

PROPOSAL

PROVIDING PROFESSIONAL SURVEYING SERVICES OF PORTION OF BLOCK 38, LOTS 11, 11.01 & 11.02, FREEHOLD TOWNSHIP, ±72.46 ACRES, OWNED BY: COUNTY OF MONMOUTH, PROJECT: PARTIAL BOUNDARY SURVEY – BAYSHOLM TRACT

TO THE MONMOUTH COUNTY PARK SYSTEM, LINCROFT, NEW JERSEY.
TO THE MONMOUTH COUNTY BOARD OF RECREATION COMMISSIONERS.

The undersigned hereby declares that he/she has carefully examined the advertisement, specifications, and form of contract for furnishing the specified items and that he/she will execute the contract according to the specifications, terms, and conditions with respect to the following:

- | | |
|---|---------------------|
| 1. Full boundary survey with the installation of two (2) monuments. | \$ <u>28,000.00</u> |
| 2. Cost for installation of one (1) additional monument. | \$ <u>300.00</u> |
| 3. Installation of nine (9) capped iron pins. | \$ <u>600.00</u> |
| 4. Cost for installation of one (1) additional capped iron pin. | \$ <u>200.00</u> |
| TOTAL COST: | \$ <u>21,500.00</u> |
| 5. Per monument installation cost (to delete). | \$ <u>100.00</u> |
| 6. Per monument installation cost (to add). | \$ <u>300.00</u> |

Surveying services shall not commence until surveyor receives a Purchase Order from the Park System and shall be completed **WITHIN FORTY-FIVE (45) DAYS** of receipt of Purchase Order.

Payment schedule for services shall be as follows:

- 50% of contracted amount shall be paid when preliminary print of survey and preliminary legal description are received;
- Up to 50% or remaining balance shall be paid in full when all required survey monuments are installed and all deliverables are received which comply with all contract specifications and requirements and have been reviewed and approved by the Monmouth County Park System and if applicable, reviewed and approved by the Green Acres Program.

VARIANCE IF ANY:

None

SIGNATURE PAGE

RFP#P-98-2025

To the Board of Recreation Commissions:

**THE UNDERSIGNED HEREBY DECLARES THAT
I (WE) HAVE CAREFULLY EXAMINED THE SPECIFICATIONS.
I (WE) HEREBY CERTIFY PRICES QUOTED ARE IN ACCORDANCE
WITH YOUR REQUIREMENTS.**

Company Name: Roberts Engineering Group, LLC
(PRINT)

Preparer's Name: Carmela Roberts, PE, CME, CPWM
(PRINT)

Signature: *Carmela Roberts* December 18, 2025
(DATE)

Address: 1670 Whitehorse-Hamilton Road
Hamilton, New Jersey 08690

Telephone No.: (609) 586-1141

Fax No.: (609) 586-1143

E-Mail Address: CRoberts@robertsengineeringgroup.com

***** (This should be the email where Contracts would be sent) *****

Contact Person: Carmela Roberts, PE, CME, CPWM

FEIN: [REDACTED]
(Federal Employee ID)

STATE CERTIFIED NJPLS LICENSE NUMBER 24GS03586800

Please note: requirements for Certificate of Liability Insurance to be submitted before award of contract, Page 7, Item #2.3.7 (e)*

**ALL SURVEYS SHALL BECOME THE PROPERTY OF THE
MONMOUTH COUNTY PARK SYSTEM**