

WEST DEPTFORD TOWNSHIP

RESOLUTION 2018- 101

RESOLUTION OF THE TOWNSHIP OF WEST DEPTFORD AUTHORIZING THE SALE OF SURPLUS PERSONAL PROPERTY NO LONGER NEEDED FOR PUBLIC USE ON AN ONLINE AUCTION WEBSITE

WHEREAS, the Township of West Deptford (hereinafter referred to as "Township") has determined that the property described on the attached pages and incorporated herein is no longer needed for public use; and

WHEREAS, the Local Unit Electronic Technology Pilot Program and Study Act (PL 2001, c.30) authorizes the sale of surplus personal property no longer needed for public use through the use of an online auction service; and

WHEREAS, the Township intends to utilize the online auction services of GovDeals located at www.govdeals.com; and

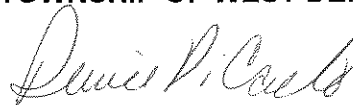
WHEREAS, the sales are being conducted pursuant to the Division of Local Government Services' Local Finance Notice 2008-9.

NOW THEREFORE, BE IT RESOLVED by the Township Committee of the Township of West Deptford, County of Gloucester and State of New Jersey on this 4th day of April 2018 as follows:

1. That the Township of West Deptford is hereby authorized to sell the surplus personal property as indicated on the attached list on an online auction website entitled www.govedeals.com.
2. The surplus property as identified shall be sold in an "as-is" condition without express or implied warranties with the successful bidder required to execute a Hold Harmless and Indemnification Agreement concerning the use of the surplus property.
3. The Township of West Deptford reserves the right to accept or reject any bid submitted.
4. The successful bidder must remove the item(s) with twenty (20) business days from the time and date of purchase. Purchases will be released only upon payment as specified.
5. Successful bidders are responsible for the loading and removal of any and all property awarded to them from the place where the property is located as indicated on the website.
6. Successful bidder shall make, at their expense, all arrangements and perform all work necessary, including packaging, loading and transportation of the property. Under no circumstances shall the Township of West Deptford be responsible for packaging, loading or shipping.

ADOPTED at the meeting of the Township Committee of the Township of West Deptford held on April 4, 2018.

TOWNSHIP OF WEST DEPTFORD



DENICE DICARLO, Mayor

ATTEST:



LEE ANN DEHART, Registered Municipal Clerk

CERTIFICATION

I, Lee Ann DeHart, Registered Municipal Clerk, of the Township of West Deptford, in the County of Gloucester, do hereby certify that the foregoing Resolution was presented and duly adopted by the Township Committee at a meeting of the Township of West Deptford held on April 4, 2018.



LEE ANN DEHART, Registered Municipal Clerk

GovDeals Vehicle Inspection Form

Inventory ID: 621	Asset Number:	Fair Market Value: \$10,000
Short Description: Year 1991 Make PemFab Imperial Model E-One Pumper		
VIN: 1 P 1 F 1 1 2 B 9 L A 0 9 0 0 1 1 Title Restriction: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		
Odometer: 2 2 3 1 9 <input checked="" type="checkbox"/> Miles <input type="checkbox"/> Kilometers Odometer Accurate <input checked="" type="checkbox"/> Y <input type="checkbox"/> N:		
Long Description: This Vehicle: <input type="checkbox"/> Starts <input checked="" type="checkbox"/> Starts with a Boost & <input type="checkbox"/> Runs/Driveable <input type="checkbox"/> Engine Runs <input type="checkbox"/> Does Not Run <input type="checkbox"/> For Parts Only Engine- Type: L, V8 <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Diesel Engine <input type="checkbox"/> Propane/Natural Gas <input type="checkbox"/> Gas/Electric Hybrid Engine Condition: <input checked="" type="checkbox"/> Runs <input type="checkbox"/> Needs repair <input type="checkbox"/> is in unknown condition Repairs needed: _____ This vehicle was maintained every _____ <input type="checkbox"/> Days <input type="checkbox"/> Hours <input type="checkbox"/> Miles Date Removed From Service: 2016 Maintenance Records: <input type="checkbox"/> Available <input checked="" type="checkbox"/> Not Available For Inspection Transmission: <input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual ___ Speed Condition: <input type="checkbox"/> Operable <input type="checkbox"/> Needs repair <input type="checkbox"/> Is Unknown Condition Repairs Needed: _____ Drivetrain: <input checked="" type="checkbox"/> 2 Wheel Drive <input type="checkbox"/> 4 Wheel Drive Condition: _____		
Exterior: Color: Red/White Windows: <input checked="" type="checkbox"/> No Cracked Glass <input type="checkbox"/> Cracked _____ Minor: <input type="checkbox"/> Dents <input type="checkbox"/> Scratches <input type="checkbox"/> Dings Tire Condition: Good Tread: _____ #Flat 0 Hubcaps # _____ Major Damage to: _____ Additional Damage: _____ Decals: <input type="checkbox"/> None <input type="checkbox"/> Have Been Sprayed or <input type="checkbox"/> Have been Removed & <input type="checkbox"/> Impressions Remain <input type="checkbox"/> No Impressions Emergency equip: <input type="checkbox"/> None <input checked="" type="checkbox"/> Has been removed & <input type="checkbox"/> There are holes in the exterior <input type="checkbox"/> There are no holes		
Interior: Color Black <input type="checkbox"/> Cloth <input checked="" type="checkbox"/> Vinyl <input type="checkbox"/> Leather Damage to Seats: Normal Wear Damage to Dash/Floor: No Radio: <input type="checkbox"/> Stock or <input type="checkbox"/> Brand & Model: No <input type="checkbox"/> AM <input type="checkbox"/> AM/FM <input type="checkbox"/> AM/FM Cassette <input type="checkbox"/> AM/FM CD <input type="checkbox"/> AC (Condition: <input type="checkbox"/> Cold <input type="checkbox"/> Unknown) <input type="checkbox"/> No AC Air Bags: <input type="checkbox"/> Driver's Side <input type="checkbox"/> Dual <input type="checkbox"/> Cruise Control <input type="checkbox"/> Tilt Steering <input type="checkbox"/> Remote Mirrors <input type="checkbox"/> Climate Control Power: <input checked="" type="checkbox"/> Steering <input type="checkbox"/> Windows <input type="checkbox"/> Door Locks <input type="checkbox"/> Seats		
Additional Equipment: Generator, 2000 GMP Pump Manufacturer Onan 6K Model 6DJBFJ30632C Serial # _____ <input type="checkbox"/> Tool Box <input checked="" type="checkbox"/> Light Bar <input type="checkbox"/> Ladder Rack <input type="checkbox"/> Utility Body: Brand _____ <input type="checkbox"/> Hitch: Type _____		
Location of Asset: West Deptford Township 400 Crown Point Road, West Deptford N.J. 08086 For more information contact: Public Works Department (856) 845-4004 Extension 137 or 127 Reminder: Do not close items on or surrounding a Holiday, on Friday nights, or Weekends. Stagger closing times by 10 minutes.		

GovDeals Vehicle Inspection Form

Inventory ID: 632	Asset Number:	Fair Market Value: \$10,000																	
Short Description: Year <u>1989</u> Make <u>Ford</u> Model <u>Maxim Pumper</u>																			
VIN: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>1</td><td>F</td><td>D</td><td>Y</td><td>D</td><td>8</td><td>0</td><td>U</td><td>0</td><td>K</td><td>V</td><td>A</td><td>5</td><td>1</td><td>8</td><td>1</td><td>6</td></tr> </table> Title Restriction: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N			1	F	D	Y	D	8	0	U	0	K	V	A	5	1	8	1	6
1	F	D	Y	D	8	0	U	0	K	V	A	5	1	8	1	6			
Odometer: <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr><td>1</td><td>5</td><td>5</td><td>8</td><td>3</td><td></td></tr> </table> <input checked="" type="checkbox"/> Miles <input type="checkbox"/> Kilometers Odometer Accurate <input checked="" type="checkbox"/> Y <input type="checkbox"/> N: _____			1	5	5	8	3												
1	5	5	8	3															
Long Description: This Vehicle: <input type="checkbox"/> Starts <input type="checkbox"/> Starts with a Boost & <input type="checkbox"/> Runs/Driveable <input type="checkbox"/> Engine Runs <input checked="" type="checkbox"/> Does Not Run <input type="checkbox"/> For Parts Only Engine- Type: <u>3208-T, V 8</u> <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Diesel Engine <input type="checkbox"/> Propane/Natural Gas <input type="checkbox"/> Gas/Electric Hybrid Engine Condition: <input checked="" type="checkbox"/> Runs <input type="checkbox"/> Needs repair <input type="checkbox"/> is in unknown condition Repairs needed: <u>Needs Batteries</u> This vehicle was maintained every _____ <input type="checkbox"/> Days <input type="checkbox"/> Hours <input type="checkbox"/> Miles Date Removed From Service: _____ Maintenance Records: <input type="checkbox"/> Available <input type="checkbox"/> Not Available For Inspection Transmission: <input type="checkbox"/> Automatic <input checked="" type="checkbox"/> Manual ___ Speed Condition: <input checked="" type="checkbox"/> Operable <input type="checkbox"/> Needs repair <input type="checkbox"/> Is Unknown Condition Repairs Needed: _____ Drivetrain: <input checked="" type="checkbox"/> 2 Wheel Drive <input type="checkbox"/> 4 Wheel Drive Condition: _____																			
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Additional Equipment: <u>6KW Diesel Generator</u> Manufacturer <u>Onan</u> Model <u>6.00JB</u> Serial # <u>K870943546</u> <input type="checkbox"/> Tool Box <input checked="" type="checkbox"/> Light Bar <input checked="" type="checkbox"/> Ladder Rack <input type="checkbox"/> Utility Body: Brand _____ <input type="checkbox"/> Hitch: Type _____																			
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