FOR INFORMATIONAL AND INSTRUCTIONAL PURPOSES ONLY

RFP # HS 2014

TITLE: Housing Security Program

SUBMISSION DEADLINE: November 22, 2013, 12:00 noon

PRE-BIDDERS CONFERENCE: NOVEMBER 6, 2013, 11:00 a.m. at Rhode Island Division of Elderly Affairs, Hazard Building, 74 West Road, Cranston, RI 02920, 2nd floor, Conference Room #2-38.

Questions concerning this solicitation may be e-mailed to rschwartz@dea.ri.gov no later than November 11, 2013 at 12:00 noon. Please reference the RFP number on all correspondence. Questions received, if any, will be responded to by email. Inquiries will **not** be permitted after this deadline, and telephone inquiries will **not** be permitted.

SURETY REQUIRED: No

BOND REQUIRED: No

ALL APPLICANTS, WITHOUT EXCEPTION, MUST REGISTER ON-LINE AT THE STATE PURCHASING WEBSITE AT WWW.PURCHASING.RI.GOV.

THIS PAGE IS NOT A BIDDER CERTIFICATION FORM

SECTION 1 – INTRODUCTION

The Rhode Island Department of Administration/Office of Purchases, on behalf of the Rhode Island Department of Human Services/Division of Elderly Affairs ("DEA"), is soliciting proposals from qualified entities to provide Housing Security, in accordance with the terms of this Request for Proposals and the State's general Conditions of Purchase, which may be obtained at the Rhode Island Division of Purchases Home Page via Internet at *http://www.purchasing.ri.gov*

This is a Request for Proposals ("RFP") and not an invitation for bid. Responses will be evaluated on the basis of the relative merits of the proposals, in addition to price; there will be no public opening and reading of responses received by DEA pursuant to this RFP, other than to name those applicants who have submitted proposals.

INSTRUCTIONS AND NOTIFICATIONS TO APPLICANTS:

- Potential applicants are advised to review all sections of this request carefully and to follow instructions completely, as failure to make a complete submission as described elsewhere herein may result in rejection of the proposal.

- **Eligible applicants for funds under this program shall include all public and private housing complexes designated by the federal government as housing for the elderly in the State of Rhode Island. The housing authority (with respect to any public housing complex), owner (with respect to any private housing complex), or a management company or governing body of any such housing complex, may apply to DEA to participate in this program. Applicants must agree to comply with all requirements as set forth in this RFP. APPLICATIONS FROM INELIGIBLE APPLICANTS WILL BE REJECTED.**

- **The aggregate funding amount pursuant to this RFP will be made available as follows: six (6) grants in the amount of $14,290.00 each. Funding is subject to availability of State funds allocated by the State of Rhode Island General Assembly to such purposes and/or changes in allocation of funds based on budgetary measures. In addition, DEA reserves the right to terminate this RFP at any time for good cause shown.**

- Alternative approaches and/or methodologies to accomplish the desired or intended results of this procurement are solicited. However, proposals which depart from or materially alter the terms, requirements, or scope of work defined by this RFP will be rejected as being non-responsive.

- All costs associated with developing or submitting a proposal in response to this RFP, or to provide oral or written clarification of its content shall be borne by the applicant. The State assumes no responsibility for these costs.

- Proposals are considered to be irrevocable for a period of not less than sixty (60) days following the opening date, and may not be withdrawn, except with the express written permission of the Director of DEA.

- **Proposals misdirected to other State locations or which are otherwise not received by DEA by the submission deadline set forth herein for any cause will be determined to be late and will be rejected. All applications for this RFP are to be presented before 12:00 Noon on November 22, 2013 to:**

  Rhonda Schwartz, Chief Program Development
  Rhode Island Division of Elderly Affairs
  74 West Road, Hazard Building 2nd floor
  Cranston, RI 02920

- It is intended that an award pursuant to this RFP will be made to a housing authority (in the case of a public elderly housing complex) or to an owner (in the case of a private housing complex), or to a management company or governing body of any such housing complex, who will assume responsibility for all aspects of the work. Joint venture and cooperative proposals will not be considered, but subcontracts are permitted, provided that their use is clearly indicated in the applicant's proposal, and the subcontractors proposed are identified in the proposal.

- Applicants are advised that all materials submitted to the State for consideration in response to this RFP will be considered to be Public Records as defined in Title 38 Chapter 2 of the Rhode Island General Laws, without exception, and will be released for inspection immediately upon request once an award has been made.

- In accordance with Title 7, Chapter 1.1 of the General Laws of Rhode Island, no foreign corporation, a corporation without a Rhode Island business address, shall have the right to transact business in the state *until it shall have procured a Certificate of Authority to do so from the Rhode Island Secretary of State* (401 222-3040).

SECTION 2 – OVERVIEW AND BACKGROUND

OVERVIEW

DEA is the designated State Unit on Aging for the State of Rhode Island, responsible for the development and implementation of a comprehensive, coordinated system of community-based care for citizens sixty years of age and older and adults with disabilities. Responsibilities of DEA include developing and implementing a State Plan on Aging under the Federal Older Americans Act (OAA), serving as the state's Single Planning and Service Agency on Aging under the OAA, advocating for the rights of older individuals and adults with disabilities, operating services designed to assist seniors and adults with disabilities to remain independent in the community and funding an array of community based services for these populations. The grants management

program coordinates these efforts and activities of the State Aging Network through the allocation and monitoring of federal and state funds.

BACKGROUND

RI General Law 42-66.1, Rhode Island Security for the Elderly Act (the "Act") was enacted to ensure the safety and security of residents in sites designated by the federal government as housing for the elderly in Rhode Island. Pursuant to the Act, DEA has established a grant program to assist in providing security at public and private housing complexes in the State of Rhode Island.

The population in the designated housing sites has changed, as has the nature of the communities in which they are located. Fire departments and police departments note an increase in security-related problems at many sites. Current areas of recommendation may include: increased security surveillance, improved recording equipment and VCRs, improved entrance security devices, and increased management and staff training on security topics.

This RFP is designed to support security efforts such as outlined in Section 4 – Scope of Work below. **The resulting contract is for the period July 1, 2013 through June 30, 2014.**

SECTION 3 – GENERAL FUNDING REQUIREMENTS

The applicant(s) chosen must be able to provide appropriate security services and improvements to public or private housing complexes designated by the federal government as housing for the elderly in the State of Rhode Island.

Each housing complex for which an application is submitted (a) must submit to DEA the annual safety and security plan required for the year commencing July 1, 2013 prior to submission of an application pursuant to this RFP and (b) must certify in writing as part of the application that it is in conformance with DEA "Rules and Regulations Governing Rhode Island Security for Housing for the Elderly," which have been promulgated pursuant to the Act, as the same have been amended and from time to time and may be further amended (the "Regulations.") Copies of the "Regulations" may be downloaded from the Rhode Island Secretary of State website (http://www.sos.ri.gov).

For purposes of this RFP:

Funds awarded by DEA pursuant to this RFP shall be used exclusively for those services detailed in Section 4 – Scope of Work below in accordance with this RFP, with no exceptions. Rhode Island General Laws Section 42-66.1-4 requires that funds from DEA through this grant will pay only for part of these costs, as detailed below:

Public Housing Complex		**Private Housing Complex**	
Housing Authority Share:	25%	Owner's Share:	75%

DEA Share: 75% DEA Share: 25%

The amounts required to be contributed by the public and private housing complexes are referred to here in as the "Matching Share". **As set forth above, DEA intends that the aggregate funding pursuant to this RFP of $85,740 will be made available as follows: six (6) grants in the amount of $14,290.00 each.** Please refer to the following examples for determining your complex's Matching Share:

1. Grant award for public housing complex (25% share borne by housing authority):

DEA State Funds Awarded: $14,290.00
Housing Authority Matching Share: $ 4,763.00

2. Grant award for private housing complex (75% share borne by owner):

DEA State Funds Awarded: $14,290.00
Owner Matching Share: $42,870.00

In other words:

(a) The **total cost** of a public housing complex project must be equal to or greater than $19,053, with DEA's share of the total cost being $14,290 and the public housing complex being responsible for the balance of the cost; and

(b) The **total cost** of a private housing complex project must be equal to or greater than $57,160, with DEA's share of the total cost being $14,290 and the private housing complex being responsible for the balance of the cost.

The housing authority's or owner's Matching Share could be larger than the percentages required as shown above, as a result of additional funding from the housing authority/owner and/or from other sources.

Please note the following additional requirements with respect to funding:

1. **EACH GRANT RECIPIENT MUST DOCUMENT ITS STATED MATCHING SHARE (AS SET FORTH IN THE SIGNED GRANT) ON ITS FINAL FINANCIAL REPORT. THE FULL MATCHING SHARE, AS SET FORTH IN THE SIGNED GRANT, MUST BE EXPENDED ON THE PROJECT (AS DEFINED BELOW) BY THE CLOSE OF THE STATE FISCAL YEAR, WHICH IS JUNE 30, 2014.**

2. **ALL STATE FUNDING UNDER THIS HOUSING SECURITY GRANT PROGRAM MUST BE SPENT, WITHOUT EXCEPTION, BY THE CLOSE OF THE STATE FISCAL YEAR. BASED UPON STATE LAW, STATE FUNDS CANNOT BE CARRIED FORWARD INTO SUBSEQUENT STATE**

3. **FUNDS AWARDED BY DEA PURSUANT TO THIS RFP MAY BE USED <u>ONLY</u> FOR THE SPECIFIC PROJECT PROPOSED TO BE UNDERTAKEN BY THE APPLICANT IN RESPONSE TO THIS RFP (THE "PROJECT"). ALSO, FUNDS AWARDED PURSUANT TO THIS RFP CANNOT BE USED TO PAY FOR WORK OR SERVICES PERFORMED PRIOR TO THE JULY 1, 2013 TO JUNE 30, 2014 STATE FISCAL YEAR.**

4. **FUNDING FOR THIS RFP IS AWARDED THROUGH THE RHODE ISLAND STATE GENERAL ASSEMBLY.**

SECTION 4 – <u>SCOPE OF WORK</u>

Part A: Housing Security Program – Eligible Activities and Requirements

Eligible applicants are permitted to submit proposals for the following:

1. Direct hiring of security guards for the elderly housing complex.

2. Subcontracting with security agency for security guards for the elderly housing complex.

3. Mechanical/electrical security devices and/or physical improvements to the building or grounds that would contribute directly to the overall security and safety of the elderly housing complex ("Security Equipment").

4. During the 2013 session of the Rhode Island General Assembly, R.I.G.L. Chapter 42-66.9 was amended to require all housing for the elderly complexes, as defined in section 42-66.1-2, which are serviced by one or more elevators and/or electrically powered chair lifts, and which include more than one hundred (100) residential living units in a single building to be equipped with emergency generators which shall provide sufficient power to provide emergency lighting to all common areas and a community room and power to operate the elevators and a refrigerator in a common area. Chapter 42-66.9 also sets forth other requirements that generator systems must meet. Proposals may be submitted to apply grant funds to the applicant's direct, out-of-pocket expense to purchase and install emergency generators ("Emergency Generators") in order to comply with R.I.G.L. Chapter 42-66.9.

5. Any combination of the above.

6. **NOTE – NEW REQUIREMENT: An applicant may submit a proposal <u>only</u> for project options #1, #2, and/or #3 above (Section 4, Part A) if the housing complex which is the subject of the proposal is (a) in compliance with or (b) exempt from: R.I.G.L. Chapter 42-66.9, as amended during the 2013 session of the Rhode Island General Assembly. Any applicant seeking grant funds under this RFP for a proposal that does not include project option #4 above in this Section 4, Part A must clearly demonstrate in its application that the housing complex which is the subject of the proposal either is (a) in compliance with or (b) exempt from: R.I.G.L. Chapter 42-66.9, as amended during the 2013 session of the Rhode Island General Assembly.**

The minimum requirements for the above are described in Part B below.

Part B: Minimum Security Requirements and Tasks

1. All security guards, whether hired directly by the applicant or by a security agency subcontractor, must meet the requirements of the Regulations. Applicants are responsible for complying, and for ensuring their security agency subcontractors comply, with the Regulations.

2. If the applicant enters into a subcontract with a security agency to provide security services, the subcontractor <u>must</u> (a) be legally authorized to conduct business within the State of Rhode Island, (b) have a demonstrated ability to provide security services, and (c) show evidence of ability to comply with all applicable requirements set forth in the Regulations. **EVIDENCE OF THE FOREGOING, REASONABLY SATISFACTORY TO DEA, MUST BE PROVIDED TO DEA AND WILL BE A CONDITION TO DELIVERY OF FUNDS AWARDED BY DEA PURSUANT TO THIS RFP.**

3. All applicants must certify that they are in conformance with DEA Rules and Regulations Governing Security for Housing for the Elderly, Copies of the "Regulations" may be downloaded from DEA website (http://www.dea.ri.gov).

4. Applicants are encouraged to consider the following Security Equipment options:

   - Video cameras for surveillance
   - Voluntary special purpose sticker on doors
   - Management stickers on cars
   - Use of TV for training
   - Front door locks on a timer
   - Special security locks
   - Installation of panel egress doors
   - Installation of card or chip access
   - Installation of speakers in each apartment for making announcements
   - Strobe lights for hearing impaired
   - Security and safety screens on first floor apartments
   - Increased lighting inside and outside building

- Installation of fences
- Motion detector system for parking lots
- Change of door locks on vacant/ empty apartments after residents move out
- Security locks on residents' cars
- Identification kit for resident's cars
- Police whistle and other sound devices

5. Applicants seeking to install Emergency Generators should clearly demonstrate in their proposal how their proposed project will cause the applicant to be in compliance with R.I.G.L. Chapter 42-66.9 and should clearly describe the specifications and capacity of the Emergency Generators (for example, for how many hours will the Emergency Generators be able to service the complex during a power outage, what areas/equipment of the complex will be powered by the Emergency Generators, etc.).

Part C: Reports

Each applicant to whom a grant is awarded pursuant to this RFP shall keep and maintain a record of time spent in performing the services required and shall present such records to DEA upon request. Also, each grantee will provide program reports to DEA, which will include but not be limited to the services provided and equipment purchased. **THE SUBMISSION OF THESE REPORTS TO DEA IS A CONTINGENCY FOR RECEIPT OF AWARDED FUNDING.**

SECTION 5 – CONDITIONS

Every applicant that is awarded funding pursuant to this RFP must enter into a written grant with DEA in a form to be prescribed by DEA. The following conditions shall be incorporated into any grant that results from this RFP (this listing is not inclusive of all requirements that will be set forth in the grant):

A. Changes. Any proposed change in the Project shall be submitted in writing to the Director of DEA for her approval, which may be withheld in her sole discretion. Any amendment to provisions of the grant shall be valid only when it has been signed by both parties and attached to the grant.

B. Acknowledgement of Funding Sources. All publicity and printed material relating to the performance of the grant shall indicate the assistance of DEA, and the content of all publicity and printed material relating to the performance of this contract shall be approved in advance by DEA.

C. Availability of Funds. It is expressly understood that all funds obligated in any grant awarded pursuant to this RFP are contingent upon receipt of funds by DEA. DEA reserves the right to reduce its financial obligation, postpone funding, or terminate this RFP and/or any grant awarded pursuant to this RFP.

D. Compliance with Auditing Requirements. The grantee will comply with all DEA auditing policies and procedures.

E. Prohibited Interest. No member, officer, trustee or employee of DEA shall have any interest - direct or indirect- in any grant awarded pursuant to this RFP or the proceeds thereof.

F. Equal Employment Opportunity/Non-Discrimination. The grant shall require that the grantee shall not discriminate against any employee or applicant for employment or receipt of service because of race, religion, color, sex, age, national origin or handicap. The grantee shall ensure that employees are treated equally during their employment without regard to their race, religion, color, sex, age, national origin or handicap. The grantee will, in all solicitations or advertisements for employees placed by or on behalf of the grantee, state that all qualified applicants will receive consideration of employment without regard to race, religion, color, sex, age, national origin or handicap.

In the event of the grantee's non-compliance with the Equal Employment Opportunity/Non-Discrimination clauses of the grant or with any of said rules, regulations or orders, the grant may be cancelled, terminated or suspended in whole or in part and the grantee may be declared ineligible for future DEA grants.

G. Grant Termination. DEA may terminate the grant or any portion of it by serving written notice of termination on the grantee. The notice shall state whether the termination is for convenience of DEA or for default of the grantee. If the termination is for default, the notice shall state the manner in which the grantee has failed to perform the requirements of the grant. The grantee shall account for any property in its possession paid for from funds received from DEA or property supplied to the grantee by DEA.

H. Submission of Reports. The grantee must submit all reports required by DEA within the specified time frames.

I. Indemnification. The grantee shall indemnify and hold harmless DEA and the State of Rhode Island from and against all loss, costs, liability, damage, and expense whether direct, consequential or incidental for personal injury and for property damage and expense arising out of or resulting in whole or in part, directly or indirectly, from work or operations under the grant but not limited to the acts, errors, omissions and negligence of the grantee's employees, agents, contractors and subcontractors.

J. Compliance With All Laws, Codes, Rules and Regulations. The grantee shall be responsible for complying with all local, state and federal laws, codes, rules and regulations that apply to the Project and to the operation of the housing complex.

SECTION 6 - QUESTIONS AND SUBMISSION REQUIREMENTS

PRE-BIDDERS CONFERENCE: November 6, 2013, 11:00 a.m. at Rhode Island Division of Elderly Affairs, Hazard Building, 74 West Road, Cranston, RI 02920, 2nd floor, Conference Room #2-38.

Questions concerning this solicitation may be e-mailed to rschwartz@dea.ri.gov no **later than November 11, 2013 at 12:00 noon.** Please reference the RFP # on all correspondence and include an email address to which an answer may be emailed. **Answers to questions received, if any, will be sent by e-mail. All questions must be submitted by e-mail; inquiries after this deadline will NOT be permitted, and telephone inquiries will NOT be accepted.**

INTERESTED APPLICANTS MAY SUBMIT APPLICATIONS TO PROVIDE THE SERVICES AND/OR EQUIPMENT COVERED BY THIS REQUEST FOR PROPOSALS ON OR BEFORE FRIDAY, NOVEMBER 22, 2013 AT 12:00 NOON. APPLICATIONS MUST BE *RECEIVED* BY DEA BY THIS DEADLINE. APPLICATIONS RECEIVED BY DEA AFTER THIS DATE AND TIME WILL BE REJECTED.

AN ORIGINAL PLUS THREE (3) COPIES of the application should be mailed or hand delivered in sealed envelopes marked "RFP # HS 2014 for Housing Security Grants" to:

Rhonda Schwartz, Chief Program Development
Housing Security Program
RI Division of Elderly Affairs
74 West Road, 2nd floor
Cranston, RI 02920

The RIVIP Bidder Certification Cover Form and other required documentation (see Section 7 below) should be included in this package.

SECTION 7 – APPLICATION REQUIREMENTS

A. **Proposals must include the following (INCOMPLETE PROPOSALS WILL BE REJECTED)**:

1. A signed and completed **RIVIP Bidder Certification Cover Form**. This form is downloadable from www.purchasing.ri.gov.

2. **THE APPLICATION THAT APPEARS AT THE END OF THIS RFP MUST BE USED BY EACH APPLICANT. ANY APPLICATION OR PROPOSAL THAT USES A FORM THAT VARIES IN FORM FROM THE ATTACHED FORM OF APPLICATION WILL BE REJECTED.**

   Instructions for completing the Application:

   EACH SECTION OF THE APPLICATION MUST BE COMPLETED; INCOMPLETE APPLICATIONS WILL BE REJECTED. NOTE ALSO THE

PAGE LIMITATIONS FOR EACH SECTION. ANY APPLICATION THAT DOES NOT COMPLY WITH THESE PAGE LIMITATIONS WILL BE REJECTED.

Please see the following additional guidelines as to the completion of each section:

a. Executive Summary-Demonstration of Need:

The Executive Summary is intended to highlight the contents of the proposal. This section of the application should provide State evaluators with a **clear understanding** of: (a) the need for the proposal at the housing complex, (b) how the proposal is intended to improve the safety and security of the residents of the housing complex, and (c) if applicable, how the proposal will help the housing complex improve its compliance with the Regulations and/or with R.I.G.L. Chapter 42-66.9. **THE EXECUTIVE SUMMARY-DEMONSTRATION OF NEED (INCLUDING ALL ATTACHMENTS AND EXHIBITS) MUST NOT EXCEED 5 PAGES.**

b. Program Narrative-Work Plan:

This section should describe the applicant's understanding of the State's requirement and a work plan for accomplishing the results proposed. Also describe the housing complex's history, including the year founded and its leadership structure, number of paid staff and volunteers. **THE PROGRAM NARRATIVE-WORK PLAN (INCLUDING ALL ATTACHMENTS AND EXHIBITS) MUST NOT EXCEED 5 PAGES.**

Where the proposal involves the direct hiring of security guards, this section should describe in reasonable detail how the security guard program will be implemented (for example, how many guards will be employed, job duties, security guard schedule, supervision, etc.).

Where the proposal involves the hiring of a security agency to provide security, this section should describe in reasonable detail the security functions that will be provided by the security agency and what will be required of the security agency as to the implementation of such functions (for example, how many guards will be required, job duties, security guard schedule, supervision, etc.). The security agency need not have been selected at the time the application is submitted; however, if the security agency is known to the applicant, the security agency should be disclosed in the application and a reasonably detailed description of the security agency and its experience and qualification in providing security should be provided, and evidence that the security agency legally is permitted to conduct business in the State of Rhode Island should be provided.

Where the proposal involves Security Equipment and/or Emergency Generators, a reasonably detailed description of the Security Equipment and/or Emergency Generators (quantity, quality, function, etc.) that will be provided should be included, including without limitation a description of the locations where the Security Equipment and/or

Emergency Generators will be installed, and whether the applicant will use its own employees to perform the work or will hire outside contractors.

NOTE – NEW REQUIREMENT: An applicant may submit a proposal only for project options #1, #2, and/or #3 in Section 4, Part A above if the housing complex which is the subject of the proposal is (a) in compliance with or (b) exempt from: R.I.G.L. Chapter 42-66.9, as amended during the 2013 session of the Rhode Island General Assembly. Any applicant seeking grant funds under this RFP for a proposal that does not include project option #4 in Section 4, Part A above must clearly demonstrate in its application that the housing complex which is the subject of the proposal either is (a) in compliance with or (b) exempt from: R.I.G.L. Chapter 42-66.9, as amended during the 2013 session of the Rhode Island General Assembly.

For all proposals, a work plan should be provided that includes a detailed proposed project schedule, including a list of tasks and activities and a scheduled completion date (where security guard services are involved, the completion date is the date on which the security guard services proposed in the application first fully commences).

c. Funding and Budget:

Complete the enclosed budget form that is part of the application form. **THE ONLY PERMITTED ATTACHMENTS/EXHIBITS TO THE BUDGET ARE THOSE, IF ANY, THAT ARE NECESSARY TO PROVIDE THE INFORMATION REQUIRED TO BE PROVIDED BY THE BUDGET FORM. APPLICATIONS MUST NOT EXCEED THIS PAGE LIMITATION.**

In addition, a budget narrative must be provided, that explains, in reasonable detail, the budget for the proposed Project. The budget narrative also should disclose all other sources of funding, and the source of the Matching Share should be provided in the budget narrative. **THE BUDGET NARRATIVE (INCLUDING ALL ATTACHMENTS AND EXHIBITS) MUST NOT EXCEED THREE PAGES**.

c. Certification/Compliance Forms:

All certification/compliance forms found at the end of the application form must be signed by an authorized signatory of the Applicant and submitted as part of the application. These include:

1. ANNUAL CERTIFICATION DRUG-FREE WORKPLACE REQUIREMENTS
2. ASSURANCE OF COMPLIANCE WITH SECTION 504 OF THE REHABILITATION ACT OF 1973, AS AMENDED
3. TITLE VI OF THE CIVIL RIGHTS ACT OF 1964
4. CERTIFICATION REGARDING LOBBYING
5. CERTIFICATION REGARDING DEBARMENT

3. A signed and completed Tax I.D. W-9 Form (to be provided by applicant)

4. Required Supporting Documentation:

Public Housing Complex:

(a) copies of all documents filed with the Rhode Island Secretary of State to establish the applicant's existence; in lieu of this, it will be sufficient that the applicant currently is included in the Rhode Island Secretary of State's corporate database of **Active** business entities;
(b) a copy of the most recently filed IRS Form 990 to the extent that the applicant is required to file such forms; if the applicant is not required to file an IRS Form 990, the applicant must certify in writing as to same;
(c) a copy of the applicant's most recent annual financial statement (which must be audited [stamped and final], including the audit management letter, if the applicant has $500,000 or more in gross annual revenues);
(d) the names and titles of all of the organization's current directors, officers, trustees and key employees;
(e) the applicant must certify in writing that it currently is legally authorized to conduct business in Rhode Island.

Private Housing Complex:

(a) a Letter of Good Standing from the Rhode Island Secretary of State. For information on how to obtain one, please visit
http://www.sos.ri.gov/business/filings/procedures
(b) a copy of the most recently filed IRS Form 990;
(c) a copy of the applicant's most recent annual financial statement (which must be audited [stamped and final], including the audit management letter, if the applicant has $500,000 or more in gross annual revenues);
(d) the names and titles of all of the organization's current directors, officers, trustees and key employees.

B. Minority Business Enterprise. Rhode Island General Laws Chapter 37-14.1 provides that minority business enterprises are to have an opportunity to participate in the performance of certain contracts funded in whole or in part by State funds. Please include in your proposal, if applicable (a) information setting forth the applicant's status as a Minority Business Enterprise, as certified by the Rhode Island Department of Administration (an "MBE") and/or (b) a subcontracting plan which addresses the State's goal of ten percent (10%) participation by MBE's in State procurements. Questions concerning this should be addressed to the MBE Compliance Office at 401-574-8253, and a list of certified MBE's may be found at www.mbe.ri.gov .

SECTION 8 - EVALUATION AND SELECTION

Proposal Evaluation: The Director of DEA will commission a Review Team which will evaluate and score all proposals that are eligible to be considered for funding, using the following criteria:

Criteria:	**Points Assigned:**
a. Executive Summary-Demonstration of Need	**40**
b. Program Narrative-Work Plan	**40**
c. Funding and Budget	**20**
TOTAL	**100**

Notwithstanding the foregoing, the State reserves the right to award on the basis of cost alone, accept or reject any or all bids, and to act in its best interest.

APPLICATIONS THAT RECEIVE A TOTAL SCORE OF LESS THAN 65 WILL BE REJECTED. A SCORE THAT EXCEEDS 65 DOES NOT GUARANTEE THAT AN APPLICATION WILL BE FUNDED. DEA RESERVES THE RIGHT IN ITS SOLE DISCRETION TO DETERMINE THE AWARDS TO BE MADE PURSUANT TO THIS RFP.

PLEASE NOTE THE PAGE LIMITATIONS FOR EACH SECTION OF THE APPLICATION, AS NOTED ABOVE AND IN THE APPLICATION. APPLICATIONS THAT EXCEED SUCH PAGE LIMITATIONS WILL BE REJECTED.

Proposals found to be technically or substantially non-responsive at any point in the evaluation process will be rejected and not considered or further evaluated. The Review Team will present written findings to the DEA Director or her designee, who will make the final selection for grant awards pursuant to this RFP. The Review Team may elect to request clarification and/or additional information from applicants as part of its evaluation of proposals.

Application Checklist

Please ensure that you have included the following, all of which are to be delivered to DEA:

___ A signed and completed RIVIP Bidder Certification Cover Form

___ Application:

- Cover Sheet
- Executive Summary-Demonstration of Need
- Program Narrative-Work Plan
- Funding and Budget (both budget narrative and budget must be completed)
- Certification/Compliance Forms (all 5 forms must be completed)

___ Tax I.D. W-9 Form

___ Annual safety and security plan required for the year commencing July 1, 2013 submitted prior to submission of an application pursuant to this RFP

___ Public Housing Complex:

(a) copies of all documents filed with the Rhode Island Secretary of State to establish the applicant's existence; in lieu of this, it will be sufficient that the applicant currently is included in the Rhode Island Secretary of State's corporate database of **Active** business entities;
(b) a copy of the most recently filed IRS Form 990 to the extent that the applicant is required to file such forms; if the applicant is not required to file an IRS Form 990, the applicant must certify in writing as to same;
(c) a copy of the applicant's most recent annual financial statement (which must be audited [stamped and final], including the audit management letter, if the applicant has $500,000 or more in gross annual revenues);
(d) the names and titles of all of the organization's current directors, officers, trustees and key employees;
(e) the applicant must certify in writing that it currently is legally authorized to conduct business in Rhode Island.

(Application Checklist continues on the next page)

Application Checklist continued--

___ Private Housing Complex:

(a) a Letter of Good Standing from the Rhode Island Secretary of State. For information on how to obtain one, please visit http://www.sos.ri.gov/business/filings/procedures
(b) a copy of the most recently filed IRS Form 990;
(c) a copy of the applicant's most recent annual financial statement (which must be audited [stamped and final], including the audit management letter, if the applicant has $500,000 or more in gross annual revenues);
(d) the names and titles of all of the organization's current directors, officers, trustees and key employees.

___ MBE information and/or plan, if applicable

ALL APPLICANTS, WITHOUT EXCEPTION, MUST REGISTER ON-LINE AT THE STATE PURCHASING WEBSITE AT WWW.PURCHASING.RI.GOV.

Rhode Island Department of Human Services/ Division of Elderly Affairs
Application for the Housing Security Grant Program

RFP# HS 2014

Name of Private or Public Housing Complex:_____

Name of Applicant:_____

Applicant is (check one):

____ Housing Authority (in the case of a public housing complex)
____ Owner (in the case of a private housing complex)
____ Management company or other governing body of a housing complex

Executive Director and/or Contact Person:_____

Address:_____
_____
Telephone#_____FAX:_____email:_____

The Applicant represents and warrants that all housing complexes with respect to which this application is submitted currently are in compliance with the Division of Elderly Affairs "Rules and Regulations Governing Rhode Island Security for Housing for the Elderly," which have been promulgated pursuant to RI General Law 42-66.1, Rhode Island Security for the Elderly Act, as the same have been amended.

The Applicant represents and warrants that the person executing this Application on behalf of the Applicant has been duly authorized to do so.

Signature:

_____ (PRINT or TYPE name of applicant entity here)

By: _____ (sign here)
Name:
Title:

Date:_____

Application for Housing Security Grant Program RFP # HS 2014
Name of Private or Public Housing Complex: _____

a. Executive Summary-Demonstration of Need (attach additional pages, as needed; <u>but this section (including all attachments and exhibits) must not exceed 5 pages</u>):

b. Program Narrative-Work Plan (attach additional pages, as needed; <u>but this section (including all attachments and exhibits) must not to exceed 5 pages</u>):

c. Funding and Budget: (attach additional pages, as needed; <u>but budget narrative (including all attachments and exhibits) must not exceed 3 pages</u>):

HOUSING SECURITY PROGRAM

PROPOSED BUDGET

Period of Performance: **FROM:** **TO:**

Agency Name: **DATE:**

ADDRESS: **TELEPHONE:**

PROGRAM: **FEIN #:**

COST CATEGORY GORY	AMOUNT
PROJECT COST:	
PERSONNEL	$
FRINGE BENEFITS	
CONSULTANTS	
IN-STATE TRAVEL	
OUT-OF-STATE TRAVEL	
PRINTING	
SUPPLIES	
EQUIPMENT	
EDUCATION MATERIALS	
OTHER – DIRECT COSTS ONLY	
INDIRECT CHARGES – not applicable	$0.00
TOTAL PROJECT COST:	$
PROJECT FUNDING SOURCES (total project funding sources must be equal to the total project cost):	
MATCHING SHARE (TOTAL FUNDS TO BE CONTRIBUTED TO THE PROJECT BY THE APPLICANT):	$
TOTAL DEA FUNDING REQUEST:	**$14,290.00**
TOTAL PROJECT FUNDING SOURCES:	$

BUDGET JUSTIFICATION

DETAIL OF PERSONNEL

NAME	POSITION TITLE	TOTAL ANNUAL SALARY $	TOTAL ANNUAL FRINGE $	TOTAL ANNUAL SALARY & FRINGE CHARGEABLE TO PROJECT	TOTAL SALARY & FRINGE CHARGEABLE TO THE GRANT $
TOTAL REQUEST					$

DETAIL OF CONSULTANT

NAME	POSITION TITLE	HOURLY RATE $	NUMBER OF HOURS	TOTAL COST CHARGEABLE TO PROJECT	TOTAL COST CHARGEABLE TO THE GRANT $
TOTAL REQUEST					$

EXPLANATION OF ALL OTHER DIRECT EXPENSES

EXPENSE CATEGORY	DESCRIPTION	TOTAL COST TO PROJECT	TOTAL COST CHARGEABLE TO GRANT
TOTAL REQUEST			$

State of Rhode Island & Providence Plantations

Department Human Services/Division of Elderly Affairs

Name of Applicant: _____

ANNUAL CERTIFICATION
DRUG-FREE WORKPLACE REQUIREMENTS
DEPARTMENT HUMAN SERVICES/DIVISION OF ELDERLY AFFAIRS GRANTEE AGENCIES

This certification is required by the regulations implementing the Drug-Free Workplace Act of 1988, 45 C.F.R. Part 76, Subpart F. The regulations, published in the May 25, 1990 Federal Register require certification by grantees, prior to award, that they will maintain a drug-free workplace. Section 76.630© of the regulations provide that a grantee that is a State may elect to make once certification in each Federal fiscal year (see Section 76.630(b) in regard to mandatory formula grants. The certification set out below is a material representation of fact upon which reliance will be placed when the agency determines to award the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government-wide supervision or debarment (see 45 C.F.R. Part 76, Sections 76.615 and 76.620).

A. The grantee certifies that it will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employee that the unlawful manufacture, distribution, dispension, possession, or use of a controlled substance is prohibited in the grantee; workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an ongoing drug-free awareness program to inform about:

1. the dangers of drug abuse in the workplace;

2. the grantee's policy of maintaining drug-free workplace.

3. Any available drug counseling, rehabilitation, and employee assistance programs; and,

4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

(c) Making it a requirement that each employee to be engaged in the performance of the grant by giving a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a conditions of employment under the grant, the employee will:

1. abide by the terms of the statement; and

2. notify the employer, in writing, of his or her conviction for a violation of a criminal drug statute occurring in the workplace, no later than five (5) days after such conviction.

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ANNUAL CERTIFICATION DRUG-FREE WORKPLACE REQUIREMENTS

(e) Notifying the agency, in writing, within ten (10) calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title to: Division of Grants Management & Oversight Office of Management and Acquisition, U.S. Department of Health & Human Services – Room 517 D, 200 Independence Avenue, S. W. Washington, D.C. 20201. Notice shall include the identification number(s) of each affected grant.

(f) Taking one of the following actions within thirty (30) calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted.

1. taking appropriate action against such an employee, up to and including termination, consistent with the requirements of the *Rehabilitation Act of 1973*, as amended, or

2. requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health law enforcement, or other appropriate agency.

(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).

B. the grantee may insert in the space provided below the site for the performance of work done in connection with the specific grant; Place of Performance (street address, city, county, state, zip code).

Place of Performance: Name: _____

Address: _____

_____

Name of Applicant: _____

Name and Title of Authorized Representative: _____

Signature: _____ Date: _____

State of Rhode Island & Providence Plantations

Department of Human Services/Division of Elderly Affairs

ASSURANCE OF COMPLIANCE WITH SECTION 504 OF THE REHABILITATION ACT OF 1973, AS AMENDED

The undersigned (hereinafter called the "recipient") **hereby agrees that** it will comply with section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), all requirements imposed by the applicable HEW regulations (45 C.F.R. Part 84), and all guidelines and interpretations issued pursuant thereto.

Pursuant to subsection 84.5(a) of the regulations [45 C.F.R. 84.55(a)], the recipient gives this Assurance in consideration of and for the purpose of obtaining any and all federal grants, loans, contracts (except procurement contracts and contracts of insurance or guaranty), property, discounts, or other federal financial assistance extended by the Department of Health, Education & Welfare after the date of this Assurance, including payments or other assistance made after such date on applications for federal assistance that were approved before such date. The recipient recognizes and agrees that such federal financial assistance will be extended in reliance on the representations and agreements made in this Assurance and that the United States will have the right to enforce this Assurance through lawful mean. This Assurance is binding on the recipient, its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign this Assurance on behalf of the recipient.

This Assurance obligates the recipient for the period during which federal financial assistance is extended to it by Department of Health Education and Welfare, or where the assistance is in the form of real or person property, for the period in subsection 84.5(b) of the regulations [45 C.F.R. 84.5(b)].

The recipient employs fifteen (15) or more persons, and, pursuant to section 84.7(a) or the A74 regulations [45 C.F.R. 84.7(a)], has designated the following person(s) to coordinate its efforts to comply with HEW regulations:

Applicant Name: _____

Address: _____

FEIN: _____

_____ _____

Signature of Chief Executive Officer Date

If there has been a change in name or ownership within the last year, please PRINT the former name below:

State of Rhode Island & Providence Plantations

Department of Human Services/Division of Elderly Affairs

TITLE VI OF THE CIVIL RIGHTS ACT OF 1964

_____ hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964 (P.L. 88-352) and all requirements imposed by or pursuant to the Regulations of the Department of Health, Education & Welfare (45 C.F.R. Part 80) issued pursuant to that title, to the and that, in accordance with Title VI of that Act and the Regulations, no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, denied the benefits of or be otherwise subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department; and,

Hereby gives assurances that it will immediately take any measures necessary to effectuate this agreement.

If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the Applicant by the Department, this assurance shall obligate the Applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits. If any personal property is so provided, this assurance shall obligate the Applicant for the period during which it retains ownership or possession of the property. In all other cases, this assurance shall obligate the Applicant for the period during which the Federal financial assistance is extended to it by the Department.

THIS ASSURANCE is given in consideration of and for the purpose of obtaining any and all Federal grants, loans, contracts, property, discounts or other Federal financial assistance extended after the date hereof to the Applicant by the Department, including installment payments after such date on account of applications for Federal financial assistance which were approved before such date. The applicant recognizes and agrees that such Federal financial assistance will be extended in reliance on the representations and agreements made in this assurance, and that the United States shall have the right to seek judicial enforcement of this assurance. This assurance is binding on the Applicant, its successors, transferees, and assignees, and the person or persons whose signatures appears below are authorized to sign this assurance on behalf of the Applicant.

Signature: _____
Chief Executive Officer

Applicant Name: _____

Address: _____
_____

Telephone Number: _____ Extension _____

State of Rhode Island & Providence Plantations

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Certification Regarding Lobbying

The undersigned certifies, to the best of his knowledge and belief, that:

1. **No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan or cooperative agreement.**

2. **If any funds other than federal appropriated funds have been paid or will be paid to any person for influence or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal contract, grant, loan or cooperative agreement, the undersigned shall complete and submit Standard Form – LLL, "*Disclosure Form to Report Lobbying*" in accordance with its instructions.**

3. **The undersigned shall require that the language of this certification be included in the ward documents for all sub-awards at all tiers (including sub-contractors, sub-grants, and contracts under grants, loans and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.**

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more that $100,000 for each failure.

Applicant Name: _____

Signature: _____

Chief Executive Officer

_____

Date

Address: _____

_____

State of Rhode Island and Providence Plantations

Department of Human Services/Division of Elderly Affairs

Name of Agency: _____

ANNUAL CERTIFICATION
REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS
As required by state and Federal law for contractors who receive in excess of $100,000 in state and/or Federal funds

A. The grantee, as the primary participant, certifies to the best of its knowledge and belief, that it and its principals:

1. **are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any state or Federal department or agency;**
2. **have not within a three year period preceding this proposal and/or during this grant period been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, state, or local) transaction or contract under public transaction; violation of Federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;**
3. **are not presently indicted or otherwise criminally or civilly charged by a governmental entity (federal, state or local) with commission of any of the offenses in the above paragraphs of this certification; and**
4. **have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, state or local) terminated for cause or default.**

C. Where the grantee, as the primary participant is unable to certify any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Further, if during the duration of this agreement, the grantee or any principal of the agency is subject to suspension or debarment, DEA will be notified immediately upon issuance of the action and in no case more than 14 days after issuance of the action.

Agency Name: _____
Address of Agency: _____
_____

Signature: _____
Chief Executive Officer

Date_____