

# Housing Rehabilitation Program

## Request for Qualifications

<b>Proposal Title:</b>	
<b>Organization Name:</b>	

**Due by: 3:00 p.m. Friday, September 11, 2015**

**Submit to:**  
City of Norfolk  
Department of Neighborhood Development  
401 Monticello Avenue, 1<sup>st</sup> Floor  
Norfolk, VA, 23510  
Email: [renovate@norfolk.gov](mailto:renovate@norfolk.gov)  
Phone Number: 757- 823-4361

**Renovate Norfolk - Request for Qualifications**

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**City of Norfolk, Virginia**

**Housing Rehabilitation Program  
Request for Qualifications (RFQ)**

**I. GENERAL INFORMATION**

**A. Purpose:**

The purpose of this RFQ is to further the City of Norfolk's ("City") goal of providing for the sustainability of affordable housing for the average working family. The funds provided through the RFQ will assist in maintaining existing, affordable housing for low to moderate income families.

The City of Norfolk's Department of Neighborhood Development ("Department") is seeking proposals from qualified organizations to operate a single family, owner occupied housing rehabilitation program benefiting citizens earning at or below 80% AMI. Rehabilitation activities must, at a minimum, address all code violations and health and safety issues. The potential program models and the proposed Scope of Services are described in this RFQ on pages 11 and 12, respectively.

The City of Norfolk receives funding from the Community Development Block Grant (CDBG) Program and Home Investment Partnerships (HOME) Program from the U.S. Department of Housing and Urban Development (HUD). The City proposes to make available CDBG funds for the rehabilitation of single family owner occupied housing in the City. The program will operate on a citywide basis. City staff will refer potential clients to the applicant(s) for all work to be performed.

The 2015-2016 Program Year will run from November 1, 2015 through October 31, 2016. Successful proposals must meet the guidelines provided in this Request for Qualification (RFQ).

The applicants awarded funding through this RFQ will be required to provide a marketing plan for their program which includes efforts to target potential clients including homeowners who might not otherwise apply for assistance.

The City is not required to seek proposals for this service, but has chosen to do so in the interest of providing a quality service to its residents. The City is not bound to award a contract to the lowest proposal or to a single applicant. The City will be reviewing the qualifications of all applicants and may choose to seek new proposals or to retract this existing RFQ.

If you are interested in submitting your organization's qualifications and proposal for consideration, you must complete the attached proposal and submit an original and five (5) copies with all required documents by **3:00 p.m. on Friday, September 11, 2015.**

All proposals should be submitted to the Department of Neighborhood Development, 401 Monticello Avenue, 1<sup>st</sup> Floor, Norfolk, Virginia 23510.

All questions regarding the proposal must be submitted in writing via email to: [renovate@norfolk.gov](mailto:renovate@norfolk.gov)

## **B. Eligible Applicants**

Applicants seeking funding must be a public or private non-profit entity, incorporated by the State of Virginia, or a for-profit housing contractor/developer. Public or private non-profit entities must provide evidence of a tax ruling from the Internal Revenue Service under Section 501(c) of the Internal Revenue Code.

Organizations must be able to demonstrate they have previously provided rehabilitation services relevant to their proposal, or be able to demonstrate significant experience and success with residential rehabilitation.

Organizations will be evaluated based on the number of units completed, quality of work, capacity of the organization, program design, financial capacity, and ability to expend program funding in a timely manner. Refer to the Evaluation Criteria for more specific information on how the proposals will be scored.

Eligible applicants must have for the last two (2) years and currently be operating in good standing with the State of Virginia for a minimum of two years.

## **C. Proposal Updates**

Any addendum or correction made to this RFQ will be placed on the City's web site. If warranted, a FAQ (Frequently Asked Questions) will be posted at the following address to provide additional guidance for potential applicants.

It is the responsibility of all potential applicants to check [www.norfolk.gov/neighborhoods](http://www.norfolk.gov/neighborhoods) prior to the submission of their proposal, ensuring they are responding to the most current requirements and that their proposal is complete and submitted before the deadline.

## **D. Public Records Law**

Virginia Public Records Law in accordance with Chapter 119, Virginia Statutes, and, except as may be provided by other applicable State and Federal laws, all applicants should be aware that the RFQ and all responses thereto are in the public domain and are available for public inspection. Applicants are requested, however, to identify specifically any information contained in their proposal which they consider confidential and/or proprietary, inclusive of trade secrets as defined in section 59.1-336 of the Code of Virginia, and which they believe to be exempt from disclosure, citing specifically the applicable exempting law.

All proposals received in response to this RFQ will become the property of the City and will not be returned. In the event of an award, all documentation produced as part of the contract will become the exclusive property of the City.

All materials that qualify for exemption must be submitted in a separate envelope, clearly identified as "EXEMPT FROM PUBLIC DISCLOSURE" with the entity's name and the proposal number written on the outside.

## **E. D-U-N-S Number Requirement**

Every proposal must contain a D-U-N-S Number. If you do not have a DUNS number, you can register with Dun and Bradstreet at [www.dnb.com](http://www.dnb.com).

## **F. Insurance Requirement**

Every proposal must contain proof of sufficient insurance for the funding amount being requested.

## **II. THE RFQ PROCESS**

### **A. Proposal Review**

Submitted proposals are final and may not be amended or substituted, unless the amendment has been requested or permitted by the City. The City, at its sole discretion, reserves the right to contact an applicant for additional information which may be necessary for the review process.

A Review Committee will be formed for the purpose of scoring and ranking the proposals received and making a recommendation to the Director regarding which proposals to fund and at what level.

After receipt of the proposals, Norfolk staff will perform a preliminary review of all proposals to ensure the packages are

complete. The staff review will ensure that each proposal contains all the information and documentation outlined in the checklist and that narrative adequately addresses the questions or topic. Staff may request additional information be submitted by the applicant for the purpose of clarification or verification of some component of the proposal. Review Committee members upon their review of the proposal may also request staff to obtain additional information.

All proposals received by the deadline, which are complete and determined eligible by staff, will be submitted to the Review Committee for evaluation, scoring and ranking. The Review Committee may request additional information from any applicant prior to making its final decision. It may choose to hold follow-up interviews with each applicant. The Review Committee will establish the criteria for the interviews. The Review Committee will determine the following:

- Whether qualifications of the applicant (and any partnering agencies) and proposed program are sufficiently addressed in the narrative and supporting documentation to allow for a prudent decision regarding the capacity of the applicant to successfully implement its proposed program;
- Whether the proposed program will comply with existing federal, state and local laws, ordinances, regulations and policies, as well as regulations governing the funding sources to be utilized within the applicant's proposed housing rehabilitation program;
- Past responsiveness of any applicant that has previously worked on City Programs;
- Feasibility of timely implementation of the program and completion of rehabilitation assistance; and
- Whether the budget appears to be an accurate estimate for the proposed program.

*If a proposal is determined to be incomplete or ineligible, the applicant will be informed and the proposal withdrawn from consideration. In cases where there is uncertainty as to the proposal's eligibility, the City's HUD representative will be consulted for a final decision.*

## **B. Award Recommendations**

Following the review of proposals, the Review Committee will develop a listing of all proposals received and reviewed. The listing containing the information below shall be presented to the Director of Neighborhood Development for consideration.

1. Eligible proposals recommended for funding and the recommended funding level;
2. Eligible proposals which are not recommended for funding, but listed as "alternatives;"
3. Proposals which do not comply with federal or state regulatory requirements or were considered infeasible; and
4. Proposals which are in conflict with an established City policy or goal.

The Review Committee will make recommendations to the Director of the Department of Neighborhood Development regarding proposals to be funded and what level of funding. The Director of Neighborhood Development will be responsible for making the final decision of awards to be made under the RFQ.

## **C. Evaluation Criteria**

Proposals will be reviewed and scored on the basis of the following criteria with a maximum possible score of 100.

1. **Organization Capacity and Relevant Experience (15 points)**. Applicants will receive scores ranging from 0 to 15 points based upon the overall capacity of the organization, the organizations experience with affordable housing programs, and similar projects.
2. **Residential Rehabilitation/Reconstruction/New Construction Experience and Performance History (15 points)**.

Zero (0) points if no experience or no experience within the past 12 months, three (3) points if experience is within the past 12 months but less than five units rehabilitated and five (5) points if experience is within the past 12 months and more than five units rehabilitated. Fifteen (15) points will be awarded to applicants with more than five years continuous experience in housing rehabilitation and with over 25 units satisfactorily completed.

3. **Program Design and Organizational Viability (15 points)**. Applicants will receive scores ranging from 0 to 15 based upon evidence of program design, organization's ability to implement, capacity to manage the rehabilitation program being proposed and the feasibility of the implementation schedule. Points will range from zero (0) for a weak presentation to fifteen (15) for a strong representation of design, implementation, the strength and experience of the program team and any partnerships identified as part of the program design. Partnerships should include evidence of a firm commitment between the entities to be part of the program.
4. **Financial Capacity of the Organization (15 points)**. Applicants will receive scores ranging from 0 to 15 based upon evidence indicating that the applicant has the financial capacity to provide the proposed activity. This includes the ability of the organization to utilize a line-of-credit or its own financial resources to up-front the rehabilitation cost to be reimbursed on a monthly basis.
5. **Ability to proceed (15 points)**. Applicants will receive scores ranging from 0 to 15 points based upon their demonstration of readiness to proceed. Factors that will be considered include knowledge in areas relevant to the implementation of its proposed program and financial capacity to work on a reimbursement basis.
6. **Prior Performance (10 points)**. Applicants will receive scores ranging from 0 to 10 points for the quality of past performance with City programs.
7. **Prior HUD Program Experience (5 points)**. Zero (0) points if no experience, three (3) points if moderate level of experience within the past 12 months and five (5) points if significant experience over the past 3 years.
8. **Years in Business (5 points)**. Zero (0) for less than one year, 3 point for 1-5 years and 5 points for over 5 years in business.
9. **Local Presence (5 points)**. Zero (0) points if no local presence and three (5) if there is a local presence.

#### **D. Redistribution of Funds**

If the City has committed funds to a project that can no longer proceed (i.e. other required funding is no longer available, site is not feasible due to environmental issues, etc.), the City reserves the right to redistribute funds to the next highest ranked un-funded applicant or distribute the funds to other approved applicants or to other eligible activities. At the City's discretion, the funding commitment may be increased based on funding availability and need.

#### **E. Disclaimer**

The City reserves the right to:

1. accept or reject any or all proposals received;
2. waive any non-substantive deficiency or irregularity;
3. negotiate with any qualified applicant;
4. award a contract in what it believes to be the best interest of the City ;
5. cancel this RFQ, in part or its entirety, if it is deemed to be in the best interest of the City ;
6. reject the proposal of any applicant who has previously failed to perform properly;

7. reject the proposal of any applicant who has failed to complete a contract within the specified timeframe;
8. reject the proposal of any applicant that is not in a position to fulfill a resulting contractual obligation. This Request for Qualifications does not commit the City to award any contract, pay any pre-award expenses, or pay any costs incurred in the preparation of this RFQ.

#### **F. Appeal Process**

Staff will make every effort to notify all applicants of the status of their proposal via a courtesy email. The City will make formal written notification via the U.S. Postal Service in the event of any of the applicant:

1. does not submit a completed RFQ proposal and will not be considered for funding,
2. is determined by city staff to be ineligible to receive funding for its proposal, or
3. was not recommended for funding by the Review Committee

If the applicant wishes to object, they must do so no later than five (5) business days from the date of the formal notification by sending correspondence to the Director of Neighborhood Development that includes all pertinent documents and information necessary to support the applicant's position. The contact information for the Director is as follows:

James A Rogers, Director  
Department of Neighborhood Development  
401 Monticello Avenue, 1<sup>st</sup> Floor  
Norfolk, VA, 23510  
Phone: 757-664-4080  
Email: [james.rogers@norfolk.gov](mailto:james.rogers@norfolk.gov)

If the Director receives an objection within the five (5) business day period, the appropriate staff will review the objection and provide a recommendation to the Assistant Director.

If the Assistant Director concurs with the applicant, the applicant will be notified, and the appeal process will be concluded. The proposal will be reviewed.

If the Assistant Director does not concur with the applicant, the applicant will be notified via certified mail with the return receipt requested and may appeal to the Director.

If the applicant wishes to appeal to the Director, it must do so no later than five (5) business days from the date the notification letter was received in a letter sent to his attention.

If the City receives the appeal within the five (5) business day period, the appropriate staff will review the appeal and the provided the Director with information for review.

If the Director concurs with the applicant, the applicant will be notified and the appeal process will be concluded and the proposal will be reviewed.

If the Director does not concur with the applicant, the applicant will be notified in writing of the City's intent to proceed. The Director's response will constitute the Applicant's final administrative action with regard to its appeal.

If an applicant fails to object or respond at any point in the process, that applicant waives its rights to an appeal. Objections or responses received after the five (5) day time period will not be considered.

The Director has the authority to determine whether or not a recommendation will be deferred pending the outcome of a protest.

### III. CONTRACTING PROCEDURES FOR SUCCESSFUL APPLICANTS

The final approval of all funding is subject to the Norfolk City Council's approval and the execution of a contract between the applicant and the City. Training will be offered by the Department of Neighborhood Development if requested by awardees ("subrecipients") following a Notice of Award. The training will provide information that will enable them to carry out their contractual responsibilities. Information will be given on the proper completion of financial reports and the proper documentation required for reimbursements.

The City will execute a Program Funding Agreement with the selected organization(s) in which the details of the City's requirements and applicable Federal and State regulations will be outlined. These regulations include, but are not limited, to the encouragement of minority and women's business enterprises in connection with funded activities and ADA compliance.

The City will monitor all subrecipients to ensure program compliance. Monitoring is an ongoing process that assesses the quality of program performance over the duration of the contract. Monitoring provides information for making informed judgment about program effectiveness and management efficiency, as well as identifies internal weaknesses that may contribute to fraud or abuse.

**Desk Monitoring:** Desk monitoring is the review of pertinent program/project documents submitted by the subrecipient or by internal departments. Staff uses the contract and its amendments as a basis for conducting the desk monitoring of specific projects. Quarterly reports and reimbursement request forms submitted by the subrecipient are the primary sources of information used by staff for desk monitoring. Desk monitoring also includes a self-monitoring component by the City in which an audit of the City's files is conducted through a data collection tracking system to ensure complete and accurate documentation is being maintained.

**Internal & Onsite Monitoring:** Internal and onsite monitoring may include, but is not limited to:

1. Review of program and financial records;
2. Review of project files to verify supporting documentation is available and maintained; and
3. Review of internal policies and procedures as applicable to the program.

Onsite reviews may be conducted annually to assess capabilities of the subrecipient and its staff in implementing projects in accordance with the terms of the contract agreement.

**Quarterly Reports:** Quarterly reporting will be a requirement of the contract. The information contained in the quarterly reports will allow City staff to monitor the subrecipient's program and financial performance and achieve early identification of potential compliance problems. Subrecipients will be required to submit quarterly reports regardless of the level of activity or expenditure.

Non-compliance with any monitoring or reporting requirement may result in termination of the contract and the agency may be subject to repayment of any funds expended by the agency on the project or program. Additionally, non-compliance may impact the agency's eligibility for consideration for future funding requests.

### IV. OTHER REQUIREMENTS

#### A. **Minority and Women's Business Enterprises**

Pursuant to the requirements of Executive Orders 11625, 12432, 12138 and of the Code of Federal Regulations, the contracted entities must make efforts to encourage the use of minority and women's business enterprises in connection with funded activities. If a Subrecipient solicits or requests an invitation for bids, every effort feasible will be made to contact minority-owned and women-owned business enterprises for a response to the solicitation or invitation for bidders. If utilizing a minority subcontractor, the Subrecipient shall summarize what portion of the project was handled by a minority subcontractor. At the end of the project, the Subrecipient shall submit a summary of all payments made to the minority subcontractor(s). The Subrecipient shall submit all necessary forms with quarterly reports to assure compliance with this requirement.

**B. Section 3 Employment Opportunities for Area Residents**

Subrecipients and any authorized subcontractors shall be subject to all applicable provisions of the Housing and Community Development Act of 1974 (42 U.S.C. § 5301) as amended in 1992, including, but not limited to: Executive Order 11246 and Section 3 of the Housing and Community Development Act of 1974, Employment Opportunities for Business and Lower Income Persons in connection with Assisted Projects (24 CFR Part 135). These require that, to the greatest extent possible, opportunities for training and employment be given to lower income residents of the project area and contracts for work in connection with the project must be awarded to business concerns which are located in, or owned in substantial part, by persons residing in the area of the project. In all solicitations for bids, the contractor must, before signing the contract, provide a preliminary statement of the work force needs and plans for possible training and employment of lower income persons. When a Subrecipient utilizes the bidding procedure to let a bid, the invitation or solicitation for bids shall advise prospective contractors of the requirements of this section and the clause shall be inserted as a component part of any contract or subcontract.

**C. Environmental Review**

The environmental effects of each funded activity must be assessed in accordance with the provisions of the National Environmental Policy Act of 1969 (NEPA) and related authorities listed in HUD’s implementing regulations at 24 CFR Parts 50 and 58. This review is completed by the city.

No activity may commence until the environmental review has been completed. If the project is already under construction at the time of submittal for federal funds, construction must cease immediately until an environmental review of the project is completed.

**D. Accessibility**

The Applicant must comply with the applicable provisions of the Americans with Disabilities Act and assist the City with complying with the implementing regulations.

**E. Lead-Based Paint**

The construction or rehabilitation of residential structures with assistance provided under the requirements of this RFQ is subject to HUD’s regulation, “Requirements for Notification, Evaluation, and Reduction of Lead-Based Hazards in Federally Owned Residential Property and Housing Receiving federal assistance, “ 24 CFR Part 35, in particular subpart B thereof. For additional information visit the HUD website at: [http://portal.hud.gov/hudportal/HUD?src=/program\\_offices/healthy\\_homes](http://portal.hud.gov/hudportal/HUD?src=/program_offices/healthy_homes)

**F. Uniform Relocation Act**

The Uniform Relocation Assistance and Real Property Acquisition Policies Act (URA), passed by Congress in 1970, is a federal law that establishes minimum standards for federally funded programs and projects that require the acquisition of real property (real estate) or displace persons from their homes, businesses, or farms. The URA's protections and assistance apply to the acquisition, rehabilitation, or demolition of real property for federal or federally funded projects. The Applicant agrees to adhere to 49 CFR Part 24, the government-wide regulation that implements the URA, and HUD Handbook 1378, which provides HUD policy and guidance on implementing the URA and 49 CFR Part 24 for HUD funded programs and projects.

For additional information on the requirements of the CDBG or HOME Programs, please refer to HUD CDP Website at the following link: [http://portal.hud.gov/hudportal/HUD?src=/program\\_offices/comm\\_planning/about/cpd\\_programs](http://portal.hud.gov/hudportal/HUD?src=/program_offices/comm_planning/about/cpd_programs).

## PROPOSAL INSTRUCTIONS

### I. GENERAL INSTRUCTIONS

- The information required on pages 15 through 19 must be provided in the corresponding field and should be completed in their entirety. The submitted proposal does not need to include the following sections: Table of Contents, General Information, Contracting Procedures for Successful Applicants, Other Requirements, Overview Guidance, Proposal Instructions, Program Models or Scope of Services.
- All forms need to be submitted in a typed format. No handwritten submittals will be accepted. This is a fillable proposal that allows you to tab forward to most boxes. You may need to click directly in some boxes in order to fill in that box.
- Please keep responses to questions as brief and concise as possible.
- Answer all questions which are applicable to your proposal. Be as specific as possible and provide all supporting documentation. Incomplete proposals will be ineligible and not be considered. Please use a separate proposal if applying for more than one project or program.
- Each proposal must be submitted with one original and five copies. The original should be bound in a three ring binder and labeled as the original. The copies must be bound in either a three ring binder or spiral bound.
- If applicable, provide one redacted copy of the proposal with the original. Follow the instructions stated under Article D on page 4.
- The original must contain original signatures in blue ink.
- Section dividers are required. See outline on the page 11.
- One disc with electronic files of all items included in the hard copy of the proposal is required, including photos or video of examples of projects discussed in Section IIIA on page 16.
- A cover letter is not required.
- Use the Proposal Cover Sheet as the cover for your submission. Fill in the proposal title and name of submitting agency.
- Letters from collaborating agencies or other funding sources should clearly specify their role in the project or contribution (financial or in-kind) that they will make.
- Proposals should follow the established outline and instructions. The proposal should be compiled in the order provided on the proposal checklist with tabs for the sections as outlined in Section I on page 11.
- Proposals must be submitted on standard 8 1/2" x 11" paper, consecutively numbered pages. If you turn your document into a PDF file, you can number the entire document consecutively. Or you can number by Tabs, or hand numbering is permissible the pages if necessary. The original should be single sided but copies may be duplexed.
- Please verify that all dates, figures, and budgets are for the appropriate year and are accurate.
- Proposals will be evaluated based on information provided in the submittal. Omitted information will not be accepted unless clarification is requested by the Review Committee.
- Don't staple any part of the proposal.

- Make sure to include all attachments, required forms, and exhibits.
- Pages in landscape layout should be oriented with the top of the page to the left side and hole punched or bound on that side.
- Don't include information or attachments not specifically asked for in this RFQ.

## II. OUTLINE OF SECTION DIVIDERS

Exhibits should be placed behind the Section in which the Exhibit is requested. No proposal should contain more than eight (8) divided sections with the cover and checklist placed in front of the first tab. The tab can be labeled to reflect the sections or appendix located behind the tab.

### Sections:

- RFQ Cover Sheet
- Section I – RFQ Checklist
- 1 Section II - General Information
- 2 Section III - Capacity and Previous Experience
- 3 Section IV - Plan for Implementation
- 4 Section V - Rehabilitation Team
- 5 Section VI - Program Budget
- 6 Section VII - Required Forms A-D (Board Information)
- 7 Section VIII - Required Forms E-K (Certifications)
- 8 Any Additional Attachments Provided by the Applicant

## III. SUPPLEMENTAL INFORMATION REQUIREMENTS

Successful applicants may be required to submit additional information including the items listed below and any additional information determined to be necessary by the staff of the Department of Neighborhood Development for a final approval of the proposed project or program. This list is not inclusive of all information that may be requested to finalize an Applicant's approval. The following information may be requested of applicants who were approved for funding. Do not submit at this time.

- Updated Agency Contact Information (if necessary)
- Code of Conduct
- Policies / Procedures for Employees
- Bylaws
- Minutes
- Signed W-9 if not on file or signee's have changed.
- Other requested information

## IV. PROGRAM MODELS

The Department of Neighborhood Development will provide funding for three (3) owner occupied housing improvement program models. For the purpose of this RFQ, an applicant may choose to apply for one or more of the following models. The typical minimum contact award per housing rehabilitation case is \$10,000 and the maximum amount of \$25,000. The models are as follows:

### **Housing Rehabilitation - - \$25,000 Typical Award Amount**

Moderate rehabilitation to eliminate all code violations and restore key systems within the home.

### **Housing Repair - - \$15,000 Limit Typical Award Amount**

Minor repair to eliminate all code violations and address a life or safety issue that impacts the household.

### **Housing Restoration - - \$10,000 Limit Typical Award Amount**

Exterior improvements to enhance the aesthetic quality of the home or eliminate barriers for disabled persons

within an owner occupied housing unit. This may include providing accessibility for disabled or elderly persons such as access ramps.

**Note:** There will be no replacement housing provided through this program. Relocation costs and storage fees will not be funded through this RFQ. All programs will operate on a reimbursement basis.

## **V. SCOPE OF SERVICES**

This scope of services should be helpful in defining areas of responsibility for the administration of the Renovate Norfolk Program. This RFQ applies only to single family dwellings. Manufactured homes and multi-family homes are not eligible for assistance under this RFQ.

1. The Subrecipient is responsible for assisting with Outreach and Education for the Renovate Norfolk Program. Such a program provides discussion with the homeowners about the design and objectives of the rehabilitation program, the availability of funds and benefits of the rehabilitation program; and eligibility requirements.
2. The Subrecipient shall develop and maintain homeowner files for each client and all records necessary for compliance with State and Federal Regulations.
3. The Subrecipient will conduct property inspections including photos to create a formal work write-up outlining the proposed scope of work and cost estimate. Each scope must be approved by the homeowner. Submit work write-ups and cost estimates to the Department for processing for environmental review. The Subrecipient must provide lead-based testing and reports, as applicable for Pre-1978 structures. If the applicant has an in-house or partnering contractor, cost reasonableness will be reviewed and approved by the Department.
4. If the Subrecipient is not a General Contractor or Residential Contractor, there must be a written procurement process in place. Contractors must adhere to City policies and procedures and must govern themselves in accordance with the City's Renovate Norfolk Program Policy. The Subrecipient must document the procurement process for the selection of the Contractor. All Contractors must be vetted and approved by the City prior to being awarded a contract.
5. The Subrecipient will prepare the rehabilitation contract in accordance with the respective funding agreement for approval. The Subrecipient must review conditions of grant and/or loan with homeowner and obtain homeowner(s) signature on all necessary documents including any mortgages, if applicable.
6. The Subrecipient will prepare and submit to the Department the Request for Payment along with supporting documentation for reimbursement. Incomplete submissions will not be processed for payment.
7. The Subrecipient shall inspect rehabilitation work on a regular basis to ensure that the Contractor is performing pursuant to the scope of work outlined in the contract and adhering to the City Building Codes. Every effort should be made to ensure that the workmanship and quality of materials must be monitored through inspections by Subrecipient and City Building Department, as applicable.
8. All change orders must be reasonable and approved by the Subrecipient, homeowner and contractor.
9. The Subrecipient must prepare all necessary documents required for the final inspection of rehabilitation work and issue a final acceptance of work signed by the Subrecipient and the homeowner. Provide a copy of this notice with the final Request for Payment.
10. The Subrecipient must secure all manufacturers and supplier warranties prior to final payment for rehabilitation work and provide them to the homeowner.
11. The Subrecipient will arbitrate disputes and/or complaints arising between contractors and homeowners regarding work to be performed, underway or completed.

12. The Subrecipient shall submit quarterly progress reports as well as any other federal or state reporting as required by the respective funding source and/or the City as outlined in the agreement. Prepare status reports as requested by the City.
13. The Subrecipient must prepare any closeout documents related to the administration of this project.
14. The Subrecipient must perform all duties as required by their agreement and in accordance with the City's Renovate Norfolk Program Policy, as amended.
15. The Subrecipient is responsible for ensuring that the Contractor adheres to the requirements of the City's Housing Rehabilitation Policy, Housing Rehabilitation Standards, as well as adhere to any State or Local Construction Requirements/Building Codes, as amended.
16. The Subrecipient must ensure all programmatic and fiscal records and appropriate staff are available for all monitoring and site visits. With respect to all matters covered by this RFQ, all records will be made available for examination, audit, inspection or copying purposes at any time during normal business hours and as often as the City, HUD, representatives of the Comptroller General of the United States or other state or federal agencies may require.
17. The Subrecipient must ensure that cost reasonableness is documented and the information will be reviewed as part of the monitoring.

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**RENOVATE NORFOLK PROGRAM**

**Section I. RFQ Checklist**

A complete proposal packet will include the following items and must be presented in the following sequence. The Checklist must be signed at the bottom, with initials or checkmarks beside each item.

**Section II: Organization General Information**

**Section III: Organization Capacity and Previous Experience**

- Exhibit 1: Organizational Chart \_\_\_\_\_
- Exhibit 2: Program Organizational Chart \_\_\_\_\_
- Exhibit 3: Key Personnel Resumes \_\_\_\_\_
- Exhibit 4: Licenses, Credentials and Training \_\_\_\_\_
- Exhibit 5: Reference Letters (Optional) \_\_\_\_\_
- Exhibit 6: Certificates of Insurance \_\_\_\_\_
- Exhibit 7: Evidence of Bonding (If Applicable) \_\_\_\_\_

**Section IV: Organization Plan for Implementation**

- Exhibit 8: Work Flow Chart \_\_\_\_\_
- Exhibit 9: Letters of Commitment/Agreements from Collaborating \_\_\_\_\_

**Section V: Rehabilitation Team**

**Section VI: Organization and Housing Rehabilitation Program Budget**

- Exhibit 10: Organization Budget and Detail Unit Cost Documentation \_\_\_\_\_
- Exhibit 11: Line of Credit or other Evidence of Sufficient Funds Available \_\_\_\_\_

**Section VII: Required Board Forms**

- Attachment A: Board of Directors, Officers and Executive Administration \_\_\_\_\_
- Attachment B: Board Characteristics \_\_\_\_\_
- Attachment C: Board Expertise \_\_\_\_\_
- Attachment D: Board Member Information \_\_\_\_\_

**Section VIII: Required Certification Forms**

- Attachment E: Affidavit of Standards for Financial Management \_\_\_\_\_
- Attachment F: Conflict of Interest Certification \_\_\_\_\_
- Attachment G: Signature Authorization \_\_\_\_\_
- Attachment H: Request for Funding and Certification \_\_\_\_\_
- Attachment I: Environmental Acknowledgement \_\_\_\_\_
- Attachment J: Acknowledgement of Virginia Public Records Law \_\_\_\_\_
- Attachment K: Organization Contact Form \_\_\_\_\_

**Electronic file of proposal and photos of relevant projects**

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Signature of Authorized Agency Official \_\_\_\_\_ Date \_\_\_\_\_

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Printed Name and Title \_\_\_\_\_

**Section II. Organization General Information**

Organization Name:	
Director or Owner:	
Contact Person:	
Contact Person Title:	
Physical Address:	
City, State, Zip:	
Mailing Address:	
City, State, Zip:	
Telephone:	
Fax:	
Email Address:	
Website:	
Tax ID Number:	
DUNS Number:	
Organization Structure:	<input type="checkbox"/> Government or Public Agency
	<input type="checkbox"/> Non Profit Organization/Corporation
	<input type="checkbox"/> For Profit Organization
Legal Structure (For Profits Only)	
Year Established:	
Business License Number:	
CHDO Status:	<input type="checkbox"/> Yes <input type="checkbox"/> No
What jurisdictions:	

**If this business is a parent company with one or more subsidiaries or a subsidiary with a parent company, provide detail as to the relationships between the companies.**

**If this organization's primary location is not in Norfolk, does a Norfolk presence exist? If yes, provide the local office address below.**

**Section III. Organization Capacity and Previous Experience**

**A. Organization Structure**

<p>1. In the space below, provide a history of the organization including a description of the history and purpose, years of experience, growth and direct experience with rehabilitation activities.</p>
<p>2. Provide an Organization Chart as Exhibit 1 and in the space below provide an overview of the organization.</p>
<p>3. Describe in detail your resources and capabilities to provide home rehabilitation, repair and/or restoration services. Include evidence of line-of-credit or other resources necessary to perform the rehabilitation activity on a reimbursement basis.</p>

**Section IV. Organization Plan for Implementation**

In this section, the applicant is to describe the design and implementation of the housing rehabilitation program being proposed. You will be expanding upon Section III, A, 2, 3 and 5 as well as discussing in detail how your organization will manage the rehabilitation program. The areas listed below should be covered at a minimum in your description.

**A. Program Development and Delivery**

*In the following section outline in detail your proposed program and the delivery of service. Address at a minimum the following items and areas outlined within the Scope of Services provided on page 12.*

1. Develop a sound work plan or “plan-of-action” narrative that details activities the organizational will undertake to achieve the rehabilitation program’s goals and objectives. Include the following as applicable:  
  
Hours of operation, flow of all activities, recruitment or marketing plan to attract potential recipients for housing rehabilitation, rehabilitation work write-ups, bidding, bid review, inspections and quality control and the organization's self-evaluation of performance. Using the organizational charts provided in the previous section, discuss the work flow and staff with key responsibilities related to implementing and managing various components. Provide a Work Flow Chart as Exhibit 8 behind this section of the proposal.
  - a. The plan should fully address the items included within Tab E – Scope of Services
  - b. Temporary Relocation Activities: Identify when temporary relocation will be necessary and describe the process your organization will utilize. The City will not provide funding for temporary relocation under this RFQ. The Subrecipient or Owner will be responsible for temporary relocation, as needed.
  - c. Affirmative Marketing Procedures to be used to inform and solicit applications for households or persons in the housing marketing area who are not likely to apply for rehabilitation housing without special outreach. Additionally, what is the marketing plan to ensure homeowners within CDBG Target

Areas are aware of the program's availability?

d. Minority Outreach - Describe the procedure to ensure the inclusion, to the maximum extent possible, of minorities and women and entities owned by minorities and women in the procurement of related services.

2. Grant compliance and Reporting of Proposed Activities - Describe the organization's financial controls, invoicing and reporting.
3. Discuss your organization's Disaster Recovery Assistance Plan which would mobilize your staff, partners and other resources to address a localized emergency such as a tornado, flooding or tropical storm or hurricane damage.

**Section V. Rehabilitation Team**

Applicants may partner with one or more other entities to provide a component of their proposed program. In this section please identify partners, what service(s) they will provide and the key staff responsible for the service(s). Provide detailed resumes in Exhibit 3 and include their organizational charts under Exhibit 1. Your Program Organizational Chart (Exhibit 2) should identify the partner(s) within the work flow. Include Letters of Commitment, Memorandum of Understanding or other partnership agreements with collaborating agencies as Exhibit 9 with this section of the RFQ.

Partner Organization No. 1	
Organization Name:	
Director or Owner:	
Contact Person:	
Contact Person Title:	
Physical Address:	
City, State, Zip:	
Mailing Address:	
City, State, Zip:	
Telephone:	
Fax:	
Email Address:	
Website:	
Tax ID Number:	
DUNS Number:	
Organization Structure:	<input type="checkbox"/> Government or Public Agency <input type="checkbox"/> Non Profit Organization/Corporation <input type="checkbox"/> For Profit Organization
Legal Structure (For Profits Only)	
Year Established:	
Business License Number:	
CHDO Status:	<input type="checkbox"/> Yes <input type="checkbox"/> No
CHDO Entities:	

Partner Organization No. 2	
Organization Name:	
Director or Owner:	
Contact Person:	
Contact Person Title:	
Physical Address:	

Partner Organization No. 2	
City, State, Zip:	
Mailing Address:	
City, State, Zip:	
Telephone:	
Fax:	
Email Address:	
Website:	
Tax ID Number:	
DUNS Number:	
Organization Structure:	<input type="checkbox"/> Government or Public Agency
	<input type="checkbox"/> Non Profit Organization/Corporation
	<input type="checkbox"/> For Profit Organization
Legal Structure (For Profits Only)	
Year Established:	
Business License Number:	
CHDO Status:	<input type="checkbox"/> Yes <input type="checkbox"/> No
CHDO Entities:	

Partner Organization No. 3	
Organization Name:	
Director or Owner:	
Contact Person:	
Contact Person Title:	
Physical Address:	
City, State, Zip:	
Mailing Address:	
City, State, Zip:	
Telephone:	
Fax:	
Email Address:	
Website:	
Tax ID Number:	
DUNS Number:	
Organization Structure:	<input type="checkbox"/> Government or Public Agency
	<input type="checkbox"/> Non Profit Organization/Corporation
	<input type="checkbox"/> For Profit Organization
Legal Structure (For Profits Only)	
Year Established:	
Business License Number:	
CHDO Status:	<input type="checkbox"/> Yes <input type="checkbox"/> No
CHDO Entities:	

**Section VI. Organization and Housing Rehabilitation Program Budget**

Submit the attached *Program Operating Budget Summary Form*, as appropriate, for the service or capital project that is being requested. Include a detailed organization budget as an attachment with this section of the RFQ.

The program will be required to operate on a reimbursement basis. Reporting and Invoices will be required on a regular basis and payments will be made by the City after review and approval of the report and invoice. Therefore the applicant needs to demonstrate its ability to incur costs upfront. Provide as an attachment, a Letter of Credit or other Evidence of Sufficient Funds being available to the organization for this purpose.

The following sections include a Project Operating Budget Summary Form and Detail Unit Cost Documentation Form. There are additional copies for the second form. An applicant may need to submit more than one of these forms. A form should be included for each Program Model the applicant is applying for under this RFQ.

Below describe how the agency proposes being compensated for its services managing and operating the program. For example: do you intend to charge a set fee per case, percentage of rehabilitation cost or actual time of staff, and what would be the estimated charges. It is anticipated this area will be negotiated with the successful applicants to reach a final agreement for reasonable costs.

**Housing Rehabilitation Program - Project Operating Budget Summary Form Template**

Description	Total Cost	Qty.	Per Home
1. Construction Costs			
a) Site Preparation/Infrastructure			
b) Construction <b>(Rehabilitation)</b> <sup>1</sup>			
c) Construction <b>(Repair)</b> <sup>2</sup>			
d) Construction <b>(Restoration)</b> <sup>3</sup>			
e) Permits			
f) Insurance/Bond/Line of Credit			
g) Contingency			
<b>Subtotal – Construction Costs</b>			
2. Soft Costs			
a) Appraisal			
b) Architect/engineer			
c) Environmental			
d) Relocation			
e) Administrative/operating expenses			
f) Other			
<b>Subtotal – Soft Costs</b>			
<b>Grand Total</b>			

<sup>1</sup> Typical Rehabilitation Amount is \$25,000

<sup>2</sup> Typical Repair Amount is \$15,000

<sup>3</sup> Typical Restoration Amount is \$10,000

**Detailed Unit Cost Documentation: Home Rehabilitation**

<b>Rehabilitation Application Intake:</b>			
Income Eligibility Determination / City Certification		N/A	
Property Qualification			
	Subtotal:	\$0.00	
<b>Rehabilitation Project Setup:</b>			
Environmental Review Coordination/Home Inspection			
Cost Estimates / Work Write Up			
Contracting with Homeowner / Loan Recording			
Contractor Procurement (Bid)			
Vetting Contractor on Debarment and Exclusion List			
Contracting with Contractor			
	Subtotal:	\$0.00	
<b>Rehabilitation Project Implementation:</b>			
Notice to Proceed / Notice of Commencement			
Permits			
Cost Reimbursement Billing / Lien Releases /Change Orders			
Progress Monitoring			
Punch List / Final Inspection			
Certificate of Occupancy / Warranties			
Hard File / Digital File			
	Subtotal:	\$0.00	
<b>Other:</b>			
	Subtotal:	\$0.00	
	<b>TOTAL UNIT COSTS:</b>		<b>\$0.00</b>

**Detailed Unit Cost Documentation: Home Repair**

<b>Rehabilitation Application Intake:</b>			
Income Eligibility Determination / City Certification		N/A	
Property Qualification			
	Subtotal:	\$0.00	
<b>Rehabilitation Project Setup:</b>			
Environmental Review Coordination/Home Inspection			
Cost Estimates / Work Write Up			
Contracting with Homeowner / Loan Recording			
Contractor Procurement (Bid)			
Vetting Contractor on Debarment and Exclusion List			
Contracting with Contractor			
	Subtotal:	\$0.00	
<b>Rehabilitation Project Implementation:</b>			
Notice to Proceed / Notice of Commencement			
Permits			
Cost Reimbursement Billing / Lien Releases /Change Orders			
Progress Monitoring			
Punch List / Final Inspection			
Certificate of Occupancy / Warranties			
Hard File / Digital File			
	Subtotal:	\$0.00	
<b>Other:</b>			
	Subtotal:	\$0.00	
	<b>TOTAL UNIT COSTS:</b>		<b>\$0.00</b>

**Detailed Unit Cost Documentation: Home Restoration**

<b>Rehabilitation Application Intake:</b>			
Income Eligibility Determination / City Certification		N/A	
Property Qualification			
	Subtotal:	\$0.00	
<b>Rehabilitation Project Setup:</b>			
Environmental Review Coordination/Home Inspection			
Cost Estimates / Work Write Up			
Contracting with Homeowner / Loan Recording			
Contractor Procurement (Bid)			
Vetting Contractor on Debarment and Exclusion List			
Contracting with Contractor			
	Subtotal:	\$0.00	
<b>Rehabilitation Project Implementation:</b>			
Notice to Proceed / Notice of Commencement			
Permits			
Cost Reimbursement Billing / Lien Releases /Change Orders			
Progress Monitoring			
Punch List / Final Inspection			
Certificate of Occupancy / Warranties			
Hard File / Digital File			
	Subtotal:	\$0.00	
<b>Other:</b>			
	Subtotal:	\$0.00	
		<b>TOTAL UNIT COSTS:</b>	<b>\$0.00</b>

**Section VII. Required Forms – Board Information**

**Attachment A: Board of Directors, Officers and Executive Administration**

If applicable, give a brief history of the board. Discuss the election and removal of officers, the duties and the exercise of powers. Using Attachment D provide a Board roster including name, address, affiliation and position. Using Attachment B, complete a board characteristics and skills checklist. If not provided in Section III, Exhibit 3, provide the resume of the Executive Director and all senior administrators.

[Empty box for providing board history, roster, and executive resumes]

Section VII. Required Forms – Board Information

Attachment B: Board Characteristics

Race	Female	Male	Total	Executive Committee Member
Asian				
American Indian/Alaskan Native				
Black/African American				
White				
Other				
<b>Ethnicity</b>				
Hispanic				
Non-Hispanic				

Professional Affiliation	Female	Male	Total	Executive Committee
Business/Industry				
Civic				
Education				
Government				
Health				
Organized Labor				
Professional				
Religious				
Retired				
Social Services				
Other				

Length of Service	Total
20 years or more	
10 – 19 years	
7 – 9 years	
3 – 6 years	
Less than 3 years	

Board Attendance	Total
Maximum Size Board	
Average # of vacancies in last 12 months	
Average attendance in last 12 months	



**Section VII. Required Forms – Board Information**

**Attachment D: Board Member Information**

**Note:** Replicate this form as many times as necessary to capture all board members.

Name:	
Address:	
City, State, Zip Code:	
Home Telephone:	
Business Telephone:	
Mobile Telephone:	
Email Address:	
Occupation:	
Business Name:	
Business Address:	
City, State, Zip Code:	
Board Member Since (Month & Year):	
Term	

I certify that the information provided above is accurate to the best of my knowledge.

---

Signature of Authorized Agency Official Date

---

Printed Name and Title

**Section VIII. Required Forms - Certifications**

**Attachment E: Affidavit of Standards for Financial Management Systems**

Date:	
Affiant:	
Recipient:	

Affiant on oath swears that the following statements are true and are within the personal knowledge of Affiant:

1. Affiant is the Chief Financial Officer of the Recipient and is authorized to make this affidavit on behalf of Recipient.
  
2. Recipient's financial management systems conform to the financial accountability standards set forth in 2 CFR Part 200, by providing for and incorporating the following:
  - a) Accurate, current, and complete disclosure of the financial results of each federally sponsored project;
  - b) Records which identify the source and request of funds for federally-sponsored activities. These records contain information pertaining to Federal awards, authorizations, obligations, unobligated balances, assets, outlays, income, and interest;
  - c) Control over and accountability for all funds, property and other assets; adequate safeguards of all such assets shall be adopted to assure that all assets are used solely for authorized purposes;
  - d) Comparison of outlays with budget amounts for each award;
  - e) Written procedures to minimize the time elapsing between the receipt of funds and the issuance or redemption of checks for program purposes by the recipient;
  - f) Written procedures for determining the reasonableness, allocability, and allowability of costs in accordance with the provisions of Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards as well as the terms and conditions of the award; and
  - g) Accounting records, including cost-accounting records that are supported by source documentation.

\_\_\_\_\_ Title

State of Virginia  
City of \_\_\_\_\_

This instrument was acknowledged before me on \_\_\_\_\_ by  
\_\_\_\_\_.

\_\_\_\_\_ Printed Name

\_\_\_\_\_ My Commission Expires

Affix Notary stamp/seal below

**Section VIII. Required Forms - Certifications**

**Attachment F: Conflict of Interest Affidavit**

**All Applicants:**

The standards in 24 CFR 570.611 provide that no employee, officer, or agent shall participate in the selection, award, or administration of a contract supported by Federal funds if a real or apparent conflict of interest would be involved. Such a conflict would arise when an employee, officer, or agent, any member of his or her immediate family, his or her partner, or an organization which employs or is about to employ any of the parties indicated herein, has a financial or other interest in the firm selected for an award.

The CDBG regulations at 24 CFR §570.611 provide that no person who is an employee, agent, consultant, officer, or elected official or appointed official of the recipient or subrecipient that are receiving CDBG funds and (1) who exercises or has exercised any functions or responsibilities with respect to activities assisted with CDBG funds; or (2) who is in a position to participate in a decision-making process or gain inside information with regard to these activities, may obtain a financial interest from a CDBG assisted activity, or have any interest in any contract, subcontract, or agreement with respect thereto, or the proceeds thereunder, either for themselves or those with whom they have family or business ties, during their tenure or for one (1) year thereafter.

A disclosure of the nature of any perceived or actual conflict must be made prior to the execution of agreements utilizing Community Development Block Grant (CDBG) funds.

**IF NO CONFLICT EXISTS, COMPLETE THE FOLLOWING:**

I certify that no conflict of interest exists between the City of Norfolk and \_\_\_\_\_  
(agency name).

I certify that no conflict of interest exists between the subcontractors of \_\_\_\_\_  
(agency name) and \_\_\_\_\_.

**IF A CONFLICT EXISTS, COMPLETE THE FOLLOWING:**

I certify that a conflict of interest exists between the City of Norfolk and \_\_\_\_\_  
(agency name).

I certify that a conflict of interest exists between the subcontractors of \_\_\_\_\_  
(agency name) and \_\_\_\_\_.

**Describe the nature of the conflict of interest below. Identify the individual, employment and the conflict or potential conflict, and their affiliation with your organization.**

Signature and Title of Authorized Agency Official:

\_\_\_\_\_

Section VIII. Required Forms - Certifications

Attachment G: Signature Authorization

Organization's Legal Name*	
Physical Address	
Mailing Address (if different)	
Telephone No.	

\*Legal name refers to the organization name that appears on the articles of incorporation.

The following person(s) are authorized by the Board of Directors to sign contracts and sign and submit invoices, reports, time/attendance records, client progress or evaluation forms pertaining to this agreement.

Name and Title	
Telephone No.	
Email Address	

Name and Title	
Telephone No.	
Email Address	

Name and Title	
Telephone No.	
Email Address	

We understand and agree to abide by the condition that if any changes occur, a new signature authorization form **must** be submitted.

Authorized by:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Typed Name and Title

**Section VIII. Required Forms - Certifications**

**Attachment H: Request for Funding and Certification**

*Signature of Agency's Authorized Representative Required.*

<b>Organization Name</b>	
<b>Project/Program Title</b>	
<b>Requested Funding</b>	

This certifies that it is understood that if funding is approved by the City of Norfolk, the organization will enter into an Agreement with the Board and that the Board must meet all programmatic and fiscal contractual requirements deemed appropriate by the City (including insurance requirements). The organization also agrees to comply with all requirements and conditions to provide documentation supporting the Proposal.

The organization certifies that the information contained in this Proposal is true and complete. It also understood that if an organization provides false or incorrect information or makes misrepresentations in their proposal it will automatically disqualify the organization. Funds will not be released until all requirements have been met, the U.S. Department of Housing and Urban Development has released the funds, environmental reviews have been completed, and agreements have been fully executed between all parties.

This proposal is submitted under the authority of:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Typed Name and Title

State of Virginia  
City of \_\_\_\_\_

This instrument was acknowledged before me on \_\_\_\_\_ by

\_\_\_\_\_.

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
My Commission Expires

Affix Notary stamp/seal below

**Section VIII. Required Forms - Certifications**

**Attachment I: Environmental Acknowledgement**

<b>Organization Name</b>	
<b>Project/Program Title</b>	

**Acknowledgement**

The Applicant acknowledges that, if the initial environmental assessment reveals conditions requiring the completion of a Format 2 detailed environmental assessment prior to release of funds for this project, the Applicant must complete or retain the services of a qualified environmental consultant to complete all required assessment activities necessary to resolve, mitigate, or otherwise resolve the environmental conditions that required performance of that detailed assessment. The Applicant also agrees to comply will all requirements and conditions resulting from or identified by the environmental assessment to complete the project.

This Acknowledgement is submitted under the authority of:

\_\_\_\_\_

\_\_\_\_\_

Signature

Typed Name and Title

\_\_\_\_\_

Date

Section VIII. Required Forms - Certifications

**Attachment J: Acknowledgement of Virginia Public Records Law**

<b>Organization Name</b>	
<b>Project/Program Title</b>	

**Acknowledgement**

The Applicant acknowledges that City of Norfolk Government operates according to the Virginia Public Records Law and the submission of a proposal in response to a Request for Qualifications or a Request for Proposal is subject to these laws. The applicant is aware that the designation of an item as exempt from public disclosure may be challenged in court by any person or entity. By designation of material in this proposal as exempt from public disclosure, Applicant agrees to defend the City (and its employees, agents and elected and appointed officials) against all claims and actions (whether or not a lawsuit is commenced) related to Applicant’s designation of material as exempt from public disclosure and to hold harmless the City (and its employees, agents and elected and appointed officials) for any award to a plaintiff for damages, costs and attorneys’ fees, and for costs and attorneys’ fees incurred by the City by reason of any claim or action related to your designation of material as exempt from public disclosure.

This Acknowledgement is submitted under the authority of:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Typed Name and Title

Section VIII. Required Forms - Certifications

**Attachment K: Organization Contact Form**

INSTRUCTIONS: Complete all information requested below.

<b>Organization's Legal Name</b>	
<b>Telephone and Fax Numbers</b>	
<b>Physical Address</b>	
<b>City and Zip</b>	
<b>Mailing Address</b>	
<b>City and Zip</b>	
<b>Agency Web Address</b>	

<b>EXECUTIVE DIRECTOR AND/OR CHIEF EXECUTIVE OFFICER</b> <i>(Person authorized to sign grant agreements)</i>	
<b>Name</b>	
<b>Telephone and Fax Numbers</b>	
<b>Mailing Address</b>	
<b>City and Zip</b>	
<b>Email Address</b>	

<b>PROGRAM OR PROJECT COORDINATOR</b> <i>(Person responsible for submission of performance reports)</i>	
<b>Name</b>	
<b>Telephone and Fax Numbers</b>	
<b>Mailing Address</b>	
<b>City and Zip</b>	
<b>Agency Web Address</b>	

<b>FISCAL CONTACT</b> <i>(i.e. Director of Finance, Accounting Manager, Fiscal Officer, etc.)</i>	
<b>Name</b>	
<b>Telephone and Fax Numbers</b>	
<b>Mailing Address</b>	
<b>City and Zip</b>	
<b>Agency Web Address</b>	

<b>PERSON COMPLETING THIS FORM</b>	
<b>Name</b>	
<b>Title</b>	
<b>Telephone No.</b>	
<b>Fax No.</b>	