

**BID RESULTS****AB2020-31 DELIVERY OF ELECTRONIC VOTING MACHINES FOR THE MERCER COUNTY SUPERINTENDENT OF ELECTIONS  
FOR A PERIOD OF TWO (2) YEARS WITH THE OPTION TO EXTEND ONE (1) YEAR****BID OPENING DATE: JULY 7, 2020**

<b>NO. OF BIDDERS:</b>	<b>1</b>
NAME OF BIDDER	BROADWAY MOVING & STORAGE, INC.
ADDRESS	130 DURAND AVE.
CITY, STATE, ZIP	TRENTON, NJ 08611
CONTACT	RICHARD CROCKER
TELEPHONE	609 396 4561
FAX	609 396 2712
E-MAIL	<a href="mailto:INFO@BROADWAYMOVERS.COM">INFO@BROADWAYMOVERS.COM</a>
INDEMNIFICATION AND INSURANCE REQUIREMENTS	SIGNED AND DATED
NEW JERSEY BUSINESS REGISTRATION	OK
STATEMENT OF OWNERSHIP FORM	SIGNED AND DATED
EXHIBIT A	INCLUDED
IRAN CERTIFICATION	SIGNED AND DATED
EIC	32324 EXPIRES 4.15.23
HOLD PRICING BEYOND 60 DAYS	YES
CONTINUITY OF OPERATION	YES
NEW JERSEY PUBLIC MOVERS AND WAREHOUSEMEN CERTIFICATE ISSUED BY NJ DIVISION OF CONSUMER AFFAIRS	39PC000030507 EXPIRES 9.30.2020
AIR RIDE CERTIFICATION	SIGNED
REFERENCES	INCLUDED, USING AGENCY TO REVIEW
EXCEPTIONS	YES; PRICE PER MACHINE \$95 WHEN THERE ARE LESS THAN 4 MACHINES DAILY WILL BE REVIEWED BY USING AGENCY
FATAL FLAW	NO



<b>BID RESULTS</b>	
<b>CK09MERCER2020-05 SCRAP METAL REMOVAL FOR THE COUNTY OF MERCER AND THE</b>	
<b>BID OPENING DATE: JULY 8, 2020</b>	
<b>NO. OF BIDDERS:</b>	<b>1</b>
NAME OF BIDDER	SCARPATI, INC.
ADDRESS	1300 - 1350 NEW YORK AVENUE
CITY, STATE, ZIP	TRENTON, NJ 08638
CONTACT	JOHN SCARPATI. JR.
TELEPHONE	609 396 7040 EXT. 10
FAX	609 396 4457
E-MAIL	<a href="mailto:INFO@SCARPATIRECYCLING.COM">INFO@SCARPATIRECYCLING.COM</a>
INDEMNIFICATION AND INSURANCE REQUIREMENTS	SIGNED AND DATED
CERTIFICATE OF INSURANCE	INCLUDED
EXECUTIVE ORDER 98-1	SIGNED AND DATED
IRAN CERTIFICATION	SIGNED AND DATED
EIC	45898 EXPIRES 02.15.25
NEW JERSEY BUSINESS REGISTRATION	OK
STATEMENT OF OWNERSHIP	OK
HOLD PRICING BEYOND 60 DAYS	YES
CONTINUITY OF SERVICES	YES
EXTEND TO THE CO-OP	YES
<b>PERCENTAGE PAID TO THE COUNTY</b>	<b>83%</b>
EXCEPTIONS	NONE
FATAL FLAW	NO

BID RESULTS			
AB2020-09 PHYSICAL THERAPY SERVICES FOR THE MERCER COUNTY CORRECTIONAL FACILITY			
BID OPENING DATE: JULY 8, 2020			
NUMBER OF BIDDERS	3		
NAME OF BIDDER	GENERAL HEALTHCARE RESOURCES, LLC	SAND REHABILITATION ASSOCIATES LLC, DBA INTEGRITY PHYSICAL THERAPY AND WELLNESS LLC	MOVEWELL PHYSICAL THERAPY
ADDRESS	2250 HICKORY ROAD, SUITE 240	10 RAMS GATE COURT	6 DEVONWOOD CT
CITY, STATE, ZIP	PLYMOUTH MEETING, PA 19462	MEDFORD, NJ 08055	VOORHEES, NJ 08043
CONTACT	NIINA LAITINEN	RUDOLPH CHRISTOPHER	MATTHEW HOFFMAN
TELEPHONE	800 879 4471	609 442 1212	215 630 2268
FAX	610 684 4739	609 241 6348	
E-MAIL	<a href="mailto:CONTRACTS@GHRESOURCES.COM">CONTRACTS@GHRESOURCES.COM</a>	<a href="mailto:RUDOLPHCHRISTOPHER@INTEGRITYPTWELLNESS.COM">RUDOLPHCHRISTOPHER@INTEGRITYPTWELLNESS.COM</a>	<a href="mailto:MATTMOVEWELLPT@GMAIL.COM">MATTMOVEWELLPT@GMAIL.COM</a>
INDEMNIFICATION AND INSURANCE REQUIREMENTS	SIGNED AND DATED	SIGNED AND DATED	NOT INCLUDED
CERTIFICATE OF INSURANCE	REQUIRED IF AWARDED	REQUIRED IF AWARDED	NOT INCLUDED
ADDENDUM NO. ONE	SIGNED AND DATED	SIGNED AND DATED	NOT INCLUDED
LICENSURE AS REQUIRED BY THE PHYSICAL THERAPIST LICENSE ACT OF 1983, N.J.S.A. 45:9-37	40QA00508800 EXPIRES 1/31/22	40QA00810700 EXPIRES 1/31/22	NOT INCLUDED
IRAN CERTIFICATION	SIGNED AND DATED	OK	NOT INCLUDED
NEW JERSEY BUSINESS REGISTRATION	REQUIRED IF AWARDED	OK	NOT INCLUDED
STATEMENT OF OWNERSHIP	OK	OK	NOT INCLUDED
REFERENCES	CORRECTION CENTER TO REVIEW	CORRECTION CENTER TO REVIEW	NOT INCLUDED
EXECUTIVE ORDER 98-1	SIGNED AND DATED	SIGNED AND DATED	NOT INCLUDED
EXHIBIT A	REQUIRED IF AWARDED	INCLUDED	NOT INCLUDED
EIC	REQUIRED IF AWARDED	REQUIRED IF AWARDED	NOT INCLUDED
EXTEND BEYOND 60 DAYS	YES	YES	NOT INCLUDED
CONTINUITY OF OPERATION	YES	YES	NOT INCLUDED
<b>ANNUAL COST, YEAR ONE</b>			
COST FOR INITIAL EVALUATION	\$ 80.00	\$ 125.00	N/A
COST FOR 40 EVALUATIONS	\$ 3,200.00	\$ 5,000.00	N/A
COST FOR FOLLOW-UP ORDERED BY PHYSICIAN	\$ 67.00	\$ 100.00	N/A
COST FOR 650 FOLLOW-UP ORDERED BY PHYSICIAN	\$ 43,550.00	\$ 65,000.00	N/A
<b>GRAND TOTAL FOR ESTIMATED EVALUATIONS AND FOLLOW-UPS</b>	<b>\$ 46,750.00</b>	<b>\$ 70,000.00</b>	N/A
<b>ANNUAL COST, YEAR TWO</b>			N/A
COST FOR INITIAL EVALUATION	\$ 80.00	\$ 125.00	N/A
COST FOR 40 EVALUATIONS	\$ 3,200.00	\$ 5,000.00	N/A
COST FOR FOLLOW-UP ORDERED BY PHYSICIAN	\$ 67.00	\$ 100.00	N/A
COST FOR 650 FOLLOW-UP ORDERED BY PHYSICIAN	\$ 43,550.00	\$ 65,000.00	N/A
<b>GRAND TOTAL FOR ESTIMATED EVALUATIONS AND FOLLOW-UPS</b>	<b>\$ 46,750.00</b>	<b>\$ 70,000.00</b>	N/A
<b>GRAND TOTAL, TWO YEARS</b>	<b>\$ 93,500.00</b>	<b>\$ 140,000.00</b>	N/A
EXCEPTIONS	NONE	NONE	NONE
FATAL FLAW	NO	NO	YES, DID NOT SUBMIT REQUIRED BID DOCUMENTS