

REQUEST FOR PROPOSALS FOR A QUALIFIED ORGANIZATION TO ADMINISTER A CITYWIDE ANTI-DISPLACEMENT TAX FUND

PREPARED BY:

**THE ATLANTA DEVELOPMENT AUTHORITY
D/B/A INVEST ATLANTA**

AND

DOWNTOWN DEVELOPMENT AUTHORITY

RFP DATE: June 23, 2023

RESPONSES DUE: July 28, 2023



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133 Peachtree Street NE, Suite 2900
Atlanta, GA 30303

REQUEST FOR PROPOSALS (“RFP”) FOR A QUALIFIED ORGANIZATION TO ADMINISTER A CITYWIDE ANTI-DISPLACEMENT TAX FUND

I. INTRODUCTION

Invest Atlanta operates as a public body corporate and politic of the State of Georgia and serves as the City of Atlanta’s (the “City”) economic development agency. Invest Atlanta, consisting of the Atlanta Development Authority, the Downtown Development Authority (“DDA”), the Urban Residential Finance Authority of the City of Atlanta (“URFA”) and the Atlanta Urban Redevelopment Agency (“AURA”), were each created to promote the revitalization of the City. Invest Atlanta represents a consolidation of the City’s economic and community development efforts in real estate, finance, marketing and employment, for the purpose of improving the quality of life for all City residents. Invest Atlanta is the cornerstone of an overall effort to provide economic and development services in a more effective and efficient manner. Invest Atlanta is guided by the “One Atlanta” principles of affordability, resiliency, and equity.

The Downtown Development Authority (“DDA”) was created and is existing under and by virtue of the Downtown Development Authorities Law, activated by a resolution of the Atlanta City Council and operates as a public body corporate and politic of the State of Georgia. Invest Atlanta, through the DDA is soliciting responses to this Request for Proposals (“RFP”) from interested and qualified non-profit and/or for-profit organizations (each, a “Respondent”) seeking to *administer a Citywide Pilot Anti-Displacement Tax Fund (the “Program”). Contracted services will include ongoing fundraising, community engagement and educating residents, reviewing applicant eligibility and awarding tax relief benefits to residents on an annual basis.* Each project will be under the purview of Invest Atlanta.

Proposals submitted in response to this RFP will be evaluated by Invest Atlanta staff. Invest Atlanta reserves the right, where it may serve its best interest, to request additional information or clarification from Respondents, or to allow for corrections, errors or omissions. All proposals submitted in response to this RFP, and all other information submitted in response to a request for additional information may become and remain the property of Invest Atlanta. Submission of a proposal indicates acceptance by the Respondent of the conditions contained in this RFP.

Invest Atlanta will not, for any reason, reimburse a Respondent for costs and expenses in connection with responding to this RFP.

II. BACKGROUND

Housing affordability is one of the Atlanta's (the "City") most difficult challenges and a key barrier to economic mobility for many residents in the City of Atlanta. The current pandemic has disproportionately impacted underserved communities, worsening the affordable housing crisis, and resulting in severe economic challenges for many residents in Atlanta. The City of Atlanta and Invest Atlanta have developed a comprehensive economic mobility plan to address these challenges.

The One Atlanta: Economic Mobility, Recovery & Resiliency Plan (2020) addresses barriers to economic mobility and supports the City's economic recovery from the current recession. Homeownership is a critical pathway to economic mobility; however, the homeownership rate for black households in Atlanta (36%) is significantly lower than for white households (59%) and is declining. Moreover, homeowners often fear displacement in anticipation of community revitalization efforts driving higher home appraisals, property appreciation and ultimately higher taxes. Housing affordability is a key strategic objective in the One Atlanta: Economic Mobility, Recovery & Resiliency Plan. The One Atlanta Housing Affordability Action Plan (2019) includes four goals to provide pathways to affordable and equitable housing opportunities:

1. Create and preserve 20,000 affordable homes by 2026 and increase overall supply;
2. Invest \$1 billion from public, private, and philanthropic sources in the production and preservation of affordable housing;
3. Ensure equitable growth for all Atlantans and minimize displacement; and
4. Support innovation and streamline processes.

III. PROGRAM

To ensure equitable growth for all Atlantans and minimize displacement, using private funding the City partnered with Invest Atlanta to implement a city-wide Anti-Displacement Program for legacy residents in Atlanta. The Anti-Displacement Program would authorize the use of the Centennial Yards Housing Trust Fund in the amount of \$4.6 million dollars to help offset rising property taxes for Atlanta residents. Invest Atlanta has outlined a priority action plan to support the expansion of an anti-displacement tax relief fund for vulnerable homeowners. This Program will pay the applicant's increase in taxes above their base taxes, for a period of 20 years, if they continue to qualify for the program. Applications will be accepted on an ongoing, rolling basis.

The program budget of \$40.7M was determined by examining the estimated tax increase for 60% of the eligible applicants in the pilot area (1,854 households), and includes the costs of annual administration, outreach and supportive services over the 20-year term.

Eligibility Requirements:

- City of Atlanta resident since 2015 (with priority for homeowners 15+ years)
- Senior 65+
- Clear Title
- Household income of 60% AMI or below
- Actively enrolled in qualifying homestead exemption programs
- No encumbrances attached to the property

Expanded Eligibility Requirements:

- Longer Occupancy Requirement (10+ years)
- Cap on Appraisal Values

Tax Related Dates and Deadlines

April 1st	Application deadline for the City of Atlanta Anti-Displacement Tax Program for upcoming tax bill
April 1st	Last day the county accepts exemption applications/updated for the upcoming tax bill
July	Property tax bills are issued
July - September	City of Atlanta Anti-Displacement Tax Program contribution is deposited on behalf of the program participant
October 31st	Deadline for submission of property taxes for City of Atlanta and APS
November 15th	Deadline for submission of property taxes for Fulton County

(The above dates are static and apply to City of Atlanta tax cycle)

Research & Development

To determine the pilot area and key demographics, Invest Atlanta underwent an extensive research and planning process with the contracted services of APD Urban Planning + Management (APD-U), the team responsible for the design of the Westside Future Fund Anti-Displacement Tax Fund for Legacy Homeowners. The first period of development focused on research comprised of

demographic, appraisal, exemption, and displacement risk analyses. The first of these, the demographic analysis identified the location and number of owner-occupied and senior owner-occupied households in the City of Atlanta with income under 60% AMI. Next, APD-U completed an exemptions analysis to see which households were currently receiving exemptions from the City of Atlanta, Dekalb, and/or Fulton County. This information was layered over the appraisal analysis which showed the housing values of the households. The results were broken down by standard, low income, senior and low income, and senior exemptions. Key findings included a concentration of standard homestead exemptions in the northern and eastern portions of the city, where housing values are higher. Low income and senior low-income exemptions were concentrated in the west and southwestern portions of the City. Using this preliminary data, APD-U completed a displacement risk analysis to determine which areas of the city are most vulnerable to the pressures of gentrification. The displacement risk was rated on a scale from 1 to 5, from least to most vulnerable. The results from the displacement risk analysis show that low income and fixed income households – i.e., seniors and those with disabilities – are at the greatest risk of displacement.

The Pilot Area

The pilot area was identified as six (6) census tracts in Southwest Atlanta and five (5) census tracts in Northwest Atlanta. Each of these census tracts are experiencing increasing home values due to accelerated development. The census tracts are currently comprised of a concentration of low-income seniors with fixed incomes and homeowners with incomes under 60% AMI. Additionally, over 3,000 of the households in the target area are currently utilizing the city or counties homestead exemption programs. All of these characteristics align with the determined eligibility requirements and those at the greatest risk of displacement. The 3,000 households that are currently utilizing the exemptions, represent the potential pilot program participants. It is projected that 60% of the households (1,854), can be expected to participate.

IV. SUBMITTAL DEADLINE

All responses to this RFP (each, a “Response”) must be submitted via email no later than **July 28, 2023 at 5:00 P.M.**

Responses received after this time and date will not be considered. Please address the Response to:

TAXRELIEF@INVESTATLANTA.COM

Anita R. Allgood
VP, Single-Family & Homeownership Services
The Downtown Development Authority d/b/a Invest Atlanta
133 Peachtree Street, Suite 2900
Atlanta, Georgia 30303

V. PROFESSIONAL FEE

All respondents will be asked to provide a proposed budget and fees for time and materials, project management costs, and professional services costs related to this RFP. Final fees will be negotiated following the selection of the Qualified Respondent. If fee negotiations with the Respondent determined most qualified are not successful, and/or the fees discussed are outside the budgetary constraints for the Project, Invest Atlanta reserves the right to suspend negotiations with the Respondent initially deemed most qualified and proceed to other Respondents. The successful Respondent will also be expected to provide a summary of assumptions used to determine its fee, including but not limited to team, hours and resources required from Invest Atlanta.

VI. INQUIRIES

Prospective Respondents are strongly encouraged to submit inquiries regarding this RFP in writing via email to: Taxrelief@investatlanta.com. Only inquiries received in writing will receive a response. Do not contact any Invest Atlanta staff by telephone with any questions or comments pertaining to this RFP. All such written inquiries must be delivered by **5:00 P.M., June 30, 2023**. **Inquiries received after such date and time will not be considered.** Invest Atlanta will publish all received written inquiries and Invest Atlanta's responses to those inquiries as an Addendum to this RFP on Invest Atlanta's website (www.investatlanta.com) on or before the close of business on **July 14, 2023**.

VII. SCOPE OF SERVICES

The scope of services for this RFP will support the creation, implementation, and facilitation of the Citywide (Pilot Area) Anti-Displacement Tax Relief Fund. Qualified non-profit and/or for-profit organizations (the "Agent" or Organization") will be selected to provide supportive services, including education on pre-existing property tax relief programs, review eligibility and distribute awards for residents located in the eligible areas within the City of Atlanta over the 20-year term of the program. Respondents are encouraged to submit proposals individually or in partnership with other qualified organizations. The scope of services for this RFP will include the following activities:

- Set up and day to day operation of the program
 - Establish process and procedures for program activities
- Significant Education and Outreach and Marketing to eligible participants in the pilot area
 - Association Meetings/ NPU Meetings/Webinars etc.
- Enforcement of program, procedural and policy guidelines
- Registration intake of program participants
 - Collection / maintenance of required applicant supporting documents

- Eligibility review / Communication of approved/denied applicants
- Coordination with existing tax entity
 - Preparation and submission of tax benefits to the tax entity within established timeline
- Quality control and program evaluation
 - Coordination with Invest Atlanta staff for program oversight
- Annual recertification of applicants
 - Collection of additional documents to determine continued eligibility
- Management/Coordination of supportive services
 - Provide assistance to applicants that need eligible homestead exemptions to qualify for the program
 - Estate planning

All Non-Profits desiring to participate must meet the following criteria:

- Organized and registered pursuant to the Georgia Nonprofit Corporation Code *O.C.G.A. § 43-17-1 et seq.*
- Registered as an Exempt Non-Profit under the Internal Revenue Code Section 501(c)(3) for at least three (3) years
- Licensed in the State of Georgia and not be the subject of any professional or administrative discipline
- Establish a Non-Profit Board committed to oversight of the organization, as well as the necessary outreach, engagement, and fundraising of potential donors for the program
- Possess technical skills essential to administer the program, preference will go to non-profits that can show history of similar program management; and
- Establish sufficient staffing to provide outreach, education, and engagement for the program.

All For-Profits desiring to participate must meet the following criteria:

- Registered and licensed in the State of Georgia and not be the subject of any professional or administrative discipline *O.C.G.A. §§ 14-2-130, 14-3-130, 14-5-23.*
- Establish a Board committed to oversight of the corporation's participation, as well as the necessary outreach, engagement, and fundraising of potential donors for the program.
- Possess technical skills essential to administer the program, preference will go to for-profits that can show history of similar program management.
- Establish sufficient staffing to provide outreach, education, and engagement for the program.

VIII. EVALUATION METRICS - EACH RFP RESPONSE WILL BE EVALUATED IN ACCORDANCE WITH THE FOLLOWING:

Invest Atlanta will convene an Evaluation Committee to evaluate each response properly submitted by a Respondent. At the discretion of Invest Atlanta, follow up interviews may be conducted with the highest-ranking Respondents as recommended by the Evaluation Committee prior to the Invest Atlanta making a final selection of the successful Consultant.

Responses should include a cover letter providing an introduction to the Respondent or team and the areas of expertise of the Respondent. The letter should also include the full name, address, phone and fax numbers of the organization and the branch office or other subordinate entity that will perform or assist in performing the services described therein. If responding as a team, the lead Respondent should be designated with a project manager identified as the single point of contact. Indicate the type of firm ownership (individual, partnership or corporation) and explain any proposed joint venture relationships. Include the state(s) in which the Respondent is incorporated and/or licensed to operate and provide a valid insurance certification.

Respondents will be evaluated on the basis of overall experience and depth of resources. It is imperative that responses contain all information requested.

To be deemed responsive for evaluation under this RFP, submissions are limited to 30 pages, inclusive of all submission requirements, narratives, and addenda.

Responses submitted to this RFP should include the following information outlined below.

Section I - Cover Letter/Business Information (10 points)

- Include a cover letter indicating the full name and address of the Respondent and the branch office or other subordinate entity that will perform or assist in performing the services described.
- Indicate the name of the senior contact person, appropriate telephone and facsimile numbers, and acknowledge Respondent's ability to commit to the contents of the response and any other information the Respondent deems relevant.
- Limit the letter to two pages.
- Indicate whether the Respondent operates as an individual, partnership or corporation and what legal entity will be providing the services.
- If applicable, include the state in which Respondent is organized. If not organized in Georgia, provide evidence of license to do business in Georgia.

Section II – Organization Information (10 points)

- The Respondent must identify the individuals that will comprise the working staff. A statement of qualifications, experience and organizational chart for the team involved in the project is required.
- Provide a summary of any pending lawsuits, unsatisfied judgments and/or liens currently filed against Respondent or any officer, owner, principal, employee, subsidiary or affiliate of the Respondent.

Section III –Experience (30 points)

- Provide a statement of Respondent’s experience in developing and completing projects similar in scope to the proposed project as well as the Respondent’s history, qualifications and financial capability for the past five years. For similar projects, include the project manager, scope of work, timetable, estimated/actual cost and percent of work for which Respondent was responsible.
- Provide organizational chart of project team/staff. Provide resumes describing the background, experience, and qualifications of key personnel that will be assigned to this project.
- Include a minimum of three (3) projects similar to the scope of services proposed. Include the name, address, telephone number, point of contact, and description of the work performed for each such reference.

Section IV Proposed Team and Approach to the Project (30 points)

- Include a statement of the Respondent’s understanding of the desired project.
- Identify current project assignment(s) and completion date(s) for projects currently being managed by key individuals to be assigned to the proposed project.
- Identify all other firms that are included in Respondent’s proposal.
- Outline Respondent’s approach to services proposed.

Section V Cost Proposal (20 points)

- The cost proposal should include all costs associated with the project, including professional services fees.

IX. TIMELINE AND DELIVERABLES

The RFP will be available on the Invest Atlanta website: <https://www.investatlanta.com/about-us/invest-atlanta-rfps>.

Action Required	Due Date
RFP Issued	June 23, 2023
Deadline to submit Written Questions	June 30, 2023
Responses to Written Questions Posted	July 14, 2023
Deadline to submit Response to RFP	July 28, 2023
Respondent Selected	August 25, 2023

Questions regarding this RFP must be in writing (via regular mail or email) and received by no later than **5:00 p.m., June 30, 2023**, to: Taxrelief@investatlanta.com.

All responses to this RFP (each, a “Response”) must be submitted via email by no later than **5:00 p.m., July 28, 2023**. Responses received after this time and date will not be considered. Responses must be sent to: Homeownership@InvestAtlanta.com.

X. DIVERSITY, EQUITY & INCLUSION POLICY

Invest Atlanta strongly encourages all Respondents to promote opportunities for diverse businesses, including Minority Business Enterprises (“MBE”), Female Business Enterprises (“FBE”) and Small Business Enterprises (“SBE”) to compete for business as subcontractors and/or suppliers. However, nothing herein should indicate that an MBE, FBE or SBE may not apply and be selected independently, as MBEs, FBEs, and SBEs that meet the qualifications of this RFP are encouraged to submit their qualifications for consideration. For an MBE, FBE or SBE to participate on the contract, said MBE, FBE or SBE must be certified as an MBE or FBE and be registered with the City's Office of Contract Compliance M/FBE Register. SBEs must be registered with the City and are defined as businesses not exceeding \$2.5 million in gross sales during the recent calendar or fiscal year.

Firms interested in obtaining applications for certification should contact these organizations:

- **City of Atlanta – Office of Contract Compliance (MBE/FBE):** Bruce T. Bell, Interim Director, Office of Contract Compliance, 55 Trinity Avenue, Atlanta, Georgia 30303, Tel: 404.330.6010, Fax: 404.658.7359, email: bbell@atlantaga.gov.

- **Small Disadvantaged Business (SDB)** certification by the U.S. Small Business Administration provided they reflect certification because of minority or women-owned status.

XI. EVALUATION & ACCEPTANCE OF STATEMENT OF QUALIFICATIONS

Invest Atlanta reserves the right to reject any and all responses, to amend this RFP and the process itself, or to discontinue the process at any time.

XII. E-VERIFY AFFIDAVIT

Provide notarized proof of compliance with Illegal Immigration Reform and Enforcement Act, O.C.G.A. §13-10-90, et seq. (**Exhibit C**) E-Verify. Respondents must comply with the Illegal Immigration Reform and Enforcement Act, O.C.G.A. §13-10-90, et seq. All services physically performed within the State of Georgia must be accompanied by proof of your registration with the E-Verify Program, as well as verification of your continuing and future participation in the E-Verify program established by the United States Department of Homeland Security. A completed E-Verify Contractor Affidavit must be submitted to Invest Atlanta (Appendix C-1). To the extent there are subcontractors working on this contract, you are responsible for obtaining a fully signed and notarized subcontractor affidavit from those firms with whom you have entered into subcontracts (Appendix C-2). In turn, should there be second tier subcontractors on this project, you must require the subcontractors to obtain E-Verify Affidavits from those second tier subcontractors.

XIII. GEORGIA OPEN RECORDS ACT

The laws of the State of Georgia, including the Georgia Open Records Act, as provided in O.C.G.A. §50-18-70, *et seq.*, require certain public records be made available for public inspection. Even though information (financial or other information) submitted by a Respondent may be marked as “confidential”, “proprietary”, etc., Invest Atlanta will make its own determination regarding what information may or may not be withheld from disclosure.

XIV. OTHER REQUIRED SUBMITTALS

Respondents are also required to complete, execute and indicated, and submit the following:

Invest Atlanta Diversity and Equity Certification Form (see Appendix E).

Invest Atlanta Contractor Disclosure and Declaration Form (see Appendix F).

XV. TERMS AND CONDITIONS

Invest Atlanta reserves the right to select or reject all or part of any proposal, waive minor technicalities, and select one or more proposals in the manner and to the extent that they serve the best interests of Invest Atlanta. This RFP does not commit Invest Atlanta to award a contract, nor will Invest Atlanta pay any costs incurred in the preparation of a proposal in response to this RFP. Invest Atlanta reserves the right to request oral interviews with one or more teams, request proposal clarifications or additional information, and/or best-and-final offers from up to three Respondents prior to making a final selection.

All proposals and supporting materials as well as correspondence relating to this RFP become property of Invest Atlanta when received. Any proprietary information contained in the Response should be so indicated. However, a general indication that the entire contents, or a major portion, of the proposal is proprietary will not be honored.

- A. All applicable State of Georgia and Federal laws, City and County ordinances, licenses and regulations of all agencies having jurisdiction shall apply to the Respondent and the development of the Property throughout and are incorporated herein. The contract with the Prospective Purchaser, and all questions concerning the execution, validity or invalidity, capability of the parties, and the performance of the contract, shall be interpreted in all respects in accordance with the laws of the State of Georgia.
- B. Professionals requiring special licenses must be licensed in the State of Georgia and shall be responsible for those portions of the work as may be required by law.
- C. Sub-Contractors as part of the Project team must be clearly identified in the Response, including roles, resumes of key personnel and project references.
- D. No Response shall be accepted from, and no contract will be awarded to, any person, firm, or corporation that (i) is in arrears to Invest Atlanta or the City with respect to any debt, (ii) is in default with respect to any obligation to Invest Atlanta or the City, or (iii) is deemed irresponsible or unreliable by Invest Atlanta. If requested, the Respondent shall be required to submit satisfactory evidence that they have the necessary financial resources to provide the proposed services.
- E. From the date Invest Atlanta receives a Respondent's proposal through the date a contract is awarded to a Respondent, no Respondent may make substitutions, deletions, additions or other changes in the configuration of Respondent's proposal or members of Respondent's team.

XVI. PROFESSIONAL SERVICES INSURANCE REQUIREMENTS

The Respondent shall include copies of current insurance policies or binders with their response to this RFP. The selected respondent(s) shall provide URFA with a certified copy of each of the policies or binders, electronically, ***indicating the existence of the required levels of insurance, prior to the beginning of the contract term.*** In the event a binder is delivered, it shall be replaced within ten (10) days by a certified copy of the policy. Each policy shall contain a valid provision or endorsement that the policy may not be canceled without giving thirty (30) days written notice thereof to the URFA representative named in the contract. A renewal policy or certificate shall be delivered to Invest Atlanta at least thirty (30) days prior to the expiration date of each expiring policy. If at any time, any of the policies shall be or become unsatisfactory to Invest Atlanta as to form or substance, or any of the carriers issuing such policies shall be or become unsatisfactory to URFA, the Respondent shall deliver to URFA representative upon demand a certified copy of any policy required herein for review. All insurance and adequacy of coverage decisions shall be made at the sole discretion of URFA, and the requirements set forth herein may be amended or changed at any time. Except as set forth herein, the Certificates of Insurance shall name URFA as an additional insured.

Below are the levels of insurance required by this RFP:

- General Liability:
 - Limits:
 - \$1M per occurrence
 - \$5M aggregate
 - Including:
 - Insurance carrier must have a minimum A.M. Best's Rating of A- or better and an A.M. Best's Financial Size Category of VIII or better.
 - The policy shall include coverage for liabilities arising out of premises, operations, independent contractors, products, completed operations, personal & advertising injury, and liability assumed under an insured contract. This insurance shall apply separately to each insured against whom claim is made or suit is brought subject to the respective limit of liability;
 - No exclusion for abuse and molestation
 - No exclusion for Assault and Battery
 - The Atlanta Development Authority d/b/a Invest Atlanta, ISAOA/ATIMA as Additional Insured regarding ongoing and completed operations
 - Primary and Noncontributory language in favor of The Atlanta Development Authority d/b/a Invest Atlanta, ISAOA/ATIMA
 - Waiver of Subrogation in favor of The Atlanta Development Authority d/b/a Invest Atlanta, ISAOA/ATIMA
 - Notice of cancellation (30 days, except 10 days for nonpayment) to Invest Atlanta

- Automobile Liability:
 - Limits:
 - \$1M combined single limit regarding any auto (or hired and non-owned auto liability if the contractor does not own any autos)
 - Including:
 - Insurance carrier must have a minimum A.M. Best's Rating of A- or better and an A.M. Best's Financial Size Category of VIII or better.
 - The Atlanta Development Authority d/b/a Invest Atlanta, ISAOA/ATIMA as Additional Insured
 - Primary and Noncontributory language in favor of The Atlanta Development Authority d/b/a Invest Atlanta, ISAOA/ATIMA
 - Waiver of Subrogation in favor of The Atlanta Development Authority d/b/a Invest Atlanta, ISAOA/ATIMA
 - Notice of cancellation (30 days, except 10 days for nonpayment) to Invest Atlanta
- Workers Compensation and Employers Liability:
 - Limits:
 - Workers Compensation: Statutory
 - Employers Liability: \$1M/\$1M/\$1M
 - Including:
 - Insurance carrier must have a minimum A.M. Best's Rating of A- or better and an A.M. Best's Financial Size Category of VIII or better.
 - Waiver of Subrogation in favor of The Atlanta Development Authority d/b/a Invest Atlanta, ISAOA/ATIMA
 - Notice of cancellation (30 days, except 10 days for nonpayment) to Invest Atlanta
- Umbrella / Excess Liability:
 - Limits:
 - \$ 10M aggregate
 - Including:
 - Insurance carrier must have a minimum A.M. Best's Rating of A- or better and an A.M. Best's Financial Size Category of VIII or better.
 - General Liability, Auto Liability and Employers Liability on the schedule of underlying
 - Follow form language
 - The Atlanta Development Authority d/b/a Invest Atlanta, ISAOA/ATIMA as Additional Insured
 - Primary and Noncontributory language in favor of The Atlanta Development Authority d/b/a Invest Atlanta, ISAOA/ATIMA
 - Waiver of Subrogation in favor of The Atlanta Development Authority d/b/a Invest Atlanta, ISAOA/ATIMA
 - Notice of cancellation (30 days, except 10 days for nonpayment) to Invest Atlanta

EXHIBIT A

INVEST ATLANTA
OFFER TO PARTICIPATE
CITYWIDE PILOT AREA ANTI-DISPLACEMENT FUND PROGRAMS

One signed original of this Offer to Participate (the “Offer”) is to be delivered to Invest Atlanta in connection with this RFP Response.

Name of Organization or Firm: _____

Address: _____

Subject to the terms and conditions stated herein, the above Respondent hereby offers to:

Administer funds on behalf of Invest Atlanta in accordance with the terms and conditions of Invest Atlanta’s Request for Proposals (the “RFP”) and the Offer to Participate (the “Offer”) which is summarized in the RFP and the provisions of which are incorporated herein by reference, and upon acceptance hereof, are hereby agreed to by the Respondent.

Please provide the following information for all organizations who are proposed to participate under this RFP Response:

Office listed on W-9 (include full street address)	Contact Phone & Email

Accompanying this RFP Response is

- An original of the Respondent Questionnaire, attached hereto as **(Exhibit B)**, which Questionnaire has been duly authorized, executed and delivered by the Respondent. The Respondent hereby agrees to hold Invest Atlanta, its employees and its agents harmless, and agrees to indemnify them from any cost they incur as a result of any material misstatement in or omission from, such Questionnaire.
- Attached S.A.V.E. Affidavit **(Exhibit C)**
- Certification Statement **(Exhibit D)**

The Respondent hereby certifies that in connection with the transaction contemplated hereby, it has not directly or indirectly contracted or entered into any agreement with any other Respondent or any other person or institution (except Invest Atlanta or its agents) with respect to any aspect of the Respondent's participation in this process, other than an agreement expressly authorized by the Offer.

This Offer is a unilateral offer and shall form a binding contract if accepted by Invest Atlanta. This Offer shall be deemed a contract between the Respondent and Invest Atlanta upon Invest Atlanta's acceptance hereof, whether or not notice of such acceptance is communicated in writing to the Respondent, it being understood that Invest Atlanta intends to so notify the Attorney within a reasonable time after Invest Atlanta's acceptance.

The name and address to which notices regarding this offer and related matters should be forwarded is:

Name of Respondent: (Please Type) _____

Street Address: _____

City _____ State _____ Zip Code _____

Phone Number: _____ Fax Number: _____

Email: _____

(SEAL)

ATTESTED:

By: _____

By: _____

Name: _____

Title: _____

Firm: _____

Address: _____

Date: _____

NOTE: ALL COMMUNICATIONS CONCERNING THIS OFFER WILL BE SENT TO THE ADDRESS ABOVE. IF APPROVALS OR RESPONSES ARE REQUIRED FROM OFFICES OTHER THAN THE ABOVE, PLEASE INDICATE SUCH BELOW.

EXHIBIT B
INVEST ATLANTA
RESPONDENT QUESTIONNAIRE
CITYWIDE PILOT AREA ANTI-DISPLACEMENT FUND

This form is to be used by all Respondents. Send the application with signature and all supporting documentation and narrative statements, as requested. PLEASE ALSO PROVIDE THE FOLLOWING INFORMATION:

Name of the Organization:	Address of the Primary Office (list branch offices on a separate sheet of paper):
Acronym; aka, or dba, if applicable	Name, Title, Date & Signature of Authorized Person:

- I. **Organization Overview and Experience** *(Please include the Firm's Corporate Resume, as well as individual professional vitae highlighting specific experience of the partners, associates, of counsel, or senior counsel)*
- II. **Qualifications:**
- III. **Number of programs administered in previous three calendar years:** *(Please provide details for each program including the amount of time and involvement in each program.)*
- IV. **SAVE Affidavit.** Invest Atlanta is required by the SAVE (Systematic Alien Verification for Entitlements) Program to verify the status of anyone who applies for a public benefit from Invest Atlanta. Benefits are defined by state statute, O.C.G.A. §50-36-1, by federal statute, 8 U.S.C. §1611 and 8 U.S.C. §1621, and by the Office of the Attorney General of Georgia. Contracts with Invest Atlanta are considered "public benefits." Beginning on January 1, 2012, any person obtaining a public benefit must show a secure and verifiable document and complete the attached SAVE Affidavit. Acceptable documents have been identified by the Office of the Attorney General. Those lists may be found at: <http://law.ga.gov>.

EXHIBIT C

SAVE AFFIDAVIT UNDER O.C.G.A §50-36-1(e)(2)

**INVEST ATLANTA AFFIDAVIT
VERIFYING STATUS FOR RECEIPT OF PUBLIC BENEFIT**

By executing this affidavit under oath, as a Contractor for Invest Atlanta or other public benefit as provided by O.C.G.A. §50-36-1 and determined by the Attorney General of Georgia in accordance therewith, I am stating the following with respect to my application for an Invest Atlanta public benefit:

For: _____.
[Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity]

1) _____ I am a United States Citizen

OR

2) _____ I am a legal permanent resident 18 years of age or older or

OR

3) _____ I am an otherwise qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older and lawfully present in the United States.

All non-citizens must provide their Alien Registration Number below.

Alien Registration number for non-citizens

The undersigned applicant also hereby verifies that he or she has provided at least one secure and verifiable document as required by O.C.G.A. §50-36-1(e)(1) with this Affidavit. **The secure and verifiable document provided with this affidavit is:**

Must attach copy of Drivers' License, Passport ID page, or other secure and verifiable document.

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. §16-10-20, and face criminal penalties as allowed by such criminal statute

Signature of Applicant

Date:

Printed Name:

Sworn to and subscribed before me
This ____ day of _____, 202__

Notary Public
My commission expires: _____

EXHIBIT C-2

CONTRACTOR AFFIDAVIT UNDER O.C.G.A §13-10-91(b)(1)

By executing this affidavit, the undersigned Contractor verifies its compliance with O.C.G.A. §13-10-91, et seq. (the “Act”) and Chapter 300-10-1 of the Rules of Georgia Department of Labor (the “Rules”), stating affirmatively that the individual, firm, or corporation which is engaged in the physical performance of services on behalf of Invest Atlanta: (1) has registered with; (2) is authorized to use; (3) is using; and (4) will continue to use throughout the contract period a federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicability provisions and deadlines established in the Act and the Rules.

The undersigned contractor further agrees that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to the contract with Invest Atlanta of which this affidavit is a part, the undersigned contractor will secure from such subcontractor(s) similar verification of compliance with the Act and the Rules through the subcontractor’s execution of the subcontractor affidavit provided below.

The undersigned contractor further agrees to provide a copy of each such affidavit to Invest Atlanta at the time the subcontractor(s) is retained to perform such services and to maintain copies of all such affidavits for no less than five (5) years from the date provided to Invest Atlanta and otherwise maintain records of compliance with the Act and the Rules as required.

Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Employment Eligibility Verification (E-Verify)
User Identification Number

Date of Authorization

I hereby declare under penalty of perjury that the foregoing is true and correct.

BY: Authorized Officer or Agent

Date

Subcontractor Name

Title of Authorized Officer or Agent of Subcontractor

Printed Name of Authorized Officer or Agent

Sworn to and subscribed before me
This ____ day of _____, 202__

Notary Public
My commission expires: _____

APPENDIX C-3

SUBCONTRACTOR AFFIDAVIT UNDER O.C.G.A §13-10-91(b)(3)

By executing this affidavit, the undersigned subcontractor verifies its compliance with O.C.G.A. § 13-10-91 (the “Act”) and Chapter 300-10-1 of the Rules of Georgia Department of Labor (the “Rules”), stating affirmatively that the individual, firm, or corporation which is engaged in the physical performance of services under a contract with _____ (name of contractor) on behalf of Invest Atlanta: (1) has registered with; (2) is authorized to use; (3) is using; and (4) will continue to use throughout the contract period a federal work authorization program known as E-Verify, or any subsequent replacement program, in accordance with the applicability provisions and deadlines established in the Act and the Rules.

The undersigned subcontractor further agrees that it will contract for the physical performance of services in satisfaction of the Contract only with sub-subcontractors who present an E-Verify Affidavit to the undersigned subcontractor with the information required by the Act and the Rules. The undersigned subcontractor will forward notice of the receipt of an E-Verify Affidavit from a sub-subcontractor to the Contractor within five (5) business days of receipt. If the undersigned subcontractor receives notice that a sub-subcontractor has received an E-Verify Affidavit from any other contracted sub-subcontractor, the undersigned subcontractor must forward, within five (5) business days of receipt, a copy of the notice to the Contractor.

Subcontractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Employment Eligibility Verification (E-Verify)
User Identification Number

Date of Authorization

I hereby declare under penalty of perjury that the foregoing is true and correct.

BY: Authorized Officer or Agent

Date

Subcontractor Name

Title of Authorized Officer or Agent of Subcontractor

Printed Name of Authorized Officer or Agent

Sworn to and subscribed before me
This ____ day of _____, 202__

Notary Public

My commission expires: _____

EXHIBIT D

CERTIFICATION STATEMENT

It is understood that the information contained in this Questionnaire will be independently verified by Invest Atlanta and will be relied upon by Invest Atlanta in selecting the Respondent. We hereby certify, to the best of our belief and knowledge, that the information presented by the foregoing Respondent Questionnaire and RFP Response is true and accurate to the extent possible given available information. In certain instances, estimates have been made based upon reasonable assumptions using such reliable sources of data and information as are available to this institution.

This _____ day of _____, 202__

Authorized Officer (Signature)

Authorized Officer
(Type or Print Name and Office Held)

EXHIBIT E



Diversity and Equity Certification Form

The Atlanta Development Authority d/b/a Invest Atlanta (“Invest Atlanta”) is committed to monitoring the participation of businesses owned and operated by diverse persons in its procurement of services and goods. It is imperative that potential vendors and consultants provide the requested information and return this form to Invest Atlanta’s Director of Compliance as part of any purchasing process.

Vendor/Consultant Name: _____

Business Address: _____

Address _____ City _____ State _____ Zip Code _____

A **Minority Business Enterprise** is defined as being at least 51% owned and controlled by one or more of the following categories: African American, Asian American, Hispanic American, or Native American. A **Female Business Enterprise** is defined as being at least 51% owned and controlled by one or more women. A **Disabled Veterans’ Business** is defined as being at least 51% owned and controlled by one or more service-disabled veterans

1. Check ALL categories that apply to your business entity. Indicate N/A if no categories are applicable.

- | | |
|--|--|
| <input type="checkbox"/> African American Business Enterprise | <input type="checkbox"/> Asian American Business Enterprise |
| <input type="checkbox"/> Hispanic American Business Enterprise | <input type="checkbox"/> Native American Business Enterprise |
| <input type="checkbox"/> Non-minority Female Business Enterprise | <input type="checkbox"/> Not Applicable |

2. Check ALL categories that apply to any subcontractors to be used for the current procurement. Indicate N/A if no categories are applicable *or* if all work will be self-performed.

- | | |
|--|--|
| <input type="checkbox"/> African American Business Enterprise | <input type="checkbox"/> Asian American Business Enterprise |
| <input type="checkbox"/> Hispanic American Business Enterprise | <input type="checkbox"/> Native American Business Enterprise |
| <input type="checkbox"/> Non-minority Female Business Enterprise | <input type="checkbox"/> Not Applicable |

3. Check ALL categories that apply to your business entity. If “Yes”, please provide a copy of the verification letter from the U.S. Department of Veteran Affairs, Center for Veterans Enterprise.

- | | | |
|---|--|---|
| <input type="checkbox"/> Veteran Owned Business | <input type="checkbox"/> Service Disabled Veteran Owned Business | <input type="checkbox"/> Not Applicable |
|---|--|---|

4. Has your business been awarded certification as an M/FBE, or a DBE (whether SBA 8(a), DOT, or other) with another governmental agency, department, or authority? ☐ Yes ☐ No If yes, then please provide a copy of your certification letter or certificate.

5. Is your principle place of business located in the 20 County metro Atlanta area? ☐ Yes ☐ No

(Barrow, Bartow, Carroll, Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Hall, Henry, Newton, Paulding, Rockdale, Spalding, Walton)

Signature: _____

Title: _____

(Must be senior management level)

Printed Name: _____

Date: _____

EXHIBIT F

**INVEST ATLANTA CONTRACTOR DISCLOSURE AND
DECLARATION FORM**

DEFINITIONS FOR THE PURPOSE OF THIS DISCLOSURE AND DECLARATION FORM

“Affiliate”	Any legal entity that, directly or indirectly through one of more intermediate legal entities, controls, is controlled by or is under common control with the RFP Respondent or a member of Respondent.
“Contractor or Vendor”	Any person or entity having a contract with Invest Atlanta
“Control”	The controlling entity: (i) possesses, directly or indirectly, the power to direct or cause the direction of the management and policies of the controlled entity, whether through the ownership of voting securities or by contract or otherwise; or (ii) has direct or indirect ownership in the aggregate of fifty-one (51%) or more of any class of voting or equity interests in the controlled entity.
“Respondent or Offeror” (the terms are interchangeably used on this Form)	<p>Any individual or entity that submits a Proposal in response to a RFP.</p> <p>If the Respondent is an individual, then that individual must complete and sign this Contractor Disclosure and Declaration Form where indicated. If the Respondent is a partnership (including but not limited to, joint venture partnership), then each partner in the partnership must complete and sign a separate Contractor Disclosure and Declaration Form where indicated. If the Respondent is an entity, then an authorized representative of that entity must complete and sign this Contractor Disclosure and Declaration Form where indicated. If the Respondent is a newly formed entity (formed within the last three years), then an authorized representative of that entity must complete and sign this Contractor Disclosure and Declaration Form where indicated, and each of the members or owners of the entity must also complete and sign separate Contractor Disclosure and Declaration Form where indicated.</p>

Instructions: Provide the following information for the entity or individual completing this Form (the “Individual/Entity”).

A. Basic Information:

1. Name of Individual/Entity responding to this solicitation: _____

2. Name of the authorized representative for the responding Entity: _____

B. Individual/Entity Information:

1. Principal Office Address: _____

2. Telephone and Facsimile Numbers: _____
3. E-Mail Address: _____

4. Name and title of Contact Person for the Individual/Entity: _____

5. Is the Individual/Entity authorized to transact business in the State of Georgia?

☐ YES (Attach documentation evidencing authority to transact business in the State of Georgia, not limited to Georgia Secretary of State documentation.)

☐ NO

C. Questionnaire

If you answer "YES" to any of the following questions, you must provide on a separate page the details necessary to explain the nature and circumstances of each action, event, matter, relationship or practice involved, including but not limited to: names of persons or entities involved, status and/or outcome of each instance. Further, if the matter involves a criminal charge, litigation of any type, or other court or administrative charge or proceeding, then the name of the court or tribunal and the file or reference number must be provided. Any information must be provided on a separate page, attached to this form and submitted with your Bid.

1. Please describe the general development of the Respondent's business during the past ten (10) years, or such shorter period of time that the Respondent has been in business.

- | | | |
|--|--------------------------|--------------------------|
| <p>2. Are there any lawsuits, administrative actions or litigation to which Respondent is currently a party or has been a party (either as a plaintiff or defendant) during the past ten (10) years based upon fraud, theft, breach of contract, misrepresentation, safety, wrongful death or other similar conduct? If the answer to this question is "NO", then please proceed to question number 4.</p> | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>3. If "yes" to question number 2, were any of the parties to the suit a bonding company, insurance company, an owner, or otherwise? If so, attach a sheet listing all parties and indicate the type of company involved.</p> | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>4. Has the Respondent or any principal thereof, been charged with a criminal offense within the last ten (10) years?</p> | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>5. Has the Respondent received any citations or notices of violation from any government agency in connection with any of Respondent's work during the past ten (10) years (including OSHA violations)? Describe any citation or notices of violation which Respondent received.</p> | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>6. Please state whether any of the following events have occurred in the last ten (10) years with respect to the Respondent. If any answer is yes, explain fully the circumstances surrounding the subject matter of the affirmative answer:</p> | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(a) Whether Respondent, or Affiliate currently or previously associated with Respondent, has ever filed a petition in bankruptcy, taken any actions with respect to insolvency, reorganization, receivership, moratorium or assignment for the benefit of creditors, or otherwise sought relief from creditors?</p> | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |

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Request for Proposals F-3

Program Manager- Citywide Anti-Displacement Tax Fund

- | | | |
|--|--------------------------|--------------------------|
| (b) Whether Respondent was subject of any order, judgment or decree not subsequently reversed, suspended or vacated by any court permanently enjoining Respondent from engaging in any type of business practice? | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| (c) Whether Respondent was subject of any order, judgment or decree not subsequently reversed, suspended or vacated by any court permanently enjoining Respondent from engaging in any type of business practice? | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Has any employee, agent or representative of Respondent who is or will be directly involved in the project, in the last ten (10) years: | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| a. directly or indirectly, had a business relationship with Invest Atlanta? | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| b. directly or indirectly, received revenues from Invest Atlanta? | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| c. directly or indirectly, received revenues from conducting business on Invest Atlanta property or pursuant to any contract with Invest Atlanta | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Whether any employee, agent, or representative of Respondent who is or will be directly involved in the project has or had within the last ten (10) years a direct or indirect business relationship with any elected or appointed Invest Atlanta official or with any Invest Atlanta employee? | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Whether Respondent has provided employment or compensation to any third-party intermediary, agent, or lobbyist to directly or indirectly communicate with any Invest Atlanta official or employee, or City of Atlanta official or employee in connection with any transaction or investment involving your firm and Invest Atlanta? | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Has the Respondent or any agent, officer, director, or employee been terminated, suspended, or debarred (for cause or otherwise) from any work being performed for Invest Atlanta, the City of Atlanta or any other Federal, State or Local Government? | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Has the Respondent, member of Respondent's team or officer of any of them (with respect to any matter involving the business practice or activities of his or her employer) been notified within the five (5) years preceding the date of this offer that any of them are the target of a criminal investigation, grand jury investigation, or civil enforcement proceeding? | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Please identify any Personal or Financial Relationships that may give rise to a conflict of interest as defined below. [Please be advised that you may be ineligible for award of contract if you have a personal or financial relationship that constitutes a conflict of interest that cannot be avoided]: | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| (a) Personal relationships: executives, board members and partners in firms submitting offers must disclose familial relationships with employees, officers and elected officials of Invest Atlanta or the City of Atlanta. Familial relationships shall include spouse, mother, father, sister, brother, and natural or adopted children of an official or employee. | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| (b) Financial relationships: Respondent must disclose any interest held with an Invest Atlanta or City of Atlanta employee or official, or family members of an Invest Atlanta or City of Atlanta employee or official, which may yield, directly or indirectly, a monetary or other material benefit to the Respondent or the Respondent's family members. Please describe: | YES | NO |
| | <input type="checkbox"/> | <input type="checkbox"/> |

D. REPRESENTATIONS

Certification of Independent Price Determination/Non-Collusion. Collusion and other anticompetitive practices among Respondents are prohibited by city, state and federal laws. All Respondents shall identify a person having authority to sign for the Respondent who shall certify, in writing, as follows:

“I certify that this proposal is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting an offer for the same supplies, labor, services, construction, materials or equipment to be furnished or professional or consultant services and is in all respects fair and without collusion or fraud. I understand collusive bidding is a violation of city, state and federal law and can result in fines, prison sentences, and civil damages awards. By signing this document, I agree to abide by all conditions of this solicitation and offer and certify that I am authorized to sign for this Respondent.”

Prohibition on Kickbacks or Gratuities/Non-Gratuity. The undersigned acknowledges the following prohibitions on kickbacks and gratuities:

- a. It is unethical for any person to offer, give or agree to give any employee or former employee a gratuity or an offer of employment in connection with any decision, approval, disapproval, recommendation, preparation or any part of a program requirement or a purchase request, influencing the content of any specification or procurement standard, rendering of advice, investigation, auditing or in any other advisory capacity in any proceeding or application, request for ruling, determination, claim or controversy or other particular matter pertaining to any program requirement or a contract or subcontract or to any solicitation therefor.
- b. It is unethical for any employee or former employee to solicit, demand, accept or agree to accept from another person a gratuity or an offer of employment in connection with any decision, approval, disapproval, recommendation, preparation or any part of a program requirement or a purchase request, influencing the content of any specification or procurement standard, rendering of advice, investigation, auditing or in any other advisory capacity in any proceeding or application, request for ruling, determination, claim or controversy or other particular matter pertaining to any program requirement or a contract or subcontract or to any solicitation therefor.
- c. It is also unethical for any payment, gratuity or offer of employment to be made by or on behalf of a subcontractor under a contract to the prime Contractor or higher tier subcontractor or any person associated therewith as an inducement for the award of a subcontract or order.

[Declaration continues on following page](#)

Declaration

Under penalty of perjury, I declare that I have examined this Contractor Disclosure and Declaration Form and all attachments to it, if applicable, and, to the best of my knowledge and belief all statements contained herein and, in any attachments, if applicable, are true, correct and complete.

I certify that this offer is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting an offer for the same supplies, services, construction, or professional or consultant services, and is in all respects fair and without collusion or fraud. I understand collusive bidding is a violation of city, state and federal law and can result in fines, prison sentences, and civil damages awards. I agree to abide by all conditions of this solicitation and offer and certify that I am authorized to sign for this Respondent.

Sign here if you are an individual:

Printed Name: _____

Signature: _____

Date: _____, 20____

Subscribed and sworn to or affirmed by _____ **(name) this** _____ **day of** ____, 20__.

Notary Public of _____ (state)

My commission expires: _____

Sign here if you are an authorized representative of a corporate entity, LLC, or partnership:

Printed Name of Corporate Entity, LLC or Partnership: _____

Signature of authorized representative: _____

Title: _____

Date: _____, 20____

Subscribed and sworn to or affirmed by _____ **(name),**
as the _____ **(title) of** _____ **(entity name) this** _____ **day of** _____
_____, 20____.

Notary Public of _____ (state)

My commission expires: _____