

# REQUEST FOR QUALIFICATIONS

for

## HOUSING REHABILITATION CONTRACTORS

for the rehabilitation of foreclosed,  
abandoned housing units acquired through the  
Neighborhood Stabilization Program

RFQ Issued: April 20, 2009

Proposal Due: May 11, 2009

Issued by:

Housing Authority of the County of Riverside

5555 Arlington Avenue

Riverside, CA 92504

Phone: (951) 343-5460

## **I. INTRODUCTION**

The Housing Authority of the County of Riverside (HACR) invites experienced and qualified housing rehabilitation contractors (Contractors) to submit a Proposal and Statement of Qualifications for the Neighborhood Stabilization Program (NSP).

The HACR expects to receive Neighborhood Stabilization Program funds from the U.S. Department of Housing and Urban Development's (HUD) Community Development Block Grant Program (CDBG) via the Riverside County Economic Development Agency to address the growing inventory of foreclosed or abandoned single-family units within the County. These funds are to be used to acquire and rehabilitate foreclosed units, which will then be made available for sale or rent to income eligible homebuyers or as affordable rental units.

The HACR will be acquiring foreclosed units in need of rehabilitation and desires to create a panel of Contractors to perform the rehabilitation of properties that have been acquired. The quality of the rehabilitation will comply with "decent, affordable housing" requirements and meet all building codes and Rehabilitation Standards as identified in Federal Register Volume 73, Number 194 published on November 6, 2008, Part II, Item I. The rehabilitation must strategically incorporate modern, green-building, and energy-efficiency improvements thereby providing increased sustainability and attractiveness of housing and neighborhoods.

### **A. Program Components**

Through the use of NSP funding sources, the HACR will be acquiring foreclosed residential units in need of rehabilitation. Under this RFQ, housing rehabilitation contractors will be procured for at least a five-year period. The HACR intends to engage up to twenty of the most qualified Contractors available for this program, ten from the western portion of the County and ten from the Eastern portion of the County, however the HACR reserves the right to qualify as many or as few contractors as deemed necessary. As housing units are acquired, staff will hold open houses with all contractors under contract. Open houses will be conducted in batches of 1 to 10 residential units that are grouped geographically. Specifications for each unit's rehabilitation will be provided by the HACR or a scope of work may be requested from the contractor. The contractors under contract will then be allotted seven days to submit bids in response to the open houses. Staff will determine the lowest responsive bidder and a Notice to Proceed will be executed for the winning bidder for each group of homes. Failure to respond to multiple bid invitations may result in the contractor's removal from the Housing Authority's panel of selected contractors.

It is anticipated that the rehabilitation cost for each house will not exceed \$25,000 however HACR reserves the right to solicit bids in excess of this amount at any time. The number of contracts or total project cost of all contracts awarded to any one contractor will not exceed ten (10) or \$200,000 at any one time. Contractors who have ten (10) ongoing projects or any number of projects with a total project cost of \$200,000 with HACR through the NSP Program will not be awarded a new contract until prior project obligations are completed.

Inability to complete projects in a timely manner may result in the contractor's removal from the panel of selected contractors.

All rehabilitation work shall comply with building code and HUD's Housing Quality Standards (HQS). Specifications developed will meet acceptable standards to obtain building permits, as necessary. Davis-Bacon prevailing wages are required for all construction work in excess of \$2,000. Furthermore, all relevant health and safety issues such as lead-based paint and asbestos will be addressed prior to general improvements taking place.

You are hereby invited to submit a proposal by Friday, May 11, at 2:00 p.m., based upon the requirements and conditions set forth in this RFQ.

#### Mailing Instructions

Mail (or hand-deliver) proposal to:

Housing Authority of the County of Riverside

Attn: Kurt Johnson

5555 Arlington Avenue

Riverside, CA 92504

#### **B. Inquiries**

Questions pertaining to this RFQ should be directed to Kurt Johnson, Contracting Officer, at (951) 343-5460.

#### **C. Submittal Date**

Proposals are due at this office before 2:00 p.m., May 11, 2009. This time and date is fixed and extensions will not be granted. All proposals received after the deadline shown will be rejected and returned.

#### **D. Proposal Evaluation**

In order to be considered, a minimum of five (5) copies of the proposal must be submitted.

The HACR reserves the right to reject any and all proposals.

All proposals become the property of the HACR.

## **E. Selection Procedure**

The following is an outline of the procedures the HACR will use in the selection process to create the panel:

- a. A Screening and Selection Committee (Committee), composed of HACR staff, will be assembled to evaluate the proposals submitted by the prospective Contractors.
- b. The Committee will select proposals, which qualify based on the following factors:
  1. Experience of the Contractor selected to provide project services,
  2. Record of the Contractor in accomplishing the work within the required time, and
  3. Record of the Contractor in being responsive to the client's requests.
- c. The Committee may select a reasonable number of Contractors to be invited to appear before it to discuss their proposals. Said interviews, if held, will take place on a date and time to be determined.
- d. The Committee will rank the Contractors and recommend the Contractors to be used for the Project(s).

## **F. Proposal Evaluation Criteria & Submission Requirements**

It is imperative that the Contractor's proposal shall fully address all aspects of this RFQ. It must clearly express the Contractor's understanding of the HACR's specific requirements and indicate the Contractor's qualifications to conduct this project in a thorough and efficient manner.

The following criteria shall be used in evaluation of the Contractor's offer of services:

- a. Experience in housing rehabilitation services on projects of similar size (25 points).
- b. Contractor's experience in conducting assignments of similar scope (15 points).
- c. Methodology to be employed in conducting the project (20 points).
- d. Contractor's support organization, accessibility and quality assurance methods for optimizing staff utilization (10 points).
- e. Contractor's licenses, certifications, etc., as appropriate for providing this type of service (10 points).
- f. Timely completion of projects (20 points).

## **G. Contract Terms**

a. Contractual terms applicable to Contractor and any and all sub-contractor (s) will include but are not limited to the following:

- Must possess a valid State Contractor's Class B license.
- Liability insurance requirements.
- Automobile Liability Insurance requirements.
- Worker's Compensation insurance requirements.
- Scope of Work.
- Identification of Personnel, contractors and subcontractors.

b. Method of Compensation

Method of Compensation will be in accordance with terms and conditions of a successfully negotiated Contractor Participation Agreement (Exhibit D). All construction work in association with NSP shall be subject to Davis-Bacon Prevailing Wages.

c. Contract Award

The contract, if awarded, will include the Scope of Work and not-to-exceed contract price as negotiated with the selected Contractor.

d. Contract Agreement

The selected Contractors will enter into a Contractor Participation Agreement with the HACR and will be issued a Notice to Proceed for projects obtained through the competitive bidding process. The terms of the Agreements are not negotiable. Upon contractor selection for individual projects in excess of \$25,000, a construction contract will be awarded

## **H. Procedure for Specific Project Award**

As work becomes available, an open house of properties will be held by the HACR in which a general scope of work and timeframe for completion will be requested by the HACR to determine which panelist will be selected for the project. Once bids have been received and evaluated, the lowest and most responsive bidder will be awarded the project and will be issued a Notice to Proceed and a Purchase Order by the HACR to perform work related to the project.

## **PART II - SCOPE OF WORK**

The successful Contractors will provide the HACR with housing rehabilitation services consistent with established local and state law and guidelines. Under the agreements, the selected Contractors will provide services including, but not limited to, the following:

- Provide general contracting services to ensure that projects are completed on time and within budget which will include activities such as weekly progress reports, detailed project budget, maintain records of competitive procurement for goods and services, etc.
- Oversee work performed by sub-contractors to ensure that all completed work is thoroughly inspected to ensure compliance with Housing Quality Standards (HQS).
- Perform energy efficient improvements consistent with Riverside Public Utilities and Southern California Gas Co. programs such as weatherization, weather-based irrigation system, drought tolerant landscaping, and installation of energy star compliant appliances and equipment.
- Abate hazardous materials in compliance with industry standards and regulations, must provide all necessary certificates and/or licenses of the contractor or sub-contractor to substantiate capacity to perform such work.
- Comply with current local building codes and HQS to ensure that rehabilitation work to be performed is inclusive of all requirements.
- Knowledge of requirements for building permits, to ensure that all appropriate permits will be obtained.
- The successful consultant will be required to comply with the HACR's insurance requirement, which includes Commercial General Liability and Automobile Insurance, Worker's Compensation Insurance and Automobile Liability Insurance.

### **PART III - PROPOSAL CONTENT**

The HACR requires each Contractor to submit a proposal clearly addressing all of the requirements outlined in this RFQ. The proposal shall be limited to 20 pages and must include a minimum of five (5) recent or current client references, which include the address and telephone number of each reference. Resumes and company qualification brochure data may be added to the 20-page proposal, provided they are located in an Appendix at the back of the proposal.

**The Proposal must contain information covering the following topics and all Appendices must be returned with proposal:**

1. A cover letter expressing interest in the program signed by a person who can legally bind the organization. Please include in your letter the legal name of the organization, the organization's address, and the contact information including email address of the executive official and the person responsible for preparing the proposal.

2. In the narrative proposal detail how the organization plans on providing appropriate rehabilitation services as described in the introduction. Please include the following in your proposal:

- a. A statement of qualifications showing past experience with the same or similar type(s) of program.
- b. Brief description of organization capacity including an organization chart.
- c. Staffing, including resumes of key person or persons that will be assigned to assist in administering the program. (Appendix A)
- d. Any prior experience with providing services or administering programs of similar scope.
- e. List of clients served over the last five (5) years.
- f. Contractor Data Sheet; Section 3 Business Concern; W-9 (Appendix B)
- g. Geographical Work Area Preference Form (Appendix C) – Contractors may select one portion of the County to perform work or elect to work in both the East and West areas of the County. This selection will determine what projects the contractor will be asked to bid. For this purpose, the County has been divided at the city of Beaumont. The East County is defined as those areas located to the East of Beaumont. The West County is defined as the City of Beaumont and those areas located to the West.

**PART IV – TIME LINE**

The following time line is proposed, but may vary based upon Housing Authority need.

RFQ issued	April 20, 2009
Qualifications due	May 11, 2009, 2:00 PM
Proposals reviewed/References Interviewed	May 12,2009
Interviews/Presentations (if necessary)	May 14, 2009
Contractor selection	May 15, 2009
Contract Executed	May 26, 2009

HACR reserves the right to revise this RFQ at any time.



# Appendix B

## CONTRACTOR DATA SHEET

LICENSE NUMBER: \_\_\_\_\_ EXPIRATION  
DATE: \_\_\_\_\_

LICENSE CLASS: \_\_\_\_\_

OWNER NAME: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP  
CODE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ FAX  
NUMBER: \_\_\_\_\_

FEDERAL ID NUMBER: \_\_\_\_\_ SOCIAL SECURITY  
NUMBER: \_\_\_\_\_

**PLEASE CIRCLE YOUR ANSWER BELOW:**

WOMEN OWNED BUSINESS YES / NO	MINORITY BUS. ENTERPRISE YES/NO	SECTION 3 BUSINESS YES / NO
ETHNICITY (CIRCLE ONE)      HISPANIC      OR      NON – HISPANIC		
RACE (CIRCLE ONE)		
1. AMERICAN INDIAN OR ALASKAN NATIVE	4. ASIAN	8. NATIVE HAWAIIAN / PACIFIC ISLANDER
2. AMERICAN INDIAN OR ALASKAN NATIVE & WHITE	5. ASIAN AND WHITE	9. WHITE
3. AMERICAN INDIAN OR ALASKAN NATIVE & BLACK	6. BLACK OR AFRICAN AMERICAN	10. OTHER MULTI-RACIAL
	7. BLACK AND WHITE	

INSURANCE  
CARRIER(S): \_\_\_\_\_

LIABILITY INS. POLICY NUMBER: \_\_\_\_\_ EXPIRATION  
DATE: \_\_\_\_\_

WORKMAN'S COMP CERTIFICATE: \_\_\_\_\_ EXPIRATION  
DATE: \_\_\_\_\_

**HOUSING AUTHORITY OF THE COUNTY OF RIVERSIDE  
CONTRACTOR CERTIFICATION  
REGARDING STATUS AS A SECTION 3 BUSINESS CONCERN**

I \_\_\_\_\_, hereby certify that the business  
(Print Name and Title)

known as \_\_\_\_\_  
(Print business name)

\_\_\_\_\_ is not a Section 3 business (Sign and complete the bottom section.)

\_\_\_\_\_ is a Section 3 business **because** (check one of the following):

\_\_\_\_\_ 51 percent (51%) or more is owned by Section 3 residents; **or**

\_\_\_\_\_ 30 percent (30%) of the permanent full time employees are currently Section 3 residents or were Section 3 residents when first hired (if within the last three years); **or**

\_\_\_\_\_ The business commits in writing to subcontract over 25 percent (25%) of the total dollar amount of all subcontracts to be let to businesses that meet the requirements of paragraphs 1 and 2 of this definition;

**AND**

The business was formed in accordance with state law and is licensed under state, county, or municipal law to engage in the business activity for which it was formed.

A Section 3 Resident is a person living in San Bernardino or Riverside County who is a Public Housing resident or who is low income.

Low Income Persons means families (including single persons) whose incomes do not exceed 80 percent of the median income as adjusted by HUD, for Riverside and San Bernardino Counties.

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

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

\$ \_\_\_\_\_

Effective 02/13/2008  
Persons in Household

1	2	3	4	5	6	7	8
\$37,300	\$42,650	\$47,950	\$53,300	\$57,550	\$61,850	\$66,100	\$70,350

A new hire is qualified as a Section 3 resident if he/she resides in Riverside or San Bernardino County and his/her total family income is less than the family income shown above for his/her household size.

**Request for Taxpayer  
 Identification Number and Certification**

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

**Name** (as shown on your income tax return)

**Business name**, if different from above

Check appropriate box:  Individual/sole proprietor  Corporation  Partnership  
 Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ .....  Exempt payee  
 Other (see instructions) ▶

**Address** (number, street, and apt. or suite no.) Requester's name and address (optional)

**City, state, and ZIP code**

List account number(s) here (optional)

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number : : :
OR
Employer identification number : : :

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

**Certification Instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

**Sign Here** Signature of U.S. person ▶ Date ▶

**General Instructions**

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

**Purpose of Form**

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

