| Submitted by: | Stuart Appraisal Company, LLC | | |
|---------------|-------------------------------|--|--|
| | (Company Name) | | |

PROPOSAL

PROVIDING PROFESSIONAL APPRAISAL SERVICES OF BLOCK 43, LOT 11.02, UPPER FREEHOLD TOWNSHIP, IMPROVED PROPERTY, OWNED BY: MORALES, ±2 ACRES, PROJECT: ADDITIONS TO CROSSWICKS CREEK PARK, INTEREST: FEE SIMPLE

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:

Appraisal services shall not commence until appraiser receives a Purchase Order from the Park System and shall be completed WITHIN THIRTY (30) DAYS of the Property Site Inspection.

Payment schedule for services shall be as follows:

100% of contracted amount shall be paid when three (3) copies of the Appraisal Report [five (5) copies if Green Acres Program project] and two (2) CD-Rs in .pdf format are delivered to the Monmouth County Park System.

| VARIANCE IF ANY: | | |
|--|--|--|
| The undersigned is a partnership under the laws of the | ne State of | |
| (circle one) a corporation | an individual | |
| having principle offices at: | | |
| ADDRESS: 42 E Main St, Suite 202 | | |
| BUSINESS PHONE: 732-409-6080 | FAX NUMBER: 732-409-0538 | |
| E-MAIL.appraisals@stuartappraisalco.com | WEB ADDRESS: www.stuartappraisalco.com | |
| CONSULTANT (Printed): Michael Pallitto | | |
| SIGNATURE: | DATED:04/26/2021 | |
| FEDERAL TAX ID # OR SOCIAL SECURITY # _ | | |
| STATE CERTIFIED GENERAL REAL ESTATE A | APPRAISER | |

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

| RRFP # 21-21 | |
|--------------|--|
| PS #30-21 | |

| Submitted by: | Comprehensive Appraisal Corp. | |
|---------------|-------------------------------|---|
| • | (Company Name) | _ |

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PROPOSAL

PROVIDING PROFESSIONAL APPRAISAL SERVICES OF BLOCK 43, LOT 11.02, UPPER FREEHOLD TOWNSHIP, IMPROVED PROPERTY, OWNED BY: MORALES, ±2 ACRES, PROJECT: ADDITIONS TO CROSSWICKS CREEK PARK, INTEREST: FEE SIMPLE

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:

| Cost to conduct a Site Inspection and submit an Appraisal Report. | | \$ 1,350 |
|---|----------|---------------|
| TO | TAL COST | \$ \$1,350 |

Appraisal services shall not commence until appraiser receives a Purchase Order from the Park System and shall be completed **WITHIN THIRTY (30) DAYS** of the Property Site Inspection.

Payment schedule for services shall be as follows:

100% of contracted amount shall be paid when three (3) copies of the Appraisal Report [five (5) copies if Green Acres Program project] and two (2) CD-Rs in .pdf format are delivered to the Monmouth County Park System.

| VARIANCE IF ANY: |
|---|
| The undersigned is a partnership under the laws of the State of |
| ADDRESS: 330 Mounts Corner Drive, # 237, Freehold, NJ 07728 |
| BUSINESS PHONE:732-308-0909 FAX NUMBER:732-431-5031 |
| E-MAIL: ronald@comprehensiveappraisal.com WEBADDRESS:www.comprehensiveappraisal.com |
| CONSULTANT (Printed):Ronald Rubinstein SIGNATURE: DATED: 4/21/2021 |
| FEDERAL TAX ID # OR SOCIAL SECURITY # |

STATE CERTIFIED GENERAL REAL ESTATE APPRAISER

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

Page 7, Item #2.3.7 (e)*

Submitted by: Sterling DiSanto & Associates, LLC (Company Name)

\$ <u>2,450.00</u> \$ 2,450.00

PROPOSAL

PROVIDING PROFESSIONAL APPRAISAL SERVICES OF BLOCK 43, LOT 11.02, UPPER FREEHOLD TOWNSHIP, IMPROVED PROPERTY, OWNED BY: MORALES, ±2 ACRES, PROJECT: ADDITIONS TO CROSSWICKS CREEK PARK, INTEREST: FEE SIMPLE

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

Cost to conduct a Site Inspection and submit an Appraisal Report.

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:

Appraisal services shall not commence until appraiser receives a Purchase Order from the Park System and shall

TOTAL COST

| be completed WITHIN THIRTY (30) DAYS of the Property Site Inspection. | | |
|---|---|--|
| Payment schedule for services shall be as follows: 100% of contracted amount shall be paid when three (3) copies of the Appraisal Report [five (5) copies if Green Acres Program project] and two (2) CD-Rs in .pdf format are delivered to the Monmouth County Park System. | | |
| | | |
| | | |
| The undersigned is a partnership under the laws of the State of New Jersey | | |
| (circle one) a corporation an individual a Limited Liability Company |) | |
| having principle offices at: | | |
| ADDRESS: 145 West End Ave, Somerville, NJ 08876 | | |
| BUSINESS PHONE: 908-526-4244 FAX NUMBER: N/A | | |
| E-MAIL: advisors@sdadvisors.com WEB ADDRESS: www.sdadvisors.com | | |
| CONSULTANT (Printed): Victor D. DiSanto, Member | | |
| SIGNATURE: JULIAN SIGNATURE: 4/22/21 | | |
| FEDERAL TAX ID # OR SOCIAL SECURITY # | | |
| STATE CERTIFIED GENERAL REAL ESTATE APPRAISEI | | |

ALL APPRAISAL REPORTS SHALL BECOME THE PROPERTY OF THE MONMOUTH COUNTY PARK SYSTEM

Please note: Requirements for Certificate of Liability Insurance to be submitted before award of contract,

| Submitted by: | Words | Apper | isal | ,uc |
|---------------|-------|------------|------|-----|
| | (Cor | npany Name | e) | |

PROPOSAL

PROVIDING PROFESSIONAL APPRAISAL SERVICES OF BLOCK 43, LOT 11.02, UPPER FREEHOLD TOWNSHIP, IMPROVED PROPERTY, OWNED BY: MORALES, ±2 ACRES, PROJECT: ADDITIONS TO CROSSWICKS CREEK PARK, INTEREST: FEE SIMPLE

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

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Cost to conduct a Site Inspection and submit an Appraisal Report.

Solution

TOTAL COST

**TOTAL COST*

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| VARIANCE IF ANY: | |
|--|---|
| The undersigned is a partnership under the laws of the State of New Jessey (circle one) a corporation an individual | |
| having principle offices at: ADDRESS: 460 main street, Metcher, N5 08840 | |
| BUSINESS PHONE: 732 - 204 - 4445 FAX NUMBER: | |
| E-MAIL: Gwode & washappeisel. net WEB ADDRESS: www.washappeisel 11c.com | - |
| CONSULTANT (Printed): Wode Apprecisal, LLC | |
| SIGNATURE: DATED: 4/23/2001 FEDERAL TAX ID # OR SOCIAL SECURITY #_ | |
| STATE CERTIFIED GENERAL REAL ESTATE APPRAISER | |

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

Page 7, Item #2.3.7 (e)*

Submitted by: <u>Sockler Realty Services Group, Inc.</u> (Company Name)

\$ 3,000.00

\$ 3,000.00

PROPOSAL

PROVIDING PROFESSIONAL APPRAISAL SERVICES OF BLOCK 43, LOT 11.02, UPPER FREEHOLD TOWNSHIP, IMPROVED PROPERTY, OWNED BY: MORALES, ±2 ACRES, PROJECT: ADDITIONS TO CROSSWICKS CREEK PARK, INTEREST: FEE SIMPLE

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

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TOTAL COST

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|---|---|--|
| Payment schedule for services shall be as follows: | | |
| | en three (3) copies of the Appraisal Report [five (5) copies CD-Rs in .pdf format are delivered to the Monmouth | |
| VARIANCE IF ANY: | | |
| The undersigned is a partnership under the laws of the | | |
| (circle one) a corporation | an individual | |
| having principle offices at: | | |
| ADDRESS: 299 Ward St, Suite C, Hightstown, NJ | 08520 | |
| BUSINESS PHONE: 609-918-1000 | FAX NUMBER: N/A | |
| E-MAIL:pete@srsgi.com | WEB ADDRESS: www.srsgi.com | |
| CONSULTANT (Printed): Peter Søckler | | |
| SIGNATURE: # SIGNATURE: | DATED: 4/21/21 | |
| FEDERAL TAX ID # OR SOCIAL SECURITY # _ | | |
| STATE CERTIFIED GENERAL REAL ESTATE AF | PPRAISER | |
| * Please note: Requirements for Certificate of Liab | ility Insurance to be submitted before award of contract, | |