

To: All Vendors  
Re: Business Registration of Public Contractors  
(Assembly No. 3130 signed into law 6/29/04, Chapter 57 Law of 2004)

All government contracting units in New Jersey have received new responsibilities under the recently enacted law. The law affects all business organizations that do business with a public agency, and in some cases, subcontractor to those organizations. This includes firms providing professional services.

Effective September 1, 2004 all business organizations doing business with a local government agency must be registered with the State and provide proof of registration to the municipality before the agency can enter into any contracts with the business.

A contract includes a formal contract awarded by a public bid, a purchase order, or other mechanism.

“Proof of registration” means a copy of the organization’s “Business Registration Certificate” issued by the Division of Revenue. No other form can be substituted; it must be this form (see sample below). Information on how a business can obtain a certificate can be obtained on the Internet at [nj.gov/njbgs](http://nj.gov/njbgs) or by phone at (609) 292-1730.

To obtain a certificate online go to the website and in the 1<sup>st</sup> column under I What To click Obtain a Business Registration Certificate. On the next page in the 3<sup>rd</sup> paragraph click on Obtain a Certificate Online. Then fill out the form.

Please submit a copy of this certificate to the Finance Department as soon as possible.

STATE OF NEW JERSEY  
BUSINESS REGISTRATION CERTIFICATE  
FOR STATE AGENCY AND CASINO SERVICE CONTRACTORS

DEPARTMENT OF TREASURY  
DIVISION OF REVENUE  
PO BOX 252  
TRENTON, NJ 08646-0252

TAXPAYER NAME:  
TAX REGISTRATION TEST ACCOUNT

TAXPAYER IDENTIFICATION#:  
970-097-382/500

ADDRESS:  
847 ROEBLING AVE  
TRENTON NJ 08611

EFFECTIVE DATE:  
01/01/01

FORM BRC(08.01)

TRADE NAME:  
CLIENT REGISTRATION

SEQUENCE NUMBER:  
0107330

ISSUANCE DATE:  
07/14/04

Acting Director  
*John S. Tully*

This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.

**TO:**

**FROM:** Township of Florence

**RE:** Federal and State Requirements

In order to meet the Federal requirements that 1099 forms be sent at the end of the calendar year to individuals and partnerships that do business with us, we request that you fill out this form and return it to us immediately. No bill will be paid unless this completed form and a copy of your Business Registration Certificate (see attached letter) is returned to:

**Township of Florence  
Finance Department  
711 Broad Street  
Florence, NJ 08518**

**COMPANY OR INDIVIDUAL**

**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

\_\_\_\_\_

1. Is this Company incorporated? \_\_\_\_\_ Yes \_\_\_\_\_ No

2. If the answer is no, is this a/an:

\_\_\_\_\_ Partnership - List Social Security No. \_\_\_\_\_

List Employer I.D. No. \_\_\_\_\_

\_\_\_\_\_ Individual - List Social Security No. \_\_\_\_\_

List Employer I.D. No. \_\_\_\_\_

\_\_\_\_\_ Other - Explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**TITLE**