



Decatur
Housing
Authority

Experience More.

REQUEST FOR PROPOSALS

(RFP)

NO. GA-011-2022-02

Flooring Replacement Services

(Tile, Carpet, VCT & LVCT)

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1.0 INTRODUCTION

The Decatur Housing Authority (hereinafter, “DHA”) was established in 1938 with its primary focus being on building housing for low-income households. Over the years, the Housing Authority has expanded its focus to include the revitalization of the Decatur community through the renewal and redevelopment of substandard housing, as well as improving facilities in the downtown area.

Today, the Authority’s philosophy emphasizes not only providing much-needed housing for the lower-income residents of our community but also providing our participants with the necessary tools to build better lives for themselves through self-sufficiency.

The Authority has also examined the need for diversity in the Decatur community and the inability of many of the people who work in our community to afford to live in Decatur. To address the need for affordable housing opportunities within the city limits of Decatur, we have formed partnerships in our community to build several developments that provide some of this much-needed affordable housing for teachers, police and fire personnel, and other employees in Decatur.

The Housing Authority of the City of Decatur, Georgia offers many programs and services to meet the needs of the City of Decatur and to provide for its growth and development, and to assist individuals and families at varying levels of income to afford to live in quality housing in the City of Decatur.

Our programs are designed to meet the needs of renters, owners, and hopeful owners, welfare recipients, young families, service workers, police and fire personnel, the elderly, and many others.

With these goals in mind, the Authority plans to develop and implement programs that are specifically designed to improve the lives our families, promote our thriving community, and foster economic development within our city.

Additionally, the Authority offers programs directly to the residents of its affordable housing rental communities.

In keeping with its mandate to provide efficient and effective services, DHA is now soliciting proposals from qualified, licensed, and insured entities to provide Carpet and Tile Replacement Service for our properties. All proposals submitted in response to this solicitation must conform to all requirements and specifications outlined within this document and any designated attachments in its entirety.

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2.0 RFP INFORMATION AT A GLANCE – Table 1

TABLE ITEM DESCRIPTION	DETAILED INFORMATION
CONTACT PERSON	<ul style="list-style-type: none"> • Lawton Jones, Technical Services Director • NOTE: Unless otherwise specified, any reference herein to “Contracting Officer” or “CO” shall be a reference to Mr. Jones
HOW TO OBTAIN THE RFP DOCUMENTS	<ul style="list-style-type: none"> • To access the RFP Documents, go to the Decatur Housing Website which is www.decaurhousing.org • Proceed to the left navigation panel and click on “Contracting Proposals” • Click on the applicable RFP or RFQ document • Be sure to download all applicable forms and documents <p>If you have any problems accessing the documents, please contact Karen Atchley at 404-270-2108</p>
PRE-CONFERENCE MEETING	<ul style="list-style-type: none"> • No pre-conference meeting will be held for this RFP.
DEADLINE TO SUBMIT QUESTIONS	<ul style="list-style-type: none"> • The deadline to submit questions for this RFP will be Friday, May 6, 2022, by 3:00 p.m. • Answers to all questions will be posted on the DHA website no later than Monday, May 9, 2022, by 3:00 p.m.
HOW TO FULLY RESPOND TO THIS RFP BY SUBMITTING A PROPOSAL	<ul style="list-style-type: none"> • As instructed within Section 5.3 of this RFP Document, please submit (1) ORIGINAL copy and (3) copies of the original to: Decatur Housing Authority, Attention: Lawton Jones, 750 Commerce Drive, Decatur, GA 30030 • On the outside of the envelope be sure to write down the number and name of this RFP. • Be sure that all required forms are executed and notarized (if necessary) • Be sure that all required forms have been included with your proposal
PROPOSAL SUBMITTAL RETURN & DEADLINE	<ul style="list-style-type: none"> • Proposals must be submitted by Friday, May 13, 2022, at 3:00 p.m. • Send to: Decatur Housing Authority, Attention: Lawton Jones, 750 Commerce Dr., Suite 400, Decatur, GA 30030 • NOTE: Hard copies of the proposal must be received in-hand and time-stamped by DHA no later than 3:00 p.m. EST on the date provided above or the proposal will not be considered a valid submission
DHA EVALUATION TIMELINE	<ul style="list-style-type: none"> • Evaluations of the proposals will take place between, Monday, May 16th thru Friday, May 20th, 2022
POTENTIAL INTERVIEWS (if needed)	<ul style="list-style-type: none"> • Interviews, if necessary, will take place between Monday, May 23rd thru Thursday, May 26th, 2022
PROPOSAL AWARD	<ul style="list-style-type: none"> • The selected contractor will be awarded on Friday, June 6th, 2022

3.0 THE AUTHORITY RESERVES THE RIGHT TO:

3.1 RIGHT TO REJECT, WAIVE, OR TERMINATE THE RFP

Reject any or all proposals, to waive any informality in the RFP process, or to terminate the RFP process at any time, if deemed by DHA to be in its best interest.

3.2 RIGHT TO NOT AWARD

Not award a contract pursuant to this RFP.

3.3 RIGHT TO TERMINATE

Terminate a contract awarded pursuant to this RFP, at any time for its convenience upon 10 days written notice to the successful proposer(s).

3.4 RIGHT TO DETERMINE TIME AND LOCATION

Determine the days, hours, and locations that the successful proposer(s) shall provide the services called for in this RFP.

3.5 RIGHT TO RETAIN PROPOSALS

Retain all proposals submitted and not permit withdrawal for a period of 60 days subsequent to the deadline for receiving proposals without the written consent of CO.

3.6 RIGHT TO NEGOTIATE

Negotiate a fee structure with the selected firm.

3.7 RIGHT TO REJECT ANY PROPOSAL

Reject and not consider any proposal that does not meet the requirements of this RFP, including but not necessarily limited to incomplete proposals and/or proposals offering alternate or non-requested services.

3.8 NO OBLIGATION TO COMPENSATE

Have no obligation to compensate any proposer for any costs incurred in responding to this RFP.

3.9 RIGHT TO PROHIBIT

At any time during the RFP or contract process to prohibit any further participation by a proposer or reject any proposal submitted that does not conform to any of the requirements detailed herein. By downloading an electronic RFP, each prospective proposer is thereby agreeing to abide by all terms and conditions listed within this document and further agrees that he/she will inform the CO in writing within five (5) days of the discovery of any item listed herein or of any item that is issued thereafter by DHA that he/she feels needs to be addressed. Failure to abide by this timeframe shall relieve DHA, but not the prospective proposer, of any responsibility pertaining to such issue.

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4.0 PROPERTY INFORMATION – Table 2

Decatur Housing Authority is seeking a qualified Carpet and Tile Replacement Service Contractor for the following properties:

PROPERTY NAME & DESCRIPTION	PHYSICAL BUILDING ADDRESSES & PROPERTY DETAILS
<p>Allen Wilson – Phase 1</p> <ul style="list-style-type: none"> • 2 Residential Buildings • Total of 40 units 	<ul style="list-style-type: none"> • Building 1 – 1480 Commerce Drive, Decatur, GA, 30030 • Building 2 – 251 Robin Street, Decatur, GA, 30030 • Unit Configurations: <ul style="list-style-type: none"> - 1 Bedroom Flats – 650 sq. ft. – 8 units - 3 Bedroom Flats – 1,125-1,199 sq. ft. – 8 units - 2 Bedroom Townhomes – 1,058-1,128 sq. ft. – 16 units - 3 Bedroom Townhomes – 1,376-1,397 sq. ft. – 8 units
<p>Allen Wilson – Phase 2 – aka “The Oliver House”</p> <ul style="list-style-type: none"> • 1 Residential Building • Total of 80 units 	<ul style="list-style-type: none"> • 1450 Commerce Drive, Decatur, GA, 30030 • Community Center • Common Areas: <ul style="list-style-type: none"> - Management Office - Meeting Rooms - Fitness Room - Laundry Rooms • Unit Configurations: <ul style="list-style-type: none"> - 1 Bedroom Flats – 654-783 sq. ft. – 72 units - 2 Bedroom Flats – 1,019 – 1,067 sq. ft. – 8 units
<p>Allen Wilson – Phase 3</p> <ul style="list-style-type: none"> • 8 Residential Buildings (various addresses) • Total of 71 units 	<ul style="list-style-type: none"> • 263 Robin Street, Decatur, GA, 30030 • Unit Configurations: <ul style="list-style-type: none"> - 1 Bedroom Flats – 663 sq. ft. – 6 units - 2 Bedroom Flats – 970-1,053 sq. ft. – 11 units - 2 Bedroom Townhomes – 1,058-1,128 sq. ft. – 38 units - 3 Bedroom Flats – 1,125 sq. ft. – 8 units - 3 Bedroom Townhomes – 1,389-1,409 sq. ft. – 8 units
<p>Oakview Walk</p> <ul style="list-style-type: none"> • 1 Residential Building • Total of 34 units 	<ul style="list-style-type: none"> • 1111 Oakview Road, Decatur, GA, 30030 • Common Areas: <ul style="list-style-type: none"> - Management Office - Computer Lab - Wellness Center - Laundry Room • Unit Configurations: <ul style="list-style-type: none"> - 1 Bedroom Flats – 700-712 sq. ft. – 27 units - 2 Bedroom Flats – 1,000 sq. ft. – 7 units

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Table 2 (continued)

<p>Spring Pointe Apartments</p> <ul style="list-style-type: none"> • 11 Residential Buildings • Total of 65 units 	<ul style="list-style-type: none"> • 1301 Oakview Road, Decatur, GA, 30030 • Common Areas: <ul style="list-style-type: none"> - Management Office - Laundry Room • Unit Configurations: <ul style="list-style-type: none"> - 1 Bedroom Flats – 600 sq. ft. – 10 units - 2 Bedroom Flats – 750 sq. ft. – 47 units - 3 Bedroom Flats – 900 sq. ft. – 8 units
<p>Swanton Heights</p> <ul style="list-style-type: none"> • 12 Residential Buildings • Total of 98 Units 	<ul style="list-style-type: none"> • 481 Electric Avenue, Decatur, GA, 30030 • Community Resource Center • Laundry Facility • Unit Configurations: <ul style="list-style-type: none"> - 1 Bedroom Flats – 30 units - 2 Bedroom Flats – 18 units - 3 Bedroom Flats – 18 units - 4 Bedroom Townhomes – 25 units - 5 Bedroom Townhomes – 7 units
<p>Trinity Walk – Phase 1</p> <ul style="list-style-type: none"> • 4 Residential Buildings • Total of 69 Units 	<ul style="list-style-type: none"> • 421 West Trinity Place, Decatur, GA 30030 • Common Areas: <ul style="list-style-type: none"> - Management Office - Conference Room - Computer Lab - Laundry Room • Unit Configurations: <ul style="list-style-type: none"> - 1 Bedroom Flats – 687-909 sq. ft. – 25 units - 2 Bedroom Flats – 877-909 sq. ft. – 11 units - 3 Bedroom Flats – 1,318-1,319 sq. ft. – 15 units - 2 Bedroom Townhomes – 1,058-1,063 sq. ft. – 18 units
<p>Trinity Walk – Phase 2</p> <ul style="list-style-type: none"> • 3 Residential Buildings • Total of 52 Units 	<ul style="list-style-type: none"> • 421 West Trinity Place, Decatur, GA 30030 • Unit Configurations: <ul style="list-style-type: none"> - 1 Bedroom Flats – 680-723 sq. ft. – 26 units - 2 Bedroom Flats – 860 sq. ft. – 12 units - 3 Bedroom Flats – 1,309 sq. ft. – 6 units - 2 Bedroom Townhomes – 1,047 sq. ft. – 8 units
<p>Chateau Apartments</p> <ul style="list-style-type: none"> • 1 Residential Building • Total of 6 Units 	<ul style="list-style-type: none"> • 923 Clairemont Avenue, Decatur, GA 30030
<p>Other Scattered Sites</p>	<ul style="list-style-type: none"> • 230 Maxwell Street, Decatur, GA 30030 • 1231 Oakview Road, Decatur, GA 30030 • 225 Olympic Place, Decatur, GA 30030 – Triplex – 3 units • 235 Olympic Place, Decatur, GA 30030 – Quadplex – 4 units

5.0 REQUIREMENTS AND SPECIFICATIONS

Decatur Housing Authority is seeking to enter into an agreement with a qualified company for the replacement of Carpet, Tile, VCT, and LVCT Flooring.

5.1 GENERAL SPECIFICATIONS

The following specifications pertain to the replacement of VCT, carpet, pad, and plank flooring at 12 properties in the City of Decatur. The contractor shall examine all aspects of the specifications and visit the sites for the viewing of the different floor plans and community facilities. At a minimum, the firm selected should provide services including, but not limited to, the following:

5.1.1 Equipment

The contractor is to provide all labor, equipment, materials, and supplies for the performance of this work. DHA will not be responsible or otherwise liable for fire, theft, loss, vandalism, and/or damage to the Contractor's tools, equipment, materials, supplies.

5.1.2 Property Damage

Any damages done to the buildings or other property because of the Contractor and/or Subcontractors is the responsibility of the Contractor. Costs of damage and/or replacement caused by the Contractor may, at the discretion of the owner, be charged back to the Contractor.

5.1.3 Experience

The Contractor confirms that he is an expert in this field of work and is fully knowledgeable and experienced in all aspects of procedures, methods, regulations, codes and municipal requirements and the Contractor further acknowledges that the Owner is relying on the expertise.

5.1.4 Materials

All flooring products and chemicals used should be green certified as defined by standards established by Green Seal™ or the U.S. Environmental Protection Agency (EPA). Contractor must provide Property Management with a Material Safety Data Sheet (MSDS) for all products and chemicals being used at facilities. All supplies and materials are subject to DHA approval.

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5.1.5 Response Time, Completion Time, and Penalty

Work is to be started within a maximum of two (2) working days of verbal notification that a unit is ready. Work is to be completed based on the following schedules regardless of the unit size. The response time is inclusive of the dates / time allotted for completion.

- a. If a 1-Bedroom unit is requisitioned, the Contractor is allowed one working day to complete the unit.
- b. If a 2-Bedroom unit is requisitioned, the Contractor is allowed one working day to complete the unit.
- c. If a 3-Bedroom unit is requisitioned, the Contractor is allowed two working days to complete the unit
- d. If a 4-Bedroom unit is requisitioned, the Contractor is allowed three working days to complete the unit.
- e. If more than half of the units requisitioned at any time are 4- or 5-Bedroom Units then one additional day is added to the above maximum working days allowed to complete the unit.

5.1.6 Start and End Time

Working days must be on Monday through Friday between the hours of 8:30 a.m. and 5:00 p.m.

- a. Saturdays, Sundays, and holidays are not part of the accepted work schedule
- b. Failure to either begin or complete work in the prescribed time frame will result in a \$50.00 per unit (each 24-hour day beginning the close of the completion date) being deducted from payment as a late penalty.
- c. A constant failure to start and complete the work within the prescribed time frame or excessive call backs is enough grounds for termination of the contract for failure to perform in the time allotted.
- d. **NOTE:** The Contractor is **required** to have each unit inspected as it is completed, regardless of the number of units on each requisition.

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5.2 SCOPE OF WORK

5.2.1 Preparation

- a. Move furniture as needed to complete the project
- b. Remove and dispose of existing carpet, cove base
- c. Prepare subflooring for application of new materials
- d. Remove dirt, oil, grease, or other foreign matter from surfaces to receive floor covering materials

5.2.2 Subflooring

- a. The Contractor acknowledges that the flooring subsurface for a project shall be concrete in 1st floor units, Gypcrete or equal, on the 2nd to 4th floors.
- b. The Contractor shall carefully inspect all floor surfaces for square, level, and condition prior to installing and/or applying the contract materials to ensure the surfaces provided are enough and satisfactory to provide a high-quality finished product free from defects. The Contractor is to immediately report any substandard surface to the Owner and not proceed until the defect is corrected in accordance with acceptable standards.

5.2.3 Application of Adhesives

- a. Mix and apply adhesives in accordance with manufacturer's instructions
- b. Provide safety precautions during mixing and applications as recommended by adhesive manufacturer
- c. Apply adhesive uniformly over surfaces:
 - Apply adhesive to only that area which can be covered by floor covering material within the recommended working time
 - Remove adhesive which dries or films over
 - Do not soil walls, bases, and adjacent areas with adhesives
 - Promptly remove any spillage
 -
- d. Clean trowel and re-work notches as necessary to ensure proper application of adhesive

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5.2.3 Carpeting

- a. The Contractor shall submit seam layouts of all carpeted areas, approved by the Owner, prior to commencing work. The Contractor shall not deviate from the approved seam layout
- b. Carpeting shall be installed with a consistent pile direction
- c. All seams must be trimmed on the row
- d. For tufted carpet, trim all seams with a cushion back or loop pile cutter
- e. A transition strip must be used to protect any exposed edges

5.2.4 Tile, VCT, and LVCT

- a. The Contractor shall submit directional layouts of all areas for tile, VCT and LVCT areas, approved by the Owner, prior to commencing work. The Contractor shall not deviate from the approved seam layout

5.2.5 Trim Work

- a. The Contractor shall supply and install matched shoe molding to all areas of laminate hardwood flooring
- b. The Contractor shall provide matching transition strips between various finished floor surfaces, including the ceramic levels and materials where required. The design, material and application of such transition strips are to be to the satisfaction of the Owner

6.0 PROPOSAL SUBMITTAL FORMAT

6.1 TABBED PROPOSAL SUBMITTAL

So that DHA can properly evaluate the offers received, all proposals submitted in response to this RFP must be formatted in accordance with the sequence noted below.

- Each category must be separated by numbered index dividers (which number extends so that each tab can be located without opening the proposal) and labeled with each tab numbered sequentially as show below.
- If no information is to be placed under any of the tabs, including the “optional” tabs, place a statement such as, “NO INFORMATION IS BEING PLACED UNDER THIS TAB” or “THIS TAB LEFT INTENTIONALLY BLANK.” **DO NOT ELIMINATE ANY OF THE TABS**
- None of the proposed services may conflict with any requirement DHA has published herein or has issued by addendum

6.1.1 TAB 1: Form of Proposal – “Attachment A”

This one-page form must be fully completed, executed where provided thereon and submitted under this tab as a part of the proposal submittal.

6.1.2 TAB 2: Profile of Firm Form – “Attachment B”

This two-page form must be fully completed, executed, and submitted under this tab as a part of the proposal submittal.

6.1.3 TAB 3: “Statement of Qualifications”

Briefly state the qualifications of the firm. DHA requests that the description be as short as possible. Identify the individual(s) who will manage (individually or collectively, the Manager) this project on a day-to-day basis.

6.1.4 TAB 4: Price Proposal – “Attachment I”

Complete this form and place under this tab as part of the proposal submittal.

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6.1.5 TAB 5: Client Information / References

The proposer shall submit a listing of former or current clients, including those from a Public Housing Authority, for whom the proposer has performed similar service to those being proposed herein. This listing shall, at a minimum, include:

- The Client's name
- The Client's contact name
- The Client's email address
- The Client's telephone number
- A brief narrative description and scope of the service(s) and the dates these services were provided, including description of the specific services, scope, size, cost, and principal elements.

6.1.6 TAB 6: Form of Non-Collusive Affidavit – “Attachment C”

This form must be completed in full, executed and submitted under this tab as part of the proposal submittal.

6.1.7 TAB 7: E-Verify Certification – “Attachment D-1”

The proposer must submit an executed copy of the E-Verify Certification form, “Attachment D-1.”

6.1.8 TAB 8: Equal Employment Opportunity / Supplier Diversity – “Attachment H”

The proposer must submit under this tab a copy of its Equal Opportunity Employment Policy and a complete description of the positive steps it will take to ensure compliance, to the greatest extent feasible, with the regulations pertaining to supplier diversity (e.g., small, minority, and women-owned businesses). If no new hires, suppliers, or vendors are contemplated proposer should so state.

6.1.9 TAB 9: Additional Forms (“Attachments F & G”)

Include under this tab the following forms completed in full and executed:

- Company Hiring Policy (*“Attachment F”*)
- Certification of a Drug Free Workplace Form (*“Attachment G”*)

6.2 BINDING METHOD

It is preferable and recommended that the proposer bind the proposal submissions in such a manner that DHA can, if needed, remove the binding or the pages from the cover (i.e., 3-ring binder, etc.) to make copies, and then return the proposal submittal to its original condition.

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6.3 SUBMISSION OF PROPOSAL

All proposals must be submitted and time-stamped in the DHA Central Office by no later than the submittal deadline stated herein (or within any ensuing addendum). A total of one (1) original signature copy (marked "ORIGINAL") and three (3) exact copies of the original, shall be placed unfolded in a sealed package and addressed to:

**The Housing Authority of the City of Decatur, GA
Attention: Lawton Jones, Technical Services Director
750 Commerce Drive, Suite 400
Decatur, GA 30030**

The package exterior must be clearly marked with the above noted RFP name and number along with the proposer's name and return address.

NOTE: Proposals received after the published deadline will not be accepted.

6.4 SUBMISSION CONDITIONS

DO NOT FOLD OR MAKE ANY ADDITIONAL MARKS, NOTATIONS OR REQUIREMENTS ON THE DOCUMENTS TO BE SUBMITTED!

Proposers are not allowed to change any requirements or forms contained herein, either by making or entering onto these documents or the documents submitted any revisions or additions; and if any such additional marks, notations or requirements are entered on any of the documents that are submitted to DHA by the proposer, such may invalidate that proposal. If, after accepting such a proposal, DHA decides that any such entry changed the intent of the proposal that DHA intended to receive, DHA may accept the proposal and the proposal shall be considered by DHA as if those additional marks, notations, or requirements were not entered on such.

By downloading these documents, each prospective proposer that does so is thereby agreeing to confirm all notices that DHA delivers to him/her as instructed, and by submitting a proposal, the proposer is thereby agreeing to abide by all terms and conditions published herein and by addendum pertaining to this RFP.

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6.5 SUBMISSION RESPONSIBILITIES

It shall be the responsibility of each proposer to be aware of and to abide by all dates, times, conditions, requirements, and specifications set forth within all applicable documents issued by DHA, including the RFP document, the documents listed in this RFP, and any addenda, and required attachments submitted by the proposer. By completing, signing, and submitting the completed documents, the proposer is stating his/her agreement to comply with all conditions and requirements set forth within those documents. Written notice from the proposer not authorized in writing by the CO to exclude any of DHA requirements contained within the documents may cause that proposer to not be considered for award.

6.6 CONTACT WITH DHA

It is the responsibility of the proposer to address all communication and correspondence pertaining to the RFP process to the designated CO, Lawton Jones. Proposers must not make inquiry or communicate with any other DHA staff member or official (including members of the DHA Board of Commissioners) pertaining to this RFP. Failure to abide by these requirements may be cause for DHA to not consider a proposal submittal received from any proposer who has not abided by this directive.

6.7 EQUAL EMPLOYMENT OPPORTUNITY AND SUPPLIER DIVERSITY

Both the Contractor and DHA have, pursuant to HUD regulation, certain responsibilities pertaining to the hiring and retention of personnel and subcontractors.

6.7.1 24 CFR § 85.36(e) states:

(e) Contracting with small and minority firms, women's business enterprise and labor surplus area firms.

- (1) The grantee and sub grantee will take all necessary affirmative steps to assure that minority firms, women's business enterprises, and labor surplus area firms are used when possible.*
- (2) Affirmative steps shall include:
 - (i) Placing qualified small and minority businesses and women's business enterprises on solicitation lists;*
 - (ii) Assuring that small and minority businesses, and women's business enterprises are solicited whenever they are potential sources;*
 - (iii) Dividing total requirements when economically feasible, into smaller tasks or quantities to permit maximum**

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participation by small and minority business, and women's business enterprises;

- (iv) Establishing delivery schedules, where the requirement permits, which encourage participation by small and minority business, and women's business enterprises;*
- (v) Using the services and assistance of the Small Business Administration, and the Minority Business Development Agency of the Department of Commerce; and*
- (vi) Requiring the prime contractor, if subcontracts are to be let, to take the affirmative steps listed in paragraphs (e)(2)(i) through (v) of this section.*

6.7.2 DHA Procurement Policy states that our Agency will:

- a. Assistance to Small and Other Business, Required Efforts;*
- b. Including such firms, when qualified, on solicitation mailing lists;*
- c. Encouraging their participation through direct solicitation of bids or proposals whenever they are potential sources;*
- d. Dividing total requirements, when economically feasible, into smaller tasks or quantities to permit maximum participation by such firms;*
- e. Establishing delivery schedules, where the requirement permits, which encourage participation by such firms;*
- f. Using the services and assistance of the Small Business Administration, and the Minority Business Development Agency of the Department of Commerce;*

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7.0 PROPOSAL SUBMITTAL FORMAT

7.1 EVALUATION FACTORS – Table 3

The following factors will be utilized by DHA to evaluate each proposal submittal received; award of points for each listed factor will be based upon the documentation that the proposer submits within his/her proposal submittal:

FACTOR NUMBER	FACTOR MAX POINT VALUE	FACTOR TYPE	FACTOR DESCRIPTION
1	20 points	Subjective	ABILITY TO PERFORM THE WORK Evidence of the proposer’s ability to perform the work as indicated by profiles of the principals’ and staff’s professional and technical competence and experience, their facilities and equipment.
2	25 points	Subjective	CAPABILITY Evidence of the proposer’s capability to provide professional services in a timely manner and number of crew members that will be provided for this contract.
3	20 points	Subjective	PAST PERFORMANCE Evidence of the proposer’s past performance in similar type of work and compliance with performance schedules.
4	20 points	Subjective	METHODOLOGY AND APPROACH Evidence of the Methodology and Approach to performing and executing the Scope of work as outlined in this RFP.
5	15 points	Objective	PRICING The price proposal as it relates to the Scope of Work for requested services and adjustment per year is shown to be fair and reasonable at 3% per year.
Total	100 points	Number of points possible	POINTS When the proposals are evaluated using the factors above the evaluation committee member will assign points to each factor with a max point value not to exceed 100 points.

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7.2 EVALUATION METHOD

7.2.1 Initial Evaluation for Responsiveness

Each proposal received will first be evaluated for responsiveness (i.e., meets minimum of the requirements). DHA reserves the right to reject any proposals deemed not minimally responsive. Such firms will be notified in writing.

7.2.2 Evaluation Packet

An evaluation packet will be prepared for each evaluator, typically including but not required the following documents:

- Instructions to Evaluators
- Proposal Tabulation Form
- Written Narrative Form for each Proposer
- Recap of each Proposer's responsiveness
- Copy of all pertinent RFP documents

7.2.3 Evaluation Committee

DHA anticipates that it will select a minimum of a three-person committee to evaluate each of the responsive "hard copy" proposals submitted in response to this RFP.

PLEASE NOTE: No proposer shall be informed at any time during or after the RFP process as to the identity of any evaluation committee member. If, by chance, a proposer does become aware of the identity of such person(s), he /she SHALL NOT make any attempt to contact or discuss with such person anything related to this RFP. As detailed within *Section 7.6* of this document, the designated CO is the only person at DHA that the proposers shall contact pertaining to this RFP. Failure to abide by this requirement may (and most likely will) cause such proposer(s) to be eliminated from consideration for award.

7.2.4 Evaluation

It is anticipated that the CO will evaluate and award points pertaining to Evaluation Factor No. 5 (the "Objective" factor); and that the appointed evaluation committee, independent of the CO or any other person at DHA, will evaluate the responsive proposals submitted and award points pertaining to Evaluation Factors 1-4 (the "subjective" factors). Upon final completion of the proposal evaluation process, the evaluation committee will forward the completed evaluations to the CO.

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7.2.5 Potential “Best and Finals” Negotiation

The Authority reserves the right to conduct a “Best and Finals” negotiation, which may include oral interviews, with all firms deemed to be in the competitive range. Any firm deemed not to be in the competitive range shall be notified of such in writing by the Authority in as timely a manner as possible, but in no case within longer than five (5) business days after the beginning of such negotiations with the firms deemed to be in the competitive range.

7.2.6 Determination of Top-Ranked Proposer

The “Subjective” points awarded by the evaluation committee shall be combined with the “Objective” points awarded by the CO to determine the final rankings, which shall be forwarded by the CO to the Executive Director (“ED”) for approval. If the evaluation was performed to the satisfaction of the ED, the final rankings may be forwarded to DHA’s Board of Commissioners (“BOC”) at a scheduled meeting for approval. Contract negotiations may, at DHA’s option, be conducted prior to or after the BOC approval.

- *Minimum Evaluation Results* – To be considered to receive an award a proposer must receive a total calculated average of at least 70 points of the 105 total possible points.
- *Ties* – In the case of a tie in points awarded, the award shall be decided according to *Section 6.12.C of the HUD Procurement Handbook 7460.8 REV 2*, by “drawing lots or other random means of selection.”

7.2.7 Notice of Evaluation Results

If an award is completed, all proposers will receive by mail a “Notice of Results of Evaluation.” Such notice shall inform all proposers of:

- Which proposer received the award.
- Where each proposer placed in the process because of the evaluation of the proposals received.
- Each proposer’s right to a debriefing and to protest.

7.2.8 Restrictions

All persons having familial (including in-laws) and/or employment relationships (past or current) with principals and/or employees of a proposer entity will be excluded from participation on the DHA evaluation committee. Similarly, all persons having ownership interest in and/or contract with a proposer entity will be excluded from participation on the DHA evaluation committee.

8.0 CONTRACT AWARD

8.1 AGREEMENT TO ABIDE BY TERMS AND CONDITIONS

By completing, executing, and submitting the Form of Proposal, "Attachment A", the "proposer is thereby agreeing to abide by all terms and conditions pertaining to this RFP as issued by the Authority". Accordingly, DHA has no responsibility to conduct after the submittal deadline any negotiations pertaining to the contract clauses already published.

8.2 CONTRACT CONDITIONS

The following provisions are considered mandatory conditions of any contract award made by DHA pursuant to this RFP:

8.2.1 Contract and Method of Payment

The final form of contract and scope of services will be negotiated between DHA and the top ranked firm after the selection process is complete. Invoices with proper document can be submitted on a monthly basis. Submit separate invoices for each project, or as requested by DHA.

8.2.2 Assignment of Personnel

DHA shall retain the right to demand and receive a change in personnel assigned to work if DHA believes that such change is in the best interest of DHA and the completion of the contracted work. Time spent on administrative items should not be billed at the consultant's rate, but at an appropriate administrative rate.

8.3 CONTRACT PERIOD

The Authority anticipates that it will initially award a contract for the period of one (1) year with the option, at the Authority's discretion, of up to six (6) additional one-year option periods, for a total maximum contract period of seven (7) years prior to the Authority issuing another RFP.

8.4 INSURANCE REQUIREMENTS

Prior to award (but not as a part of the proposal submission) the successful proposer will be required to provide:

8.4.1 Workers Compensation Insurance

Include an original certificate evidencing the proposer's current industrial (worker's compensation) insurance carrier and coverage amount.

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8.4.2 General Liability Insurance

Include an original certificate evidencing General Liability coverage, naming the Authority as an additional insured, together with the appropriate endorsement to said policy reflecting the addition of the Authority as an additional insured under said policy (minimum of \$1,000,000 each occurrence, general aggregate minimum limit of \$1,000,000, together with damage to premises and fire damage of \$50,000 and medical expenses any one person of \$5,000), with a commercially reasonable deductible (e.g. “Commercially reasonable,” meaning at least 1% of the “general aggregate minimum” of the policy, with a maximum deductible amount of \$50,000.

8.4.3 Professional Liability Insurance

Include and original certificate showing the proposer’s professional liability and/or “errors and omissions” coverage (minimum of \$1,000,000 each occurrence, general aggregate minimum limit of \$1,000,000), with a deductible of not great than \$5,000.

8.4.4 Automobile Insurance

Include an original certificate showing the proposer’s professional liability and/or “errors and omissions” coverage (minimum of \$1,000,000 each occurrence, general aggregate minimum limit of t\$1,000,000), with a commercially reasonable deductible (e.g., “commercially reasonable,” meaning at least 1% of the “general aggregate minimum” of the policy, with a maximum deductible amount of \$50,000.

8.4.5 Certificates

The requested related information shall also be entered where provided for on the Profile of Firm Form (“Attachment B”). **DO NOT INCLUDE COPIES OF INSURANCE CERTIFICATES WITHIN THE PROPOSAL SUBMITTAL** – the Authority will garner the necessary certificates from the successful proposer prior to contract execution.

8.5 RIGHT TO NEGOTIATE FINAL FEES

The Authority shall retain the right to negotiate the amount of fees that are paid to the successful proposer, meaning the fees proposed by the top-rated proposer during negotiations may, at the Authority’s option, be the basis for the beginning of negotiations. Such negotiations shall begin after the Authority has chosen a top-rated proposer. If such negotiations are not, in the opinion of the CO, successfully concluded within five (5) business days, the Authority shall retain the right to end such negotiations and begin negotiations with the next-rated proposer.

8.6 CONTRACT SERVICE STANDARDS

All work performed pursuant to this RFP must conform and comply with all applicable local, state, and federal codes, statutes, laws, and regulations.

ATTACHMENTS

(**NOTE:** Some of the Attached documents will need to be returned along with your proposal, be sure these forms are executed, and notarized if required. Other documents included are for information purposes only)

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9.0 List of Attachments – Table 4

ATTACHMENT IDENTIFIER	ATTACHMENT NAME	ATTACHMENT ACTION STEP
Attachment A	Form of Proposal	Submit with Proposal under “ Tab 1 ”
Attachment B	Profile of Firm	Submit with Proposal under “ Tab 2 ”
Attachment C	E-Verify Information	Information Only
Attachment C-1	E-Verify Certification Affidavits	Submit with Proposal under “ Tab 7 ”
Attachment D	General Conditions	Information Only
Attachment E	Non-Collusive Affidavit	Submit with Proposal under “ Tab 6 ”
Attachment F	Company Hiring Policy Form	Submit with Proposal under “ Tab 9 ”
Attachment G	Certification of a Drug-Free Workplace Form	Submit with Proposal under “ Tab 9 ”
Attachment H	Certification Concerning EEO Form	Submit with Proposal under “ Tab 8 ”
Attachment I	Price Proposal	Submit with Proposal under “ Tab 4 ”

ATTACHMENT “A”

Form of Proposal

(NOTE: This form will be placed under “**TAB 1**” of your hard copy original)

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9.1 ATTACHMENT A – Form of Proposal

Instructions

Unless otherwise specifically required, the items listed below must be completed and included in the proposal submittal. Please complete this form by marking “X” in the first column to confirm that the referenced completed information has been included with the “hard copy” original.

NOTE: This form will be placed under “**TAB 1**” of your hard copy original. Please prepare **(3)** additional copies of the original for a total of **(4)** proposals that are to be submitted.

“X” ITEM IS INCLUDED	TAB DIVIDER NUMBER	FORM NAME OR DETAILS OF INFORMATION TO BE SUBMITTED	ATTACHMENT IDENTIFIER
	Tab 1	Form of Proposal	A – this form
	Tab 2	Form HUD-5369-C	B
	Tab 3	Profile of Firm Form	C
	Tab 4	Statement of Qualifications – <i>See Section 6.1.4 for details</i>	N/A
	Tab 5	Price Proposal	M
	Tab 6	Client Information/References – <i>See Section 6.1.6 for details</i>	N/A
	Tab 7	Form of Non-Collusive Affidavit	H
	Tab 8	E-Verify Affidavit Forms	G-1
	Tab 9	Certification Concerning EEO Form	L
	Tab 10	Company Hiring Policy	J
	Tab 10	Certification of a Drug Free Workplace	K

PROPOSER’S STATEMENT

The undersigned proposer hereby states that by completing and submitting this form and all other documents within this proposal submittal, he/she is verifying that all information provided herein is, to the best of his/her knowledge, true and accurate, and that if DHA discovers that any information entered herein to be false, that shall entitle DHA to not consider or make award or to cancel any award with the undersigned party. Further, by completing and submitting the proposal submittal, and by entering and submitting the undersigned proposer is thereby agreeing to abide by all terms and conditions pertaining to this RFP as issued by DHA via the hard copy original, and by executing all forms provided. Pursuant to all RFP Documents, this Form of Proposal, and all attachments, and pursuant to all completed documents submitted, the undersigned proposes to supply DHA with the services described herein for the fees entered within the areas provided pertaining to this RFP.

Signature	Printed Name	Company	Date

ATTACHMENT “B”

Profile of Firm Form

(NOTE: This form must be fully completed and placed under “**TAB 2**” of your hard copy original)

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9.2 ATTACHMENT B – Profile of Firm Form

NOTE:

- This form will be placed under “**TAB 2**” of your hard copy original.
- This form must be completed by each contractor and sub-contractor

PRIME or SUB-CONTRACTOR: _____

NAME OF FIRM: _____

STREET ADDRESS: _____

CITY: _____ **STATE:** ____ **ZIP:** _____

1) Company Information:

- Please attach a brief biography/resume of the company, including the following information:
 - Year Firm was established
 - Year Firm was established in [Jurisdiction]
 - Former Name and year Established (if applicable)
 - Name of Parent Company and Date Acquired (if applicable)

2) Principals / Partners

- List the name, title, and percentage of ownership for the Principals / Partners in the Firm in the table below.
- Please submit under **Tab No. 2** a brief professional resume for each):

NAME	TITLE	% OF OWNERSHIP

3) Project Manager / Supervisory Personnel

- List below the individual(s) or supervisory personnel that will work on the project
- Please submit under **Tab No. 2** a brief resume for each (do not duplicate any resumes for the individuals provided above in Step No. 2).

NAME	TITLE

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ATTACHMENT “B” PROFILE OF FIRM FORM (continued)

4) Proposer Diversity Statement

- You must select all the following that apply to the ownership of this firm and enter where provided the correct percentage of ownership for each category:

Caucasian American (Male) _____%

Public Held Corporation _____%

Government Agency _____%

Non-Profit Organization _____%

Resident (RBE), Minority (MBE), or Woman-Owned (WBE) Business Enterprise

○ Resident-Owned _____%

○ African American _____%

○ Native American _____%

○ Hispanic American _____%

○ Asian/Pacific American _____%

○ Hasidic Jew _____%

○ Asian/Indian American _____%

○ Woman-Owned _____%

○ Woman-Owned (Caucasian) _____%

○ Disabled Veteran _____%

○ Other (Specify): _____%

WMBE Certification Number _____

○ Certified by (Agency): _____

○ **NOTE:** A Certification Number Not Required to Propose, enter if available

5) Federal Tax ID Number: _____

6) Business License Number [Appropriate Jurisdiction: _____

7) State of (list state) License Type and Number: _____

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8) Worker's Compensation Insurance Carrier: _____

a. **Policy Number:** _____

b. **Expiration Date:** _____

9) General Liability Insurance Carrier: _____

a. **Policy Number:** _____

b. **Expiration Date:** _____

10) Professional Liability Insurance Carrier: _____

a. **Policy Number:** _____

b. **Expiration Date:** _____

11) Debarred Statement

Has this firm, or any principal(s) ever been debarred from providing any services by the Federal Government, any state government, the State of Georgia, or any local government agency within or outside the State of Georgia?

YES or **NO**

12) Disclosure Statement

Does this firm or any principals thereof have any current, past, personal, or professional relationship with any Commissioner or Officer of the Decatur Housing Authority?

YES or **NO**

13) Non-Collusive Affidavit

The undersigned party submitting this proposal hereby certifies that such proposal is genuine and not collusive and that said proposer entity has not colluded, conspired, connived, or agreed, directly or indirectly, with any proposer or person, to put in a sham proposal or to refrain from proposing and has not in any manner, directly or indirectly sought by agreement or collusion, or communication or conference with any person, to fix the proposal price, or that of any other proposer or to secure any advantage against the Decatur Housing Authority or any person interested in the proposed contract; and that all statements in said proposal are true.

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ATTACHMENT “B” PROFILE OF FIRM FORM (continued)

14) Verification Statement

The undersigned proposer hereby states that by completing and submitting this form he/she is verifying that all information provided herein is, to the best of his/her knowledge, true and accurate, and agrees that if Decatur Housing Authority discovers that any information entered herein is false, that shall entitle Decatur Housing Authority to not consider nor make award or to cancel any award with the undersigned party.

Printed Name of Owner/Representative

Signature of Owner/Representative

Date

Name of Firm/Company

ATTACHMENT “C”
E-Verify Compliance Information

(**NOTE:** This form is for **INFORMATIONAL** purposes only and will not be included as part of the proposal submittal)

9.3 ATTACHMENT C – E-Verify Compliance Information

E-Verify is an internet-based system to help employers determine if an employee is eligible to work in the United States. E-Verify is currently free to employers and is available in all 50 states. All contractors that will be working on Decatur Housing Authority projects must enroll in E-Verify. Please go to the following website: <https://www.uscis.gov/e-verify>. An E-Verify affidavit must be completed and submitted with the bid proposal.

Please be advised that based on current regulation, our contractors are only required to use E-Verify for **NEW HIRES ONLY** working on our jobsite or properties and not to check people that are currently employed by you. Contractors do have the responsibility to have this same policy/program in place with their lower-tier subs. These policy/procedures may change at any time based on changing laws and regulations.

9.3.1 E-Verify Contact Information

- **For Employers:**
 - Phone Number: 888-464-4218
 - TTY Number: 877-875-6028
 - Email Address: E-Verify@dhs.gov
- **For E-Verify Employer Agents:**
 - Phone Number: 888-464-4218
 - TTY Number: 877-875-6028
 - Email Address: E-VerifyEmployerAgent@dhs.gov
- **For Employees:**
 - Phone Number: 888-897-7781
 - TTY Number: 877-875-6028
 - Email Address: E-Verify@dhs.gov
- They are available Monday through Friday, from 8:00 a.m. to 8:00 p.m. ET, except when the federal government is closed.
- For customers with hearing and speech impairment, the TTY phone is available Monday through Friday, from 8:00 a.m. to 5:00 p.m. ET, except when the federal government is closed.
- The normal response time for e-mail inquiries is two federal government workdays. If more time is needed to respond to the inquiry, you will be contacted within two federal government workdays to explain the need for additional time to respond and an estimated response time.

ATTACHMENT “D”
E-Verify Affidavit Forms

(NOTE: Any of the applicable affidavit forms will be placed under
“TAB 7” of your hard copy original)

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9.4 ATTACHMENT C-1 – E-Verify Affidavit Form – Contractor

Contractor Affidavit under O.C.G.A § 13-10-91(b)(1)

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm, or corporation which is engaged in the physical performance of services on behalf of (Name of Public Employer) has registered with, is authorized to and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization Number User Identification Number	
Date of Authorization	
Name of Contractor	
Name of Project	
Name of Public Employer	

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

Executed on _____, _____, _____ in _____, _____
Day Month Year City State

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME ON THIS
THE _____ DAY OF _____, 202_____

Notary Public

My Commission Expires: _____

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**9.5 ATTACHMENT C-1 – E-Verify Affidavit Form – Subcontractor
Contractor Affidavit under O.C.G.A § 13-10-91(b)(3)**

By executing this affidavit, the undersigned subcontractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a contract with (Name of Contractor) on behalf of (Name of Public Employer) has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the subcontractor with the information required by O.C.G.A. § 13-10-91(b). Additionally, the undersigned subcontractor will forward notice of the receipt of an affidavit from a sub-subcontractor to the contractor within five business days of receipt. If the undersigned subcontractor receives notice that a sub-subcontract has received an affidavit from any other contracted sub-subcontractor, the undersigned subcontractor must forward, within five business days of receipt, an identification number and date of authorization are as follows:

Federal Work Authorization Number	
User Identification Number	
Date of Authorization	
Name of Subcontractor	
Name of Project	
Name of Public Employer	

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

Executed on _____, _____, _____ in _____, _____
Day Month Year City State

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME ON THIS
THE _____ DAY OF _____, 202_____

Notary Public

My Commission Expires: _____

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9.6 ATTACHMENT C-1 – E-Verify Affidavit Form – Sub-Subcontractor Contractor Affidavit under O.C.G.A § 13-10-91(b)(3)

By executing this affidavit, the undersigned subcontractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a contract with (Name of Contractor) on behalf of (Name of Public Employer) has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91. Furthermore, the undersigned subcontractor will continue to use the federal work authorization program throughout the contract period and the undersigned subcontractor will contract for the physical performance of services in satisfaction of such contract only with sub-subcontractors who present an affidavit to the subcontractor with the information required by O.C.G.A. § 13-10-91(b). Additionally, the undersigned subcontractor will forward notice of the receipt of an affidavit from a sub-subcontractor to the contractor within five business days of receipt. If the undersigned subcontractor receives notice that a sub-subcontract has received an affidavit from any other contracted sub-subcontractor, the undersigned subcontractor must forward, within five business days of receipt, an identification number and date of authorization are as follows:

Federal Work Authorization Number	
User Identification Number	
Date of Authorization	
Name of Subcontractor	
Name of Project	
Name of Public Employer	

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

Executed on _____, _____, _____ in _____, _____
Day Month Year City State

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME ON THIS
THE _____ DAY OF _____, 202_____

Notary Public

My Commission Expires: _____

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9.7 ATTACHMENT C-1 – E-Verify Affidavit

O.C.G.A. § 50-36-1(e)(2)(f)(1) Affidavit

By executing this affidavit under oath, as an applicant for a(n)

[*type of public benefit*], as referenced in O.C.G.A. § 50-36-1, from

[*name of government entity*], the undersigned applicant verifies one of the following with respect to any application for a public benefit:

1. I am a United States citizen
2. I am a legal permanent resident of the United States
3. I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other Federal Immigration Agency.
4. My alien number issued by the Department of Homeland Security or Other Federal Immigration Agency is: _____

Alien Number

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by

O.C.G.A. §50-36-1(e)(4)(f)(1)(A), with this affidavit. The secure and verifiable document provided with this affidavit can best be classified as: _____

Name of Document provided

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

Executed on _____, _____, _____ in _____, _____
Day Month Year City State

Signature of Applicant

Printed Name of Applicant

SUBSCRIBED AND SWORN BEFORE ME ON THIS
THE _____ DAY OF _____, 202_____

Notary Public

My Commission Expires: _____

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9.8 ATTACHMENT D – General Conditions

Definitions – Whenever used in any of the Contract Documents, the following meanings shall be given to the terms herein defined:

1. The term “**Contract**” means the Contract executed by the Local Public Housing Agency and the Contractor, of which these General Conditions and General Specifications form a part.
2. The term “**Authority**” or “**Local Public Housing Agency**” means Decatur Housing Authority who is authorized to undertake this contract.
3. The term “**Contractor**” means the person, firm or corporation entering the Contract with the Local Public Housing Agency to perform the work embraced in this Contract.
4. The term “**Project Area**” means the site.
5. The term “**Local Government**” means the City of Decatur, Georgia, within which the site is situated.
6. The term “**Contract Documents**” means and shall include all documents in the Bid package consists of the Bid documents, drawings, and addenda.
7. The term “**General Specifications**” means that part of the Contract Documents which describes, outlines, and stipulates: the quality of the materials to be furnished; the quality of workmanship required; and the methods to be used in carrying out the service work to be performed under this contract.

Assignment of Contract – The Contractor’s obligations and duties under this Contract shall not be assigned in whole or in part by the Contractor without the written approval of the Authority, but this shall not prohibit the assignment of the proceeds due hereunder to a bank or financial institution nor shall this provision preclude the Contractor from subletting as provided in the Contract, parts of the work in accordance with the general practice of the building industry. This Contract may be assigned by the Authority to a corporation, agency, or instrumentality authorized to accept such assignment.

Bidding – All bids are irrevocable for a period of sixty days and the Authority reserves the right to reject any or all bids and to waive any informalities or irregularities in the bidding process. It is the bidder’s responsibility to visit the site and inspect the conditions of the apartments and the different apartment sizes prior to submitting a bid.

NOTE: Each bidder must be able to demonstrate to the satisfaction of the Authority that they have the experience and/or capability (supervisory, equipment, personnel, etc.) to do the work and to be able to do it for the bid. No one should bid if they cannot do a very good quality job and for the bid.

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Company Representative – Furnish the name, address, and telephone number of your local agent or representative who will furnish the services to be performed hereunder during the entire term of this Contract. Said representative is to be available and perform required work after hours in the event of an emergency related to the work under this Contract.

Conflict of Interest – No member, officer, or employee of the Authority during his/her tenure or for one year thereafter shall have any interest, direct or indirect, in this Contract or the proceeds thereof. No employee of the Authority shall be employed by the Contractor for performance of work under this contract.

Contract period – The Term of this contract will be for one year with the option of four one-year renewals at the discretion of the Housing Authority, unless otherwise specified.

Equal Employment Opportunity – During the period of this contract, the Contractor will not discriminate against any employee or applicant for employment because of age, race, color, religion, sex, disability, familial status, or national origin. The Contractor will take affirmative action to ensure that applicants are employed, and the employees are treated during employment with without regard to their age, race, color, religion, sex, disability, familial status, or national origin.

The work to be performed under this contract requires that to the greatest extent feasible, opportunities for training and employment e give to lower income residents of the unit of local government and that contracts for work in connection with the project be awarded to business concerns which are located in or owned in substantial part residing in the same area.

General – The Contractor is to provide all labor, equipment, supplies and materials for the performance of this work. The Authority will not be responsible or otherwise liable for the loss and/or damage to the Contractor's equipment. Any damage done to the grounds, buildings, or other property because of the Contractor and/or subcontractors or equipment is the responsibility of the Contractor.

Insurance Requirements – The Contractor shall maintain during the term of the Contract the following insurance coverage:

- a. **Comprehensive General Public Liability Insurance** – Protecting the Contractor from claims for all damages whatsoever, including damages for care and loss of services arising out of bodily injury, sickness or disease including death and/or damage to operations be by the Contractor or any subcontractor or anyone indirectly or directly employed by either of them in the amount of not less than \$1,000,000, including premise operations, contractual independent contractors and products and completed operations liability.

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Insurance Requirements (cont.)

- b. Contractual Liability Insurance** – Afforded the Contractor or subcontractor shall cover in its entirety the following **“Hold Harmless Cause”**:

“The Contractor shall save and hold harmless the Owner individually and all employees of the foregoing from and against all liability, claims and demands of whatsoever kind or nature arising out of or connected with the performance of work by the Contractor, for on in behalf of the Owner, whether such injury, loss or damage shall have been occasioned by negligence of the Contractor or by any subcontractor of the Contractor or their employees. The Contractor will defend at his own expense any actions based thereon and shall pay all charges of attorneys and all cost and other expenses arising therefrom. And further the Contractor shall indemnify and save harmless, the Owner from and against any claims, costs, damages and demands, resulting from injuries, death or damage to property alleged to have arisen out of breach or violation of the Georgia Structural Act because of or connected with the performance of work by the Contractor.”

The Contractor will defend at his own expense any actions based thereon and shall pay all charges of attorneys and all cost and other expenses arising therefrom.

- c. Worker’s Compensation Insurance** – In an amount as may be required by the State or other Political Subdivision having jurisdiction over the territory or the employees in which this contract is performed and **Employer’s Liability Insurance** in the amount on not less than \$100,000.
- d.** The Contractor must also provide DHA with \$1,000,000 of **Owner’s and Contractor’s Protective Liability** coverage in an occurrence made from. A claims made policy is prohibited.
- e.** Also, \$1,000,000 of **Automobile Coverage** for all owned and non-owned vehicles must be provided.

Payment – Payment will be made following successful completion of all necessary work (and corrective action, if any) monthly. Payment requests shall be in the form of a monthly invoice along with the list of each location serviced attached. All work scheduled for payment shall be 100% satisfactory and 100% complete before payment will be made. The Authority will not pay for materials to be stored.

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Permits/Licenses – The Contractor shall secure and pay for all permits, fees, licenses (including DeKalb County and a City of Decatur business license, when applicable), necessary for the proper execution and completion of the work. The Contractor shall give all notices and comply with all applicable Federal, State, and local laws, ordinances, codes, rules, and regulations. The intent of this Contract is that the Contractor shall examine the specifications for compliance with applicable codes and regulations bearing on the work and shall immediately report any discrepancy it may discover to DHA

Proof of Insurance Coverage – The Contractor shall furnish DHA Certificates of Insurance that meet State of requirements and are satisfactory to DHA. Policies are to be written on an occurrence basis only and not claims made. DHA is to be included on the Contractor’s Insurance Certificate listed as the Certificate Holder. **DHA will not allow any work to begin without the specified insurance coverage listed herein.**

Protection – Exercised care not to deface adjacent work and carefully protect all DHA and resident property while work is going on, using suitable cover cloths or other approved protection. The Contractor will be required to make good on any damage caused by the Contractor. Keep free from damage to all surfaces. Protect equipment and items that are finished by their manufacturer and upon completion of the work, remove from the site any equipment required in exercising the Contract.

Subcontractors – All subcontractors must be approved in advance by DHA. A subcontractor’s approval form must be completed by the Contractor and submitted to DHA for review. DHA encourages the Contractor to use “Minority Businesses and Women-Owned Enterprises” as subcontractors under this contract. All approved subcontractors must provide a Non-Collusive Affidavit and an Insurance Certificate before work assigned to them commences. DHA must be added as an additional insured to the subcontractor’s insurance. All subcontractors at any tier level must be formally approved prior to work on DHA’s projects. All required documentation will apply.

Suspension of Work – DHA has the right to suspend the Contract if it is apparent that the Contractor is failing to fulfill the terms of this Agreement. Once the requirements have been fulfilled the Contract will be reinstated and **NO** additional time will be added to the completion time of the Contract.

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Termination of Contract – If the Contractor refuses or fails to prosecute the work with such diligence as will ensure its completion within the time specified in these Contract Documents, DHA, by written notice to the Contractor, may terminate the Contractor’s right to proceed with the work. Upon such termination DHA may take over the work and prosecute the same to completion, by contract or otherwise and the Contractor shall be held responsible for any additional cost incurred. DHA reserves the right to cancel the contract upon ten days written notice if the Contractor fails to fulfill the terms of this Agreement or fails to sufficiently accomplish on a timely basis the requirements of this Agreement. Contract may be terminated **without** notice if the actions of the Contractor or subcontractor in any way threaten the health and/or safety of the residents or employees or DHA property is placed at risk.

Working Hours – The acceptable working hours are specified in the General Specifications. The Contractor’s working hours vary depending on the type of work being performed. The office hours for all locations of the Housing Authority are from 8:00 a.m. – 5:00 p.m., Monday through Friday.

ATTACHMENT “E”
Non-Collusive Affidavit

(NOTE: This form will be placed under **“TAB 6”** of your hard copy original)

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9.9 ATTACHMENT E – Non-Collusive Affidavit

STATE OF:

COUNTY OF:

_____, being first duly sworn, deposes and says that he/she
Proposer Name

Is the owner/officer of the firm of _____, the party making
Name of Firm

the foregoing proposal, that such proposal is genuine and not collusive or sham; that said proposer has not colluded, conspired, connived or agreed, directly or indirectly, with any proposer or person to put in a sham proposal or to refrain from proposing, and has not in any manner, directly or indirectly, sought by agreement or collusion, or communication or conference with any person, to fix the proposal price of affiant or of any other proposal, or to fix any overhead, profit, or cost element of said proposal price, or of that of any other proposal, or to secure any advantage against or any person interested in the proposed Contract; and that all statements in said proposal are true.

Signature of Proposer if Proposer is an individual

Signature of Officer if Proposer is a corporation

Company Name

SUBSCRIBED AND SWORN BEFORE ME ON THIS
THE _____ DAY OF _____, 202_____

Notary Public

My Commission Expires: _____

ATTACHMENT “F”
Company Hiring Policy

(NOTE: This form will be placed under **“TAB 9”** of your hard copy original)

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9.10 ATTACHMENT F – Company Hiring Policy Form

The hiring policy of _____ is that we employ the most
Name of Company
competent people available, regardless of age, race, color, religion, sex,
handicap, familial status, or national origin. It is also the policy of the company to
make this intention clear to all unions, hiring halls, or any other agency supplying
employees to this company. It is also the policy of this company to include the
equal employment provisions of the 1964 Civil Right Law as part of our
subcontracts. The company policy on firing or laying off employees is the same
as the hiring policy.

Signed by Official Representative: _____

Print Name: _____

Date: _____

An Equal Opportunity Employer

9.11 ATTACHMENT G – Certification for a Drug-Free Workplace

ATTACHMENT “G” – Form-HUD-50070
Certification for a Drug-Free Workplace

To download this attachment please click on the link below:

<https://www.hud.gov/sites/documents/50070.PDF>

(NOTE: This form will be placed under **“TAB 9”**
of your hard copy original)

ATTACHMENT “H”
Certification Concerning EEO

(NOTE: This form will be placed under **“TAB 8”**
of your hard copy original)

**REQUEST FOR PROPOSAL (RFP) NO. GA-011-2022-02
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9.12 ATTACHMENT H – Certification Concerning EEO Form

Company:

Minority Employees:

Subcategory	Total Number of Employees	Caucasian	African American	Hispanic	Native-American	Asian or Pacific
Officer/Supervisors						
Technicians						
Housing - Sales						
Rental Management						
Office/Clerical						
Service Workers						
Other						
Journeyman – Trade:						
Helpers – Trade:						
Apprentices – Trade:						
Other – Trade:						
Total of All Employees:						
Total % of All Employees:						