

# REQUEST FOR PROPOSALS

## *Financial Auditing Services*

Due: Wednesday, October 8th, 2025, by 10:00 AM



Newton Housing Authority  
32 Liberty Street  
Newton, New Jersey 07860

## REQUEST FOR PROPOSALS

The Housing Authority of the Town of Newton, New Jersey will accept proposals for its Annual Financial Audit for the fiscal year ending 12/31/2025. It is the Housing Authority's desire to retain and employ a duly qualified Independent Public Auditor (I.P.A.) to audit the books and accounts of the Authority. All services must be in accordance with the existing rules, orders, directives, regulations handbooks and laws as promulgated by the United States Department of Housing and Urban Development and the State of New Jersey under the Local Authorities Fiscal Control Act and the Fiscal Affairs Law (including N.J.A.C. 5:31-7). The services that are requested will be as follows and will encompass all the Housing Authority's programs (including, but not limited to-Public Housing Program, Capital Fund Program, etc.):

- 1) Audit the accounts and records of the Authority for the 12-month periods 1/1/2025 to 12/31/2025 in accordance with generally accepted government auditing standards (GAAS), Government Auditing Standards, the auditing and reporting provisions in OMB audit circular, and those auditing standards having been adopted by the Local Finance Board and the Division of Local Government Services, Dept. of Community Affairs, State of New Jersey. The audit performed should be sufficient in scope to enable the auditor to express an opinion on whether the financial statements fairly present the financial position of the Authority and are free of material misstatements. It must be acceptable by the U.S. Department of Housing & Urban Development and the State of New

Jersey. The report must include all statements necessary to present the audit in conformity with Generally Accepted Accounting Principles (GAAP).

2) The audit report must be in a format which is approvable by the United States Department of Housing and Urban Development as detailed in the HUD Audit Guide (7476.1 REV-1), the Single Audit Act of 1984 and the State of New Jersey under the Local Authorities Fiscal Control Act, N.J.A.C. 5:31-7 and GASBY.

3) The report must be completed and submitted to the Housing Authority and the State of New Jersey (Division of Local Government Services) within four (4) months of the end of the Authority's fiscal year.

4) The auditor will be required to utilize the state prescribed "Audit Questionnaire" as part of the auditor's working papers.

5) Upon completion of the report, sufficient certified copies should be made to provide each PHA Commissioner and Staff with a copy and other copies for the HUD office, State of New Jersey, Local Governing Body, and other applicable agencies as required by all applicable rules and regulations.

6) Must attend meetings, as requested, with Housing Authority Commissioners/staff, HUD Auditors/staff and must make work papers available for a period of time dictated by the government.

7) The auditor will be required to prepare and submit the state-required "Synopsis of Audit" in a format that is acceptable for publication in a newspaper of general circulation.

8) The auditor must work with the fee accountant to prepare

the necessary schedules and forms to ensure compliance with GAAP, per instructions of the U.S. Dept. of HUD.

9) The FYE 12/31/2025 audit report shall commence immediately upon notification from the Housing Authority that the Financial Data Schedule (FDS) has been completed and submitted to HUD.

Qualifications:

1) Must be a Registered Municipal Accountant of New Jersey (RMA) or a Certified Public Accountant of New Jersey (CPA) as required by Title 40A:5A-15 of the Fiscal Control Law.

2) The selected Auditor must meet the standards specified in the Standards for Audit of Government Organizations, Programs, Activities and Functions.

3) Must have previous experience auditing Public Housing Authorities.

4) Must be approvable by the U.S. Department of Housing & Urban Development

Proposal Submission:

All persons interested in submitting a proposal for the Annual Audit should submit a proposal based upon a lump-sum fee. Proposals should be delivered to the Housing Authority of the Town of Newton, New Jersey on or before Wednesday, October 8, 2025, by 10:00 AM. All proposals will be reviewed in accordance with the Housing Authority's rating system. The proposal rating system and the standard form of contract are attached to this Request for Proposals.

The following must be submitted with the proposal:

- 1) Listing of similar work that the firm has previously completed.
- 2) Listing of references.
- 3) New Jersey Business registration Form
- 4) Affirmative Action Compliance Notice
- 5) Stockholder Disclosure Certification
- 6) Non-Collusive Affidavit

This solicitation is being made as "Fair and Open" in accordance with N.J.S.A. 40A:19A-20.4 et seq.

WILLIAM F. SNYDER  
Interim Executive Director

## COMPETITIVE PROPOSAL EVALUATION SYSTEM

Prepared by:

Type of Service: Auditing

Name/Address of Respondent:

- 1) Demonstrated experience and competence in this type of work (20 Points).
- 2) Familiarity with the Housing Authority's Programs in specific and HUD rules and regulations in general (25 Points).
- 3) Capability and capacity to accomplish work within the required time (15 Points).
- 4) Geographic location of the firm relative to the proximity to the Housing Authority (5 Points).
- 5) Specialized experience of key personnel in Housing Authority Programs (20 Points).
- 6) Firm's Equal Opportunity Policy. Each bidder must ensure that all employees and applicants for employment are not discriminated against because of race, color, religion, sex or national original (5 Points).
- 7) Price (10 Points)

Total Point Score (100):

Narrative                      Review                      of                      Proposal:

**PROPOSAL FOR AUDITING SERVICES**

**Newton Housing Authority  
32 Liberty Street  
Hackensack, New Jersey 07960  
(973 383-5191)**

Firm Name:

Address:

Telephone #

Contact Person:

1/1/2025-12/31/2025 Fee: \$

Hourly Rate for additional services: \$



## **Legal Advertisement**

### **Request for Proposal**

The Housing Authority of the Town of Newton will receive Proposals for Audit Services of an Independent Public Accountant to audit the financial records of the Authority for the period ending December 31st, 2025, in accordance with general accepted and government auditing standards, the auditing and reporting provisions of OMB Circular A-133 and HUD notice PIH 97-30 and in conformance with the State of New Jersey Statutes and Regulations, New Jersey Administrative Code 5:31.7. The authority reserves the right to reject any and all proposals submitted and to waive any information thereto, and to request additional information from all auditors. The proposal package can be obtained at the Newton Housing Authority office, 32 Liberty Street, Newton, New Jersey and returned there on or before Wednesday, October 8th, 2025, by 10:00 AM. This solicitation is being undertaken in accordance with NJSA 19:44A-29.4 et seq. as a "fair and open" competitive process and in compliance with the rules & restrictions set forth by the State's Local Unit Pay-to-Play law.

William F. Snyder  
Executive Director



<b>STANDARD BID DOCUMENT REFERENCE</b>	
	<b>Reference: VII-D</b>
<b>Name of Form:</b>	<b>BUSINESS REGISTRATION CERTIFICATE</b>
<b>Statutory Reference:</b>	<b>N.J.S.A. 52:32-44 (P.L. 2004, c.57)</b>
<b>Instructions Reference</b>	<b>Statutory and Other Requirements VII-D</b>
<b>Description:</b>	<b>Contractor must provide State Division of Revenue issued Business Registration Certificate with the bid submission.</b>

Detailed information on this requirement is found in Division of Local Government Services Local Finance Notices 2004-17 (8/6/04), 2004-24 (11/1/04), 2005-12 (4/27/05) and on the Division web site at [www.nj.gov/dca/lgs/lpcl](http://www.nj.gov/dca/lgs/lpcl). These resources and a Frequently Asked Questions resource should be consulted when questions arise.

STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE FOR STATE AGENCY AND CASINO SERVICE CONTRACTORS		ISSUANCE DIVISION OF REVENUE PO BOX 22 TRENTON, NJ 08646
TAXPAYER NAME:	TRADE NAME:	
TAX REGISTRATION TEST ACCOUNT	CLIENT/STRAT	
TAXPAYER IDENTIFICATION#:	SEQUENCE NUMBER:	
870-057-382/500	0107	
ADDRESS:	ISSUANCE DATE:	
847 ROEHLING AV TRENTON NJ 08611	07/14/04	
EXPIRATION DATE:		
01/01/05		
<p><i>[Signature]</i> Acting Director</p> <p>This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.</p>		

STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE	
Taxpayer Name:	TAX REG TEST ACCOUNT
Trade Name:	
Address:	847 ROEHLING AVE TRENTON, NJ 08611
Certificate Number:	1093907
Date of Issuance:	October 14, 2004
For Office Use Only:	
20041014112823533	

<b>STANDARD BID DOCUMENT REFERENCE</b>	
	<b>Reference: VII-H</b>
<b>Name of Form:</b>	<b>NON-COLLUSION AFFIDAVIT</b>
<b>Statutory Reference:</b>	No specific statutory reference State Statutory Reference N.J.S.A. 52:34-15
<b>Instructions Reference:</b>	Statutory and Other Requirements VII-H
<b>Description:</b>	The Owner's use of this form is optional. It is used to ensure that the bidder has not participated in any collusion with any other bidder or Owner representative or otherwise taken any action in restraint of free and competitive bidding.

NON-COLLUSION AFFIDAVIT

State of New Jersey

County of \_\_\_\_\_

ss:

I, \_\_\_\_\_ residing in \_\_\_\_\_  
(name of affiant) (name of municipality)  
in the County of \_\_\_\_\_ and State of \_\_\_\_\_ of full age,  
being duly sworn according to law on my oath depose and say that:

I am \_\_\_\_\_ of the firm of \_\_\_\_\_  
(title or position) (name of firm)

\_\_\_\_\_ the bidder making this Proposal for the bid

entitled \_\_\_\_\_, and that I executed the said proposal with  
(title of bid proposal)

full authority to do so that said bidder has not, directly or indirectly entered into any agreement, participated in any collusion, or otherwise taken any action in restraint of free, competitive bidding in connection with the above named project; and that all statements contained in said proposal and in this affidavit are true and correct, and made with full knowledge that the \_\_\_\_\_ relies upon  
the truth of the statements contained in said Proposal

(name of contracting unit)

and in the statements contained in this affidavit in awarding the contract for the said project.

I further warrant that no person or selling agency has been employed or retained to solicit or secure such contract upon an agreement or understanding for a commission, percentage, brokerage, or contingent fee, except bona fide employees or bona fide established commercial or selling agencies maintained by

Subscribed and sworn to

before me this day

\_\_\_\_\_  
Signature

\_\_\_\_\_, 2 \_\_\_\_\_

(Type or print name of affiant under signature)

Notary public of \_\_\_\_\_

My Commission expires \_\_\_\_\_

(Seal)

STANDARD BID DOCUMENT REFERENCE	
Name of Form:	FEDERAL NON-DEBARMENT CERTIFICATION
Statutory Reference:	N.J.S.A. 52:32-44.1 (P.L. 2019, c.406)
Description:	Meets statutory criteria for certification of non-debarment by a federal government agency.

**Summary of the Certification Requirements under N.J.S.A. 52:32-44.1**

Pursuant to state law any natural person, company, firm, association, corporation, or other entity prohibited, or "debarred," from contracting with the federal government agencies, shall also be prohibited from contracting for public work in the state of New Jersey. This prohibition also extends to any affiliate organization(s) held by or subject to the control of an entity of that prohibited person or entity.

Prior to awarding a contract for public work a local units must obtain written certification from the contracting person or entity through the form below, attesting to their non-debarment from contracting with federal government agencies. Contracting units are reminded that they must fill-in the boilerplate information in the certification sections of Parts II through IV regarding their name and type of contracting unit before using the form.

**CERTIFICATION OF NON-DEBARMENT**



**FOR FEDERAL GOVERNMENT CONTRACTS**

**N.J.S.A. 52:32-44.1 (P.L. 2019, c.406)**

This certification shall be completed, certified to, and submitted to the contracting unit prior to contract award, except for emergency contracts where submission is required prior to payment.

PART I: VENDOR INFORMATION	
Individual or Organization Name	
Physical Address of Individual or Organization	
Unique Entity ID (if applicable)	
CAGE/NCAGE Code (if applicable)	
Check the box that represents the type of business organization:	

☐ Sole Proprietorship (skip Parts III and IV) ☐ Non-Profit Corporation (skip Parts III and IV)

☐ For-Profit Corporation (any type) ☐ Limited Liability Company (LLC) ☐ Partnership

☐ Limited Partnership

☐ Limited Liability Partnership (LLP)

☐ Other (be specific): \_\_\_\_\_

PART II - CERTIFICATION OF NON-DEBARMENT: Individual or Organization			
<p>I hereby certify that the individual or organization listed above in Part I is not debarred by the federal government from contracting with a federal agency. I further acknowledge: that I am authorized to execute this certification on behalf of the above-named organization; that the <b>&lt;name of contracting unit&gt;</b> is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the date of contract award by <b>&lt;type of contracting unit&gt;</b> to notify the <b>&lt;type of contracting unit&gt;</b> in writing of any changes to the information contained herein; 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 am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the <b>&lt;type of contracting unit&gt;</b>, permitting the <b>&lt;type of contracting unit&gt;</b> to declare any contract(s) resulting from this certification void and unenforceable.</p>			
Full Name (Print):		Title:	
Signature:		Date:	

**PART III - CERTIFICATION OF NON-DEBARMENT: Individual or Entity Owning Greater than 50**



Percent of Organization	
<b>Section A (Check the Box that applies)</b>	
<input type="checkbox"/>	Below is the name and address of the stockholder in the corporation who owns more than 50 percent of its voting stock, or of the partner in the partnership who owns more than 50 percent interest therein, or of the member of the limited liability company owning more than 50 percent interest therein, as the case may be.
<b>Name of Individual or Organization</b>	
<b>Physical Address</b>	
<b>OR</b>	
<input type="checkbox"/>	No one stockholder in the corporation owns more than 50 percent of its voting stock, or no partner in the partnership owns more than 50 percent interest therein, or no member in the limited liability company owns more than 50 percent interest therein, as the case may be.
<b>Section B (Skip if no Business entity is listed in Section A above)</b>	
<input type="checkbox"/>	Below is the name and address of the stockholder in the corporation who owns more than 50 percent of the voting stock of the organization's parent entity, or of the partner in the partnership who owns more than 50 percent interest in the organization's parent entity, or of the member of the limited liability company owning more than 50 percent interest in organization's parent entity, as the case may be.
<b>Stockholder/Partner/Member Owning Greater Than 50 Percent of Parent Entity</b>	
<b>Physical Address</b>	
<b>OR</b>	
<input type="checkbox"/>	No one stockholder in the parent entity corporation owns more than 50 percent of its voting stock, no partner in the parent entity partnership owns more than 50 percent interest therein, or no member in the parent entity limited liability company owns more than 50 percent interest therein, as the case may be.
<b>Section C – Part III Certification</b>	

I hereby certify that no individual or organization that is debarred by the federal government from contracting with a federal agency owns greater than 50 percent of the **Organization listed above in Part I** or, if applicable, owns greater than 50 percent of a parent entity of **<name of organization>**. I further acknowledge: that I am authorized to execute this certification on behalf of the above-named organization; that the **<name of contracting unit>** is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the date of contract award **<type of contracting unit>** to notify the **<type of contracting unit>** in writing of any changes to the information contained herein; 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 am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the **<type of contracting unit>**, permitting the **<type of contracting unit>** to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print):		Title:	
Signature:		Date:	

Part IV - CERTIFICATION OF NON-DEBARMENT: Contractor - Controlled Entities	
Section A	
<input type="checkbox"/>	Below is the name and address of the corporation(s) in which the <b>Organization listed in Part I</b> owns more than 50 percent of voting stock, or of the partnership(s) in which the <b>Organization listed in Part I</b> owns more than 50 percent interest therein, or of the limited liability company or companies in which the <b>Organization listed above in Part I</b> owns more than 50 percent interest therein, as the case may be.
Name of Business Entity	Physical Address
**Add additional sheets if necessary**	
OR	
<input type="checkbox"/>	The <b>Organization listed above in Part I</b> does not own greater than 50 percent of the voting stock in any corporation and does not own greater than 50 percent interest in any partnership or any limited liability company.



**Section B: (skip if no business entities are listed in Section A of Part IV)**

Below are the names and addresses of any entities in which an entity listed in Part III A owns greater than 50 percent of the voting stock (corporation) or owns greater than 50 percent interest (partnership or limited liability company).

Name of Business Entity Controlled by Entity  
Listed in Section A of Part IV

Physical Address

\*\* Add additional Sheets if necessary\*\*

OR



No entity listed in Part III A owns greater than 50 percent of the voting stock in any corporation or owns greater than 50 percent interest in any partnership or limited liability company.

**Section C - Part IV Certification**

I hereby certify that the **Organization** listed above in Part I does not own greater than 50 percent of any entity that that is debarred by the federal government from contracting with a federal agency and, if applicable, does not own greater than 50 percent of any entity that in turns owns greater than 50 percent of any entity debarred by the federal government from contracting with a federal agency. I further acknowledge: that I am authorized to execute this certification on behalf of the above-named organization; that the *<name of contracting unit>* is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the date of contract award by *<type of contracting unit>* to notify the *<type of contracting unit>* in writing of any changes to the information contained herein; 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 am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the *<type of contracting unit>*, permitting the *<type of contracting unit>* to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print):

Title:

Signature:

Date: