from date of award for the following amount:

Cost for Years 1 - 3: \$ \$97,850, \$97,850, \$100,786 Total for all 3 years = \$296,486

Cost for years 1 - 3 in words: Total for all 3 years is Two Hundred Ninety Six Thousand Four Hundred and Eighty Six Dollars.

Optional one (1) year extension: \$ 100,786

Optional one (1) year extension in words: One Hundred Thousand Seven Hundred and Eighty Six Dollars

*OPTIONAL  
Package*

BUSINESS NAME Inservco Insurance Services, Inc.

AUTHORIZED SIGNATURE *Staci L. Ulp* DATE 1-6-2020

PRINT NAME Staci L. Ulp TITLE Executive VP & COO

TELEPHONE NUMBER: 800-356-0438 Ext. 4057 FAX NUMBER: 717-221-6060

TAX I.D. OR SOCIAL SECURITY NUMBER 23-2145732

ADDRESS: Two North Second Street  
Harrisburg, PA 17101

PHONE 800-356-0438 Ect. 4057 FAX 717-221-6060

EMAIL sulp@pnat.com



STATEMENT OF  
CERTAIN POLITICAL CONTRIBUTIONS  
MADE AFTER JULY 11, 1986

(This statement is part of the proposal packet)

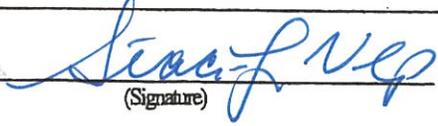
Ordinance Number 0-86-0007, as amended by Ordinance Number 0-95-0003, adopted by the Board of Chosen Freeholders of the County of Essex, requires that all proposals for negotiated contracts submitted by individuals and/or business entities seeking to provide goods or to perform services for the County of Essex shall contain a statement setting forth each political contribution by them of \$500.00 or more made within five years next preceding the date of said contract, either directly or indirectly, to any County elected political official, County political party and/or County official, political organization, or any State political party.

Set forth name of County elected official, County political party and/or County official, political organization, or State political party to whom a political contribution of \$500.00 or more was made by proposers within five (5) years of the date hereof.

If none, write "none".

Name		Amount
Essex Co Democratic Comm	07/19/18	\$300.00
Jones and Ruiz (Essex County Democratic Committee)	4/2/2021	\$300.00
Victory 2021 (Essex County Democratic Committee)	11/4/2021	\$300.00
Brendan Gill - Essex County Commissioner	3/28/2022	\$250.00
Luciano for Commissioner (Essex County Commissioner)	6/28/2022	\$200.00

Proposer: Inservco Insurance Services, Inc.

By:   
(Signature)

Name of Signatory: Staci L. Ulp  
(Print or Type)

STATE OF NEW JERSEY  
BUSINESS REGISTRATION CERTIFICATE

DEPARTMENT OF TREASURY  
DIVISION OF REVENUE  
PO BOX 280  
TRENTON NJ 08646-0282

TAXPAYER NAME:

INSERVED INSURANCE SERVICES, INC.

TRADE NAME:

ADDRESS:  
2 NORTH 2ND STREET  
HARRISBURG PA 17101  
EFFECTIVE DATE:

12/03/01

SEQUENCE NUMBER:

0108186

ISSUANCE DATE:

02/16/16

Director  
New Jersey Division of Revenue

FORM BRC

This Certificate is NOT assignable or transferable... It must be conspicuously displayed at the principal place of business.

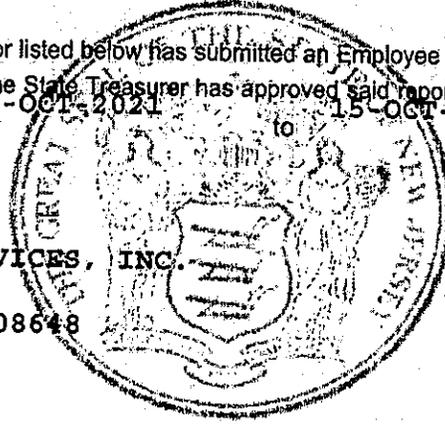
Certification 5867

# CERTIFICATE OF EMPLOYEE INFORMATION REPORT

RENEWAL

This is to certify that the contractor listed below has submitted an Employee Information Report pursuant to N.J.A.C. 17:27-1.1 et. seq. and the State Treasurer has approved said report. This approval will remain in effect for the period of 15-OCT-2021 to 15-OCT-2024

INSERVCO INSURANCE SERVICES, INC.  
3150 BRUNSWICK PIKE  
LAWRENCEVILLE NJ 08648



*Elizabeth Maher Muoio*  
ELIZABETH MAHER MUOIO  
State Treasurer



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/6/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Arthur J. Gallagher Risk Management Services, LLC 40 West Front Street Media PA 19063	<b>CONTACT NAME:</b> Terri Sutton	
	<b>PHONE (A/C No., Ext):</b> 610-548-5106	<b>FAX (A/C No.):</b> 610-565-1388
<b>E-MAIL ADDRESS:</b> Terri_Sutton@ajg.com		
<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
<b>INSURER A:</b> Hartford Casualty Insurance Company		29424
<b>INSURER B:</b> Property and Casualty Ins Co of Hartford		34690
<b>INSURER C:</b> Hartford Insurance Company of Illinois		38288
<b>INSURER D:</b>		
<b>INSURER E:</b>		
<b>INSURER F:</b>		

**COVERAGES** **CERTIFICATE NUMBER:** 714358487 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC OTHER:		39UUNHH9845	3/1/2022	3/1/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ \$
A	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		39 UEN DE7756	3/1/2022	3/1/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		39RHUHH9956	3/1/2022	3/1/2023	EACH OCCURRENCE \$ 25,000,000 AGGREGATE \$ 25,000,000 \$
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	39 WE AP9G6Y	3/1/2022	3/1/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**  
 Inservco Insurance Services, Inc. is a wholly-owned subsidiary of Pennsylvania National Mutual Casualty Insurance Company and is a Named Insured.

Per endorsement HG 00 01 09 16/16-02-0292 (4-11), the following are Additional Insureds under the General Liability, Automobile Liability and Umbrella Policies, on a primary & non-contributory basis, if required by written contract, but only for the coverage and limits provided by the policy and additional insured endorsement: The County of Essex, New Jersey, including all Departments, Boards, Committees, Commissions or Other Entities Established by Them or Operating Under Their Control and All Employees, Trustees, Commissioners, Committee Members, Aides, Advisory Board Members, Elected and Appointed Officials, Volunteers and Students While Acting Within the Scope of Their Duties On Behalf of The County of Essex, New Jersey  
 30 Days Notice of Cancellation will be provided

**CERTIFICATE HOLDER** **CANCELLATION**

County of Essex Risk Management Department Hall of Records/Room 510 465 Dr. Martin Luther King Blvd. Newark, NJ 07102 USA	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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# STANDARD GOODS AND SERVICES AGREEMENT INSURANCE REQUIREMENTS



**Provider of Goods and Services, please promptly give this to your broker**  
**These requirements constitute the Contract Insurance requirements**

Throughout the life of this Contract, the Provider of Goods and Services shall pay for and maintain in full force and effect with an insurance company(s) (Company) admitted by the New Jersey Department of Banking & Insurance to do business in the State of New Jersey and rated not less than "A- VIII" in Best Insurance Key Rating Guide, the following policies of insurance:

**REQUIRED COVERAGES - the following may be provided through a combination of primary and excess policies in order to meet the minimum limits set forth below:**

**1. Workers' Compensation and Employer's Liability:**

Provided in the State of New Jersey and elsewhere as may be required and shall include:

- a. Workers' Compensation Coverage: Statutory Requirements
- b. Employers Liability Limits not less than:
  - Bodily Injury by Accident: \$1,000,000 Each Accident
  - Bodily Injury by Disease: \$1,000,000 Each Employee
  - Bodily Injury by Disease: \$1,000,000 Policy Limit

**2. Commercial General Liability:**

Occurrence Form with the following limits:

- a. Each Occurrence: \$1,000,000
  - b. General Aggregate \$2,000,000
- Products/Completed Operations
- a. Each Occurrence \$1,000,000
  - b. General Aggregate \$2,000,000
  - c. Personal/Advertising Injury \$1,000,000

**3. Automobile Liability:**

When autos are used in conjunction with contracts/agreements with Essex County entities coverage must include All Owned, Hired and Non-Owned Vehicles.

- a. Per Accident Combined Single Limit \$1,000,000

**4. Indemnification:**

Provider of Goods and Services shall indemnify and hold harmless, the County, and the County's respective members, elected officials, employees, agents and representatives from and against claims, damages, losses, demands, suits, actions, recoveries, judgments, and costs and expenses, arising out of or resulting from performance of work, provided that such claim, damage, loss, or expense is attributable to bodily injury, sickness, disease, or death, or injury to or destruction of tangible property but only to the extent caused by the negligent acts or omissions of the Provider of Goods and Services, anyone directly or indirectly employed by them or anyone for whose acts they may be liable, regardless of whether or not such claim, damage, loss, expense, is caused in part by any Indemnified Parties.

**5. Deductibles/Self-Insured Retentions:**

Deductibles and Self-Insured Retentions must be declared. Provider of Goods and Services shall not have a Deductible or Self Insured Retention (SIR) on any policy greater than \$25,000. Higher values must be approved by the County Risk Manager.

**6. Additional Insureds:**

The following shall be added as ADDITIONAL INSUREDS on all liability policies (except Workers' Compensation and Professional Liability Policy, where applicable), for ongoing operations and completed operations on a primary noncontributory basis;

*The County of Essex, New Jersey, including all Departments, Boards, Committees, Commissions or Other Entities Established by Them or Operating Under Their Control and All Employees, Trustees, Commissioners, Committee Members, Aides, Advisory Board Members, Elected and Appointed Officials, Volunteers and Students While Acting Within the Scope of Their Duties On Behalf of The County of Essex, New Jersey.*

**7. Additional Insurance Requirements:**

a. Each insurance policy required by this clause shall be endorsed to state that coverage shall not be cancelled by either party, except that after thirty (30) days' prior to written notice by certified mail, return receipt requested, has been given to the County. The Insurer shall provide the County with notification of any cancellation, non-renewal, major change, modification or reduction in coverage.

b. Regardless of these contract minimum insurance requirements, the Provider of Goods and Service's and its insurer shall agree to commit the Provider of Goods and Service's full policy limits and these minimum requirements shall not restrict the Provider of Goods and Service's liability or coverage limit obligations.

c. The Provider of Goods and Services shall furnish the County of Essex with the Insurance Certificates and applicable Endorsements for all required insurance, prior to the County's execution of the Agreement and start of work. Proper Address for Certificates, Endorsements and Notices shall be:

**County of Essex**  
**Risk Management Department - Hall of Records/Room 510**  
**465 Dr. Martin Luther King Blvd.**  
**Newark, NJ 07102**

Provider of Goods and Services shall waive all rights of recovery against the County and all the additional insured's for loss or damage covered by any of the insurance maintained by the Provider of Goods and Services, where applicable by law.

**PRINCIPAL:**

Sworn to and subscribed  
before me on this \_\_\_\_ day  
of \_\_\_\_\_, 20\_\_

Inservco Insurance Services, Inc.  
(Bidder/Respondent's Company Name)

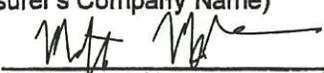
  
(Authorized Signature on Behalf of the Principal)

Staci L. Ulp  
(Print Name)

**INSURER:**

\_\_\_\_\_  
NOTARY PUBLIC

Arthur J Gallagher Risk Management Services Inc  
(Insurer's Company Name)

  
(Authorized Signature on behalf of the Insurer)



# OFFICE OF PURCHASING

## ASPIRATIONAL GOAL ACKNOWLEDGEMENT FORM

Name of Organization: Inservco Insurance Services, Inc.

Print Name of Vendor Representative: Staci L. Ulp

Title of Vendor Representative: President & CEO

I have reviewed the Essex County Board of Chosen Freeholders **Resolution No. R-2017-00834**, where it explains the economic disadvantages in Essex County, including above average unemployment rates, high home foreclosures rates and higher rates on ALICE households (Asset Limited, Income Constraint, Employed) and poverty households.

I understand that the Board of Chosen Freeholders believes potential vendors should be informed of Essex County's economic disadvantages that effects the well-being of Essex communities. I acknowledge this legislative body intent to **encourage** awarded vendors to actively pursue in their hiring efforts and practices to seek potential candidates from the vast, diverse, qualified and experienced talent that exists in Essex County's unemployed and underemployed residents.

By signing this acknowledgement form, I hereby confirm that I have read **Resolution No. R-2017-00834** and acknowledge the encouraged efforts of the County of Essex **Aspirational Goal to establish a total workforce for each contract comprised of a minimum of 35% Essex County residents**. I acknowledge that my organization will make good faith efforts in seeking talent from Essex County unemployed and underemployed qualified residents when fulfilling job opening(s).

Furthermore, I understand that for the term of each contract, I have been requested to complete an annual report of employee status, by filing a Vendor **Employee Disclosure Form**.

I also understand that the Board of Chosen Freeholders may review my responses to the Vendor Employee Disclosure Form to monitor my continued efforts and commitment.

Staci L. Ulp  
Print Full Name

 2-1-2023  
Signature and Date

\_\_\_\_\_  
Print Full Name

\_\_\_\_\_  
Signature and Date

*Putting Essex County First*



### VENDOR EMPLOYEE DISCLOSURE FORM

DATE: 2-1-2023

NAME: Inservco Insurance Services, Inc.

CONTACT NAME: Staci L. Ulp PHONE: 717-230-8300 Ext. 4057

EMAIL: sulp@pnat.com

LOCATION: 2 North Second Street, Harrisburg PA 17101

Are you currently employed by the County of Essex in the current year ONLY if this is your first time working with the County of Essex.

For all awarded contracts with the County, please complete each contract year, up to the last 6 years. Failure to complete this form may result in the loss or any diminution of this contract.

TOTAL EMPLOYEES	ESSEX COUNTY EMPLOYEES ONLY	YEAR	TOTAL EMPLOYEES	ESSEX COUNTY EMPLOYEES ONLY	YEAR	TOTAL EMPLOYEES	ESSEX COUNTY EMPLOYEES ONLY
		2022		0			
		2021		0			
		2020		0			
		2019		0			
		2018		0			

Are you making any efforts to employ Essex County residents?

Do you hire Union labor?  Y  N If so, please provide Union Affiliation(s):

*Putting Essex County First*

ESSEX COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER

RESOLUTION OF THE BOARD OF CHOSEN FREEHOLDERS  
COUNTY OF ESSEX

235

RESOLUTION NO. 2017-00834  
PROPOSED BY: FREEHOLDER TORO  
CO-SPONSORS: JOHNSON, RICHARDSON, GILL & TIMBERLAKE  
SUBJECT:

AUTHORITY FOR RESOLUTION N.J.S.A. 40:41A-38(a)  
AUTHORITY FOR ACTION C.C.E. 2-29(B)

**RESOLUTION ESTABLISHING THE COUNTY OF ESSEX ASPIRATIONAL GOAL  
INITIATIVE TO INCREASE THE PARTICIPATION OF A DIVERSE AND QUALIFIED  
ESSEX COUNTY WORKFORCE IN COUNTY PROJECTS**

WHEREAS, it is the position of the Board of Chosen Freeholders that it is our obligation as a government body to create opportunities to enhance the quality of life for Essex County residents; and

WHEREAS, as of April 2017, statistics from the New Jersey Department of Labor (NJDL) indicate Essex County has the second largest labor force per square mile in the State, with 2,899 such persons per square mile; and

WHEREAS, statistics also indicate Essex County's unemployment rate is amongst the *highest* in the northern region of the State at 5.2%, with 18,900 unemployed residents; and

WHEREAS, in May 2016, data from U.S. foreclosure reporting company, RealtyTrac revealed that Essex County had a foreclosure rate at 4.12%, comprising a total of 6,367 homes in foreclosure; the *highest* number of foreclosed properties in the State of New Jersey; and

WHEREAS, the Essex County Board of Chosen Freeholders finds the data presented supports the notion that a direct correlation exists between the unemployed and/or underemployed rates and high housing foreclosure rates; and

WHEREAS, research conducted by the United Way found in 2014 that 28% of Essex County households were living in ALICE households (Asset Limited, Income Constrained, Employed) and 16% of Essex County households were living in poverty households; placing both metrics *above* State average; and

WHEREAS, the Board of Chosen Freeholders believes vendors that service the County of Essex should be informed of Essex County's economic disadvantages and can be active participants in the alleviation of the social ills that afflict County residents; and

WHEREAS, the 2016 Annual Report of the Essex County Office of Small Business Development and Affirmative Action ("SBDAA") reflects "during the period December 16, 2015 through December 14, 2016, the County spent \$178,507,745.57 on private contracts"; and

WHEREAS, the Board of Chosen Freeholders' intent is to *encourage* its vendors to be partners in the ongoing and constant effort to improve the livelihood of its residents and consider hiring workers from the vast and diverse pool of qualified and experienced workers that reside in Essex County; now therefore, be it

RESOLVED, The Essex County Board of Chosen Freeholders establishes an Aspirational Hiring Goal for the performance of certain contracts, including construction and improvement projects; solid waste removal and recycling; building, roads and parks maintenance; specialty trade work (i.e., plumbing and electrical, etc.), wherein the awarded vendor will make a voluntary, good faith effort to assemble a workforce for the performance of its Essex County contract with at least 35% being bona fide Essex County residents; where good faith efforts<sup>1</sup> for hiring Essex County residents are to be encouraged to the greatest extent possible by developers, construction contractors and any other entities or individuals which have been contracted to conduct business with the County of Essex, and the same shall be applied to all federally or state assisted, county-sponsored or privately funded developments within the County limits; and be it further

RESOLVED, it is one of the goals of this Resolution that the County's Purchasing Department establish policy wherein the Contract package to the awarded bidders and vendors, for those services described above, shall include a copy of this Resolution, along with the Aspirational Goal Acknowledgement Form and Vendor Employee Disclosure Form(s), which the vendor is encouraged, but not mandated, to review, complete and return to the Purchasing Department with the completed contract documents; and be it further

RESOLVED, the Essex County Board of Chosen Freeholders shall establish a Board Committee to periodically review Vendors' participation in hiring Essex residents. The committee will analyze Vendors' Employee Disclosure Forms and employee residency records to monitor Vendors' compliance with this ordinance. The Committee and/or the Board as a Whole is empowered to call Vendors to a public meeting to seek information concerning their contract(s) with the County of Essex. Vendors are asked to maintain current employee records while servicing County contracts, which may be requested by the Board; and be it further

RESOLVED, The Clerk of the Board shall forward copies of this Resolution to the Office of the County Administrator, Office of County Counsel and Office of Purchasing.

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<sup>1</sup> Examples of good faith efforts to commitment: hire Essex labor and, if organized labor is utilized by the vendor, to use Essex County based local unions as possible; advertise job openings, for a minimum of 30 days, with a government employment agency, non-profit employment agency, state university or college placement department and/or Essex County Vocational schools. Participation in employment job fairs and recruitments in Essex community and faith based organizations programs and events; including Veteran hiring preference. Providing apprenticeships, internships, and on-the-job training opportunities to Essex residents.

*Michael J. Richardson*

Approved as to form and legality

Freeholder Council

RECORD OF VOTE (X=Vote N.V.=Abstention ABS=Absent)

Moved by Freeholder  
Second by Freeholder

*TORO*  
*Richardson*

Freeholder	Yes	No	N.V.	ABS	Freeholder	Yes	No	N.V.	ABS
BOBADILLA	X				RICHARDSON	X			
GILL, V.P.				X	SEBOLD	X			
JOHNSON	X				TORO	X			
JONES	X								
LUCIANO	X				TIMBERLAKE, PRES.	X			

It is hereby certified that the foregoing Resolution was  adopted ( ) defeated ( ) tabled by roll call vote at a Regular meeting of the Board of Chosen Freeholders of the County of Essex, New Jersey held on Oct 14, 2014

Is Publication Required ( ) Yes ( ) No

Date Published \_\_\_\_\_

*Briggs N. Timberlake*

Briggs N. Timberlake, President