

RESOLUTION OF THE TOWNSHIP OF IRVINGTON, NJ

No. **DA16-00927-40**

Date of Adoption **SEPTEMBER 27, 2016**

APPROVED AS TO FORM AND LEGALITY ON THE BASIS OF FACTS SET FORTH BY

Legislative Research Officer

PRESENTED BY COUNCIL MEMBER

BURGESS

SECONDED BY

COX

AUTHORIZING THE AWARD OF A FAIR AND OPEN CONTRACT FOR SELF-INSURED ADMINISTRATOR

WHEREAS, sealed proposals were received on July 27, 2016 for Self-Insured Administrator (General Liability and Workers' Compensation) in response to public advertisement in the New Jersey Star Ledger on July 12, 2016; and

WHEREAS, three (3) qualifications were received and publicly opened by the Municipal Clerk and the Purchasing Agent; and

WHEREAS, said qualifications were referred to Township Attorney; and

WHEREAS, the qualifications satisfied the RFP requirement; and

WHEREAS, the Township Attorney has recommended award should be made to D & H Alternative Risk Solutions, PO Box 68 Newton, NJ 07860 on the basis of their qualifications and experiences, for a total amount of \$58,050.00 (\$30,025 for Workers Compensation, \$28,025.00 for General Liability [all lines]) per year for three years; and

NOW THEREFORE, BE IT RESOLVED BY THE MUNICIPAL COUNCIL OF THE TOWNSHIP OF IRVINGTON that a three years contract for Self-Insured Administrator be awarded to D & H Alternative Risk Solutions, PO Box 68 Newton, NJ 07860 on the basis of their response to the request for proposal, meeting the selection criteria and qualifications, for an amount not to exceed \$58,050.00, per year for three years, starting on September 28, 2016 and ending on September 27, 2019; and

BE IT FURTHER RESOLVED that the Township Attorney is hereby authorized and directed to prepare the necessary contract and the Mayor and Township Clerk are authorized and directed to sign the same; and

BE IT FURTHER RESOLVED the required Certificate of Availability of Funds No C6-00229 for the above has been obtained from the Chief Financial Officer for the first three months of service and the appropriation to be charged for this expenditure is in the amount of \$14,512.50 is Account Number 6-01-20-155-155-299 and the remaining balance of \$159,637.50 will be certified will be certified by the Chief Financial Officer contingent upon the adoption of the calendar year 2017, 2018 and 2019 budgets.

RECORD OF COUNCIL VOTE

X = Indicates Vote N.V. = No Vote A.B. = Absent

COUNCIL MEMBER	YES	NO	N.V.	A.B.	COUNCIL MEMBER	YES	NO	N.V.	A.B.
BURGESS, 1ST VICE PRESIDENT	X				INMAN	X			
COX	X				JONES, 2ND VICEPRESIDENT	X			
FREDERIC	X				LYONS, PRESIDENT	X			
DR. HUDLEY	X								

PRESIDENT OF COUNCIL *David Lyons* MUNICIPAL CLERK *Shelly Men* DATE **SEPTEMBER 27, 2016**

I hereby certify that the foregoing is a true copy of a Resolution duly adopted by the Municipal Council. In witness whereof I have hereunto set my hand and the Corporate Seal of the Township of Irvington.

MUNICIPAL CLERK

DATE

SEP 27 2016

ADMINISTRATOR ☒ ASSESSOR ☐ BLDG ☐ CFO ☒ COLLECTOR ☐ COURT ☐ ENGINEER ☐ FIRE ☒ HEALTH ☐ HOUSING ☐ INIC ☐ JUDGE ☐ LEGAL ☒ LIBR ☐ LICEN ☐ MAYOR ☐ OCDP ☐ PARKS ☐ PAYROLL ☐ PUBLIC SAFETY ☒ DIR ☐ PUBLIC WORKS ☐ PURCHASING ☒ SEC ☐ PB/ZBA ☐ TRAFFIC ☐ ZONING ☒ OFF ☐ DLGS ☐ GNCD ☐ OTHER(S):

Certification Of Availability of Funds

This is to certify to the of the Township of Irvington that funds for the following resolutions are available.

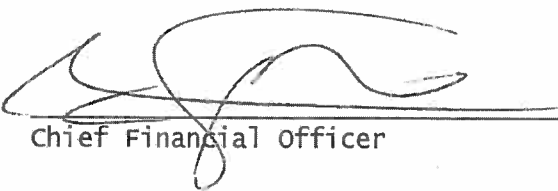
Resolution Date: 09/27/16
Resolution Number: C-00229

Vendor: DHALT001 D&H ALTERNATIVE RISK SOLUTIONS
P.O. BOX 68
NEWTON, NJ 07860

Contract: C6-00229 TPA Claims Services
10/1/16 - 9/30/17

Account Number	Amount	Department Description
6-01-20-155-155-299	14,512.50	LEGAL SERVICES
Total	14,512.50	

Only amounts for the 2016 Budget Year have been certified. Amounts for future years are contingent upon sufficient funds being appropriated.



Chief Financial Officer

SERVICE REQUESTED:	Third Party Administrative Services-Workers's Compensation and Liability Claims Services		
VENDOR NAME:	Claims Resolution Corporation, Inc.	Inservco Insurance Services, Inc.	D&H Alternative Risk Solutions, Inc.
CONTACT PERSON:	David Harris	Michael P. Scheib	Wayne F. Dietz
ADDRESS:	701 Somerstown Lane, Galloway, NJ 08205	2 North Second Street, Harrisburg, PA 17101	P.O. Box 68 Newton, NJ 07860
TELEPHONE:	973-731-5700	800-356-0438	973-940-1851
FAX NUMBER:	609-241-0400	717-221-6060	973-940-1852
EMAIL ADDRESS:	dharris@crctpa.com	mscheib@pnat.com	gh@risksolutions.com
TOTAL COST:	\$77,000.00	\$81,885	\$58,050
Business Disclosure Entity Certification	x	x	x
Bidder's Affidavit	x	x	x
Non-Collusion Affidavit	x	x	x
Disclosure Ownership	x	x	x
Qualification Affidavit	x	x	x
Insurance Requirement	x	x	x
Affirmative Action	x	x	x
NJ Business Registration Cert	x	x	x
Professional Service Entity Info	x	x	x
Submission Form	x	x	x
Statement of indebtedness form	x	x	x
Payment Commodity	x	x	x
Iran Disclosure	x	x	x
Addendum			