



Dannel P. Malloy  
*Governor*

STATE OF CONNECTICUT  
DEPARTMENT OF HOUSING



Evonne M. Klein  
*Commissioner*

**The State of Connecticut  
Department of Housing**

**Request for Proposals**

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**Technical Assistance/Development Consultant  
Limited Equity Cooperatives  
in the State-Sponsored Housing Portfolio**

**Key Dates:**

**Questions Due: June 20, 2014**

**RFP Submission Deadline: July 7, 2014**

**Contract Announcement: August 8, 2014**

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**I. STATEMENT OF OBJECTIVES**

Pursuant to this Request for Proposals (RFP), the State of Connecticut Department of Housing (DOH) is seeking proposals from individuals, entities or organizations prepared to provide technical assistance, training and development consultant assistance to the owners of various limited equity cooperatives in the State-Sponsored Housing Portfolio (SSHP). In 2012, State of Connecticut Governor Dannel Malloy committed \$300 million to revitalize the SSHP over a ten year period. The Department of Housing (DOH), along with the Connecticut Housing Finance Authority (CHFA), is responsible for the allocation of these investments and to ensure that these resources are judiciously utilized and leveraged to the greatest extent possible.

Limited Equity Cooperatives (LEC's) are a subset of the SSHP, and are those units specifically developed under the state program of the same name, and further described in [Section 8-214f](#) of the Connecticut General Statutes, and [Sections 8-214h-1 thru 8-214f-20](#) of the Regulations of Connecticut State Agencies. Many of these LEC's are experiencing administrative and technical assistance needs relevant to their organizational functionality, and/or require the assistance of a qualified development consultant in order to access these funds in the most effective and efficient way. Attached as Appendix A is a list of those LEC's that DOH intends to assist through this RFP.

In support of the Governor's commitment, CHFA recently conducted a 10-Year Capital Plan (the "Capital Plan") to assess the physical needs, operating performance and market conditions of the SSHP which recommended a roll out of investments, transactions and timing for the SSHP. This RFP is intended to support the recommendations of the Capital Plan with respect to the LEC's and to leverage available program resources to preserve and extend the useful life of this critical affordable housing stock.

The selected consultant will be expected to work with owners of the LEC properties to assist them in understanding their continued obligations under the Limited Equity Cooperative Program, the requirements of financial transactions with respect to capital improvement of their properties, and to guide them through the development, financing and rehabilitation process.

**II. SCOPE OF WORK**

The scope of work includes the following:

**A. Technical Assistance - Organizational:**

1. The consultant will work with the identified LEC's to ensure they are organizationally sound and operating in accordance with the program requirements of the Limited Equity Cooperative Program.
2. The consultant will identify training needs of members of the LEC's in order to ensure continued organizational compliance in accordance with the program requirements of the Limited Equity Cooperative Program.
3. The consultant will provide or arrange for the provision of training for the members of the LEC's in order to ensure continued organizational compliance in accordance with

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the program requirements of the Limited Equity Cooperative Program.

**B. Technical Assistance - Operational:**

1. The consultant will work with the identified LEC's to ensure they are operationally sound and financially stable in accordance relative to both income and expense potential with the program requirements of the Limited Equity Cooperative Program.
2. The consultant will identify training needs of members of the LEC's in order to ensure continued operational and financial stability in accordance with the program requirements of the Limited Equity Cooperative Program.
3. The consultant will provide or arrange for the provision of training for the members of the LEC's in order to ensure continued operational and financial stability in accordance with the program requirements of the Limited Equity Cooperative Program.

**C. Technical Assistance – Transitional:**

1. As part of the technical assistance process, if the consultant in consultation with DOH, CHFA and the members determines that an LEC cannot sustain itself organizationally and operationally, it will work with DOH, CHFA and the members to facilitate a transition to another form of affordable housing.

**D. Development Consultant Services:**

1. Financial Assistance
  - Identification of financing sources available for the recommended project for predevelopment and/or project development. (This should include but is not limited to Federal resources, State capital funds, municipal funding and funding available through the Federal Home Loan Bank.)
  - Identify and review leveraging opportunities, including, but not limited to, Energy rebates/incentives and local community initiatives.
  - Provide model budgets, proformas, timelines, and other necessary documentation.
  - With the members, develop the financing plan, capital stack and operating proforma to establish the project plan, consistent with the Capital Plan capital needs and recommendations.
  - Assist property owner in drafting a timeline for development from concept to completion of redevelopment.
2. Procurement Assistance
  - Help the members in drafting RFPs and drafting scopes of services.
  - Assist in identifying and selecting required services. Specifically, assist owner to:
    - Secure an architect to prepare Drawings and Specifications
    - Secure a State of CT licensed contractor
    - Secure Phase I ESA (Phase II if required) and Hazardous Materials Reports
    - Secure an Energy audit in accordance with CHFA Construction Guidelines:

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“Energy Conservation” including a Letter of Agreement (“LOA”) from utility company providing incentives/rebates for eligible measures.

**E. Term:**

The contract shall be effective for a period of three years commencing approximately September 1, 2014. The State shall have no obligation for costs incurred outside the contract period.

**III. AWARD CRITERIA**

All proposals will be evaluated using the following criteria:

1. Limited Equity Cooperative Experience and Capacity (20%) – Provide an overview of the respondent and the qualifications of staff providing the proposed scope of services relative to sections A, B and C of the above scope. Identify the intended engagement of any subcontractors should the RFP be awarded. Identify similar services provided by the respondent and its subcontractors, if any, and describe how that experience directly increases the capacity of the respondent to undertake the scope of work described in sections A thru C, above. Provide a summary of key strengths and qualifications of the respondent, or any subcontractors, and your ability to provide the scope of services described in sections A thru C, above.
2. Development Consultant Experience and Capacity (20%) – Provide an overview of the respondent and the qualifications of staff providing the proposed scope of services relative to section D of the above scope. Identify the intended engagement of any subcontractors should the RFP be awarded. Identify similar services provided by the respondent and its subcontractors, if any, and describe how that experience directly increases the capacity of the respondent to undertake the scope of work described in section D of the above scope. Provide a summary of the respondent’s experience in working with local utility companies and third party energy consultants to secure project rebate/incentives for properties.
3. Program Plan (10%) – Provide a narrative description of the specific program plan and services to be provided to the selected LEC’s. Narrative should address all of the scope of services identified in Section II above.
4. Timeliness to Initiate Technical Service Provision (15%) – Provide a project plan with timelines showing when the respondent can begin providing each of services identified in the proposed scope of work, and to what portion of the identified LEC’s the respondent can assist over the initial 3 year period.
5. Budget (30%) – Provide a standard budget detailing the cost of services for each section A thru D of the above scope on a “per property” basis. The budget should identify the total number of properties to be assisted during the initial term.
6. Minority/Women Owned Business (5%) – DOH encourages all entities to make a good faith effort to hire and/or utilize veterans, minority- and women-owned businesses.

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Indicate what efforts the respondent will make in this area relative to any new hires or in the selection of subcontractors.

Proposals submitted in response to this RFP will be evaluated based the quality and the reasonableness of the responses for each item above.

**IV. EVALUATION PROCESS**

A screening committee consisting of DOH and CHFA staff will review all proposals. If at least three qualified proposals are received, the screening committee will evaluate the proposals based on the weighted award criteria described above and submit its evaluation to the Commissioner. The Commissioner shall decide which respondent(s) DOH will seek to negotiate and ultimately contract with, if any.

**V. PROPOSAL FORMAT**

Proposals should be submitted as follows:

1. One (1) complete original clearly marked "**ORIGINAL**", with all required materials having original signatures, where applicable;
2. Two (2) copies, with all required materials; and
3. All materials must be bound (3 ring binders, etc.) and tabbed by section and placed in the same order as they are referenced in the proposal. Each tabbed section must include all relevant materials for that section, including proposal materials.

**VI. INSTRUCTIONS**

1. Completed proposals and all materials must be hand delivered or mailed via a nationally-recognized overnight carrier to: Laura McMenamin, DOH, 505 Hudson Street, 2<sup>nd</sup> Floor, Hartford, CT 06106-7106. **All proposals must be received at DOH on or before 4:00 p.m. on Monday, July 7, 2014.**
2. Any proposal received after the established deadline will not be considered.
3. All responses to this **Request for Proposals** must conform to these instructions. Failure to conform may be considered appropriate cause for rejection of the response.
4. An individual authorized to act on behalf of the respondent must submit the proposal. The proposal must also provide the name, title, address and telephone number for individuals authorized to negotiate and contractually bind the organization, and for those who may be contacted for the purpose of clarifying the information provided in the proposal. This information should also be included in the transmittal letter.

**VII. QUESTIONS**

All questions related to this RFP should be submitted to Michael Santoro by e-mail at [michael.santoro@ct.gov](mailto:michael.santoro@ct.gov) no later than noon (EST) on Wednesday, June 20, 2014. Each question should begin by referencing the RFP page number and section number to which it relates. Answers to all questions received by the deadline above will be posted on DOH's website on a rolling basis at [www.ct.gov/doh](http://www.ct.gov/doh).

**VIII. REVISIONS TO THE RFP**

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Only written modifications to this RFP issued in the form of one or more addenda will be considered to be alterations to this RFP. Oral comments are not binding. An Addendum may be issued by DOH for any revisions, modifications, clarifications or alterations to the RFP.

**IX. ERRORS**

If a respondent discovers an error after submitting its response, but prior to the response submission deadline, the respondent may request that the response be withdrawn. This request must be submitted in writing and signed by an officer or authorized representative of the firm. If the request is approved, the respondent may submit a revised response as long as it is received prior to the response submission deadline.

No alterations or corrections to the responses are permitted after the responses are opened. If an error is discovered after the response opening but before contract award, the respondent may request that its response be withdrawn. An officer or authorized representative of the firm must submit this request in writing. The decision to permit withdrawal of the response will be at the discretion of the Commissioner.

**X. SUBCONTRACTING OR ASSIGNMENT**

In the event a respondent proposes to subcontract for some or all of the services to be performed under the terms of the contract award, it shall state so in its proposal and attach for approval a list of said subcontractors and an itemization of the products and/or services to be supplied by them. Nothing contained in the specifications shall be construed as creating any contractual relationship between any such subcontractor and DOH.

Except as expressly proposed by a respondent in its proposal, the agreement to be entered into between the respondent selected under this RFP, if any, and DOH, may not be subcontracted or assigned by the respondent, in whole or in part, without the prior written consent of DOH. Such consent, if granted, shall not relieve the respondent its responsibilities under the contract, except as otherwise expressly provided therein.

**XI. RIGHT TO INSPECT FACILITIES AND RECORDS**

DOH reserves the right to inspect the respondent's establishment before making an award, for the purposes of ascertaining whether the respondent has the capacity to perform the proposed scope of service.

DOH may request references during the evaluation, and such references may be contacted to assist DOH in making a contract award that is most advantageous to DOH.

**XII. CONDITIONS**

Any prospective Administrator must be willing to adhere to the following conditions and must positively certify to adhere to them in its proposal:

1. **Acceptances or Rejection by the State.** The State reserves the right to accept or reject any or all proposals submitted for consideration under this RFP.
2. **Conformance with Statutes.** Any contract awarded as a result of this RFP must be in full conformance with statutory requirements of the State of Connecticut and the Federal Government.
3. **Ownership of Proposals.** All materials are considered public information with the exception of personal and financial information. Following the execution of one or more contracts in connection with this RFP, proposals will be available for review upon

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request. All proposals in response to this RFP will be the sole property of the State and subject to the provisions of Connecticut's Freedom of Information Act, CGS §1-200 et seq.

4. **Ownership of Subsequent Products.** Any product, whether acceptable or unacceptable, developed under a contract awarded as a result of this RFP will be sole property of the State unless stated otherwise in the contract.
5. **Timing and Sequence.** Timing and sequence of events resulting from this RFP will ultimately be determined by the State.
6. **Stability of Proposed Prices.** Any price offerings must be valid for a period of 90 days from the due date of the proposals.
7. **Oral Agreements.** No contract, unless it shall be in writing, executed by an authorized representative of DOH following the obtaining of all necessary approvals and in accordance with all applicable law, shall be binding on DOH. No oral agreement or arrangement made with DOH or any DOH employee shall be binding on DOH.
8. **Amending or Canceling Requests.** The State reserves the right to amend or cancel this RFP.
9. **Rejection for Default or Misrepresentation.** The State reserves the right to reject any proposal if any proposed subcontractor is in the default of any prior contract with the state or for any misrepresentation.
10. **State's Clerical Errors in Awards.** The State reserves the right to correct inaccurate awards resulting from its clerical errors.
11. **Rejection of Qualified Proposals.** Proposals are subject to rejection in whole or in part if they limit or modify any of the terms, conditions and/or specifications of this RFP.
12. **Presentation of Supporting Evidence.** Any respondent, if requested, must be prepared to present evidence of experience, ability, service capacity, and financial standing.
13. **Changes to Proposal.** Except as otherwise permitted by DOH, no additions or changes to a proposal will be allowed after submittal.
14. **Collusion.** By responding, the respondent implicitly states that its proposal is not made in connection with any competing respondent submitting a separate response to this RFP, and is in all respects fair and without collusion or fraud. It is further implied that the respondent did not participate in the RFP development process, had no knowledge of the specific contents of the RFP prior to its issuance, and that no employee of DOH participated directly or indirectly in the respondent's proposal preparation.
15. **EEO-4 Form.** The proposal shall include a copy of the company's latest EEO-4 report as well as a copy the respondent's equal employment policy statement.

**XIII. CONFLICT OF DOCUMENTS**

Should any of the terms of any documents connected to the offer, acceptance, supply of goods, performance of services, and/or any verbal representations be in conflict with this RFP, the terms of the RFP shall supersede all other documents and/or verbal representations. The only exception would be if DOH amends this RFP.

**XIV. SEVERABILITY**

The invalidity of any portion of this RFP will not and shall not be deemed to affect the validity of any other provision. In the event that any provision of this RFP is held to be invalid, the parties agree that the remaining provisions shall be deemed to be in full force and effect as if they had been executed by both parties subsequent to the expungement of the invalid provision.

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**XV. RIGHTS RESERVED BY THE STATE**

DOH reserves the right to modify or waive any requirement, condition or other term set forth in this RFP, to request additional information at any time from one or more respondents, to select any number of proposals submitted in response to the RFP or to reject any or all such proposals.

**XVI. NOTIFICATION OF AWARD**

The selected respondent(s), if any, will receive a Notice of Award. The Notice may contain certain contingency requirements that must be satisfied within a designated time frame. Failure to comply with all provisions of the Notice of Award will disqualify that respondent and the award may be directed to another respondent.

**XVII. PRICE AND PAYMENT**

1. Unless otherwise noted by DOH, all salaries and other budgetary information quoted shall be firm through execution of a contract and shall not be subject to increase during the period of such contract, unless agreed upon by both parties in writing. The Commissioner must be notified in writing of any price reduction within five (5) business days of the effective date.
2. As the compensation contemplated under this RFP includes both a fee based on performance and a fixed monthly fee, payment will be made both in the form of quarterly advances based upon anticipated expenditures when equivalent funds can't be deducted from loan repayment proceeds and on a periodic basis based on demonstrated performance metrics. DOH will pay for services actually provided, as verified by periodic financial statements, and programmatic reports and updates.



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**RESPONDENT INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Website Address: \_\_\_\_\_

FEIN No: \_\_\_\_\_ State Sales Tax No: \_\_\_\_\_

If you are using a **THIRD PARTY** to write this proposal, please provide the following:

Consultant/Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Website Address: \_\_\_\_\_

**NARRATIVE DESCRIPTION OF SERVICES TO BE PROVIDED**

- 2.1. Provide up to a 4-page description of the proposed activity. **See Section III Award Criteria, Item 3. Attach as Exhibit 2.1.**

**QUALIFICATIONS AND CAPACITY**

- 3.1. Describe the nature of your organization, staffing and overall qualifications to perform and complete each section of the Scope of Work. **See Section III Award Criteria, Item 1 and 2. Attach as Exhibit 3.1.**
- 3.2. Please identify any relevant past experience of your organization that demonstrates its fitness to perform the proposed scope of work, including a description of the experience(s), timeframe in which the prior work was completed, special skills associated with performing that work and any other relevant information. **See Section III Award Criteria, Item 1 and 2. Attach as Exhibit 3.2.**
- 3.3. Provide a description of the Program Plan intended to implement the full scope of services identified in **Section II Scope. See Section III Award Criteria, Item 3. Attach as Exhibit 3.3.**
- 3.4. Please provide a signed copy of CHRO "Notification to Responders" form and information addressing (a) through (e) on the form. **Attach as Exhibit 3.4.**
- 3.5. Please provide a copy of your Equal Employment Opportunity Policy Statement. **Attach as Exhibit 3.5.**
- 3.6. Please attach the last three years' audited financial statements (include notes and projections). If audited statements do not exist, attach last three years' federal tax returns. **Attach as Exhibit 3.6.**
- 3.7. Please attach certificate(s) of insurance showing the current coverage. **Attach as Exhibit 3.7.**
- 3.8. **Is the respondent, any principal or any affiliate of the respondent is a defendant of the respondent in any litigation?**  YES  NO  
If yes, indicate the nature and status of the litigation. **Attach as Exhibit 3.8.**

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**TIMELINESS TO INITIATE AND IMPLEMENT SERVICE PROVISION**

- 4.1** Please indicate timeframes expected to initiate and implement the proposed Program Plan. **See Section III Award Criteria, Item 4. Attach statement as Exhibit 4.1.**

**PROPOSED BUDGET**

- 5.1** Provide a standardized budget detailing the cost of services for each section A thru D of the above scope on a “per property” basis. The budget should identify the total number of properties to be assisted during the initial term. **See Section III Award Criteria, Item 5. Attach budget as Exhibit 5.1.**

**MINORITY/WOMEN OWNED BUSINESS**

- 6.1** Please indicate if your organization is a minority, women or veteran owned business by completing Exhibit B, if applicable. Note: DOH encourages all entities to make a good faith effort to utilize small, minority, women and veteran owned businesses. **See Section III Award Criteria, Item 6. Attach completed form as Exhibit 6.1.**

- 6.2** Please attach the respondent's equal employment policy statement as **Exhibit 6.2.**

**SUBCONTRACTOR CERTIFICATION FORM**

- 7.1** Please complete the Subcontractor Certification form, Exhibit C, if applicable. **Attach statement as Exhibit 7.1.**

**RESPONDENT CERTIFICATION**

It is hereby represented by the respondent (undersigned) as an inducement to DOH to consider the proposal, that to the best of my knowledge and belief, no information or data contained in the proposal or in the attachments are in any way false or incorrect, and that no material information has been omitted, including the financial statements. The respondent (undersigned) agrees that banks, credit agencies, the Connecticut Department of Labor, the Connecticut Department of Revenue Services, and other references are hereby authorized now, or any time in the future, to give DOH of any and all information in connection with matters referred to in this proposal.

Certifying Representative:

1. Type Name and Title: \_\_\_\_\_

2. Signature: \_\_\_\_\_

3. Date: \_\_\_\_\_

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**Attachment A**

<b>Project Name</b>	<b>Address</b>	<b>Municipality</b>	<b>Units</b>
Amistad Court Cooperative	165-171 Westland Street	Hartford	14
Brace Dale Cooperative	91-93 Brace Road	West Hartford	4
Cherry St Cooperative	115-125 Cherry Street	Waterbury	6
Cobbs Mill Crossing Cooperative	15 Cobbs Mill Lane	Glastonbury	32
Common Thread Cooperative	46 Saint James Street	Manchester	16
Flagg Road	30 Flagg Road	West Hartford	10
Greenfield Village Coop Assoc.	41A Marshall Road 146-160 Barbour Street (PO Box 2695)	Rocky Hill	10
Harrington Place Cooperative	2695)	Hartford	18
Lawrence Crest Co-op	30 Lawrence Street	Waterbury	13
Patchogue Place Cooperative	20 Patchogue Place	Westbrook	12
Pine Grove Manor, Inc.	15 Grove Street	Enfield	8
Pleasant St Co-op	38-60 Pleasant Street	Enfield	12
Rehoboth Place Cooperative	39-49 Vine Street	Hartford	15
Riverside School Cooperative	45 Riverside Avenue	Torrington	12
Rose Garden Cooperative	417-427 Garden Street	Hartford	8
Sheldon Common I Co-op	110 Martin Street	Hartford	7
Sheldon Common II Co-op	120-122 Martin Street	Hartford	2
South Main St Co-op			
Willow Brook Estates Condo	472 South Main Street	New Britain	10
Tannery Brook Cooperative	21 Tannery Brook Road	Litchfield	16
Villa Coqui Cooperative	71-73 Chestnut Street	Hartford	13

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**EXHIBIT B (3.4)**

**NOTIFICATION TO RESPONDERS**

The contract to be awarded is subject to contract compliance requirements mandated by Sections 4a-60 and 4a-60a of the Connecticut General Statutes; and, when the awarding agency is the State, Sections 46a-71(d) and 46a-81i(d) of the Connecticut General Statutes. There are Contract Compliance Regulations codified at Section 46a-68j-21 through 43 of the Regulations of Connecticut State Agencies, which establish a procedure for awarding all contracts covered by Sections 4a-60 and 46a-71(d) of the Connecticut General Statutes.

According to Section 46a-68j-30(9) of the Contract Compliance Regulations, every agency awarding a contract subject to the contract compliance requirements has an obligation to “aggressively solicit the participation of legitimate minority business enterprises as responders, contractors, subcontractors and suppliers of materials.” “Minority business enterprise” is defined in Section 4a-60 of the Connecticut General Statutes as a business wherein fifty-one percent or more of the capital stock, or assets belong to a person or persons: “(1) Who are active in daily affairs of the enterprise; (2) who have the power to direct the management and policies of the enterprise; and (3) who are members of a minority, as such term is defined in subsection (a) of Section 32-9n.” “Minority” groups are defined in Section 32-9n of the Connecticut General Statutes as “(1) Black Americans . . . (2) Hispanic Americans . . . (3) persons who have origins in the Iberian Peninsula . . . (4) Women . . . (5) Asian Pacific Americans and Pacific Islanders; (6) American Indians . . .” An individual with a disability is also a minority business enterprise as provided by Section 32-9e of the Connecticut General Statutes. The above definitions apply to the contract compliance requirements by virtue of Section 46a-68j-21(11) of the Contract Compliance Regulations.

The awarding agency will consider the following factors when reviewing the responder’s qualifications under the contract compliance requirements:

- (a) The responder’s success in implementing an affirmative action plan;
- (b) The responder’s success in developing an apprenticeship program complying with Sections 46a-68-1 to 46a-68-17 of the Connecticut General Statutes, inclusive;
- (c) The responder’s promise to develop and implement a successful affirmative action plan;
- (d) The responder’s submission of employment statistics contained in the “Employment Information Form”, indicating that the composition of its workforce is at or near parity when compared to the racial and sexual composition of the workforce in the relevant labor market area; and
- (e) The responder’s promise to set aside a portion of the contract for legitimate minority business enterprises. See Section 46a-68j-30(10)(E) of the Contract Compliance Regulations.

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The undersigned acknowledges receiving and reading a copy of the "Notification to Responder's form.

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**\* INSTRUCTION: responder must sign acknowledgement below, and return acknowledgment to DOH along with response proposal.**

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

On behalf of:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RFP Name: \_\_\_\_\_

**CERTIFICATE OF CORPORATION**

I, \_\_\_\_\_ certify that I am the Secretary of the Corporation named in the foregoing instrument; that I have been duly authorized to affix the seal of the Corporation to such papers as require the seal; that \_\_\_\_\_, who signed said instrument on behalf of the

Corporation was then \_\_\_\_\_ of said Corporation; that said instrument was duly signed for and in behalf of said Corporation by authority of its governing body and is within the scope of its Corporation powers.

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**EXHIBIT B (6.1)**

**MINORITY/WOMEN/VETERAN-OWNED BUSINESS CERTIFICATION**

Complete Legal Name of Business: \_\_\_\_\_

Headquarters

Address: \_\_\_\_\_  
 Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Does your firm meet the following definition of a minority business enterprise (MBE)?**  
 YES  NO

**A minority business enterprise (MBE) is defined as:** A small business with at least 51% ownership by one or more minority person(s)\* who exercise operational authority over the daily affairs of the business, has the power to direct the management, policies and receives beneficial interests of the business.

\* Who is considered a minority? A person(s) who is Black, Hispanic, Asian, American Indian, has origins in the Iberian Peninsula, a woman, and an individual with a disability according to the Americans with Disabilities Act - see program information for more detail.

Date Business was first established: \_\_\_/\_\_\_/\_\_\_ Total Number of employees \_\_\_\_\_

**Type of Business (Check only one)**

<input type="checkbox"/> Sole Proprietorship	Date Established	___/___/___
<input type="checkbox"/> General Partnership	Date of Partnership	___/___/___
<input type="checkbox"/> Limited Liability Partnership	Date of Partnership	___/___/___
<input type="checkbox"/> Corporation	Date of Incorporation	___/___/___
<input type="checkbox"/> Limited Liability Company (LLC)	Date of LLC	___/___/___

Number of years company has been owned and managed by present owner: \_\_\_\_\_

Identify the Principal(s) and/or Officer(s) of the company:

<u>Name(s) of Present Principals/Titles</u>	<u>% of Ownership</u>
_____/_____	_____
_____/_____	_____
_____/_____	_____
_____/_____	_____

Please identify the category under which certification of your business enterprise is minority owned, woman-owned, veteran-owned or owned by a person(s) with a disability. Select one or more of the following categories:

A minority is a person who is a citizen or lawful permanent resident of the United States and who is included in one of the following categories:

<u>Minority Category</u>	<u>Gender</u>	<u>% of Ownership</u>
___ Black American	M / F	_____ %
___ Hispanic American	M / F	_____ %
___ Iberian Peninsula	M / F	_____ %
___ Asian American	M / F	_____ %
___ American Indians	M / F	_____ %
___ Individual w/ a disability	M / F	_____ %
___ Woman (circle below)	M / F	_____ %
___ Veteran (circle below)	M / F	_____ %

*White > Black > Hispanic > Iberian Peninsula > Asian > American Indian*

“The undersigned swears the forgoing statements are true and correct and including all material information necessary to identify and explain the operations of \_\_\_\_\_ as well as the ownership thereof.”

**Signature:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Corporate Seal (where appropriate)**

**REQUEST FOR PROPOSALSS**  
**Investigative Research**

**EXHIBIT C (7.1)**

**SUBCONTRACTOR CERTIFICATION**

It is hereby represented by the Subcontractor (undersigned) as an inducement to the Department of Housing to consider the participation as requested herein, that to the best of my knowledge and belief, no information or data contained in the application or in the attachments are in any way false or incorrect, and that no material information has been omitted, including the financial statements. It is also hereby stated that the undersigned will comply with all program requirements for any approved activity and that the organization and its principals are not suspended or debarred as defined in 24 CFR part 5 Subpart A of the Code of Federal Regulations. The undersigned agrees that banks, credit agencies, the Connecticut Department of Labor, the Connecticut Department of Revenue Services, the Connecticut Department of Environmental Protection, and other references are hereby authorized now, or any time in the future, to give the Department of Housing any and all information in connection with matters referred to in this response.

Certifying Representative

Type Name and Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_