

# **SCOPE OF WORK**

## **UST Removal**

Northern State Prison  
Newark, Essex County, NJ

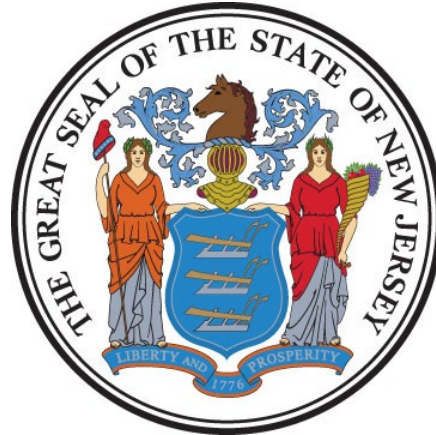
**Project No. C1098-00**

## **STATE OF NEW JERSEY**

Honorable Philip D. Murphy, Governor  
Honorable Tahesha L. Way, Lt. Governor

## **DEPARTMENT OF THE TREASURY**

Elizabeth Maher Muoio, Treasurer



## **DIVISION OF PROPERTY MANAGEMENT AND CONSTRUCTION**

Thomas A. Edenbaum, Director

**Date: April 23, 2025**

## TABLE OF CONTENTS

SECTION	PAGE
<b>I. OBJECTIVE .....</b>	<b>4</b>
<b>II. CONSULTANT QUALIFICATIONS .....</b>	<b>4</b>
A. CONSULTANT & SUB-CONSULTANT PRE-QUALIFICATIONS.....	4
<b>III. PROJECT BUDGET .....</b>	<b>4</b>
A. CONSTRUCTION COST ESTIMATE (CCE) .....	4
B. CURRENT WORKING ESTIMATE (CWE) .....	4
C. CONSULTANT'S FEES .....	5
<b>IV. PROJECT SCHEDULE .....</b>	<b>5</b>
A. SCOPE OF WORK DESIGN & CONSTRUCTION SCHEDULE .....	5
B. CONSULTANT'S PROPOSED DESIGN & CONSTRUCTION SCHEDULE .....	6
<b>V. PROJECT SITE LOCATION &amp; TEAM MEMBERS.....</b>	<b>6</b>
A. PROJECT SITE ADDRESS .....	6
B. PROJECT TEAM MEMBER DIRECTORY .....	7
1. DPMC Representative: .....	7
2. Department of Corrections:.....	7
<b>VI. PROJECT DEFINITION .....</b>	<b>7</b>
A. BACKGROUND .....	7
B. FUNCTIONAL DESCRIPTION OF THE BUILDING.....	7
<b>VII. CONSULTANT DESIGN RESPONSIBILITIES.....</b>	<b>8</b>
A. DESIGN REQUIREMENTS .....	8
1. Underground Tank Removal, Closure & Disposal Procedure:.....	8
2. Construction Work Area Requirements:.....	9
B. DESIGN MEETINGS & PRESENTATIONS.....	9
C. EXISTING DOCUMENTATION .....	10
<b>VIII. PERMITS &amp; APPROVALS.....</b>	<b>10</b>
A. NJ UNIFORM CONSTRUCTION CODE PLAN REVIEW AND PERMIT.....	10
B. OTHER REGULATORY AGENCY PERMITS, CERTIFICATES AND APPROVALS.....	13
<b>IX. ENERGY REBATE AND INCENTIVE PROGRAMS .....</b>	<b>13</b>
<b>X. ALLOWANCES .....</b>	<b>14</b>

A. PLAN REVIEW AND PERMIT FEE ALLOWANCE..... 14

1. Permits: ..... 14

2. Permit Costs: ..... 14

3. Applications: ..... 14

4. Consultant Fee: ..... 14

**XI. SOW SIGNATURE APPROVAL SHEET..... 15**

**XII. CONTRACT DELIVERABLES ..... 16**

**XIII. EXHIBITS..... 16**

A. SAMPLE PROJECT SCHEDULE FORMAT

B. PROJECT SITE MAP & BUILDINGS LIST

C. GENERAL SECURITY INFORMATION

D. APPLICATION FOR CLEARANCE

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## I. OBJECTIVE

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The objective of this project is to remove the existing underground abandoned 20,000 gallon heating oil tank at the Northern State Prison. See **Exhibit 'B'** for the project site location map.

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## II. CONSULTANT QUALIFICATIONS

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### A. CONSULTANT & SUB-CONSULTANT PRE-QUALIFICATIONS

The Consultant shall be a firm pre-qualified with the Division of Property Management & Construction (DPMC) in the following discipline(s):

- **P005 Civil Engineering**

The Consultant shall also have in-house capabilities or Sub-Consultants pre-qualified with DPMC in:

- **P011 Environmental Engineering**

As well as, **any and all** other Architectural, Engineering and Specialty Disciplines necessary to complete the project as described in this Scope of Work (SOW).

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## III. PROJECT BUDGET

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### A. CONSTRUCTION COST ESTIMATE (CCE)

The initial Construction Cost Estimate (CCE) for this project is \$ 212,000.

The Consultant shall review this Scope of Work and provide a narrative evaluation and analysis of the accuracy of the proposed project CCE in its technical proposal based on its professional experience and opinion.

### B. CURRENT WORKING ESTIMATE (CWE)

The Current Working Estimate (CWE) for this project is \$ 288,012.

The CWE includes the construction cost estimate and all consulting, permitting and administrative fees.

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The CWE is the client agency's financial budget based on this project Scope of Work and shall not be exceeded during the design and construction phases of the project unless DPMC approves the change in Scope of Work through a Contract amendment.

### C. CONSULTANT'S FEES

The construction cost estimate for this project ***shall not*** be used as a basis for the Consultant's design and construction administration fees. The Consultant's fees shall be based on the information contained in this Scope of Work document and the observations made and/or the additional information received during the pre-proposal meeting.

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## IV. PROJECT SCHEDULE

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### A. SCOPE OF WORK DESIGN & CONSTRUCTION SCHEDULE

The following schedule identifies the estimated design and construction phases for this project and the estimated durations.

<b>PROJECT PHASE</b>	<b>ESTIMATED DURATION (Calendar Days)</b>
<b>1. Site Access Approvals &amp; Schedule Design Kick-off Meeting</b>	<b>14</b>
<b>2. Design Development Phase</b>	<b>42</b>
• <i>Project Team &amp; DPMC Plan/Code Unit Review &amp; Comment</i>	<b>14</b>
<b>3. Final Design Phase</b>	<b>42</b>
• <i>Project Team &amp; DPMC Plan/Code Unit Review &amp; Approval</i>	<b>14</b>
<b>4. Final Design Re-Submission to Address Comments</b>	<b>7</b>
• <i>Project Team &amp; DPMC Plan/Code Unit Review &amp; Approval</i>	<b>14</b>
<b>5. DCA Submission Plan Review</b>	<b>30</b>
<b>6. Permit Application Phase</b>	<b>7</b>
• <i>Issue Plan Release</i>	
<b>7. Bid Phase</b>	<b>42</b>
<b>8. Award Phase</b>	<b>28</b>
<b>9. Construction Phase</b>	<b>120</b>
<b>10. Project Close Out Phase</b>	<b>30</b>

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## **B. CONSULTANT’S PROPOSED DESIGN & CONSTRUCTION SCHEDULE**

The Consultant shall submit a project design and construction schedule with its technical proposal that is similar in format and detail to the schedule depicted in **Exhibit ‘A’**. The schedule developed by the Consultant shall reflect its recommended project phases, phase activities, activity durations.

A written narrative shall also be included with the technical proposal explaining the schedule submitted and the reasons why and how it can be completed in the time frame proposed by the Consultant.

This schedule and narrative will be reviewed by the Consultant Selection Committee as part of the evaluation process and will be assigned a score commensurate with clarity and comprehensiveness of the submission.

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## **V. PROJECT SITE LOCATION & TEAM MEMBERS**

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### **A. PROJECT SITE ADDRESS**

The location of the project site is:

Northern State Prison  
168 Frontage Road  
Newark, NJ 07114

See **Exhibit ‘B’** for the project site location map.

## **B. PROJECT TEAM MEMBER DIRECTORY**

The following are the names, addresses, and phone numbers of the Project Team members.

### **1. DPMC Representative:**

Name: Grant Butts, Project Manager  
Address: Division of Property Management & Construction  
20 West State Street, 3<sup>rd</sup> Floor  
Trenton, NJ 08608-1206  
Phone No: (609) 218-0326  
E-Mail: [Grant.Butts@treas.nj.gov](mailto:Grant.Butts@treas.nj.gov)

### **2. Department of Corrections:**

Name: Drew Pangaldi, Project Manager  
Address: Department of Corrections  
Whittlesey Road, PO Box 863  
West Trenton, NJ 08625  
Phone No: (609) 292-4036 ext. 5270  
E-Mail: [drew.pangaldi@doc.nj.gov](mailto:drew.pangaldi@doc.nj.gov)

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## **VI. PROJECT DEFINITION**

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### **A. BACKGROUND**

Northern State Prison was opened in 1987 and is a maximum security prison. The Prison is located on a 43 acre site and includes in excess of fifty buildings. The Prison currently houses approximately 2,700 incarcerated persons.

### **B. FUNCTIONAL DESCRIPTION OF THE BUILDING**

The facility desires the consultant to remove and properly dispose of the existing UST. The abandoned existing underground 20,000 gallon heating oil tank at the Northern State Prison. See **Exhibit 'B'** for the project site location map.

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## **VII. CONSULTANT DESIGN RESPONSIBILITIES**

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### **A. DESIGN REQUIREMENTS**

The Consultant shall provide Design, Construction Administration, Permitting and Bid/Award services to remove the existing underground storage tank, test the soils. The design shall follow all applicable codes and standards. The Consultant shall provide the design for capping and/or the safe removal of any associated piping or hosing.

#### **1. Underground Tank Removal, Closure & Disposal Procedure:**

The Consultant shall prepare a DEP notification as required by the New Jersey Department of Environmental Protection (“NJDEP”) Administrative Requirements for the Remediation of Contaminated Sites (N.J.A.C. 7:26C), and the Technical Requirements for Site Remediation (N.J.A.C. 7:26E) for the underground 20,000 gallon heating oil tank (“UST”).

The Consultant shall prepare the local permit application for the removal of the UST and shall submit it to the local municipal offices and obtain all approvals necessary for the UST removal.

The Consultant shall oversee the tank cleaning, waste collection and disposal. Residual product and sludge from the UST shall be collected in a vac truck for off-site disposal. The work area shall be monitored for the presence of combustible vapors and oxygen during the field activities. The waste material including residual product and sludge shall be disposed at an off-site licensed facility for recycling. Waste manifests shall be obtained.

Tank Removal and Disposal. The area around the tank shall be excavated and the tank shall be removed for examination. Excavated soils shall be temporarily stockpiled and the excavation area shall be examined for evidence of discharge of petroleum product and soil/groundwater contamination based on visual observations and field screening using an organic vapor meter (OVM). The tank and piping shall be disposed at a scrap yard.

Post-Excavation Soil Sampling and Laboratory Analysis shall be conducted pursuant to removal of the UST and piping, post-excavation soil sampling shall be performed in accordance with the “NJDEP Field Sampling Procedures Manual” and as per the summary of soil sampling and analysis required in accordance with N.J.A.C. 7:26E-6.3(b).

The excavation area shall be backfilled with excavated overburden soils and suitable fill material. A clean fill certificate for the backfill material shall be provided with the UST Closure Report.

Upon completion of the field activities and receipt of the laboratory analytical data, a Site Investigation (“SI”) Report for the closure of the UST shall be submitted to NJDEP with a Response Action Outcome (“RAO”). The report shall describe the tank closure activities, observed condition of the UST upon removal, condition of the subsurface soils and groundwater,

results of soil analysis, waste disposal documents, conclusions and recommendations. The SI Report shall be submitted to the client for review and signature prior to submission to the NJDEP.

## **2. Construction Work Area Requirements:**

Indicate the location and dimensioned details for any temporary construction barriers for security and/or safety, plastic barriers for dust and dirt containment, and special covers for equipment protection during the removal the UST. The design documents shall describe all salvage items that are to be retained by Client Agencies.

Include in the design documents that the site must be restored to pre-construction conditions after construction has been completed and approved.

## **B. DESIGN MEETINGS & PRESENTATIONS**

### **1. Design Meetings:**

Conduct the appropriate number of review meetings with the Project Team members during each design phase of the project so they may determine if the project meets their requirements, question any aspect of the contract deliverables, and make changes where appropriate. The Consultant shall describe the philosophy and process used in the development of the design criteria and the various alternatives considered to meet the project objectives. Selected studies, sketches, cost estimates, schedules, and other relevant information shall be presented to support the design solutions proposed. Special considerations shall also be addressed such as: Contractor site access limitations, utility shutdowns and switchover coordination, phased construction and schedule requirements, security restrictions, available swing space, material and equipment delivery dates, etc.

It shall also be the responsibility of the Consultant to arrange and require all critical Sub-Consultants to be in attendance at the design review meetings.

Record the minutes of each design meeting and distribute within three (3) calendar days to all attendees and those persons specified to be on the distribution list by the Project Manager.

### **2. Design Presentations:**

The minimum number of design presentations required for each phase of this project is identified below for reference:

Design Development Phase: One (1) oral presentation at phase completion.

Final Design Phase: One (1) oral presentation at phase completion.

## C. EXISTING DOCUMENTATION

Review any documents and additional information that may be provided at a later date such as reports, studies, surveys, equipment manuals, as-built drawings, etc. The State does not attest to the accuracy of the information provided and accepts no responsibility for the consequences of errors by the use of any information and material contained in the documentation provided. It shall be the responsibility of the Consultant to verify the contents and assume full responsibility for any determination or conclusion drawn from the material used. If the information provided is insufficient, the Consultant shall take the appropriate actions necessary to obtain the additional information required.

All original documentation shall be returned to the provider at the completion of the project.

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## VIII. PERMITS & APPROVALS

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### A. NJ UNIFORM CONSTRUCTION CODE PLAN REVIEW AND PERMIT

The project construction documents must comply with the latest adopted edition of the NJ Uniform Construction Code (NJUCC).

The latest NJUCC Adopted Codes and Standards can be found at:

<http://www.state.nj.us/dca/divisions/codes/codereg/>

#### 1. NJ Uniform Construction Code (NJUCC) Plan Review

Consultant shall estimate the cost of the NJUCC Plan Review by DCA and include that amount in their fee proposal line item entitled “**Plan Review and Permit Fee Allowance**”, refer to paragraph X.A.

Upon approval of the Final Design Phase Submission by DPMC, the Consultant shall submit the construction documents to the Department of Community Affairs (DCA), Bureau of Construction Project Review to secure a complete plan release.

As of July 25, 2022, the Department of Community Affairs (DCA) is only accepting digital signatures and seals issued from a third party certificate authority.

Procedures for submission to the DCA Plan Review Unit can be found at:

[https://www.state.nj.us/dca/divisions/codes/forms/pdf\\_bcpr/pr\\_app\\_guide.pdf](https://www.state.nj.us/dca/divisions/codes/forms/pdf_bcpr/pr_app_guide.pdf)

Consultant shall complete the “Project Review Application” and include the following on Block 5 as the “Owner’s Designated Agent Name”:

Trevor M. Dittmar, DPMC  
PO Box 235  
Trenton, NJ 08625-0235  
[Trevor.Dittmar@treas.nj.gov](mailto:Trevor.Dittmar@treas.nj.gov) 609-984-5529

The Consultant shall complete the NJUCC “Plan Review Fee Schedule”, determine the fee due and pay the NJUCC Plan Review fees, refer to Paragraph X.A.

The NJUCC “Plan Review Fee Schedule” can be found at:

[http://www.state.nj.us/dca/divisions/codes/forms/pdf\\_bcpr/pr\\_fees.pdf](http://www.state.nj.us/dca/divisions/codes/forms/pdf_bcpr/pr_fees.pdf)

## **2. NJ Uniform Construction Code Permit**

Upon receipt of a complete plan release from the DCA Bureau of Construction Project Review, the Consultant shall complete the NJUCC permit application and all applicable technical sub-code sections. The “Agent Section” of the application and certification section of the building sub-code section shall be signed. These documents, with **six (6) sets of DCA approved, signed and sealed construction documents** shall be forwarded to the DPMC Project Manager.

The Consultant may obtain copies of all NJUCC permit applications at the following website:

<https://www.nj.gov/dca/divisions/codes/resources/constructionpermitforms.html>

All other required project permits shall be obtained and paid for by the Consultant in accordance with the procedures described in Paragraph VIII.B.

## **3. Prior Approval Certification Letters:**

The issuance of a construction permit for this project may be contingent upon acquiring various “prior approvals” as defined by N.J.A.C. 5:23-1.4. It is the Consultant’s responsibility to determine which prior approvals, if any, are required. The Consultant shall submit a general certification letter to the DPMC Plan & Code Review Unit Manager during the Permit Phase of this project that certifies all required prior approvals have been obtained.

In addition to the general certification letter discussed above, the following specific prior approval certification letters, where applicable, shall be submitted by the Consultant to the DPMC Plan & Code Review Unit Manager: Soil Erosion & Sediment Control, Water & Sewer Treatment Works Approval, Coastal Areas Facilities Review, Compliance of Underground Storage Tank Systems with N.J.A.C. 7:14B, Pinelands Commission, Highlands Council, Well Construction and Maintenance; Sealing of Abandoned Wells with N.J.A.C. 7:9D, Certification that all utilities have been disconnected from structures to be demolished, Board of Health

Approval for Potable Water Wells, Health Department Approval for Septic Systems. It shall be noted that in accordance with N.J.A.C. 5:23-2.15(a)5, a permit cannot be issued until the letter(s) of certification is received.

#### **4. Multi-building or Multi-site Permits:**

A project that involves many buildings and/or sites requires that a separate permit shall be issued for each building or site. The Consultant must determine the construction cost estimate for *each* building and/or site location and submit that amount where indicated on the permit application.

#### **5. Special Inspections:**

In accordance with the requirements of the New Jersey Uniform Construction Code N.J.A.C. 5:23-2.20(b), Bulletin 03-5 and Chapter 17 of the International Building Code, the Consultant shall be responsible for the coordination of all special inspections during the construction phase of the project.

Bulletin 03-5 can be found at:

[https://www.nj.gov/dca/codes/publications/pdf\\_bulletins/b\\_03\\_5.pdf](https://www.nj.gov/dca/codes/publications/pdf_bulletins/b_03_5.pdf)

##### **a. Definition:**

Special inspections are defined as an independent verification by a certified special inspector for **Class I buildings and smoke control systems in any class building**. The special inspector is to be independent from the Contractor and responsible to the Consultant so that there is no possible conflict of interest.

Special inspectors shall be certified in accordance with the requirements in the New Jersey Uniform Construction Code.

##### **b. Responsibilities:**

The Consultant shall submit with the permit application, a list of special inspections and the agencies or special inspectors that will be responsible to carry out the inspections required for the project. The list shall be a separate document, on letter head, signed and sealed.

## **B. OTHER REGULATORY AGENCY PERMITS, CERTIFICATES AND APPROVALS**

The Consultant shall identify and obtain all other State Regulatory Agency permits, certificates, and approvals that will govern and affect the work described in this Scope of Work. An itemized list of these permits, certificates, and approvals shall be included with the Consultant's Technical Proposal and the total amount of the application fees should be entered in the Fee Proposal line item entitled, **"Plan Review and Permit Fee Allowance."**

The Consultant may refer to the Division of Property Management and Construction "Procedures for Architects and Engineers Manual", Paragraph **"9. REGULATORY AGENCY APPROVALS"** which presents a compendium of State permits, certificates, and approvals that may be required for this project.

The Consultant shall determine the appropriate phase of the project to submit the permit application(s) in order to meet the approved project milestone dates.

Where reference to an established industry standard is made, it shall be understood to mean the most recent edition of the standard unless otherwise noted. If an industry standard is found to be revoked, or should the standard have undergone substantial change or revision from the time that the Scope of Work was developed, the Consultant shall comply with the most recent edition of the standard.

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## **IX. ENERGY REBATE AND INCENTIVE PROGRAMS**

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The Consultant shall review any and all programs on the State and Federal level to determine if any proposed upgrades to the mechanical and/or electrical equipment and systems for this project qualify for approved rebates and incentives.

The Consultant shall review the programs available on the "New Jersey's Clean Energy Program" website at: <http://www.njcleanenergy.com> as well as federal websites and New Jersey electric and gas utility websites to determine if and how they can be applied to this project.

The Consultant shall identify all applicable rebates and incentives in their technical proposal and throughout the design phase.

The Consultant shall be responsible to complete the appropriate registration forms and applications, provide any applicable worksheets, manufacturer's specification sheets, calculations, attend meetings, and participate in all activities with designated representatives of the programs and utility companies to obtain the entitled financial incentives and rebates for this project.

All costs associated with this work shall be estimated by the Consultant and the amount included in the base bid of its fee proposal.

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## **X. ALLOWANCES**

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### **A. PLAN REVIEW AND PERMIT FEE ALLOWANCE**

The Consultant shall obtain and pay for all of the project permits in accordance with the guidelines identified below.

#### **1. Permits:**

The Consultant shall determine the various permits, certificates, and approvals required to complete this project.

#### **2. Permit Costs:**

The Consultant shall estimate the application fee costs for all of the required project permits, certificates, and approvals (excluding the NJ Uniform Construction Code permit) and include that amount in its fee proposal line item entitled “**Plan Review and Permit Fee Allowance**”. A breakdown of each permit and application fee shall be attached to the fee proposal for reference.

**NOTE:** The NJ Uniform Construction Code permit is excluded since it will be paid for by the State.

#### **3. Applications:**

The Consultant shall complete and submit all permit applications to the appropriate permitting authorities and the costs shall be paid from the Consultant’s permit fee allowance. A copy of the application(s) and the original permit(s) obtained by the Consultant shall be given to the DPMC Project Manager for distribution during construction.

#### **4. Consultant Fee:**

The Consultant shall determine what is required to complete and submit the permit applications, obtain supporting documentation, attend meetings, etc., and include the total cost in the base bid of its fee proposal under the “Permit Phase” column.

Any funds remaining in the permit allowance will be returned to the State at the close of the project.

PROJECT NAME: UST Removal  
PROJECT LOCATION: Northern State Prison  
PROJECT NO: C1098-00  
DATE: April 23 2025

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## XI. SOW SIGNATURE APPROVAL SHEET

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This Scope of Work shall not be considered a valid document unless all signatures appear in each designated area below.

The client agency approval signature on this page indicates that they have reviewed the design criteria and construction schedule described in this project Scope of Work (including the subsequent contract deliverables and exhibits) and verifies that the work will not conflict with the existing or future construction activities of other projects at the site.

SOW PREPARED BY: Lucy Ibrahim 04/23/2025  
LUCY IBRAHIM, PROJECT MANAGER DATE  
DPMC PROJECT PLANNING & INITIATION

SOW APPROVED BY: James Wright 4/23/2025  
JAMES WRIGHT, MANAGER DATE  
DPMC PROJECT PLANNING & INITIATION

SOW APPROVED BY: D. P. 4/24/25  
DREW PANGALDI, PROJECT MANAGER DATE  
DEPARTMENT OF CORRECTIONS

SOW APPROVED BY: Grant Butts 4/25/2025  
GRANT BUTTS, PROJECT MANAGER DATE  
DPMC PROJECT MANAGEMENT GROUP

SOW APPROVED BY: Jeanette M. Barnard 5.20.25  
JEANETTE M. BARNARD, DEPUTY DIRECTOR DATE  
DIV PROPERTY MGT & CONSTRUCTION

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## **XII. CONTRACT DELIVERABLES**

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The following are checklists listing the Contract Deliverables that are required at the completion of each phase of this project. The Consultant shall refer to the DPMC publication entitled “Procedures for Architects and Engineers,” 3.0 Edition, dated September 2022 available at <https://www.nj.gov/treasury/dPMC/Assets/Files/ProceduresforArchitectsandEngineers.pdf> for a detailed description of the deliverables required for each submission item listed. References to the applicable paragraphs of the “Procedures for Architects and Engineers” are provided.

Note that the Deliverables Checklist may include submission items that are “S.O.W. Specific Requirements”. These requirements will be defined in the project specific scope of work and included on the deliverables checklist.

This project includes the following phases with the deliverables noted as “Required by S.O.W” on the Deliverables Checklist:

- **DESIGN DEVELOPMENT PHASE**
- **FINAL DESIGN PHASE**
- **PERMIT APPLICATION PHASE**
- **BIDDING AND CONTRACT AWARD**
- **CONSTRUCTION PHASE**
- **PROJECT CLOSE-OUT PHASE**

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## **XIII. EXHIBITS**

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- A. **SAMPLE PROJECT SCHEDULE FORMAT**
- B. **PROJECT SITE MAP & BUILDINGS LIST**
- C. **GENERAL SECURITY INFORMATION**
- D. **APPLICATION FOR CLEARANCE**

**END OF SCOPE OF WORK**

## Deliverables Checklist Design Development Phase

A/E Name: \_\_\_\_\_

A/E Manual Reference	Submission Item	Required by S.O.W.		Previously Submitted		Enclosed	
		Yes	No	Yes	No	Yes	No
14.4.1.	A/E Statement of Site Visit						
14.4.2.	Narrative Description of Project						
14.4.3.	Building Code Information Questionnaire						
14.4.4.	Space Analysis						
14.4.5.	Special Features						
14.4.6.	Catalog Cuts						
14.4.7.	Site Evaluation						
14.4.8.	Subsurface Investigation						
14.4.9.	Surveys						
14.4.10.	Arts Inclusion						
14.4.11.	Design Rendering						
14.4.12.	Regulatory Approvals						
14.4.13.	Utility Availability						
14.4.14.	Drawings (6 Sets)						
14.4.15.	Specifications (6 Sets)						
14.4.16.	Current Working Estimate/Cost Analysis in CSI Format						
14.4.17.	Project Schedule						
14.4.18.	Formal Presentation						
14.4.19.	Plan Review/Scope of Work Compliance Statement						
14.4.20.	Design development Phase Deliverables Checklist						
<b>S.O.W. Reference</b>	<b>S.O.W. Specific Requirements</b>						

This checklist shall be completed by the Design Consultant and included as the cover sheet of this submission to document to the DPMC the status of all the deliverables required by the project specific Scope of Work.

\_\_\_\_\_  
Consultant Signature

\_\_\_\_\_  
Date

## Deliverables Checklist Final Design Phase

A/E Name: \_\_\_\_\_

A/E Manual Reference	Submission Item	Required by S.O.W.		Previously Submitted		Enclosed	
		Yes	No	Yes	No	Yes	No
15.4.1.	A/E Statement of Site Visit						
15.4.2.	Narrative Description of Project						
15.4.3.	Building Code Information Questionnaire						
15.4.4.	Space Analysis						
15.4.5.	Special Features						
15.4.6.	Catalog Cuts						
15.4.7.	Site Evaluation						
15.4.8.	Subsurface Investigation						
15.4.9.	Surveys						
15.4.10.	Arts Inclusion						
15.4.11.	Design Rendering						
15.4.12.	Regulatory Approvals						
15.4.13.	Utility Availability						
15.4.14.	Drawings (6 Sets)						
15.4.15.	Specifications (6 Sets)						
15.4.16.	Current Working Estimate/Cost Analysis in CSI Format						
15.4.17.	Project Schedule						
15.4.18.	Formal Presentation						
15.4.19.	Plan Review/Scope of Work Compliance Statement						
15.4.20.	Final Design Phase Deliverables Checklist						
<b>S.O.W. Reference</b>	<b>S.O.W. Specific Requirements</b>						

This checklist shall be completed by the Design Consultant and included as the cover sheet of this submission to document to the DPMC the status of all the deliverables required by the project specific Scope of Work.

\_\_\_\_\_  
Consultant Signature

\_\_\_\_\_  
Date

**A/E Name:** \_\_\_\_\_

[illegible]

This checklist shall be completed by the Design Consultant and included as the cover sheet of this submission to document to the DPMC Project Manager the status of all the deliverables required by the project specific Scope of Work.

Consultant Signature

Date \_\_\_\_\_

[illegible]

Date

[illegible]

Date \_\_\_\_\_

[illegible]

Date

February 7, 1997  
Rev.: January 29, 2002

### Responsible Group Code Table

The codes below are used in the schedule field "GRP" that identifies the group responsible for the activity. The table consists of groups in the Division of Property Management & Construction (DPMC), as well as groups outside of the DPMC that have responsibility for specific activities on a project that could delay the project if not completed in the time specified. For reporting purposes, the groups within the DPMC have been defined to the supervisory level of management (i.e., third level of management, the level below the Associate Director) to identify the "functional group" responsible for the activity.

<u>CODE</u>	<u>DESCRIPTION</u>	<u>REPORTS TO ASSOCIATE DIRECTOR OF:</u>
CM	Contract Management Group	Contract Management
CA	Client Agency	N/A
CSP	Consultant Selection and Prequalification Group	Technical Services
A/E	Architect/Engineer	N/A
PR	Plan Review Group	Technical Services
CP	Construction Procurement	Planning & Administration
CON	Construction Contractor	N/A
FM	Financial Management Group	Planning & Administration
OEU	Office of Energy and Utility Management	N/A
PD	Project Development Group	Planning & Administration

## EXHIBIT 'A'

Activity ID	Description	Repn	Weeks
<b>&lt;PROJ&gt;</b>			
<b>Design</b>			
CV3001	Schedule/Conduct Predesign/Project Kick-Off Mtg.	CM	
CV3020	Prepare Program Phase Submittal	AE	
CV3021	Distribute Program Submittal for Review	CM	
CV3027	Prepare & Submit Project Cost Analysis (DPMC-38)	CM	
CV3022	Review & Approve Program Submittal	CA	
CV3023	Review & Approve Program Submittal	PR	
CV3024	Review & Approve Program Submittal	CM	
CV3025	Consolidate & Return Program Submittal Comments	CM	
CV3030	Prepare Schematic Phase Submittal	AE	
CV3031	Distribute Schematic Submittal for Review	CM	
CV3037	Prepare & Submit Project Cost Analysis (DPMC-38)	CM	
CV3032	Review & Approve Schematic Submittal	CA	
CV3033	Review & Approve Schematic Submittal	PR	
CV3034	Review & Approve Schematic Submittal	CM	
CV3035	Consolidate & Return Schematic Submittal Comment	CM	
CV3040	Prepare Design Development Phase Submittal	AE	
CV3041	Distribute D. D. Submittal for Review	CM	
CV3047	Prepare & Submit Project Cost Analysis (DPMC-38)	CM	
CV3042	Review & Approve Design Development Submittal	CA	
CV3043	Review & Approve Design Development Submittal	PR	
CV3044	Review & Approve Design Development Submittal	CM	
CV3045	Consolidate & Return D.D. Submittal Comments	CM	
CV3050	Prepare Final Design Phase Submittal	AE	
CV3051	Distribute Final Design Submittal for Review	CM	
CV3052	Review & Approve Final Design Submittal	CA	
CV3053	Review & Approve Final Design Submittal	PR	
CV3054	Review Final Design Submittal for Constructability	OCS	

**NOTE:**  
Refer to section "TV Project Schedule" of the  
Scope of Work for contract phase durations.

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DBCA - TEST

Sheet 1 of 3

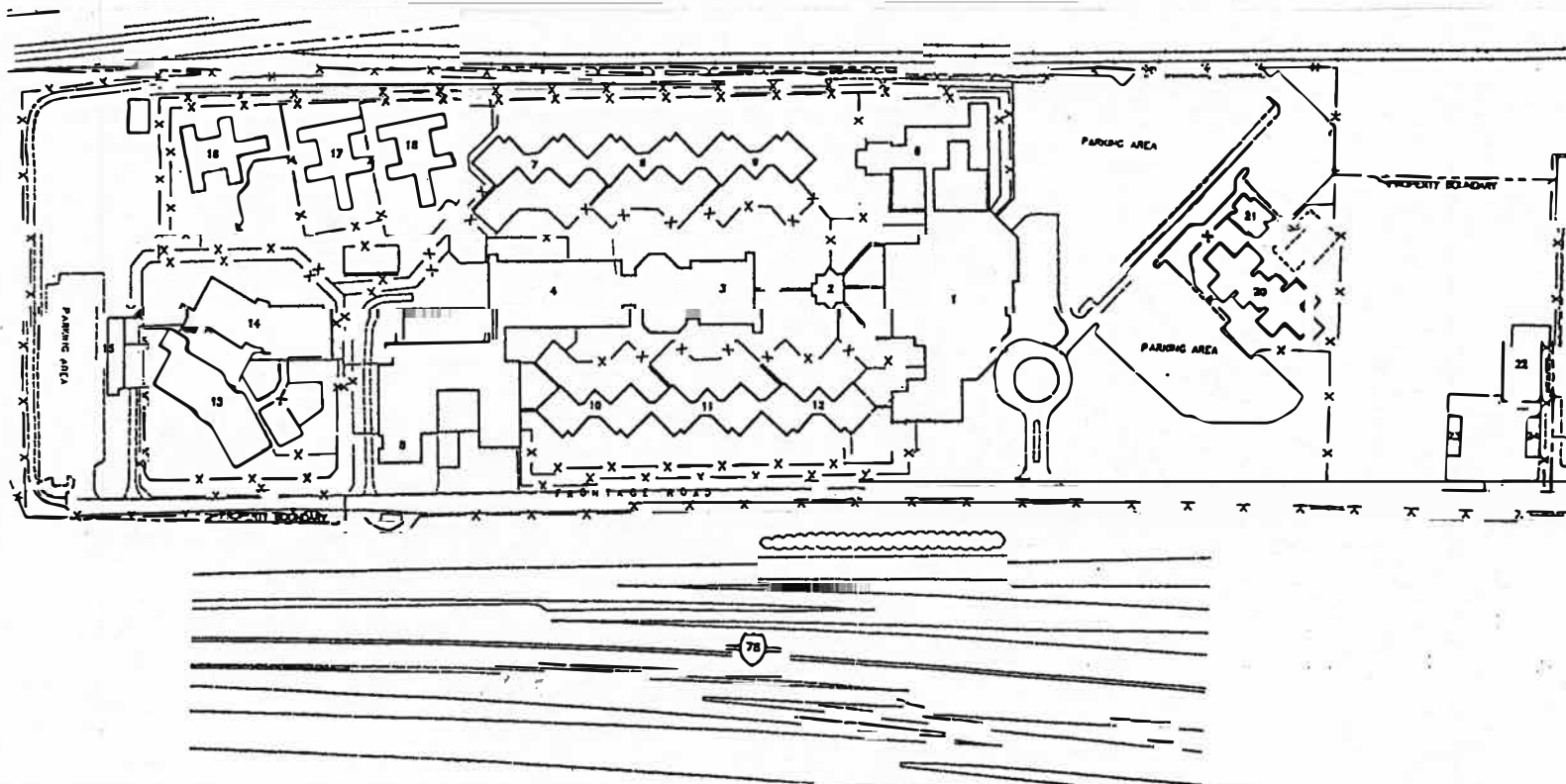
**Bureau of Design & Construction Services**

**EXHIBIT 'A'**





# NORTHERN STATE PRISON, ESSEX COUNTY, NEW JERSEY

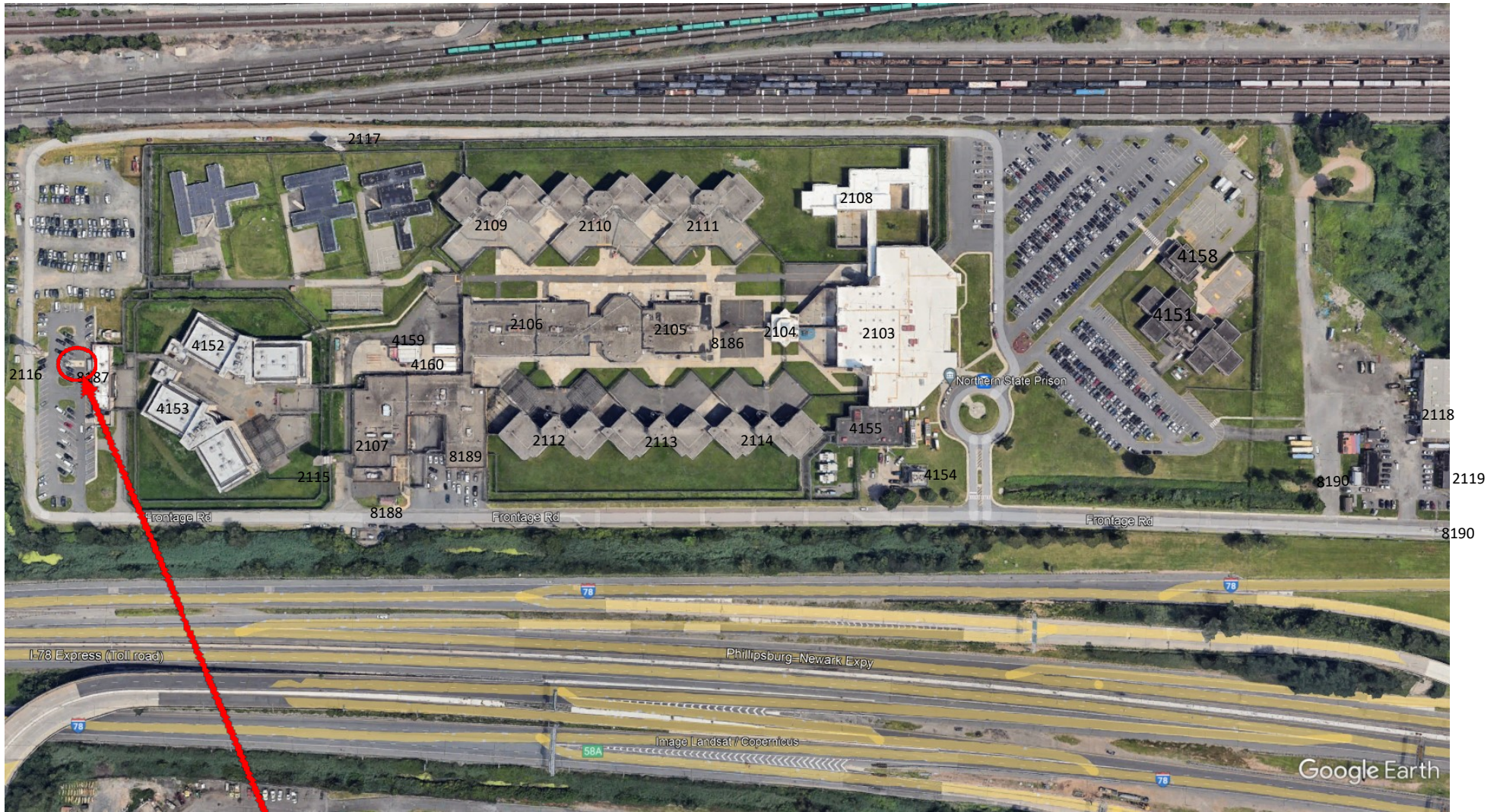


<u>Bldg. No.</u>	<u>Bldg. Name</u>	<u>Bldg. No.</u>	<u>Bldg. Name</u>	<u>Bldg. No.</u>	<u>Bldg. Name</u>
01	Admin. Bldg.	11	Housing Unit E	20	Minimum Unit 2
02	Chapel	12	Housing Unit F	21	Minimum Unit 2-Support
03	Dining	13	A.C.S.U.	22	Outside-Warehouse
04	State Use	14	A.C.S.U.	23	Maintenance Office
05	Kitchen	15	A.C.S.U.	24	Maintenance Office/Storage
06	Hospital	16	Aposing Trailers	25	Power House
07	Housing Unit A	17	Aposing Trailers	50	A.C.S.U. Trailers
08	Housing Unit B	18	Aposing Trailers	51	A.C.S.U. Trailers
09	Housing Unit C	19	Traffic Control		
10	Housing Unit D				

**DIRECTIONS:** From NJ Turnpike, take Exit 14. Take second right marked **FRONTAGE ROAD** after toll booth. Go left onto Frontage Road past Double Tree Hotel to Northern State Prison.

## EXHIBIT 'B'

# Northern State Prison



Existing underground  
abandoned 20,000 gallon  
heating oil tank

Building ID Northern State Prison

**EXHIBIT 'B'**

# Northern State Prison



**EXHIBIT 'B'**

# Northern State Prison

<b>Bldg ID</b>	<b>Bldg Name</b>
2103	Administration Bldg / Tower # 1 & # 5
2104	Chapel
2105	Inmate Dining / Education
2106	Vocational Educ. & State Use Sewing
2108	Hospital/Detention
2109	Housing Unit A
2110	Housing Unit B
2111	Housing Unit C
2112	Housing Unit D
2113	Housing Unit E
2114	Housing Unit F
2115	Guard Tower # 2 South Wall
2116	Guard Tower # 3 West Parking Lot
2117	Guard Tower # 4 North Wall
2118	Maintenance Garage/Warehouse
2119	Maintenance Office Trailer
4151	Minimum Unit 2
4152	Administrative Close Supervision Unit –North
4153	Administrative Close Supervision Unit -South
4154	ACSU Support / Power House
4155	Power House
4158	Minimum Unit 2 Support
4159	Refrigerated Trailers (6)
4160	Food Storage Trailers (3)
8186	Clothing Issue Building
8187	Lobby
8188	Gate Building
8189	Vehicle Maintenance Garage
8190	Lawn and Maintenance Storage Shed
8191	Salt Storage Shed
8192	Sight Security Building

**EXHIBIT 'B'**

# **NORTHERN STATE PRISON, ESSEX COUNTY, NEW JERSEY**

## **GENERAL SECURITY INFORMATION**

- I. The Local Administration of this facility is charge with the responsibility of the custody of their inmates. All non-State employees are responsible and must comply with the following rules for their own protection, as well as the safety of their operation. These rules plus specific facility rules must be adhered to. This building is a medium security facility.
  - A. No workman is to fraternize or argue with the inmates. Any difficulties with inmates and/or employee should be handled through the officer on duty at the work station.
  - B. Do not give anything to, or take anything from, the inmates.
  - C. Lock all cars, trucks and demobilize all vehicles and equipment when unattended.
  - D. No photographs are to be taken without permission.
  - E. All tools and equipment to remain overnight, will be locked in storage areas. Equipment, such as, ladders and scaffolding will be chained and locked (Contractors supply these items) before leaving.
  - F. No firearms, ammunition, hunting knives, or other articles of this nature are permitted on the grounds.
  - G. Provide necessary protective drop cloth and barricades to prevent damage to adjacent areas, equipment or surfaces.
  - H. Institutional Fire Regulations shall be strictly adhered to; contact Fire Chief when in doubt.
  - I. Speed limit and all NO PARKING areas must be obeyed.
  - J. Personal items are to be kept locked in vehicle, outside the security perimeter of the facility.
  - K. It is the responsibility of the Contractor to know that his tools, and equipment are secured in a designated location at the end of every work day.

- L. Unless otherwise required by the facility, the work crews going into the existing facility will check in at approximately 7:30 AM. Passes will be issued by the Gate Officer. An inventory of tools will be completed at this time. The Correctional officer assigned will then escort the workers to the job site.
- M. Unless otherwise required by the facility, the hours at work will normally be from 7:30 AM until 4:00 PM. If necessary to work later than this, arrangements will be made through custody personnel through the duty officer, 24 hours in advance. The Contractor will be allowed to work Monday through Saturday, a six (6) day week.
- N. Contractor's working crew can provide their own lunch, but will be required to have their lunch break in designated areas. The Contractor to coordinate with the Facility prior to the commencement of work with regard to lunch preferences. Workers will not exit the facility to eat.
- O. All tools brought into the facility must be inventoried and a record kept of them on file. Any additions or deletions to the original list must be approved by the assigned custody officer who will initial the change.
- P. Tools brought into the security perimeter of the prison will be inventoried before going into and accounted for on the way out by the escort officer.
- Q. An escort officer will be assigned to work crews that are working inside of the prison. The escort officer is responsible for the supervision of the high security tools, large electric drills, large hammers, hacksaws, etc. Cooperation with the Officers is imperative.
- R. All persons must have some type of positive identification upon entering the prison. A current Driver's License is acceptable, picture I.D. cards will be made at the prison.
- S. Contractors will park in an area assigned to them by the facility.

## Page 1 of 3

CIRCLE ONE: **TEMPORARY** OR **VOLUNTEER** CIRCLE ONE: **NEW** **RENEWAL**

(PLEASE PRINT LEGIBLY)

NAME: \_\_\_\_\_ SS #: \_\_\_\_\_  
(LAST) (FIRST) (M.I.)

AKA: \_\_\_\_\_ / \_\_\_\_\_  
(OTHER NAMES USED SUCH AS MAIDEN NAME, ADOPTIONAL, RELIGIOUS, ETC.) (MARKS, SCARS AND TATTOOS)

**DATE OF BIRTH :** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **SEX:** \_\_\_\_ **RACE:** \_\_\_\_ **EYES:** \_\_\_\_ **HAIR:** \_\_\_\_ **HT:** \_\_\_\_ **WT:** \_\_\_\_

PLACE OF BIRTH: \_\_\_\_\_ Driver's Lic. #: \_\_\_\_\_  
(State Only) (State) (Number)

HOME ADDRESS: \_\_\_\_\_  
(STREET) (CITY) (STATE) (ZIP CODE)

Name of your Department/Agency: \_\_\_\_\_ Phone # \_\_\_\_\_

ADDRESS: \_\_\_\_\_

(STREET) (CITY) (STATE) (ZIP CODE)

PURPOSE OF VISITATION TO INSTITUTIONS: \_\_\_\_\_

Have you ever been convicted of any violation of the Criminal Code in this State or in any other Jurisdiction? (Violations include offenses, crimes, misdemeanors, and felonies).

(Circle one)      YES              NO      **If “YES”, explain on reverse side.**

Do you presently have any pending criminal charges? YES \_\_\_\_\_ NO \_\_\_\_\_ If "YES", explain on reverse side.

APPLICANT MUST LIST EXPUNGED CONVICTION(S) INFORMATION, SIGN AND DATE THE "AUTHORIZATION TO RELEASE INFORMATION" FORM LOCATED IN THIS APPLICATION. FALSIFICATION OF APPLICATION MAY RESULT IN THE TERMINATION OF YOUR EMPLOYMENT.

**Have you ever engaged in sexual abuse in a prison, jail, lockup, community facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?**    YES \_\_\_\_\_ NO \_\_\_\_\_

If "YES", explain: (Please note the date of incident, date of adjudication and the name and location of the prison, jail, lockup community, facility or institution where the incident occurred).

---

**Have you ever been civilly or administratively adjudicated of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? YES \_\_\_\_\_ NO \_\_\_\_\_**

**If “YES”, explain:** \_\_\_\_\_

IDU: A003 Revised 3/14

# EXHIBIT 'D'

Have you ever been employed by the NJ Dept. of Corrections in any capacity? YES \_\_\_\_\_ NO \_\_\_\_\_ If “YES”, explain on reverse side.

Are you currently on an inmate visit list or do you currently have any acquaintances or family members incarcerated in any NJ Dept. of Corrections facilities? YES\_\_\_\_\_ NO \_\_\_\_\_ If “YES”, explain on reverse side.

\*\*\*\*\*

^ \*\*\*\*\* (DO NOT WRITE BELOW THIS LINE, FOR SPONSOR USE ONLY) \*\*\*\*\* ^

Title applicant applying for: \_\_\_\_\_ Location: \_\_\_\_\_

Sponsor: \_\_\_\_\_ Title: \_\_\_\_\_

Division, Bureau or Unit: \_\_\_\_\_

Sponsor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Send reply to: \_\_\_\_\_ Phone: \_\_\_\_\_  
( Print Name )

.....

**Applicant Section Continued**

NATURE OF CONVICTION	DATE OF CONVICTION	AGE AT TIME OF INCIDENT	NAME & ADDRESS OF POLICE AGENCY OR COURT	DISPOSITION

COMMENTS / EXPLANATIONS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**AUTHORIZATION TO RELEASE INFORMATION:**

**I hereby authorize the release of any and all information regarding me, to the NJ Department of Corrections, at their request, in order that they may determine my suitability for employment.**

**SIGNATURE OF APPLICANT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

^ \*\*\*\*\* DO NOT WRITE BELOW THIS LINE \*\*\*\*\* ^

\*\*\*\*\* SPECIAL INVESTIGATIONS DIVISION USE ONLY \*\*\*\*\*

THE ABOVE NAMED APPLICANT'S CRIMINAL HISTORY RECORD INDICATES:

_____	_____	_____
ARREST & CONVICTION	ARREST AND NO CONVICTION	NO RECORD
_____	_____	_____
NAME	TITLE	DATE

**EXHIBIT 'D'**