

REQUEST FOR PROPOSAL #2021-012

Planning Partner for the Virgin Islands Housing Authority

Friday, June 18, 2021

Robert Graham, CPM

Executive Director/Contracting Officer

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PART 1 – GENERAL INFORMATION

1.1 The Virgin Islands Housing Authority (VIHA)

The Virgin Islands Housing Authority (VIHA) a public body corporate and political; is located within the United States Virgin Islands, an un-incorporated territory of the United States. VIHA is responsible for planning, financing, constructing, maintaining, and managing all public housing developments located on the three islands of St. Thomas, St. John and St. Croix, which include ten (10) Asset Management Projects (AMPs) with 2,954 public housing units in 24 communities. VIHA's mission is to create vibrant, dynamic, sustainable communities so families can evolve economically, and to improve lives and strengthen communities through quality, safe and affordable housing and by providing a myriad of services to empower public housing residents. VIHA also administers the Territory's Housing Choice Voucher Program, which currently provides rental assistance in the form of vouchers to 1,733 eligible low- income families, the elderly, and persons with disabilities. The vouchers help low-income families to rent affordable housing of their choice from private landlords in the Territory and are funded by the U.S. Department of Housing and Urban Development.

1.2 Solicitation Purpose

The Virgin Islands Housing Authority (VIHA) is seeking proposals from interested and qualified individuals, companies or planning firms to become our Master Planning Partner for the Choice Neighborhoods Initiative (CNI) planning process in the U.S. Virgin Islands. The Planning Partner will lead the CNI planning process in conjunction with the subsequently procured Development Partner for the Marley redevelopment project. VIHA is the lead applicant for the CNI Planning Grant. The selected Contractor will perform CNI planning activities including Assessing the Existing Conditions, the Visioning Process, Neighborhood Plan Process, Housing Plan Process, People Plan Process, and the Transformation Plan. The list of tasks and current planning schedule is attached to this RFP as is the current organizational structure. VIHA will only share their winning CNI application with the Contractor that is selected to perform this work. Tasks may be modified based on the needs of the VIHA, and VIHA's chosen development partner and HUD.

The Choice Neighborhoods Initiative bolsters community-generated strategies to address struggling neighborhoods wherein there is distressed public or HUD-assisted housing. The CNI program aims to transform these areas into neighborhoods of choice using a comprehensive approach to neighborhood transformation that goes well beyond the normal scope of standard affordable housing redevelopment. The CNI program supports organizations that work to transform neighborhoods by not only revitalizing severely distressed public housing but also by leveraging investments in well-functioning community programs and services, providing new investment dollars where non exist currently, supporting high quality public schools and innovative education programs such as high quality early learning programs and services, creatively leveraging existing public assets, public transportation and by working to improve access to jobs for all residents in the community focus area. Additional and more detailed information about HUD's 10-year history of progress under the CNI program can be found at: Choice Neighborhoods Implementation Grants/HUD.gov/U.S. Department of Housing and Urban Development (HUD).

The Choice Neighborhoods Initiative is focused on three core goals:

- (a) Housing: Transform distressed public and assisted housing into energy efficient, mixed-income housing that is physically and financially viable over the long term
- (b) People: Support positive outcomes for families who live in the target developments and the surrounding neighborhood, particularly outcomes related to residents; education, health and recreation safety, employment, and mobility
- (c) Neighborhood: Transform distressed, high-poverty neighborhoods into viable, mixed-income neighborhoods with access to well-functioning services, high quality public schools and education programs, high quality early learning programs and services, public assets, public transportation, and improved access to jobs.

Please Note: Respondents are responsible for reading this Request for Proposals ("RFP") and all exhibits, in its entirety, as updates and revisions have been added. By submitting a response to this solicitation, the

Respondent acknowledges that it has read the entire document and is responding with full knowledge of all terms, conditions, and requirements as set forth.

1.3 Schedule of Events

The following Schedule of Events represents VIHA's estimate of the timetable that will be followed in connection with this solicitation:

EVENTS	DATE AND/OR TIME		
RFP Released	Friday, June 18, 2021		
Pre-Proposal Conference and Site Inspection	None Scheduled.		
Deadline for Questions	Wednesday, June 23, 2021, by 12:00 P.M. LOCAL TIME		
Proposal Due Date and Time	Thursday, July 8, 2021, by 2:00 P.M. LOCAL TIME		

VIHA reserves the right, at its sole discretion, to adjust this Schedule of Events as it deems necessary. If necessary, VIHA will communicate adjustments to any event in the Schedule of Events in the form of an addendum to this RFP. Addenda to this RFP will only be issued and posted on VIHA's website at: http://www.vihousing.org

1.4 Communications

All procurement actions facilitated by VIHA will be conducted in an open, transparent and competitive manner. VIHA will take into account with each transaction competitive pricing, quality of work, reputation and referrals, and understanding of the solicited deliverables and/or requirements. VIHA supports solicitation of proposals from all markets with no geographical preferences and to give ALL qualified businesses, including those that are owned by minorities, women, and small business enterprises, opportunity to do business with VIHA as Contractors and Subcontractors.

In order to maintain a fair and impartial competitive process, VIHA and any outside consultants assisting VIHA with this solicitation shall avoid private communication concerning this procurement with prospective Respondents during the entire procurement process. From the issue date of this RFP until the final award is announced, Respondents are not allowed to communicate about this RFP for any reason with any VIHA staff and/or outside consultants assisting VIHA with this solicitation except:

- Through the RFP Point of Contact named below;
- As otherwise specified in this RFP; and/or
- As provided by existing work agreement(s) (if any)

Prohibited communications includes all contact, including but not limited to, telephonic communications, emails, faxes, letters, or personal meetings, such as lunch, entertainment, or otherwise. VIHA reserves the right to reject the proposal of any Respondent violating this provision.

- A. Questions must be submitted in writing via email to mmiller@vihousing.org. VIHA will receive requests for additional information and/or clarification relative this solicitation between Friday, June 18, 2021, 12:00 P.M. LOCAL TIME and Wednesday, June 23, 2021, by 12:00 P.M. LOCAL TIME.
- B. Responses to these questions will be addressed in writing and issued as an addendum to this RFP. VIHA will not respond to requests for information after the date stated above.
- C. It is the responsibility of the Respondent to monitor VIHA's website for any addenda issued. All Respondents are encouraged to frequently check VIHA's website for additional information.
- D. All requests for information or clarification pertaining to this solicitation must be addressed in writing.

RFP Point of Contact

Marilyn Miller Procurement Manager Virgin Islands Housing Authority Procurement Department 9900 Oswald Harris Court St. Thomas, VI 00802

Email: mmiller@vihousing.org

PART 2 - SCOPE OF WORK

2.1 Scope of Work and Specific Requirements

The selected Planning Partner will co-lead the CNI planning process in conjunction with the team currently working on the CNI planning grant at the direction of the VIHA. The target neighbourhood is Marley Homes and Additions & Marley Additions. The VIHA team will also create Neighborhood, Housing and People Committees and additional Task Forces as needed.

The Planning Partner will be involved in the following:

- Assessing the Existing Conditions. Facilitating the Marley Homes and Additions meetings, identifying
 community assets, interviewing service provider organizations, conducting the resident needs assessment,
 and conducting the community needs assessment. In addition, the Planning Partner will document the
 process and the results. The VIHA team will retain a market study consultant. The Services VIHA will review
 the outputs and provide comments.
- The Visioning Process. Conducting individual and joint visioning sessions for Marley Homes and Additions residents, as well as others identified as stakeholders within in the footprint of the Marley Homes and Additions CNI's historic footprint. Refinement of the vision in communitywide meetings. Documentation of the plan, the process and the results, using community data gleaned from the process to form a vision that can be implemented. The VIHA-led team will actively participate in this visioning process. The VIHA, MHAB and MHI will review the outputs and provide comments and feedback to inform the process further.
- Neighbourhood Plan Process. Conducting Marley Homes and Additions meetings to explore options and
 opportunities. Identify potential projects and identify realistic options for funding to support each project.
 Assist in evaluating the strength of each project. Documentation of the plan, the process and the results are
 necessary and key to the success of this effort. The VIHA team will implement Early Action Activities. The
 MHA, MHAB and MHI will review the outputs and provide comments and feedback to inform the process
 further.
- The Housing Plan Process. Assist the VIHA team with the Virgin Islands State Historic Preservation Office (VISHPO) consultation, Part 58 Environmental Review and Phase I and II Environmental Assessments as needed. Work with the Housing Committee and Task Forces, the Marley Homes and Additions community residents as well as business investment interest to create a shared wider-community vision for housing. Support the VIHA and their selected architectural firm when needed to develop conceptual housing alternatives and schematic drawings for stakeholders to review and discuss at public meetings or elsewhere. Work with the master developer and financial consultants retained by VIHA to identify financing options. VIHA will review the outputs and provide comments.

- The People Plan Process. Work with the People Committee and Tasks Forces and the service providers, supported by the results of the resident needs assessment to identify appropriate programs and services that will assist families to become economically self-sufficient, improve the educational outcomes for children, improve health outcomes, improve safety and security, and assist seniors to successfully age in place. Identify funding sources. Document the process and the results, including a plan that can be carried into the implementation phases. The VIHA team will participate in this process. VIHA will review the outputs and provide comments.
- <u>Project Outputs</u>. Develop the Transformation Plan with Content, the draft Transformation Plan and the Final Transformation Plan. The VIHA team will participate in this process. The VIHA, MHAB and MHI will review the outputs and provide comments.

PART 3 - PROPOSAL SUBMISSION

3.1 Proposal Format and Structure

VIHA intends to retain a Contractor using a best value basis, meaning VIHA will consider factors other than just cost in making an award. Therefore, to allow for easy comparison of proposals during evaluation, proposals should contain the following information with documentation and be arranged in consecutive order. Respondents interested in responding to this RFP should submit the following information. The sections are delineated as follows:

The sections are delineated as follows:

A. Introductory Letter. Firm shall provide a brief synopsis on company letterhead of its ability to perform the scope of work outlined in the RFP, business background and identify the benefits provided by it offering. The Introductory Letter must include the legal business name and company status (i.e., partnership, corporation – including State or Territory of incorporation, etc.). Additionally, the respondent must state if there have been any recent (within the past 3 years) changes in ownership and/or substantial leadership changes. Also, please include the location of the Firm's principal place of business and discuss any joint venture partners or sub-consultants as they pertain to the RFP. Please limit Introductory Letter to three (3) pages maximum.

The Virgin Islands Housing Authority will evaluate all responses and will select the three (3) most highly qualified names or firms and rank them in a one-two-three order, according to the following qualifications:

B. Tabbed sections as indicated:

TAB	WEIGHTED SCORING CRITERIA	PAGE COUNT
Α	Company Experience	Maximum 6 pages
В	Success Rate, Qualifications, Experience, and Personnel Listing	Maximum 8 pages
С	Description of the Planning Process	Maximum 5 pages
D	Statement of Contractor Qualifications	Maximum 2 pages
E	References	Maximum 2 pages
F	Commitment to Diversity	Maximum 2 pages
G	Cost Proposal	Maximum 2 pages
Н	Misc. Pricing	Maximum 2 pages
Ī	Mandatory Submittals	N/A - Use Forms

The proposal should be prepared simply and economically, avoiding the use of elaborate promotional materials beyond those sufficient to provide a complete presentation.

A page is considered to be one side of a single side of and 8½" x 11" paper, single-spaced using not smaller than an 11-point font, and containing margins at the top, bottom, and sides of no less than one inch in width.

Foldouts containing charts, spreadsheets, and oversize exhibits are permissible and will be included in page count. VIHA will allow a font size no smaller than 9-point for information included in tables and charts *only*. All proposal pages must be consecutively numbered. Respondents are cautioned that if their Proposal exceeds the page limitation, VIHA will evaluate up through the permitted number of pages only. Information contained on pages beyond that limit will not be considered.

All information must be incorporated into a response to a specific requirement and clearly referenced. Any information not meeting these criteria will be deemed extraneous and will in no way contribute to the evaluation process.

- 3.2 Profile of Firm, Form of Proposal, HUD 5369 B, HUD 5369 C, HUD SF-LLL, HUD 50071, HUD 50070 and HUD 2530. These forms must be fully completed, if applicable, and submitted as part of the proposal submittal.
- 3.3 Success Rate, Qualifications, Experience, and Personnel Listing.
 - List the community engagement plans the proposer has prepared for housing development and/or neighbourhood revitalization projects, and details that illustrate the success of those plans. Include the name, address and telephone number of client contacts for each.
 - The proposer's qualifications, relevant experience, and ability of staff to successfully perform the required services; include experience with Choice Neighbourhoods applications, if applicable.
 - The number of years the firm has been in business.
 - The project team members, their roles on the project and provide resumes that describe how they meet the qualifications listed above.
- 3.4 Description of the Planning Process. Please address each item listed in the Scope of Services in 2.1.
- **3.5 Statement of Contractor Qualifications.** This form must be complete and submitted as part of the proposal submittal. The proposal must include relevant resumes, a representative list of community engagement plans the firm has written as well as two samples.
- 3.6 References. Include a list of at least three references to explain your experience with performing services similar to those detailed herein. Include contact information for each reference. At least one reference should be from an organization that is similar in nature to VIHA.
- 3.7 Misc. Pricing. The proposer must include his hourly rate for any additional work, outside of what is outlined in this RFP, that the VIHA may request. This hourly rate will be applicable to the work beyond those proposed in the lump sum amounts associated Community Engagement and with the preparation of a Choice Neighbourhoods Implementation Grant application.
- **3.8** Women-/Minority-Owned Business Enterprises and Section 3 Participation. Exhibit H must be fully completed and submitted as part of the proposal submittal. The proposer must also submit a copy of its Equal Employment Opportunity Policy or Affirmative Action Plan.
- 3.9 Section 3 Self-Certification Form (Optional). Section 3 is an income-based program through the U.S. Department of Housing and Urban Development that allows VIHA to give preferences to those that qualify. To claim a Section 3 reference for this RFP, the proposer must complete and submit Section 3 certification along with any documentation required by the form.
- 3.10 Subcontractor/Joint Venture Information (Optional). Identify whether your firm intends to use any subcontractors to perform these services and/or if the proposal is a joint venture with another firm. All preceding information required from the proposer must also be included for any major subcontractors (10% or more) or any joint vventures.

3.11 Other Information (Optional). The proposer may include any other information that they believe is appropriate to assist VIHA in its evaluations.

Respondents interested in responding to this RFP should submit the following information. The sections are delineated as follows:

All information presented in response to this RFP must be included in the submitted response. There can be no information that is linked to a website that requires reviewers to access the website for consideration of content. Any such conditions will not be considered as part of the Respondent's proposal.

VIHA may award a contract on the basis of initial offers received, without discussions; therefore, each initial offer should contain the Respondent's best terms from a cost or price and technical standpoint. The selected firm must be ready to execute contract within one week of receiving a contract from VIHA.

3.12 Submission of Proposals

By submitting a response to the RFP, the Respondent is acknowledging that the Respondent:

- 1. Has read the information and instructions; and
- 2. Agrees to comply with the information and instructions contained herein.
- A. Submission Requirements: Completed proposals must be submitted to the VIHA electronically by the Proposal Due Date and Time. Respondents shall transmit completed proposals to the VIHA by email to mmiller@vihousing.org in PDF file format. The "Subject" line of the email should state "(name of firm) Planning Partner for the Virgin Islands Housing Authority." Please exercise caution in creating your electronic file.
- B. Each proposal and all materials submitted to VIHA in response to this RFP shall become the property of VIHA. Selection or rejection of a proposal does not affect this right.
- C. VIHA reserves the right to:
 - Reject any or all offers, discontinue this RFP process and re-advertise this RFP without obligation or liability to any potential Respondent,
 - Accept other than the lowest priced offer;
 - Award more than one (1) contract; and
 - Award a contract on the basis of initial offers received, without discussions or requests for best and final offers.

PART 4 - PROPOSAL EVALUATION

4.1 Evaluation Factors and Award

The proposal evaluation process is designed to award the contract, not necessarily to the Respondent of least cost, but rather to the Respondent with the best combination of attributes (e.g., qualifications and experience, cost, etc.), based upon the evaluation factors specifically established for this Request for Proposals.

Respondents must provide all information outlined in the Evaluation Factors to be considered responsive. Proposals will be evaluated based on the responsiveness of the Respondent's information to the Evaluation Factors, which will demonstrate the Respondent's understanding of the Evaluation Factors and capacity to perform the required services of this Request for Proposals.

Proposals will be evaluated based on the following Evaluation Factors:

No.	WEIGHTED EVALUATION FACTORS	WEIGHT OF FACTOR
1 a	Firm-fixed base bid fee to complete community engagement work for the Choice Neighborhoods application per the specified scope.	10
1 b	Hourly rate to develop the Transformation Plan for the Historic Centennial Hill neighborhood. The firm-fixed base bid fee will be negotiated with the firm based on this hourly rate submitted.	5
2	Proposal is complete and addresses the proposal requirements and additional materials; compelling narrative that demonstrates writing skills; demonstrated grasp of the work required.	15
3	Demonstrated record of success in successfully writing and implementing community engagement plans.	30
4	Qualifications and Experience General qualifications: specialized qualifications and professional competence in areas directly related to this RFP (includes a review of references).	40
	TOTAL BASE POINTS	100
BONUS	Direct experience working on a CNI planning grant and or CNI implementation plan preparation	10
	TOTAL POINTS	110
	*Additional points available for Section 3 Business. Business Preference Evaluation Factor. A proposer may receive a Section 3 Business Preference if in Exhibit H.	they qualify as
5a	Category 1 Business Fifty-one (51%) or more owned by residents of the specific community or communities for which the Section 3 covered assistance is expended: or Full time, permanent workforce includes thirty percent (30%) of the above residents as employees.	15
5b	Category 2 Business Fifty-one percent (51%) or more owned by residents of another specific community or communities managed by the Virgin Islands Housing Authority that is expending the Section 3 covered assistance: or Full-time, permanent workforce includes thirty percent (30%) of the above residents as employees.	13
5c	Category 3 Business An entity selected to carry out a HUD Youth Build Program in the metropolitan area, or non-metropolitan county, in which the Section 3 covered assistance is expended.	11
5d	Category 4 Business Fifty-one percent 51% or more owned by Section 3 residents; or Fulltime, permanent workforce includes no less than thirty percent (30%) Section 3 residents: or Will subcontract in excess of twenty-five percent (25%) of the total amount of subcontracts to business concerns identified above.	9
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The establishment, application and interpretation of the above Evaluation Factors shall be solely within the discretion of VIHA. VIHA reserves the right to determine the suitability of proposals on the basis of all of these factors.

4.2 Evaluation Factor Description

Respondents are required to respond thoroughly to each of the following evaluation factors, with focus on providing answers that are both clear and concise.

I. Cost

Firm-fixed base bid fee to complete community engagement work for the Choice Neighborhoods application per the specified scope.

II. Cost

Hourly rate to develop the Transformation Plan for the Historic Centennial Hill neighborhood. The firm-fixed base bid fee will be negotiated with the firm based on this hourly rate submitted.

III. Quality

Proposal is complete and addresses the proposal requirements and additional materials; compelling narrative that demonstrates writing skills; demonstrated grasp of the work required.

IV. Success Rate

Demonstrated record of success in successfully writing and implementing community engagement plans.

V. Qualifications and Experience

General qualifications: specialized qualifications and professional competence in areas directly related to this RFP (includes a review of references).

4.3 Evaluation and Award Process

be established to evaluate proposals based solely on the Evaluation Factors set forth above. Proposals will be evaluated on an individual basis against the requirements stated in the RFP. Factors not specified in the RFP will not be considered. VIHA reserves the right to waive any minor irregularities or technicalities in the proposals received.

A Technical Advisor with the required expertise may provide information and advise the Evaluation Committee on technical matters to ensure that the Evaluation Committee will have the benefit of such expertise to inform decisions. The designated Technical Advisor does not have voting rights with respect to the evaluation and scoring of Project Proposals but will have consultation rights with respect to matters that cannot be resolved by the Evaluation Committee.

Proposals that are considered nonresponsive will not receive consideration. VIHA reserves the right at any time during the evaluation process to reconsider any proposal submitted. It also reserves the right to meet with a Respondent at any time to gather additional information. Furthermore, VIHA reserves the right to delete, add or modify any aspect of this procurement.

VIHA reserves the right to: 1) award this contract to one Respondent, 2) make multiple awards, 3) award without discussions and 4) negotiate the final scope of services, price, schedule and any and all aspects of this solicitation with all Respondents. VIHA may 1) reject any or all offers if such action is in VIHA's interest, 2) award contract other than to the lowest Respondent, 3) waive informalities and minor irregularities in offers received, and 4) award all or part of the requirements stated. VIHA reserves the right to reject an award to Respondent during the contract negotiations if 1) Respondent and VIHA cannot agree to mutual terms for the contract or 2) Respondent causes delay that, in VIHA's discretion, causes a hardship to VIHA.

A proposal receiving an acceptable evaluation from the Evaluation Committee will be submitted to VIHA's Board of Commissioners for approval subject to the availability of funding.

VIHA anticipates that will award a contract for the period of time that it takes the Contractor to complete the work and submit the completed Transformation Plan to HUD by the HUD-mandated deadlines. It is currently contemplated that the completion of the Transformation Plan will be completed within twenty-four (24) months or less.

PART 5 – MANDATORY SUBMITTALS

5.1 Mandatory Submittals

The following Mandatory Submittals that must be included as a part of the proposal and received by the due date and time are:

MANDATORY SUBMITTALS
Exhibit A – Fee Proposal Form
Exhibit B – W-9-Request for Taxpayer Identification Number and Certification
Exhibit C – Required Representations and Certifications
Exhibit D – Subcontractor Data Form
Exhibit E – Section 3 Business Self-Certification Form
Exhibit F – Principal Personnel Disclosure Statement Certification and Instructions
Exhibit G – Respondent Disclosure Certification
Exhibit H Liability Questionnaire
Exhibit I – HUD-50071 - Certification of Payments to Influence Federal Transactions
Exhibit J Record of Comparable Projects in Past Two (2) Years
Exhibit K – Record of Comparable Projects in Progress
Exhibit L – Three Completed Contractor Responsibility Survey[b1]
Exhibit M – Addenda Acknowledge Form

^{*}Forms shall be completed, signed, and notarized where required or marked "Not Applicable" where appropriate.

5.2 Principal Personnel Disclosure Statement Certification Form

VIHA requires that a notarized *Principal Personnel Disclosure Statement Certification* Form (Exhibit I) be submitted by each Respondent. Preparation of these documents is governed by the instructions identified on the Form. The following definitions apply when completing this Form:

- a. Sole Proprietorships. A sole proprietorship is a; business owned by one (1) individual.
- b. Partnerships. A partnership exists when two (2) or more persons associate to conduct a business enterprise.
- c. Limited Liability Companies. A limited liability company is a legal entity created by territory/state law.
- d. Corporations. A corporation is a legal entity created by territory/state law. All officers and assistant officers shall be identified on the Principal Personnel Disclosure Statement Certification Form.

5.3 Disclosure Statement

Prior to award, and while Respondent is conducting business with VIHA, Respondent is required to disclose any direct or indirect conflicts of interest and any organizational conflicts of interest as soon as such conflict becomes known or should have become known. Respondents with a conflict of interest must provide a full and complete

disclosure, in writing, to the Procurement Manager. The Disclosure Statement must be presented on Respondent's letterhead, notarized and signed by the individual making the disclosure. The details to be included in the Disclosure Statement may be found on the bottom of the *Principal Personnel Disclosure Statement Certification* Form (Exhibit I).

5.4 Certification Regarding Debarment

Respondent certifies by submission of its proposal, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by a federal department or agency. All Respondents are required to submit a Disclosure Statement if this is not the case.

PART 6 - RFP ADMINISTRATIVE TERMS AND CONDITIONS

6.1 Required VIHA Respondent Registration

In order to do business with VIHA, Respondent must be a registered vendor prior to submitting a response. If Respondent has already registered with VIHA, the Respondent's (Vendor) profile must be up to date.

Respondent is responsible for contacting their local authorities to ensure that Respondent has complied with all laws and is authorized and/or licensed to do business in the Territory. All applicable fees associated therewith are the responsibility of Respondent now or hereafter in effect during the contract. Respondent and its employees, agents and subcontractors shall also comply with all Federal, State and local laws regarding business permits and licenses that may be required to carry out the services performed under the contract.

6.2 Cost of Proposals

All costs incurred, directly or indirectly, in response to this solicitation, including the preparation, submittal, or presentation of the proposal, shall be the sole responsibility of, and borne by, the Respondent. The cost for developing the proposal and participating in the procurement process (including the protest process) is the sole responsibility of the Respondent. VIHA will not provide reimbursement for such costs.

6.3 Ownership of Documents

All documents and information generated, prepared, assembled and provided to VIHA pursuant to this RFP become the property of VIHA upon receipt. Respondents shall not copyright, or cause to be copyrighted, any portion of any document submitted to VIHA as a result of this RFP.

6.4 Rejection of Proposals

VIHA may reject any or all proposals. Action to reject all proposals shall be taken only for unreasonably high prices, error in the solicitation, cessation of need, unavailability of funds, failure to secure adequate competition, or any other reason deemed appropriate by VIHA.

6.5. New Equipment

All material, supplies and equipment offered and furnished must be new, and of current manufacturer production, unless the RFP specifically permits used or reconditioned items.

6.6. Taxes

VIHA is exempt from sales tax. The Contractor agrees to pay all taxes incurred in performance of an awarded contract.

6.7. Contractor Status

The Contractor shall be an independent Contractor and will not be an employee of VIHA.

6.8. Funding Limitations

This procurement may be funded, in whole or in part, by grant funds provided by the U.S. Department of Housing and Urban Development ("HUD"). VIHA will not be bound to any contract if funding has been disallowed by HUD.

6.9. Government Restrictions

In the event any governmental restrictions may be imposed which would necessitate alteration of the material, quality, workmanship or performance of the goods or the material, quality, workmanship or performance of the goods or services offered, it shall be the responsibility of the successful Respondent to immediately notify VIHA in writing specifying the regulation which requires an alteration. VIHA reserves the right to accept any such alteration, including any reasonable price adjustments occasioned thereby, or to cancel the contract at no expense to VIHA.

6.10 Section 3

In keeping with Section 3 of the Act of 1968, and in accordance with the goals of HUD, VIHA strongly encourages Section 3 participation.

6.11 Errors - Proposal Rejection

Each correction made by the Respondent on the Fee Proposal Form MUST BE INITIALED IN INK by each correction. No corrections will be made in pencil.

6.12 Acceptance Period

All Respondents submitting a proposal must agree to honor the terms and conditions contained herein for a period of ninety (90) days.

6.13 Proposal Signature

The person signing the Fee Proposal Form must be a person authorized to bind the Respondent contractually. Unsigned offers will be rejected. Unsigned offers cannot be signed after the proposal has been opened. No signatures shall be in pencil.

6.14 Withdrawal of Proposals

Proposals may be withdrawn by written notice received any time before contract award. Proposals may be withdrawn in person by Respondent or its authorized representative if the identity of such representative is established and a signed receipt of the withdrawn proposal is received by VIHA prior to the contract award.

6.15 VIHA Authorized Procurement Authority

In accordance with VIHA's Final Amended Procurement Policy Statement contracts in excess of \$150,000 shall be subject to approval by VIHA's Board of Commissioners prior to award and contract execution.

6.16 Amendments to Solicitation

VIHA reserves the right to increase or delete any scheduled items, and/or increase or reduce the quantity of any scheduled item as deemed necessary, to waive informalities and technicalities, and to make other changes and modifications consistent with VIHA's policies, and the laws and regulations governing HUD programs.

All addenda to this solicitation will be posted on VIHA's website. It is the responsibility of the Respondent to monitor VIHA's website for any addenda issued. Each Respondent must acknowledge all addenda issued on VIHA's website so as to ensure that addenda are considered in their proposal response (see Exhibit M - Addenda Acknowledge Form). All Respondents are encouraged to frequently check VIHA's website for additional information.

6.17 Cancellation of Solicitation

VIHA reserves the right to cancel a solicitation when it is determined to be in the best interest of VIHA to do so.

6.18 Contracting Officer

VIHA's Contracting Officer is the Executive Director of VIHA.

6.19 Due Diligence

All procurement transactions shall be conducted only with responsible Contractors, i.e., those who have the technical and financial competence to perform and who have a satisfactory record of integrity. Where warranted and before awarding a contract, VIHA shall review the proposed Contractor's ability to perform the contract successfully, considering factors such as the Contractor's integrity, compliance with public policy, record of past performance (including vendor performance reports and contacting previous clients of the Contractor), and financial and technical resources (an extensive financial review is normally conducted on all non-bonded procurement transactions over \$150,000 in total contract value). Contracts shall not be awarded to debarred, suspended, or ineligible Contractors. VIHA shall not contract with firms and/or individuals listed on *List of Parties Excluded from Federal Procurement and Non-procurement Programs*. If a prospective Contractor is found to be non-responsible, a written determination of non-responsibility shall be prepared, and the prospective Contractor shall be advised of the reasons for the determination.

6.20 Proposal Evaluation Period

During the period when proposal evaluation is being conducted, all proposal analyses are confidential. This measure simply maintains the integrity of VIHA's procurement system. No VIHA personnel in any office can discuss information pertinent to any proposal during this period. Violation of the confidentiality of proposals pending award seriously compromises VIHA in establishing contractual agreements and may result in the disqualification of the Respondent from this procurement action.

6.21 Insurance Requirements

The following insurance coverage shall be carried by the Contractor during the term of this contract and will be subject to approval by VIHA. The premium cost of all insurance purchased by the Contractor for protection against risks assumed by virtue of the contract shall be borne by the Contractor and is not reimbursable by VIHA.

- A. Worker's Compensation, in accordance with the laws of the Territory of the U.S. Virgin Islands (minimum of \$1,000,000)
- B. Professional Liability containing errors and omissions coverage in an amount net less than \$1,000,000.00
- C. General Liability covering bodily injury, personal injury, and property damage in an amount not less than \$1,000,000.00
- D. Automotive Liability covering bodily injury and property damage in an amount not less than \$100,000.00.
- E. VIHA shall be specified as an additional insured. The Contractor shall also agree to indemnify and hold VIHA, its officers, agents and employees, harmless from any and all claims made against VIHA's officers.

agents and employees, which arise out of any action or omission of the Contractor or any of its officers, employees or agents, which agreement to indemnify and hold VIHA, its officers, agents and employees, harmless shall not be limited to the limit of liability insurance required under the provisions of these specifications or contract, of which these specifications are made a part.

F. Proof of insurance shall be provided to VIHA prior to execution of this Contract and at the beginning of each option term (if applicable). VIHA specifically reserves the right to require the Contractor to provide certified copies of such policy or policies.

Each such policy will not be canceled or materially changed or altered without first giving thirty (30) days' written notice thereof to Marilyn Miller, Procurement Manager, Procurement Department, 9900 Oswald Harris Court, St. Thomas, Virgin Islands 00802, sent by certified mail, return receipt requested.

6.22 Contract Administration

Lydia Pelle, Chief Operating Officer, is responsible for the administration of this contract, unless otherwise stated in the contract. The Contracting Officer for this contract will be Robert Graham, CPM, Executive Director. The Contracting Officer is responsible for final approval and acceptance of all services rendered.

6.23 Contract Period

The Contractor shall complete all work hereunder within the terms of the contract. Contract period shall be for two (2) years from the Execution Date of the Contract.

6.24 Option to Extend

The contract shall have an option to extend for up to two (2) additional twelve (12) month periods. Total contract period shall not exceed thirty-six (36) months from the Effective Date of the contract, i.e., the date on which the original contract is executed by VIHA.

6.25 Holidays

VIHA recognizes the following holidays as vacation days for its employees:

New Year's Day Three King's Day Holy Thursday Good Friday President's Day **Easter Monday** Martin Luther King, Jr.'s Birthday Transfer Day VI Emancipation Day Columbus Day D. Hamilton Jackson Day Veteran's Day Thanksgiving Day Memorial Day **Christmas Day** Independence Day

Day after Christmas Labor Day

Children's Parade Day – STX Carnival Children's Parade Day – STX Carnival

If a holiday falls on a Sunday, the following Monday will be observed. If a holiday falls on a Saturday, the preceding Friday will be observed.

6.26 Termination of Convenience and Default

VIHA reserves the right to terminate this contract without prior notification for reasons it deems in the best interest of VIHA in accordance with Clause 4 of the HUD Form 5370-C — General Contract Conditions Non-Construction. If terminated, VIHA will notify the Contractor of the termination in writing by certified mail; return receipt requested and shall pay Contractor for services rendered prior to Contractor's receipt of notice of the contract termination.

6.27 Advertising

Respondent agrees not to use the fact of or the results from submission of a proposal as a part of any commercial advertising. VIHA does not permit the use of VIHA's relationship with an entity of purposes of marketing efforts, unless VIHA specifically agrees otherwise.

6.28 Notices

All notices, demands, requests, and claims pertaining to the award of this contract must be addressed in writing to:

Robert Graham, CPM
Executive Director/Contracting Officer
The Virgin Islands Housing Authority
9900 Oswald Harris Court
St. Thomas, Virgin Islands 00802

Any protest against this procurement action must be received prior to the due date for receipt of proposals, and any protest against the award of a contract must be received within ten (10) calendar days after contract award, or the protest will not be considered. All proposal protests shall be in writing and must give complete and detailed grounds because the actual or prospective Contractor is protesting the solicitation and/or award. The proposal protest shall be submitted to the authorized VIHA personnel or designee, who shall review the protest and all other related information and issue a written decision on the matter. The authorized VIHA personnel or designee may, at their discretion, suspend the procurement and/or contract award pending resolution of the protest, if warranted by the facts presented. The authorized VIHA personnel or designee will have final ruling authority.

6.29 Compliance with Law

The Contractor shall comply with all applicable Federal, State/Territory and local laws, regulations, ordinances and requirements applicable to the work described herein including, but not limited to, those applicable laws, regulations and requirements governing equal employment opportunity programs, subcontracting with small and minority firms, women's business enterprise, and labor surplus area firms, equal opportunity for businesses and unemployed and underemployed persons (as referenced in Section 3 of The Housing and Urban Development Act of 1968, as amended, 12 U.S.C. 1701u (Section 3), the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973, the Davis-Bacon Act, and those laws and regulations concerning the abatement and remediation of asbestos and lead-based paint, and shall provide for such compliance in the contract documents. To the extent the work required under this contract is related to development, Contractor shall further comply with the applicable Annual Contributions Contract (ACC) related to such development. To the extent such work is related to a mixed finance development, Contractor shall comply with the provisions of 24 CFR ' 941.208. The Contractor shall obtain, at Contractor's expense, such permits, certificates and licenses as may be required in the performance of the work specified.

6.30 Indemnification

VIHA cannot and by the agreement relating to this RFP, does not agree to indemnify, hold harmless, exonerate or assume the defense of the Contractor or any other person or entity whatsoever, for any purpose whatsoever.

6.31 Standards of Conduct

The Contractor shall be responsible for maintaining satisfactory standards of employees' competency, conduct, courtesy, appearance, honesty, and integrity, and shall be responsible for taking such disciplinary action with respect to any employee, as may be necessary.

EXHIBITS

(Rev. November 2017) Department of the Treasury

Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

Internal	Revenue Service	► Go to www.irs.gov/FormW9 for instru	ictions and the lates	t information.	- 1		
	1 Name (as show	n on your income tax return). Name is required on this line; do n	ot leave this line blank.				
	2 Business name	disregarded entity name, if different from above					
က်							
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.					ns (codes apply only to es, not individuals; see	
g	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate				instructions of		
s or	Individual/so single-memb	brakeriotor or	Partnership	Trust/estate	Evennt nave	a code (if only)	
Print or type. See Specific Instructions on page		ity company. Enter the tax classification (C=C corporation, S=S	corporation P_Partners	ship) 🕒	exempt baye	e code (if any)	
or to		the appropriate box in the line above for the tax classification of			Exemption fr	om FATCA reporting	
int o	LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that				code (if any)	• •	
F		triat is not disregarded from the owner for U.S. rederal tax purp ad from the owner should check the appropriate box for the tax			, ,,		
eci	Other (see in	structions) ►			(Applies to accour	nts maintained outside the U.S.)	
S.	5 Address (numb	er, street, and apt. or suite no.) See instructions.		Requester's name a	ind address (o	ptional)	
See							
	6 City, state, and	ZIP code					
	7 Liet account nu	mber(s) here (optional)					
	LIST GCCCGITT TIG	noorly noro (opnoral)					
Par	Taxpa	yer Identification Number (TIN)					
Enter	your TIN in the ar	opropriate box. The TIN provided must match the name	given on line 1 to avo	oid Social sec	urity number		
backu	p withholding. Fo	or individuals, this is generally your social security number	er (SSN). However, for	ra 📗	\Box		
		prietor, or disregarded entity, see the instructions for Pa over identification number (EIN). If you do not have a nur		a	-	-	
TIN, la		, , , , , , , , , , , , , , , , , , , ,		or			
		in more than one name, see the instructions for line 1. A	ilso see What Name a	end Employer	identification	number	
Numb	er 10 Give me ne	equester for guidelines on whose number to enter.		.	-		
Par	Cortif	ication					
		ury, I certify that:				· · · · · · · · · · · · · · · · · · ·	
		on this form is my correct taxpayer identification number	r (or Lam waiting for a	unumber to be iss	ued to me):	and	
		ackup withholding because: (a) I am exempt from backu					
		m subject to backup withholding as a result of a failure t backup withholding; and	to report all interest or	r dividends, or (c)	the IRS has	notified me that I am	
	3. I am a U.S. citizen or other U.S. person (defined below); and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.						
	• •		, ,	•	ect to backu	n withholding because	
Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid,							
	acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.						
Sign Here	0.8		_	-A- M			
11616	U.S. person			Pate >			
Gei	neral Inst		 Form 1099-DIV (divided) 	idends, including	those from s	stocks or mutual	

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; do not leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note: ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

- b. Sole proprietor or single-member LLC. Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.
- c. Partnership, LLC that is not a single-member LLC, C corporation, or S corporation. Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.
- d. Other entities. Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.
- e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

IF the entity/person on line 1 is a(n)	THEN check the box for
Corporation	Corporation
 Individual Sole proprietorship, or Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes. 	Individual/sole proprietor or single- member LLC
 LLC treated as a partnership for U.S. federal tax purposes, LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes. 	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
Partnership	Partnership
Trust/estate	Trust/estate

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2-The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5-A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8-A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10-A common trust fund operated by a bank under section 584(a)
- 11-A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for	THEN the payment is exempt for
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,0001	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

- A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)
- B-The United States or any of its agencies or instrumentalities
- C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)
- E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)
- F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state
 - G-A real estate investment trust
- H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940
 - I-A common trust fund as defined in section 584(a)
 - J—A bank as defined in section 581
- K-A broker
- L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M-A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident atien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See What Name and Number To Give the Requester, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/Businesses and clicking on Employer Identification Number (EIN) under Starting a Business. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see Exempt payee code, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

- 1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
- 3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.
- 4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
- 5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account ¹
Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
 b. So-called trust account that is not a legal or valid trust under state law 	The actual owner ¹
Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)	The grantor*
(A))	
(A)) For this type of account:	Give name and EIN of:
	Give name and EiN of: The owner
For this type of account: 8. Disregarded entity not owned by an	
For this type of account: 8. Disregarded entity not owned by an individual	The owner
8. Disregarded entity not owned by an individual 9. A valid trust, estate, or pension trust 10. Corporation or LLC electing corporate status on Form 8832 or	The owner Legal entity ⁴
For this type of account: 8. Disregarded entity not owned by an individual 9. A valid trust, estate, or pension trust 10. Corporation or LLC electing corporate status on Form 8832 or Form 2553 11. Association, club, religious, charitable, educational, or other tax-	The owner Legal entity ⁴ The corporation
For this type of account: 8. Disregarded entity not owned by an individual 9. A valid trust, estate, or pension trust 10. Corporation or LLC electing corporate status on Form 8832 or Form 2553 11. Association, club, religious, charitable, educational, or other tax-exempt organization	The owner Legal entity ⁴ The corporation The organization

For this type of account:	Give name and EIN of:
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
 Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B)) 	The trust

- ¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.
- ² Circle the minor's name and furnish the minor's SSN.
- ³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.
- ⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

*Note: The grantor also must provide a Form W-9 to trustee of trust.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- · Protect your SSN,
- . Ensure your employer is protecting your SSN, and
- · Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.ldentityTheft.gov and Pub. 5027.

Visit www.irs.gov/IdentityTheft to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

Instructions to Offerors Non-Construction

U.S. Department of Housing and Urban Development Office of Public and Indian Housing



1. Preparation of Offers

- (a) Offerors are expected to examine the statement of work, the proposed contract terms and conditions, and all instructions. Fallure to do so will be at the offeror's risk.
- (b) Each offeror shall furnish the information required by the solicitation. The offeror shall sign the offer and print or type its name on the cover sheet and each continuation sheet on which it makes an entry. Erasures or other changes must be initialed by the person signing the offer. Offers signed by an agent shall be accompanied by evidence of that agent's authority, unless that evidence has been previously furnished to the HA.
- (c) Offers for services other than those specified will not be considered.

2. Submission of Offers

- (a) Offers and modifications thereof shall be submitted in sealed envelopes or packages (1) addressed to the office specified in the solicitation, and (2) showing the time specified for receipt, the solicitation number, and the name and address of the offeror.
- (b) Telegraphic offers will not be considered unless authorized by the solicitation; however, offers may be modified by written or telegraphic notice.
- (c) Facsimile offers, modifications or withdrawals will not be considered unless authorized by the solicitation.

3. Amendments to Solicitations

- (a) If this solicitation is amended, then all terms and conditions which are not modified remain unchanged.
- (b) Offerors shall acknowledge receipt of any amendments to this solicitation by
 - (1) signing and returning the amendment;
 - (2) identifying the amendment number and date in the space provided for this purpose on the form for submitting an offer,
 - (3) letter or telegram, or
 - (4) facsimile, if facsimile offers are authorized in the solicitation. The HA/HUD must receive the acknowledgment by the time specified for receipt of offers.

4. Explanation to Prospective Offerors

Any prospective offeror desiring an explanation or interpretation of the solicitation, statement of work, etc., must request it in writing soon enough to allow a reply to reach all prospective offerors before the submission of their offers. Oral explanations or instructions given before the award of the contract will not be binding. Any information given to a prospective offeror concerning a solicitation will be furnished promptly to all other prospective offerors as an amendment of the solicitation, if that information is necessary in submitting offers or if the lack of it would be prejudicial to any other prospective offerors.

5. Responsibility of Prospective Contractor

- (a) The HA shall award a contract only to a responsible prospective contractor who is able to perform successfully under the terms and conditions of the proposed contract. To be determined responsible, a prospective contractor must -
 - Have adequate financial resources to perform the contract, or the ability to obtain them;

- (2) Have a satisfactory performance record;
- (3) Have a satisfactory record of integrity and business ethics;
- (4) Have a satisfactory record of compliance with public policy (e.g., Equal Employment Opportunity); and
- (5) Not have been suspended, debarred, or otherwise determined to be ineligible for award of contracts by the Department of Housing and Urban Development or any other agency of the U.S. Government. Current lists of ineligible contractors are available for inspection at the HA/HUD.
- (b) Before an offer is considered for award, the offeror may be requested by the HA to submit a statement or other documentation regarding any of the foregoing requirements. Failure by the offeror to provide such additional information may render the offeror ineligible for award.

6. Late Submissions, Modifications, and Withdrawal of Offers

- (a) Any offer received at the place designated in the solicitation after the exact time specified for receipt will not be considered unless it is received before award is made and it -
 - (1) Was sent by registered or certified mail not later than the fifth calendar day before the date specified for receipt of offers (e.g., an offer submitted in response to a solicitation requiring receipt of offers by the 20th of the month must have been mailed by the 15th);
 - (2) Was sent by mail, or if authorized by the solicitation, was sent by telegram or via facsimile, and it is determined by the HA/ HUD that the late receipt was due solely to mishandling by the HA/HUD after receipt at the HA;
 - (3) Was sent by U.S. Postal Service Express Mail Next Day Service - Post Office to Addressee, not later than 5:00 p.m. at the place of mailing two working days prior to the date specified for receipt of proposals. The term "working days" excludes weekends and U.S. Federal holidays; or
 - (4) Is the only offer received.
- (b) Any modification of an offer, except a modification resulting from the HA's request for "best and final" offer (if this solicitation is a request for proposals), is subject to the same conditions as in subparagraphs (a)(1), (2), and (3) of this provision.
- (c) A modification resulting from the HA's request for "best and final" offer received after the time and date specified in the request will not be considered unless received before award and the late receipt is due solely to mishandling by the HA after receipt at the HA.
- (d) The only acceptable evidence to establish the date of mailing of a late offer, modification, or withdrawal sent either by registered or certified mail is the U.S. or Canadian Postal Service postmark both on the envelope or wrapper and on the original receipt from the U.S. or Canadian Postal Service. Both postmarks must show a legible date or the offer, modification, or withdrawal shall be processed as if mailed late. "Postmark" means a printed, stamped, or otherwise placed impression (exclusive of a postage meter machine Impression) that is readily identifiable without further action as having been supplied and affixed by employees of the U.S. or Canadian Postal Service on the date of mailing. Therefore, offerors should request the postal clerk to place a hand cancellation bull's-eye postmark on both the receipt and the envelope or wrapper.
- (e) The only acceptable evidence to establish the time of receipt at the HA is the time/date stamp of HA on the offer wrapper or other documentary evidence of receipt maintained by the HA.

- (f) The only acceptable evidence to establish the date of mailing of a late offer, modification, or withdrawal sent by Express Mail Next Day Service-Post Office to Addressee is the date entered by the post office receiving clerk on the "Express Mail Next Day Service-Post Office to Addressee" label and the postmark on both the envelope or wrapper and on the original receipt from the U.S. Postal Service. "Postmark" has the same meaning as defined in paragraph (c) of this provision, excluding postmarks of the Canadian Postal Service. Therefore, offerors should request the postal clerk to place a legible hand cancellation bull's eye postmark on both the receipt and the envelope or wrapper.
- (g) Notwithstanding paragraph (a) of this provision, a late modification of an otherwise successful offer that makes its terms more favorable to the HA will be considered at any time it is received and may be accepted.
- (h) If this solicitation is a request for proposals, proposals may be withdrawn by written notice, or if authorized by this solicitation, by telegram (including mailgram) or facsimile machine transmission received at any time before award. Proposals may be withdrawn in person by a offeror or its authorized representative if the identity of the person requesting withdrawal is established and the person signs a receipt for the offer before award. If this solicitation is an invitation for bids, bids may be withdrawn at any time prior to bid opening.

7. Contract Award

- (a) The HA will award a contract resulting from this solicitation to the responsible offeror whose offer conforming to the solicitation will be most advantageous to the HA, cost or price and other factors, specified eisewhere in this solicitation, considered.
- (b) The HA may
 - (1) reject any or all offers if such action is in the HA's interest,
 - (2) accept other than the lowest offer,
 - (3) waive informalities and minor irregularities in offers received, and (4) award more than one contract for all or part of the requirements stated.
- (c) If this solicitation is a request for proposals, the HA may award a contract on the basis of initial offers received, without discussions. Therefore, each initial offer should contain the offeror's best terms from a cost or price and technical standpoint.

- (d) A written award or acceptance of offer mailed or otherwise furnished to the successful offeror within the time for acceptance specified in the offer shall result in a binding contract without further action by either party. If this solicitation is a request for proposals, before the offer's specified expiration time, the HA may accept an offer, whether or not there are negotiations after its receipt, unless a written notice of withdrawal is received before award. Negotiations conducted after receipt of an offer do not constitute a rejection or counteroffer by the HA.
- (e) Neither financial data submitted with an offer, nor representations concerning facilities or financing, will form a part of the resulting contract.

8. Service of Protest

Any protest against the award of a contract pursuant to this solicitation shall be served on the HA by obtaining written and dated acknowledgment of receipt from the HA at the address shown on the cover of this solicitation. The determination of the HA with regard to such protest or to proceed to award notwithstanding such protest shall be final unless appealed by the protestor.

9. Offer Submission

Offers shall be submitted as follows and shall be enclosed in a sealed envelope and addressed to the office specified in the solicitation. The proposal shall show the hour and date specified in the solicitation for receipt, the solicitation number, and the name and address of the offeror, on the face of the envelope.

It is very important that the offer be properly identified on the face of the envelope as set forth above in order to insure that the date and time of receipt is stamped on the face of the offer envelope. Receiving procedures are: date and time stamp those envelopes identified as proposals and deliver them immediately to the appropriate contracting official, and only date stamp those envelopes which do not contain identification of the contents and deliver them to the appropriate procuring activity only through the routine mail delivery procedure.

[Describe bid or proposal preparation instructions here:]

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB 0348-0046

Authorized for Local Reproduction

Standard Form LLL (Rev. 7-97)

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

(See reverse for public burden disclosure.) 1. Type of Federal Action: 2. Status of Federal Action: 3. Report Type: a. bid/offer/application a. contract a. initial filing b. grant b. initial award b. material change c. cooperative agreement c. post-award For Material Change Only: year _____ quarter ____ d. loan e. loan guarantee date of last report _____ f. loan insurance 4. Name and Address of Reporting Entity: 5. If Reporting Entity in No. 4 is a Subawardee, Enter Name Prime Subawardee and Address of Prime: Tier _____, if known: Congressional District, if known: 4c Congressional District, if known: 6. Federal Department/Agency: 7. Federal Program Name/Description: CFDA Number, if applicable: _____ 8. Federal Action Number, if known: 9. Award Amount, if known: 10. a. Name and Address of Lobbying Registrant b. Individuals Performing Services (including address if (if individual, last name, first name, MI): different from No. 10a) (last name, first name, MI): Information requested through this form is authorized by title 31 U.S.C. section
 1352. This disclosure of lobbying activities is a material representation of fact Signature: upon which reliance was placed by the tier above when this transaction was made Print Name: or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the Title: __ required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure. Date: ____ Telephone No.:

Federal Use Only:

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

- 1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
- 2. Identify the status of the covered Federal action.
- Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
- 4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
- 5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
- 6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizationallevel below agency name, if known. For example, Department of Transportation, United States Coast Guard.
- Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
- Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
- 9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
- 10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.
 - (b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
- 11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.

Certification of Payments to Influence Federal Transactions

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

Public reporting burden for this information collection is estimated to average 30 minutes. This includes the time for collecting, reviewing, and reporting data. The information requested is required to obtain a benefit. This form is used to ensure federal funds are not used to influence members of Congress. There are no assurances of confidentiality. HUD may not conduct or sponsor, and an applicant is not required to respond to a collection of information unless it displays a currently valid OMB control number.

Applicant Name		
Program/Activity Receiving Federal Grant Funding		
The undersigned certifies, to the best of his or her knowledge and b	elief, that:	
(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement. (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.	certificat all tunder grade sub reconstructions. Sure or enter 31, U. certification \$10,000	The undersigned shall require that the language of this ation be included in the award documents for all subawards tiers (including subcontracts, subgrants, and contracts grants, loans, and cooperative agreements) and that all ipients shall certify and disclose accordingly. Pertification is a material representation of fact upon which e was placed when this transaction was made or entered abmission of this certification is a prerequisite for making ring into this transaction imposed by Section 1352, Title S. Code. Any person who fails to file the required ation shall be subject to a civil penalty of not less than 0 and not more than \$100,000 for each such failure.
I hereby certify that all the information stated herein, as well as any inf Warning: HUD will prosecute false claims and statements. Conviction 1012; 31 U.S.C. 3729, 3802)		
Name of Authorized Official	Title	
Signature		Date (mm/dd/yyyy)
		·

Previous edition is obsolete form HUD 50071 (01/14)

VIRGIN ISLANDS HOUSING AUTHORITY REQUIRED REPRESENTATIONS AND CERTIFICATIONS

This form includes clauses required by OMB's common rule on bidding/offering procedures, implemented by HUD in 2 CFR 200 §318 - §326, and those requirements set forth in Executive Order 11625 for small, minority, women-owned businesses, and certifications for independent price determination, and conflict of interest. The form is required for all contracts awarded by VIHA. The form is used by Respondents to certify to VIHA's Contracting Officer for contract compliance.

I. CONTINGENT FEE REPRESENTATION AND AGREEMENT

The Respondent represents and certifies as part of its offer that, except for full-time bona fide employees working solely for the Respondent, the Respondent:

- (1) has, has not employed or retained any person or company to solicit or obtain this contract; and
- (2) has, has not paid or agreed to pay to any person or company employed or retained to solicit or obtain this contract any commission, percentage, brokerage, or other fee contingent upon or resulting from the award of this contract.

If the answer to either (1) or (2) above is affirmative, the Respondent shall make an immediate and full written disclosure to VIHA's Contracting Officer.

Any misrepresentation by the Respondent shall give VIHA the right to (1) terminate the resultant contract/ (2) at its discretion, to deduct form contract payments the amount of any commission, percentage, brokerage, or other contingent fee; or (3) take other remedy pursuant to the contract.

II. SMALL, MINORITY, WOMEN-OWNED BUSINESS CONCERN REPRESENTATION

The Respondent represents and certifies as part of its offer that it -

- is is not a small business concern. "Small business concern," as used in this provision, means a concern, Including its affiliates, that is independently owned and operated, not dominant in the field of operation in which it is bidding, and qualified as a small business under the criteria and size standards in 13 CFR 121.
- is not a women-owned business enterprise. "Women-owned business enterprise," as used in this provision, means a business that is at least 51 percent owned by a woman or women who are U.S. citizens and who also control and operate the business.
- is is not a minority business enterprise. "Minority business enterprise," as used in this provision, means a business which is at least 51% owned or controlled by one or more minority group members or, in the case of a publicly owned business, at least 51% of its voting stock is owned by one or more minority group members, and whose management and daily operations are controlled by one or more such individuals.

For the purpose of this definition, minority group members are (Check the block applicable to you):

Black Americans Asian Pacific Americans Hispanic Americans

Native Americans Hasidic Jewish Americans Asian Indian Americans

III. CERTIFICATE OF INDEPENDENT PRICE DETERMINATION

The Respondent certifies that-

- (1) The prices in this offer have been arrived at independently, without, for the purpose of restricting competition, any consultation, communication, or agreement with any other Respondent or competitor relating to (I) those prices, (ii) the intention to submit a offer, or (iii) the methods or factors used to calculate the prices offered;
- (2) The prices in this offer have not been and will not be knowlingly disclosed by the Respondent, directly or indirectly, to any other Respondent or contract award unless otherwise required by law; and
- (3) No attempt has been made or will be made by the Respondent to induce any other concern to submit or not to submit an offer for the purpose of restricting competition.

Each signature on the offer is considered to be a certification by the signatory that the signatory:

(A) Is the person in the Respondent's organization responsible for determining the prices being offered in this offer, and that the signatory has not participated and will not participate in any action contrary to subparagraphs (1) through (3) above; or

VIRGIN ISLANDS HOUSING AUTHORITY REQUIRED REPRESENTATIONS AND CERTIFICATIONS

(B) (i) Has been authorized, in writing, to act as agent for the following principals in certifying that to hose principals have not participated, and will not participate in any action contrary to subparagraphs (1) through (3) above; (ii) As an authorized agent, does certify that the principals named in subdivision (B)(i) above have not participated, and will not participate, in any action contrary to subparagraphs (1) through (3) above; and (iii) As an agent, has not personally participated, and will not participate in any action contrary to subparagraphs (1) through (3) above.

If the Respondent deletes or modifies subparagraph 2 above, the Respondent must furnish with its offer a signed statement setting forth in detail the circumstances of the disclosure.

IV. ORGANIZATIONAL CONFLICTS OF INTEREST CERTIFICATION

The Respondent warrants that to the best of its knowledge and belief and except as otherwise disclosed, it does not have any organizational conflict of interest which is defined as a situation in which the nature of work under a proposed contract and a prospective contractor's organizational, financial, contractual or other interest are such that:

(i)Award of the contract may result in an unfair competitive advantage; (ii) The Respondent's objectivity in performing the contract work may be impaired; or (iii) That the Respondent has disclosed all relevant information and requested VIHA to make a determination with respect to this contract.

The Respondent agrees that if after award he or she discovers an organizational conflict of interest with respect to this contract, he or she shall make an immediate and full disclosure in writing to VIHA which shall include a description of the action which the Contractor has taken or intends to eliminate or neutralize the conflict. VIHA may, however, terminate the Contract for the convenience e of VIHA if it would be in the best interest of VIHA.

In the event the Contractor was aware of an organizational conflict of interest before the award of this Contract and intentionally did not disclose the conflict to VIHA, VIHA may terminate the Contract for default.

The Contractor shall require a disclosure or representation from subcontractors and consultants who may be in a position to influence the advice or assistance rendered to VIHA and shall include any necessary provisions to eliminate or neutralize conflicts of interest in consultant agreements or subcontracts involving performance or work under this Contract.

In the absence of any actual or apparent conflict, I hereby certify that to the best of my knowledge and belief, no actual or apparent conflict of interest exists with regard to my possible performance of this procurement.

V. CONFLICT OF INTEREST

In the absence of any actual or apparent conflict, the Respondent, by submission of an offer, hereby warrants that to the best of its knowledge and belief, no actual or apparent conflict of interest exists with regard to my possible performance of this procurement, as described in the clause I this solicitation titled "Organizational Conflict of Interest."

VI. EQUAL EMPLOYMENT OPPORTUNITY STATEMENT

The Respondent does not discriminate against any employee or applicant for employment because of race, color, religion, sex, age, national origin, disability or familial status. The Respondent has an affirmative action program to ensure that applicants are employed, and employees are treated fairly during employment without regard to race, color, religion, sex, national origin, age, disability or familial status. Such action includes, but is not limited to the following: employment, upgrading, demotion or transfer, recruitment or recruitment advertising, layoff or termination, rates of pay or other forms of compensation; and selection for training, including apprenticeship.

VII. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION

The Respondent certifies by submission of this offer, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by a Federal department or agency.

VIII. RESPONDENT'S SIGNATURE

The Respondent hereby certifies that the information contained in these certifications and representations is accurate, complete and current. If Respondent needs to explain or disclose information relating to this form, an additional sheet is attached with such explanation or disclosure.

Signature	Title	
Type or Print Name	Date	

VIRGIN ISLANDS HOUSING AUTHORITY SUBCONTRACTOR DATA FORM

Consistent with Presidential Executive Orders 11625, 12138, and 12432, Section 3 of the HUD Act of 1968 and 13 CFR 121, all feasible efforts should be made to ensure that small and minority-owned businesses, women's business enterprises, and other individuals or firms located in or owned in substantial part by persons residing in the area of a VIHA community are used when possible. Respondent proposes to subcontract with the following businesses for this project. The Respondent acknowledges that all Minority Business Enterprises (MBEs) and Women's Business Enterprises (WBEs), Section 3 and Small Business entities, regardless of tier, are to be listed on this form. Respondent understands that it is responsible for ensuring that VIHA has updated information on its subcontractors and that no known conflicts of interest or personal or financial interests, as defined within the Solicitation, exist in relation to Respondent's subcontractors and the resulting Contract. Respondent must ensure that its subcontractors disclose any conflicts of interest or personal or financial interests.

	Business Name					
	Owner Name(s)					
	Owner Title(s)					
	Business Contact Info	PHONE		E-MAIL		
	Service(s) Provided					
	Business Type		MBE	WBE	SEC 3	SMALL
	Business Name	Т				.
	Owner Name(s)					
	Owner Title(s)					
	Business Contact Info	PHONE		E-MAIL		
m	Service(s) Provided					···
	Business Type		МВЕ	WBE	SEC 3	SMALL
	Business Name					
	Owner Name(s)					
	Owner Title(s)					
	Business Contact Info	PHONE		E-MAIL		
	Service(s) Provided					
	Business Type		МВЕ	WBE	SEC 3	SMALL
	Business Name					
Ų	Owner Name(s)					
	Owner Title(s)					
	Business Contact Info	PHONE		E-MAIL		
	Service(s) Provided					
	Business Type	8	MBE	WBE	SEC 3	SMALL

For purposes of this form, the following terms shall have the following meanings:

MBE refers to a minority enterprise which, pursuant to Executive Order 11625, is defined as a business which is at least 51 percent owned by one or more minority group members or, in the case of a publicly owned business, at least 51 percent of its voting stock is owned by one or more minority group members, and whose management and daily operations are controlled y one or more such individuals.

WBE refers to women-owned small business concerns and means a small business that is at least 51 percent owned by a women or women who are U.S. citizens and who also control and operate the business.

SECTION 3 refers to a Section 3 business concern which means a business concern (1) that is 51 percent or more owned by section 3 residents; or (2) whose permanent, full-time employees include persons, at least 30 percent of whom are currently Section 3 residents, or within three (3) years of the date of first employment with the business concern were Section 3 resident; or (3) that provides evidence of a commitment to subcontract in excess of 25 percent of the dollar award of all subcontracts to be awarded to business concerns that meet the qualifications set forth in paragraphs (1) and (2) of this definition. 24 CFR § 135.5.

SECTION 3 RESIDENT means (1) a public housing resident; or (2) an individual who resides in the metropolitan area or non-metropolitan county in which the section 3 covered assistance is expended, and who is: (i) a low-income person, as such term is defined in 42 USC 1437a(b)(2); or (ii) a very low-income person, as this term is defined in 42 USC 1437a(b)(2). 24 CFR § 135.5.

SMALL BUSINESS refers to a small business concern, as the term is defined by the Small Business Administration in 13 CFR Part 121, and means a concern, including its affiliates, that is independently owned and operated, not dominant in the field of operation in which it is bidding, and qualified as a small business under the criteria and size standards in 13 CFR Part 121.

Reproduce form as necessary.

VIRGIN ISLANDS HOUSING AUTHORITY SECTION 3 BUSINESS SELF-CERTIFICATION FORM

The Respondent represents and certifies that it...

is a Section 3 business as indicated below [check applicable category and subcategory]:

Category 1 Business

Fifty-one percent (51%) or more owned by residents of the specific community or communities for which the Section 3 covered assistance is expended; or

Full-time, permanent workforce includes thirty percent (30%) of the above residents as employees.

Category 2 Business

Fifty-one percent (51%) or more owned by residents of another specific community or communities managed by the Virgin Islands Housing Authority that is expending the Section 3 covered assistance; or

Full-time, permanent workforce includes thirty percent (30%) of the above residents as employees.

Category 3 Business

An entity selected to carry out a HUD Youthbuild Program in the metropolitan area, or non-metropolitan county, in which the Section 3 covered assistance is expended.

Category 4 Business

Fifty-one percent (51%) or more owned by Section 3 residents; or

Full-time, permanent workforce includes no less than thirty percent (30%) Section 3 residents; or

Will subcontract in excess of twenty-five percent (25%) of the total amount of subcontracts to business concerns identified above (see *Attached Subcontracts/Agreements*).

is not a Section 3 business (Form must be notarized only if certifying as a Section 3 business).

Subscribed and sworn to before me this day of 20	Company Name		
	Authorized Representative Name (Print)		
Notary	Authorized Representative Name (Signature)		
My commission expires			
	Authorized Representative Title		
Date	Date		

VIRGIN ISLANDS HOUSING AUTHORITY

PRINCIPAL PERSONNEL DISCLOSURE STATEMENT CERTIFICATION

Instructions

Every Offeror is required to read the below instructions and submit this *Principal Personnel Disclosure Statement Certification*. This Certification must be completed accurately and must be **notarized**. If a financial or personal interest exists, Offerors are required to make Full Disclosure in a **Disclosure Statement** (see "Disclosure Statement Instructions" below) and **should not** submit this *Principal Personnel Disclosure Statement Certification*).

FINANCIAL OR PERSONAL INTEREST DISCLOSURE

No VIHA employee, officer, member of its Board of Commissioners, or agent shall participate directly or indirectly in the selection, award or administration of any contract if a conflict of interest, either real or apparent, would be involved. This type of conflict of interest occurs when one of the following persons have a financial or any other type of interest in a respondent (including its officers, members, and partners) competing for the award:

- 1. An employee, officer, member of the Board of Commissioners, or agent of VIHA or any public official;
- A relative (including spouse, father, mother, child, brother and sister, including "half" or "step" relatives) of any of the above;
- The partner (financial or otherwise) of any of the above; or
- An organization that employs or is negotiating to employ or has an arrangement concerning prospective employment of any of the above.

DISCLOSURE STATEMENT INSTRUCTIONS

Offerors having a financial or personal interest in this solicitation, subsequent contract and/or the above-identified business shall make immediate, full and complete disclosure in writing to the Office of the General Counsel (a "Disclosure Statement").

All Disclosure Statements must be presented on the Offeror's letterhead, notarized and signed by the individual making the disclosure.

If applicable, provide the following information in the Disclosure Statement:

- Describe the nature of the interest(personal/financial)
- Names of individuals involved/associated with VIHA and Respondent
- Title of individuals named
- Relationships (blood/marriage), (mother, father etc.)
- Social Security numbers or Taxpayer Identification number
- Type of involvement (principal, officer, employees, etc.)
- Value of financial interest
- Name and address of business
- Other pertinent information

•	. ,			
l,	, being an authorized representative of			
certify that all Principal		this Certification have read the above instructions and that none of		
the persons listed abo	ove have a financial or any othe	er type of interest in Respondent or any Principal Personnel of		
Respondent.				
	Signature of Respondent			
	3	Signature		
		Title		
		Date		

WARNING: All information is to be true and accurate. False, misleading statements or failure to provide all information requested will disqualify a Respondent from this solicitation process. VIHA reserves the right, based upon the information provided, to determine if a conflict of interest is real or apparent and whether or not a Respondent is qualified to participate in this solicitation process.

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VIRGIN ISLANDS HOUSING AUTHORITY RESPONDENT DISCLOSURE CERTIFICATION

All Respondents responding to this Solicitation must submit a Respondent Disclosure Certification. This Certification must be completed accurately and must be notarized. If a financial or personal interest exists (i.e., If you answer yes to any question). Respondents must make a full and separate disclosure as described in the Financial or Personal Interest Disclosure section of this Respondent Disclosure Certification.

To purposes of this Respondent Disclosure Certification, the following terms shall have the meanings ascribed below:

<u>VIHA Employee</u> means persons who work at VIHA as a full time, part time, temporary or contract employee. <u>Current</u> means as of the date that this disclosure is made. <u>Former</u> means within the last 12 months from the date of this disclosure. <u>Interest</u> means any interest that may yield monetary or other material gain or benefit. <u>Immediate Family Member</u> means spouse, mother, father, brother, sister, child (whether related as a "half" or "step" relative, e.g., half brother or stepchild) partner or a significant other living in the same household. <u>Public Official means any public official, member of the local governing body or State or local legislator, members of or delegate to the Congress of the USA or resident commissioner. <u>Resident Commissioner</u> means an individual appointed to oversee a territory or possession of the U.S.</u>

Please respond to each question by circling the applicable response. If your answer is "YES" to any question, please see the FINANCIAL OR PERSONAL INTEREST DISCLOSURE section.

(1)	DO YOU EMPLOY A CURRENT OR FORMER VIHA EMPLOYEE OR ANY IMA	MEDIATE FAMILY MEMBER OF A CURRENT OR FORMER EMPLOYEE OF VIHA	A? YES	NO		
(2)	DO ANY CURRENT OR FORMER VIHA EMPLOYEES OR IMMEDIATE FAMIL INDIRECT INTEREST IN TOUR BUSINESS?	OR YES	МО			
VIHA BO	ARD OF COMMISSIONERS DISCLOSURES					
(3)	DO YOU EMPLOY CURRENT OR FORMER OFFICERS OR MEMBERS OF VIHA'S BOARD OF COMMISSIONERS OR ANY IMMEDIATE FAMILY MEMBERS OF THE BOARD OF COMMISSIONERS?					
(4)	ARE YOU OR ANY PERSON EMPLOYED BY YOUR BUSINESS CURRENT OF	FICERS OR MEMBRS OF VIHA'S BOARD OF COMMISSIONERS?	YES	NO		
(5)	DO ANY CURRENT OFFICER OR MEMBER OF VIHA'S BOARD OF COMMIS OF VIHA'S BOARD OF COMMISSIONERS HAVE A DIRECT OR INDIRECT IN	SIONERS OR IMMEDIATE FAMILY MEMBERS OR CURRENT OR FORMER MI TEREST IN YOUR BUSINESS?	EMBERS YES	NO		
PUBLIC C	DEFICIALS DISCLOSURE					
(6)	DO YOU EMPLOY CURRENT OR FORMER PUBLIC OFFICIALS OR ANY IMMEDIATE FAMILY MEMBERS OF PUBLIC OFFICIALS? YES NO					
(7)	DO ANY CURRENT OR FORMER PUBLIC OFFICIALS HAVE A DIRECT OR INDIRECT INTEREST IN YOUR BUSINESS? YES NO					
l, above regard Contract.	, an officer authorized to make this cert ding Respondent is true and correct as of the date that this Certification is m		ereby certify and swear that the financial interests in this Solicital			
discovered b	that Respondent is responsible for updating this information and praviding y Respondent. I understand that failure to provide such disclosure may lea ay lead to a negative note on VIHA's Vendor Performance Record.					
		Signature	Date			
Sworn to ar	nd subscribed	Name				
Before me t	this day of20	Title				
NOTARY PU	BLIC					

FINANCIAL OR PERSONAL INTEREST DISCLOSURE

VIHA EMPLOYEE DISCLOSURES

Respondents having a financial, contractual, organizational or personal interest in this Solicitation or subsequent Contract shall make an immediate, full and complete disclosure in writing to the Executive Director, in the form of a Disclosure Statement.

All Disclosure Statements must be presented on the Respondent's letterhead, notarized and signed by the individual making the disclosure. If applicable, provide the following information on the Disclosure Statement:

- * Describe the nature of the interest (personal/financial)
- * Names of individuals involved/associated with VIHA and Vendor
- * Title of individuals named above.
- * Relationships (blood/marriage), (mother, father etc.)
- * Value of financial interest

- * Type of involvement (principal, officer, employees, etc.)
- * Name & address of business
- Social Security numbers or Taxpayer Identification Number
- * Other pertinent information*

VIRGIN ISLANDS HOUSING AUTHORITY LIABILITY QUESTIONNAIRE

BU	BUSINESS NAME:					
			nnaire with your response. This form shall be filled out in its se your response to be deemed non-responsive.			
(1)	Has your company, any par	tner or officer of your company eve	er been sued? YES NO			
	If yes, please explain.					
(2)			ently involved in pending litigation? YESNO			
	ii yes, presse express.					
(3)	of the US Department of H	ousing & Urban Development? YE	r been involved in litigation against the Virgin Islands Housing Authority S NO			
(4)	Has a bonding company ev YES NO	er denied, paid out claims or revok	ed a bond your company or any officers or partners of your company?			
	If yes, please explain.					
			*			
(5)			swer to any of the above questions? YESNO			
	<u></u>					
Co	ompany Officer or Partner (Printe	d Name)				
Sig	gnature		WARNING			
Tit	tle		All information is to be true and accurate. False, misleading statements or failure to provide information will disqualify Vendor or Contractor from VIHA 's procurement process. VIHA reserved			
be	bscribed and sworn to		the right, based on the information provided, to determine if a conflict of interest is real or apparent and whether or not a Vendor or Contractor is qualified to be participating in the procurement			
of	, 20	My commission expires	process.			
Ma	atan.	Data				

VIRGIN ISLANDS HOUSING AUTHORITY RECORD OF COMPARABLE PROJECTS COMPLETED IN PAST TWO (2) YEARS

Please provide a minimum of three (3) and maximum of ten (10) comparable jobs completed in the past two (2) years. For purposes of this process, "comparable" is defined as projects of similar complexity, size and type of work.

Project Name	Owner (Client's Name)	Owner Contact Name, Phone and E-Mail	Contract Amount	Percent Complete	Completion Date
				1	

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VIRGIN ISLANDS HOUSING AUTHORITY RECORD OF COMPARABLE PROJECTS IN PROGRESS

Please provide comparable jobs currently in progress. For purposes of this process, "comparable" is defined as projects of similar complexity, size and type of work.

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VIRGIN ISLANDS HOUSING AUTHORITY CONTRACTOR RESPONSIBILITY SURVEY							
SOLICITATION NUMBER AND TITLE:							
REFERENCE BEING PROVIDED FOR							
COMPANY NAME		The second secon					
COMPANY ADDRESS							
CONTACT PERSON							
CONTACT PHONE NUMBER / EMAIL ADDRESS							
REFERENCE CONTACT INFORMATION	go umpores Var				N. C. C.		
SURVEY DATE							
COMPANY / OWNER'S NAME							
CONTACT PERSON							
CONTACT PHONE NUMBER / EMAIL ADDRESS							
CONTRACT AMOUNT (\$)							
% COMPLETED / COMPLETED							
IF NOT COMPLETED, ESTIMATED COMPLETION DATE			1.0				
TECHNICAL PERFORMANCE	Engineer on						
FACTORS/RATINGS	EXCELLENT	6000	FAIR	POOR	UNSATISFACTORY	NOT APPLICABLE	
Completion of major tasks / milestones / deliverables on schedule							
Responsiveness to changes in technical direction.							
Ability to identify risk factors and alternatives for alleviating risk.							
Ability to identify and solve problems expeditiously.							
Ability to employ standard tools / methods.	Ability to employ standard tools / methods.						
MANAGEMENT PERFORMANCE							
FACTORS/RATINGS EXCELLENT GOOD FAIR POOR UNSATISFACTORY				NOT APPLICABLE			
Overall communication with staff							
Effectiveness and reliability of Contractor's Key Personnel							
Ability to recruit and maintain qualified personnel							
Ability to manage multiple tasks from planning through execution.							
Ability to effectively manage subcontractors.							
Overal performance in planning, scheduling, and monitoring							
Use of management tools (e.g. schedule/task management tools)							
CONTRACT ADMINISTRATION							
FACTORS/RATINGS YES					NO		
Was the project completed on schedule?							
If not, how late was it: < 30 days; < 60 days;	If not, how late was it: < 30 days; < 60 days; < 90 days; > 90 days						
Did the contractor submit unnecessary Change Order requests?							
Were contractor proposals for Change Orders reasonably priced?	Were contractor proposals for Change Orders reasonably priced?						
Were there any claims?							
Compliance with labor laws						1	
Compliance with safety requirements							
Given a choice, would you do business with this contractor again?							
SURVEY COMPLETED BY (PRINT):	MIN TO THE		SIGNATURE				

VIRGIN ISLANDS HOUSING AUTHORITY CONTRACTOR RESPONSIBILITY SURVEY **SOLICITATION NUMBER AND TITLE:** REFERENCE BEING PROVIDED FOR... COMPANY NAME COMPANY ADDRESS CONTACT PERSON CONTACT PHONE NUMBER / EMAIL ADDRESS REFERENCE CONTACT INFORMATION... SURVEY DATE COMPANY / OWNER'S NAME CONTACT PERSON CONTACT PHONE NUMBER / EMAIL ADDRESS **CONTRACT AMOUNT (\$)** % COMPLETED / COMPLETED IF NOT COMPLETED, ESTIMATED COMPLETION DATE TECHNICAL PERFORMANCE EXCELLENT FACTORS/RATINGS G000 FAIR POOR UNSATISFACTORY NOT APPLICABLE Completion of major tasks / milestones / deliverables on schedule. Responsiveness to changes in technical direction. Ability to identify risk factors and alternatives for alleviating risk. Ability to identify and solve problems expeditiously. Ability to employ standard tools / methods. MANAGEMENT PERFORMANCE FACTORS/RATINGS EXCELLENT UNSATISFACTORY POOR NOT APPLICABLE Overall communication with staff. Effectiveness and reliability of Contractor's Key Personnel Ability to recruit and maintain qualified personnel. Ability to manage multiple tasks from planning through execution. Ability to effectively manage subcontractors. Overall performance in planning, scheduling, and monitoring. Use of management tools (e.g. schedule/task management tools), **CONTRACT ADMINISTRATION** FACTORS/RATINGS YES NO Was the project completed on schedule? If not, how late was it: _____ < 30 days; ____ < 60 days; ___ < 90 days; ____ Did the contractor submit unnecessary Change Order requests? Were contractor proposals for Change Orders reasonably priced? Were there any claims? Compliance with labor laws Compliance with safety requirements Given a choice, would you do business with this contractor again? SIGNATURE: SURVEY COMPLETED BY (PRINT):

VIRGIN ISLANDS HOUSING AUTHORITY CONTRACTOR RESPONSIBILITY SURVEY **SOLICITATION NUMBER AND TITLE:** REFERENCE BEING PROVIDED FOR... COMPANY NAME COMPANY ADDRESS CONTACT PERSON CONTACT PHONE NUMBER / EMAIL ADDRESS REFERENCE CONTACT INFORMATION... SURVEY DATE COMPANY / OWNER'S NAME **CONTACT PERSON** CONTACT PHONE NUMBER / EMAIL ADDRESS CONTRACT AMOUNT (\$) % COMPLETED / COMPLETED IF NOT COMPLETED, ESTIMATED COMPLETION DATE TECHNICAL PERFORMANCE FACTORS/RATINGS EXCELLENT GOOD UNSATISFACTORY NOT APPLICABLE Completion of major tasks / milestones / deliverables on schedule. Responsiveness to changes in technical direction. Ability to identify risk factors and alternatives for alleviating risk. Ability to identify and solve problems expeditiously. Ability to employ standard tools / methods. **MANAGEMENT PERFORMANCE** FACTORS/RATINGS EXCELLENT G000 FAR POOR UNSATISFACTORY NOT APPLICABLE Overall communication with staff. Effectiveness and reliability of Contractor's Key Personnel Ability to recruit and maintain qualified personnel Ability to manage multiple tasks from planning through execution. Ability to effectively manage subcontractors. Overall performance in planning, scheduling, and monitoring Use of management tools (e.g. schedule/task management tools). CONTRACT ADMINISTRATION FACTORS/RATINGS YES NO Was the project completed on schedule? If not, how late was it: _____ < 30 days; ____ < 60 days; ____ < 90 days; ____ Did the contractor submit unnecessary Change Order requests? Were contractor proposals for Change Orders reasonably priced? Were there any claims? Compliance with labor laws Compliance with safety requirements Given a choice, would you do business with this contractor again? SURVEY COMPLETED BY (PRINT): SIGNATURE:

VIRGIN ISLANDS HOUSING AUTHORITY ADDENDA ACKNOWLEDGEMENT FORM

SOLICITATION #					
SOLICITATION TITLE					
The undersigned here the amended provision	by further acknowns ons and requires	wledges ments	lowing Addendum to the above noted solicitation. that its bid response includes allowances for all of of the Scope of Work/Specifications, solicitation ove noted solicitation and each has been taken into		
Al	DDENDUM#		ISSUANCE DATE		
Al	DDENDUM #		ISSUANCE DATE		
Al	DDENDUM #		ISSUANCE DATE		
Al	DDENDUM #	_	ISSUANCE DATE		
Al	DDENDUM #		ISSUANCE DATE		
No addenda were received for the above referenced solicitation. THIS FORM MUST BE SUBMITTED WITH THE FIRM'S RESPONSE TO THIS SOLICITATION. FAILURE TO INCLUDE THIS FORM IN YOUR RESPONSE MAY SUBJECT YOUR FIRM TO DISQUALIFICATION.					
DATE					
COMPANY PROVIDING OF	FER				
NAME/TITLE OF PERSON F	PROVIDING OFFER				
PERSON PROVIDING OFFE	R PHONE NUMBER				
PERSON PROVIDING OFFE	R E-MAIL ADDRESS		11 N S S S S S S S S S S S S S S S S S S		

SIGNATURE OF PERSON PROVIDING OFFER