

REQUEST FOR QUALIFICATIONS

OWNER-OCCUPIED REHABILITATION PROGRAM MANAGEMENT SERVICES

PREPARED BY:

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

AND

**URBAN RESIDENTIAL FINANCE AUTHORITY
OF THE CITY OF ATLANTA, GEORGIA**

RFQ DATE: AUGUST 12, 2022

RESPONSES DUE: SEPTEMBER 9, 2022



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REQUEST FOR QUALIFICATIONS (“RFQ”) FOR OWNER-OCCUPIED REHABILITATION PROGRAM MANAGEMENT SERVICES

INTRODUCTION

The Urban Residential Finance Authority of the city of Atlanta Georgia is soliciting responses to this Request for Qualifications (“RFQ”) for interested and qualified firms or individuals wishing to provide program management and implementation services for the rehabilitation of eligible owner-occupied homes within the City of Atlanta, excluding homes within the boundaries of the Westside Tax Allocation District and Choice Grant funded neighborhoods.

BACKGROUND

Invest Atlanta operates as a public body corporate and politic of the State of Georgia and serves as the City’s economic development agency. Invest Atlanta, consisting of 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 improving the City’s neighborhoods and 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.

URFA was duly created and is existing under and by virtue of the Urban Residential Finance Authorities Act for Large Municipalities, Georgia O.C.G.A Section 36-41-1, et seq., as amended and an activating resolution of the governing body of the City of Atlanta, Georgia, duly adopted on May 7, 1979, and approved by the Mayor of the City on May 19, 1979. URFA offers several programs that make living in the City affordable. With programs and incentives targeted at developers, homeowners and renters, URFA makes living in-town affordable for all types of working families.

Proposals submitted in response to this RFQ will be evaluated by Invest Atlanta team members. 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 RFQ, and all other information submitted in response to a request for additional information, become and remain the property of Invest Atlanta. Submission of a proposal indicates acceptance by the Respondent of the conditions contained in this RFQ.

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

SUBMISSION DEADLINE

All responses to this RFP (each, a “Response”) must be submitted by email to homeownership@investatlanta.com to the attention of Anita R. Allgood, VP, Single-Family & Homeownership Services, by no later than 5:00 p.m., EST, **Friday, September 9, 2022**. Only emails sent to homeownership@investatlanta.com will be considered as responsive to the request for qualifications. Responses received after this time and date will not be considered. Invest Atlanta email has limitations on attachment size. Proposals shall be submitted in a PDF file under

20 megabits. If the file is over, you will need to send multiple emails. The Project name must be noted in the subject line, otherwise the proposal may be considered as non-responsive to the RFP. Electronic submittals will be held, un-opened, until the time and date noted in the RFP.

INQUIRIES

Prospective Respondents are strongly encouraged to submit inquiries regarding this RFQ by email, in writing to: Homeownership@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 RFQ. All such written inquiries must be delivered by **5:00PM, August 19, 2022**. Inquiries received after such date and time will not be considered or receive a response. Invest Atlanta will publish all received written inquiries and Invest Atlanta's responses to those inquiries as an Addendum to this RFQ on Invest Atlanta's website (www.investatlanta.com) on or before the close of business on **August 26, 2022**.

SCOPE OF SERVICES

The Urban Residential Finance Authority of the City of Atlanta, Georgia ("URFA") is seeking qualified Consultants and/or Agencies (collectively identified as the "selected respondent or Program Manager") to provide program management services to market, implement, and coordinate the Owner-Occupied Rehabilitation Program ("OOR program") for a designated target geography within the City of Atlanta, excluding homes within the boundaries of the Westside Tax Allocation District and Choice Grant funded neighborhoods (refer to **Exhibit F**) for target geographies).

Through the OOR program, the Program Manager will increase the quality of life and address safety and accessibility issues for eligible City homeowners by managing life safety repairs and rehabilitation to single family homes. Final tasks and services to be provided by the Selected Respondent will be developed in partnership with Invest Atlanta and may include the following summary elements (additional detail provided in **Exhibit A**):

- 1) **Program Management** - The Selected Respondent(s) will be responsible for the following:
 - a. Applicant intake and review of eligibility verification.
 - b. Main point of contact for participants throughout the rehabilitation process
 - c. Oversight of the construction process including initial identification of priority repairs; periodic onsite check-ins; and final walk-through upon completion.
 - d. Execution of all applicant document/disclosures, including tri-party scope of work agreement between selected contractor, eligible homeowner, and Program Manager;
 - e. Execution of construction related contracts;
 - f. Preparation and submission of requisitions to Program Administrator for funding disbursement;
 - g. Monitoring construction timeliness and quality;
 - h. Retention of all application and supporting documents, as well as all construction related documents including all permits and inspections reports;
 - i. Periodic reporting as requested by the Program Administrator or its designated agents; and
 - j. Data entry of all required and pertinent information into the Neighborly Software.
 - k. Proper documentation of applicant/PM/GC communications in the Neighborly audit log.
 - l. Upload of all applicant documentation into the Neighborly Software.

- m. Liaise with Invest Atlanta staff periodically to provide feedback on the program and address challenges, questions, or concerns.
- 2) Home Improvement Contractor Management** – The selected respondent(s) will identify and select qualified, experienced, and licensed contractors or general contractors to identify, prioritize, and complete eligible home improvements. The selected respondent(s) should be able to demonstrate the following:
- a. Experience managing major home repairs, home improvements, and/or new construction of single-family residential properties;
 - b. Experience with owner-occupied rehabilitation and/or renovations;
 - c. An established procurement process for identifying and selecting qualified contractors or general contractors using a selection criterion substantially conforming to the Sample General Contractor Selection Criteria provided in **Exhibit B**;
 - d. Familiarity with City of Atlanta licensing and permitting processes and requirements; and
 - e. Program Manager MAY NOT also serve in the capacity of general contractor or facilitate any form of rehab
- 3) Others Services TBD**
- 4) Selected Respondents will receive a detailed training and a spreadsheet outlining the specific program details and process flow required to complete each rehab case.**

PROGRAM DETAILS

URFA serves as *program administrator* responsible for: Program Design and Implementation, Account Administration and Funding Process, Compliance Monitoring and Reporting (may be delegated to City).

The selected respondent(s) will serve as *Program Manager(s)* responsible for delivering the following activities: application intake and eligibility verification, inspection/assessment services, contractor selection, construction supervision, quality control and reporting. The selected respondent(s) will also be expected to coordinate certain community engagement activities with Invest Atlanta and/or City of Atlanta Office of Housing and Community Development.

Under the OOR program, deferred forgivable loans will be provided to eligible homeowners up to 60% of area median income, adjusted for household size (limitations may apply) during the initial 12 months of the program. Terms of the deferred forgivable loan are as follows: loan amount of \$15,000 or below will have a 5-year term. Loan amounts over \$15,000 will have a 10-year term. All loans will be at a 0% interest rate with payments deferred and forgiven until the earlier of loan maturity, sale, transfer of ownership, or failure to maintain the property as the primary residence during the loan term. The principal balance is reduced by 10% or 20% annually (depending on the loan term) provided the eligible homeowner maintains primary residency. The prorated remaining balance is due and payable immediately if the home is sold, transferred or no longer the primary residence. A deed restriction will also be placed on the home for the length of the 5 or 10-year residency period to further ensure the remaining loan balance is repaid. The maximum loan amount per home, inclusive of Contractor's Allowance for Profit, inspection and closing costs is \$30,000 per home.

PROGRAM ELIGIBILITY REQUIREMENTS

The eligibility requirements for this program within the eligible areas are:

1) Eligibility Criteria

- Homeowner within one (1) of the designated target geographies, excluding the Westside Tax Allocation District and Choice Grant funded neighborhoods
- Must be a primary homeowner and existing resident of the property at least five (5) years prior to application. If multiple homeowners exist, all owners must sign application and loan documents.
- Household income must not exceed 60% of AMI as published by HUD (adjusted for household size, limitations may apply).
- Homeowners with 1st and 2nd mortgage liens are permitted provided all mortgages are current and not in default. (Homeowners with tax liens, FIFAs, etc. would not qualify for the program). Water liens with a payment plan are acceptable.
- Proof of Homeowner's Insurance is required and must be submitted annually.
- Prior recipients of owner-occupied rehabilitation grants from Invest Atlanta, City of Atlanta or Atlanta Housing over five thousand dollars (\$5,000) within the previous 12 months are excluded.
- Homes with children 6 years old and younger residing in the home will be tested for Lead Based Paint (LBP). In these circumstances, prospective homeowner applicants will be referred to LBP remediation programs and may re-apply to the OOR Program upon completion of LBP remediation.
- Homes exceeding one (1) unit are excluded.
- Investor-owned properties are excluded.

2) Eligible Renovations

- 1st Priority Rehabilitation – health and safety renovation/repair of homes with major systems damage/deferred maintenance such as: roofing, gutters, energy efficient water heaters, minor plumbing repairs, HVAC, window replacement and insulation, improved accessibility for aged or disabled, etc.
- 2nd Priority Rehabilitation – renovations that enhance exterior/beautification: painting and landscaping.

3) Eligible Participant Preferences

- Tier 1 Priority Eligible Participants included for First 12 Months:
 - Senior Head of Household aged 55+ ≤ 60% AMI
 - Disabled Head of Household ≤ 60% AMI
 - Military Veteran Head of Household ≤ 60% AMI
 - Those living in the home for > 15 years
- Tier 2 Priority Eligible Participants include:
 - Households ≤ 60% AMI

4) Maximum Loan Amount

- Maximum of up to \$30,000 deferred forgivable loan per house, inclusive of all inspection, repair, construction related costs and any applicable title attorney's fees and costs.

RESPONSE COMPONENTS

NOTE: Responses should include a cover letter providing an introduction to the firm or team and the areas of expertise of the firm. The letter should also state 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 firm 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 firm is incorporated and/or licensed to operate and provide a valid insurance certification.

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

All qualifying proposals must include the following components:

- A. Cover Letter** – Signed letter briefly stating project understanding, team members and qualifications for project selection and execution.
- B. Team Description** – Organizational chart defining roles of team members. Firm description and bios describing relevant professional licensure and relevant experience for each team member.
 - List any litigation the firm was involved in during the last five (5) years. Also, list any current, pending or threatened litigation and provide a description.
 - A disclosure statement listing all potential conflicts of interest related to this project. This disclosure statement must be addressed specifically in your response, even if no conflict exists.
 - A current audited balance sheet and two (2) years of audited financials.
 - An overview of the firm’s relationships with female business enterprises, minority business enterprises or small business enterprises. Please indicate if any proposing firm or joint venture partner is certified under any of these categories by the City of Atlanta.
- C. Program Manager Qualifications-** Provide details of past experiences, references for similar work, planning/budget/schedule activities, public engagement experience, and talents applicable to respective service to be provided, documentation method, project tracking method, and work product delivery methods that have proven successful. Also, include any experience or work completed on behalf of the City of Atlanta, Invest Atlanta, Atlanta Beltline, Inc. and the Atlanta Beltline Partnership, etc. If respondent is an existing contractor or partner under any repair programs administered by the one of the previously named entities, a letter of “good standing” must be submitted.
 - Provide the following information for three current or recently completed projects:
 - Project Name
 - Project Location
 - Project Scope and Description
 - Nature of Public/ Community Involvement
 - Project Methodology (specifically including work plan reviews)
 - Contract Amount

- Contract Type: (i.e., lump sum, guaranteed maximum price, etc.)
 - Actual or Expected Completed Date
 - Detailed description of the scope and results of such services
 - Actual Duration
 - Project reference and contact information
- Provide a list of economic development authorities, universities, governmental entities, or other clients for which the Respondent served as consultant/agent for real estate rehabilitation like those requested in the Scope of Services.

D. Scope of Work - Potential services in accordance with the objectives outlined within this document, including firm’s capabilities and anticipated approach to the project. Please describe the tools, methods, and frameworks the Consultant/Agency plans to utilize to accomplish the identified goals. Include a staffing plan, as well as estimated hours and resources that will be required from URFA and/or the City of Atlanta Office of Housing and Community Development.

E. E-Verify and SAVE Affidavit (Exhibits C – C2)

F. Certification Statement (Exhibit D)

G. Diversity & Equity Certification Form (Exhibit E)

H. Proof on required insurance

I. Identification of requested Preliminary Owner-Occupied Target Geographies in order of preference. (See Target Areas – Exhibit F)

PROJECT TIMELINE

The identified timeline for this project is expected to be **October 2022 to December 2024** with the potential to extend beyond this timeframe.

The Program Management fee shall not exceed \$5,000 on cases over \$15,000 or \$2,500 on cases less than \$15,000.

EVALUATION METRICS – EACH RFQ RESPONSE WILL BE EVALUATED IN ACCORDANCE WITH THE FOLLOWING:

URFA will assemble an evaluation committee to evaluate each timely response properly submitted by a Respondent. At the discretion of URFA, follow up interviews may be conducted with the highest-ranking Respondents as recommended by the evaluation committee prior to URFA making a final selection of the successful Consultant.

Criteria	Relative Weight
Respondent Qualifications	30
Respondent Experience managing homeowner rehab projects	30
Work with Government Agencies	15
Professional Liability Errors and Omissions Policy	15
Respondent’s Financial Strength	10

URFA will select one or more firms (not to exceed 8 firms) to be listed as Participating Program Manager Respondents based upon the criteria specified above. In the event of a tie the tying Respondents will be selected based upon criteria including but not limited to years of handling home quality standard inspections.

On or about **September 30, 2022**, URFA will send a notice of acceptance (the “Notice of Acceptance”) to each Respondent selected to participate in the Program. The Notice of Acceptance shall specify, among other things:

1. The date on which the Program will begin;
2. Acceptance Period; and
3. The date upon which the Program Manager may begin participation.

No later than **5:00 p.m. on October 7, 2022**, selected Respondents shall deliver to URFA:

1. One executed signature page of the Notice of Acceptance; and
2. A final list of name and contact information of all working for the firm to include, but not limited to, email address, the firm location and phone numbers.

THE DESCRIPTIONS OF THE TERMS OF THE PROGRAM HEREIN AND IN THE ATTACHED PROGRAM SUMMARY ARE QUALIFIED IN THEIR ENTIRETY BY THE OFFER, THE AGREEMENT AND THE ACCOMPANYING EXHIBITS. INVEST ATLANTA/URFA RESERVES THE RIGHT TO REJECT ANY AND ALL APPLICATIONS OR PARTICIPANTS.

INVEST ATLANTA/URFA RESERVES THE RIGHT TO REJECT ANY AND ALL RESPONSES, TO AMEND THE REQUEST FOR PROPOSALS AND THE PROCESS ITSELF, OR TO DISCONTINUE THE PROCESS AT ANY TIME.

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

TIMELINE AND DELIVERABLES

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

Action Required	Due Date
RFQ Issued	August 12, 2022
Deadline to submit Written Questions	August 19, 2022
Responses to Written Questions Posted	August 26, 2022
Deadline to submit Response to RFQ	September 9, 2022
Selected Respondents Notified	September 30, 2022
Deadline for selected Respondents to submit acceptance letters to URFA	October 7, 2022
2022-2024 Participating Respondents can participate in URFA programs	October 10, 2022

Questions regarding this RFQ must be in writing (via regular mail or email) and received by no later than **5:00 p.m.** August 19, 2022, to: Homeownership@investatlanta.com

All responses to this RFQ (each, a “Response”) must be submitted via email by no later than **5:00 p.m., September 9, 2022**. Responses received after this time and date will not be considered. Responses must be sent to: Homeownership@InvestAtlanta.com

DIVERSITY, EQUITY & INCLUSION POLICY

Invest Atlanta requires, 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 RFQ 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, email: bbell@atlantaga.gov.
- **Small Disadvantaged Business (SDB)** certification by the U.S. Small Business Administration provided they reflect certification based upon minority or women-owned status.

A firm selected by the Respondent to jointly respond to this RFP can only satisfy one of the three categories. The same firm may not, for example, be listed for participation as a MBE organization and a SBE organization even if the level of participation exceeds each category’s goal. All firms must be registered or certified prior to the submittal of the Response. A Respondent is at risk in that there may be an issue of time to certify or register if it intends to use a firm that is not certified or registered at the time the Response is submitted. Invest Atlanta is an Equal-Opportunity Employer.

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 (**Exhibit 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 sub-contracts (**Exhibit C-2**).

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.

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 RFQ 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 RFQ. Invest Atlanta reserves the right to request oral interviews with one or more teams, and request proposal clarifications or additional information.

All proposals and supporting materials as well as correspondence relating to this RFQ 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 cannot 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.

PROFESSIONAL SERVICES INSURANCE REQUIREMENTS

The Contractor shall provide URFA with a certified copy of each of the policies or binders, electronically, indicating the existence of the policies 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 Contractor 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.

- General Liability:
 - Limits:
 - \$1M per occurrence
 - \$2M 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
 - Urban Residential Finance Authority of the City of Atlanta, ISAOA/ATIMA as Additional Insured regarding ongoing and completed operations
 - Primary and Noncontributory language in favor of Urban Residential Finance Authority of the City of Atlanta, ISAOA/ATIMA
 - Waiver of Subrogation in favor of Urban Residential Finance Authority of the City of Atlanta, ISAOA/ATIMA: and
 - Notice of cancellation (30 days, except 10 days for nonpayment) to URFA
- 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 dba Invest Atlanta, ISAOA/ATIMA; and
 - Notice of cancellation (30 days, except 10 days for nonpayment) to URFA
- Professional Liability/Errors and Omissions 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;
 - Primary and Noncontributory language in favor of Urban Residential Finance Authority of the City of Atlanta, ISAOA/ATIMA;
 - Waiver of Subrogation in favor of Urban Residential Finance Authority of the City of Atlanta, ISAOA/ATIMA; and

- Notice of cancellation (30 days, except 10 days for nonpayment) to URFA
- Umbrella / Excess Liability:
 - Limits:
 - \$ 5M per occurrence
 - \$ 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, Employers Liability, and Professional Liability/Errors and Omissions Liability must be included on the schedule of underlying coverages;
 - Follow form language
 - The Atlanta Development Authority dba Invest Atlanta, ISAOA/ATIMA as Additional Insured
 - Primary and Noncontributory language in favor of Urban Residential Finance Authority of the City of Atlanta, ISAOA/ATIMA
 - Waiver of Subrogation in favor of Urban Residential Finance Authority of the City of Atlanta, ISAOA/ATIMA; and
 - Notice of cancellation (30 days, except 10 days for nonpayment) to URFA

EXHIBIT A
PROGRAM MANAGER SCOPE OF SERVICES

For the Owner-Occupied Rehabilitation Program (the “OOR Program”), the selected Program Manager would be responsible for the day-to-day operations, implementation, and reporting of the Program and will report directly to URFA “Program Administrator” and the City of Atlanta Office of Housing and Community Development (collectively the “Program Sponsors”). The responsibilities of the Program Manager include, but are not limited to, the following:

- 1) Management of intake applications from interested homeowners. Interested homeowners that meet the eligible criteria will be identified as “Program Participants.”
- 2) The Program Manager will manage the Program Participant through the owner-occupied rehabilitation process, including scheduling and coordination of legal title services to identify any title or encumbrance issues before any Construction Services begin;
- 3) Provide Construction Services to the Program Participant for review and consent including a presentation of a detailed Scope of Construction Services prepared in conjunction with a Certified Home Inspector for each Program Participant’s home per established rehabilitation standards and prioritization of repairs as outlined herein to the Program Participant for review and consent;
- 4) Selects Contractors from the list Qualified Contractors for bidding on the proposed Scope of Construction Services and reviews/evaluates bids for appropriateness and agreement with the Scope of Construction Services, Program Guidelines, and Insurance Requirements;
- 5) Presents appropriate and acceptable bids, Scope of Construction Services, total budget (inclusive of loan closing costs, eligible temporary relocation costs, etc.) to Program Participants for review and consent to proceed;
- 6) Schedules Contractor/Program Participant Agreement execution;
- 7) Submits Program Participant’s eligibility documentation, executed Contractor/Homeowner Agreement, and total budget (inclusive of loan closing costs, eligible temporary relocation costs, etc.) to Program Administrators for concurrence;
- 8) Schedules program loan closings and provides assigned Contractor(s) with Notice to Proceed post-closing;
- 9) Monitors construction progress, completion, schedule, and quality via Certified Construction Inspectors;

- 10) Maintains communication with Program Participants during construction period and manages temporary relocation, as applicable;
- 11) Receives and reviews periodic construction inspection reports and reviews and approves all requisitions for payment/reimbursement;
- 12) Submits construction inspection report and corresponding requisitions to URFA for funding;
- 13) Approves and reviews all completed work with Program Participants upon construction completion obtaining Program Participants acknowledgement of project completion;
- 14) Submits final construction inspection reports, Program Participants acknowledgement of completion, and final requisition for payment of remaining funds to URFA; and
- 15) Maintains appropriate files and records of Program activities.

In regards to the Construction Services, the Program Manager will perform or have its designated agent perform the following tasks:

- 1) Program Manager or its designated agent inspects Program Participant's home to determine scope of services and prioritization of repairs.
- 2) Program Manager or its designated agent identifies any mold/LBP remediation needs and assigns certified remediation contractor for inclusion within the proposed rehabilitation budget and scope of services.
- 3) Program Manager obtains at least 3 bids from an approved General Contractor (GC) in accordance with the scope of services, following the provided Contractor Selection Criteria.
- 4) Program Manager selects General Contractor for home rehabilitation assignment with Program Participants input.
- 5) Program Manager reviews the rehabilitation costs with GC and reviews rehabilitation budget scope of services with Program Participant.
- 6) Program Manager finalizes rehabilitation budget, which includes a line-by-line item budget listed in order of repair priority. The Program Manager should ensure the budget is comprehensive and includes the following:
 - a. Construction Costs

- b. Contractor's Fee
 - c. Construction Management Fee
 - d. Contingency reserve
 - e. Exterior beautification
 - f. Estimated closing costs
- 7) Program Manager submits rehabilitation budget to Program Administrator for confirmation of resource allocation.
- 8) The Program Administrators review the proposed rehabilitation budget and notify the Program Manager of acceptance or rejection of the submitted budget within 48 hours of receipt. If rehabilitation budget is rejected, Program Administrators must provide questions and/or rationale to Program Manager. Program Manager shall have 48 hours to respond and submit a revised budget.
- 9) Program Administrators shall confirm resource allocation with Program Manager.
- 10) Program Manager meets with GC and Program Participant and perform the following tasks:
- a. Provide an overview of the final rehabilitation budget and scope of repairs to the Program Participant;
 - b. Obtain written acknowledgement of final rehabilitation budget and scope of repairs by Program Participant;
 - c. Obtain written acknowledgement of loan amount and residency requirements by Program Participant; and
 - d. Ensure that GC and Program Participant execute the Contractor Agreement.
- 11) Upon execution of the Contractor Agreement, the following occurs:
- a. Program Manager provides GC "Notice to Proceed."
 - b. GC pursues necessary permits.
 - c. Simultaneously to permits, the Program Manager coordinates the following:

- i. Delivery of required “GC/Program Participant documents” to closing attorney for preparation of loan documents. These GC/Program Participant documents shall include, but are not limited to:
 1. Executed GC/Program Participant Contract;
 2. Program Participant acknowledgement of rehabilitation budget and scope of repairs;
 3. Program Participant acknowledgement of loan amount and residency requirements; and
 4. Scheduling and arrangements for temporary relocation (as applicable).
- 12) Program Manager schedules pre-existing conditions inspection with approved Construction Inspector. Such inspection shall be scheduled within 72 hours of initial contact by Program Manager.
- 13) Program Manager shall contact closing attorney to schedule the loan closing and Program Manager will subsequently notify Program Administrators of the closing date.
- 14) Closing attorney follows existing URFA processes to close loan which are as follows:
 - a. Closing attorney sends to URFA the “closing documents” no later than 48 hours prior to scheduled closing.
 - b. The closing documents include:
 - i. Closing Statement and Instructions (inclusive of any wiring instructions);
 - ii. Preliminary HUD-1 Statement;
 - iii. Draft of Deferred Forgivable Loan Note;
 - iv. Draft of Deed to Secure Debt;
 - v. Draft Title Insurance Policy for 2nd/3rd/ or 4th Mortgage; and
 - vi. Executed GC/Program Participant Contract.

- 15) Program Administrators will review the closing documents, communicate any corrective changes or comments to the closing attorney as needed, and deliver documents to be held in escrow pending closing to the attorney within the 48-hour period.
- 16) Post-closing, closing attorney shall deliver to URFA executed originals of the closing documents described above as well as a certified copy of the security deed and the recorded security deed.
- 17) Within 48 hours of loan closing, Program Manager or its designated agent will visit the home to ensure repair and rehabilitation construction has been commenced by the GC(s).
- 18) Program Manager should monitor construction, schedule construction inspections, review the GC's requisition and coordinate submission of requisitions to Program Administrators. Requisitions should include the following items:
 - a. General Contractor's SOV Construction Form accompanied by Schedule of Values (Construction Costs);
 - b. Invoices for all other "soft cost" expenditures (Non-construction Costs);
 - c. Invoices and check copy or canceled check for all reimbursable expenses paid to third parties;
 - d. Construction Lien Waivers (Hard Costs Only);
 - e. Construction Inspection Report as obtained and provided by Program Manager (via hard copy or electronic format);
 - f. Completed and Executed Requisition Form;
 - g. Payment Instructions Form; and
 - h. Contractor Affidavit Under O.C.G.A. 13-10-91 (b) (1) (Exhibit "C").
- 19) Program Administrators will employ the following process and procedure when approving requisition draws:
 - a. Requisitions will be reviewed and processed within five (5) business days of a completed submission.
 - b. No more than two (2) disbursement requests will be processed within a thirty (30) day period for each home.

- c. Only one (1) disbursement request for each home may be submitted every fourteen (14) days.
- d. Complete and accurate requisitions submitted on Monday, Tuesday, or Wednesday will be reviewed and processed for payment by Thursday or Friday pending satisfactory review.
- e. Complete and accurate requisitions submitted on Thursday or Friday will be processed for payment on the following Thursday or Friday.
- f. Payment by wire or ACH is preferred by Program Administrator; if a check is requested Payee information must be confirmed and delivery of check pre-arranged by contacting the Transaction Services Manager (Vickey Roberts – vroberts@investatlanta.com; 404-614-8305).

NOTE: All complete, accurate, documented, and supported requisitions will be processed and paid within 7 – 14 business days.

EXHIBIT B SAMPLE GENERAL CONTRACTOR SELECTION CRITERIA

Selection of a general contractor in the Housing Opportunity Bond Owner-Occupied Rehabilitation Program (“OOR Program”) is the responsibility Program Manager with acceptance and acknowledgement from the homeowner. The selection of a general contractor in the OOR Program will follow the Program Manager’s procurement process, with bidding, awards and contract execution coordinated by the Program Manager. Rehabilitation work will be undertaken only through a written tri-party contract between the contractor, Program Manager, and the homeowner receiving the assistance.

The Program Manager will obtain a minimum of three (3) bids on the planned repairs, based on the preliminary work write-up prepared by the Program Manager or it’s designee in accordance with the guidelines provided for eligible repairs and prioritization. The bids are to be returned to the designated location on the specific due date. The Program Manager will record the total amount of the bid and the date and time the bid was received. The Program Manager will evaluate the bid documents to determine which bids are eligible. Bids are considered eligible when the following conditions are met:

- 1) The submitting contractor currently meets all program requirements and is not debarred or suspended from participating in the OOR Program.

- 2) The contractor is not on probation as described in the following Section C.
- 3) The bid is received by the Program Manager or its designated agent prior to the bid submission deadline date and time stated in the bid documents.
- 4) The total amount of the bids is within 15% of the total cost listed on the initial work write-up prepared by the Program Manager or its designee and does not exceed the maximum dollar limits of the program.

If none of the bids solicited are within 15% of the preliminary work write-up initially or by negotiation, the bid must be rejected and other bids must be obtained that are within the specified cost limits. Any bids received outside of the estimated range of housing rehabilitation will be rejected and the bidder will be notified in writing. Contracts will not be awarded until the Program Manager or its designee has completed its contractor certification and the contractor has met the requirements.

Contractors in the OOR Program will only be able to have one contract in progress at any time until they have successfully completed at least three (3) contracts. Successful completion of three contracts removes this restriction and the contractor may have more than one rehabilitation project at any given time.

When an acceptable, eligible bid has been secured and the general contractor is selected, the contractor is notified that they must furnish the Program Manager or the implementing agency with a current *Certificate of Insurance*, a completed *Contractor Information Form*, and a statement concerning the non-use of lead-based paint. Information will be verified for accuracy and completeness of the forms submitted by the contractor. If all submitted documents are in order and the contractor is not on the list of parties debarred or suspended from participation in federal procurement or non-procurement programs or if the contractor is not suspended or debarred from participation in the City of Atlanta HOME Owner-Occupied Rehabilitation Program or the OOR Program, the Program Manager or its designee will proceed with the preparation of contract documents.

Participating general contractors must obtain all permits that are required to perform the authorized scope of work. The contractor must comply with all the regulations governing the issuance and inspections of any work permitted. Furthermore, all general contractors and subcontractors must possess trade or other professional licenses as may be required by the State of Georgia and the City of Atlanta in order to perform such functions that are subject to licensing. Each contract between a contractor, Program Manager, and a homeowner shall contain language denying participation to contractors who fail to perform in a satisfactory manner.

Contractors proven to provide poor service or quality of workmanship and/or who exhibit behavior that is not professional in the opinion of the Program Manager or Program Administrator will be debarred or suspended from any future contracts with the OOR Program.

Contractors will be informed of this decision in writing with the opportunity to appeal to the Program Manager or his/her designee.

Contractors will be required to have criminal background checks.

This section sets forth requirements and procedures with respect to contractor qualifications and construction contracts for housing rehabilitation assistance.

- A. **CONTRACTOR** – The term “Contractor” applies to the firm bidding on work or receiving an award. The firm must hold a current Georgia General Contractor license. Contracts for Major System Repairs may be awarded to business vendors whose services are appropriate for the work begin done (i.e., roofing contractor, plumber or licensed electrician) but who may not necessarily be licensed general contractors. These vendors must have current licensure applicable to their specialty.
- B. **FINANCIAL CAPACITY** – Contractor must be able to demonstrate financial capacity to provide for their working capital needs. This may be evidenced by two-years financial statements, documents supporting trade lines of credit, or bank statements indicating access to lines of credit or cash on hand of \$10,000 or greater.
- C. **INSURANCE** – Before commencing work, the contractor shall submit to the Program Manager a current certificate of insurance as evidence of the coverage required.
 1. The contractor shall carry or require that there be carried Workers’ Compensation Insurance for all employees and those of subcontractor engaged in work at the site in accordance with Georgia State Workers’ Compensation Laws.
 2. The contractor shall carry during the life of the contract Property Damage Insurance in the amount of not less than \$100,000 to protect the contractor and subcontractor from claims for property damage which might arise from operations under their contract.
 3. The contractor shall carry or require that there be carried General Liability Insurance. The Program Manager and Program Administrator must be named as an additional insured under the general contractor’s protective coverage. General contractors or agents participating in the OOR Program must furnish the Program Manager, written notice of any change and/or cancellation of the required coverage no less than thirty (30) days before any such change is effective. Coverage will be verified by the Program Administrator the Program Administrator before contract execution.

- D. FORM OF CONTRACT – The contract documents to be executed by the homeowner and the general contractor will be prepared by the Program Manager or its designee after a preconstruction conference. At this preconstruction conference, the homeowner, Program Manager, and contractor will agree to the work condition, use of facilities and other construction related matters. Such documents must be fully executed prior to beginning the rehabilitation work. These contract documents shall state a specific date for commencement of the work, a specific date for completion of work, and a copy of the work write-up. An executed copy of the contract shall be furnished to the homeowner, contractor, and to the Program Manager or its designee.

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-1

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: _____

EXHIBIT C-2

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 _____, 2021

Notary Public

My commission expires: _____

EXHIBIT D
CERTIFICATION STATEMENT

It is understood that the information contained in this Request for Qualifications will be independently verified by Invest Atlanta/ URFA and will be relied upon by Invest Atlanta/URFA in selecting Respondents. We hereby certify, to the best of our belief and knowledge, that the information presented by the RFQ 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 _____, 2021_

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 Assistant Director of Compliance for Housing and Community Development, as part of the response.

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: _____



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 RFQ 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)	Any individual or entity that submits a Proposal in response to a RFQ. 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.

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.

- | | | |
|---|---------------------------------|--------------------------------|
| 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. | YES
<input type="checkbox"/> | NO
<input type="checkbox"/> |
| 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. | YES
<input type="checkbox"/> | NO
<input type="checkbox"/> |
| 4. Has the Respondent or any principal thereof, been charged with a criminal offense within the last ten (10) years? | YES
<input type="checkbox"/> | NO
<input type="checkbox"/> |
| 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. | YES
<input type="checkbox"/> | NO
<input type="checkbox"/> |
| 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: | YES
<input type="checkbox"/> | NO
<input type="checkbox"/> |
| (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? | YES
<input type="checkbox"/> | NO
<input type="checkbox"/> |
| (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
<input type="checkbox"/> | NO
<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
<input type="checkbox"/> | NO
<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
<input type="checkbox"/> | NO
<input type="checkbox"/> |
| a. directly or indirectly, had a business relationship with Invest Atlanta? | YES
<input type="checkbox"/> | NO
<input type="checkbox"/> |
| b. directly or indirectly, received revenues from Invest Atlanta? | YES
<input type="checkbox"/> | NO
<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
<input type="checkbox"/> | NO
<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
<input type="checkbox"/> | NO
<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
<input type="checkbox"/> | NO
<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
<input type="checkbox"/> | NO
<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
<input type="checkbox"/> | NO
<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
<input type="checkbox"/> | NO
<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
<input type="checkbox"/> | NO
<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
<input type="checkbox"/> | NO
<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: _____

EXHIBIT F

Preliminary Owner-Occupied Rehabilitation Target Geographies

OOR Target Area 1:

Council Districts 3*, 9, 10

*Excluding Westside TAD and Choice Neighborhoods footprint.

OOR Target Area 2:

Council Districts 1, 2, 5

OOR Target Area 3:

Council Districts 6, 7, 8

OOR Target Area 4:

Council Districts 4, 11, 12

