



**Town of Weymouth**  
**Housing Rehabilitation Assistance Program**  
**Request for Proposals: Housing Rehabilitation Specialist**

## **I. Introduction**

The Town of Weymouth, through the Weymouth Office of Planning and Community Development (PCD), is requesting proposals for the services of a Housing Rehabilitation Specialist for the Weymouth federally funded CDBG Housing Rehabilitation Assistance Program pursuant to MGL Chapter 30B, as amended.

## **II. Overview**

The Weymouth Office of Planning & Community Development (PCD) manages a Housing Rehabilitation Loan Program (HRLP) in order to renovate substandard housing units owned or rented by persons of low to moderate income levels. This program will rehabilitate an estimated minimum of four (4) to up to twenty (20) housing units to correct Article II of the State Sanitary Code deficiencies resulting in safe, sanitary and affordable housing. The Weymouth HRLP has adopted HUD Minimum Property Standards for one and two family dwellings and multi-housing standards and Article II of the State Sanitary Code as the minimum standards for rehabilitation.

The Weymouth HRLP will be available to property owners who meet federal low-to-moderate income guidelines with priority given to emergency repairs. Both single and multi-family (up to 4) units are eligible for assistance as well as SRO (single room occupancy). Financing for the repairs will be provided through a deferred payment loan of up to \$35,000 (unless a waiver is granted) at 0% interest rate.

## **III. Services Required**

The selected Housing Rehabilitation Specialist will join in a contract agreement with the Town for the time period of not to exceed one year from the execution of the contract for services to complete the following items per case. The Rehab Specialist will:

- Make one (1) initial inspection of properties for code violations, energy inefficiencies, and desired home improvements.
- Prepare an inspection report according to HUD standards.
- Prepare a preliminary work write-up and cost estimate, incorporating reports on lead paint (prepared by others) and review the information with the owner.
- Develop the final Scope of Work and cost estimate and review with the homeowner for signature.

- Conduct one on-site building “walk-through” with contractors and review of Scope of Work. Develop any addendums to the Scope of Work if required.
- Conduct up to two (2) progress inspections during the rehabilitation process to verify that the work is being done in accordance with the approved Scope of Work.
- Approve any interim payments requests for contractor reimbursement of work to date.
- Inspect building and consult with contractor for approval of any Change Orders.
- Make (1) final inspection upon completion of construction and sign off for approval of Final Payment to the Contractor.
- Be available to answer questions for clarification by homeowners or contractors on specifications.

**It is anticipated that the work will begin in January, 2017 and continue through December 31, 2017, with the possibility of an extension. The maximum amount of the contract is \$40,000 (for approximately 20 projects).**

#### **IV. Proposal Requirements**

**Two Separate Proposal Submittals are required, a Narrative and a Price Proposal:**

##### ***A. Narrative***

Narrative proposals must consist of the following information in the order indicated below:

1. Cover letter from the consultant stating that he/she has read, understands, and will comply with the requirements and conditions contained in the Request for Proposals.
2. Minimum Evaluation Criteria
  - Copy of Construction Supervisor and/or General Contractor license or demonstration of previous experience as a Rehabilitation specialist.
3. Comparative Evaluation Criteria
  - Documentation of years’ experience as a Housing Rehabilitation Specialist
  - Minimum of two relevant references to be contacted to assess relevant experience/work performance.
4. A signed Affidavit of Non-Collusion in order to preclude conflict of interest that may arise from providing services to the Towns of Weymouth. A blank affidavit of non-collusion is included.
5. A signed Certificate of Beneficial Interest must be submitted. A blank statement is included.
6. A signed Certificate of State Tax Compliance must be submitted. A blank statement is included.
7. Professional insurance is required from an insurer qualified to do business in Massachusetts. Include a written statement of coverage and certification from insurance company can be provided within 5 days of contract award.

**INSURANCE SPECIFICATIONS**  
**INSURANCE REQUIREMENTS FOR AWARDED CONTRACTOR ONLY:**

Prior to commencing performance of any work or supplying materials or equipment covered by these specifications, the Contractor shall furnish to the Office of the Purchasing Director a Certificate of Insurance evidencing the following:

General Comprehensive Liability in the amount of \$1,000,000 Bodily Injury and Property Damage Liability, combined Single Limit with a \$3,000,000 annual aggregate limit:

Automobile Liability (applicable for any contractor/consultant who has an automobile operating exposure) in the amount of \$1,000,000 for bodily injury and property damage per accident;

Workers' Compensation and Employer's Liability in the amount as may be required by Massachusetts General Laws Chapter 152;

Umbrella Liability of \$2,000,000 for each occurrence and \$2,000,000 in the aggregate; and

Architects and Engineers Professional Liability in the amount of \$1,000,000 per occurrence, \$3,000,000 aggregate.

The Contractor shall name the Town as an additional insured under all insurance coverages required by the contract, with the exception of workers' compensation insurance. The Contractor shall further provide the Town with a copy of the current additional insured endorsement page reflecting that the Contractor added the Town as an additional insured for each insurance policy to which the Contractor added the Town.

The Town and Consultant acknowledge that the types of insurance and coverage limits listed herein are the minimum necessary for the Town to award this contract to the Consultant. The Town does not intend the required types of insurance coverage in any way limits the Consultant's liability for any damages arising from the Consultant's performance of services under this contract. Failure to have the above described coverage in effect during the entire period of the contract shall be deemed to be a breach of the contract.

The Contractor shall maintain the listed insurance coverage throughout the duration of this contract. If, at any time while a contract is in effect, any of the listed insurance coverages should lapse, the Contractor shall immediately notify the Town. Within thirty (30) days of any such lapse, the Contractor shall provide the Town with new certificates of insurance coverage. No payment will be made on a contract with an expired insurance certificate.

***B. Price Proposal***

- Please provide a per-case fee and an hourly fee rate for circumstances in which cases require more or less than the aforementioned Services Required. Note that the total contract

amount in not to exceed \$40,000 (for approximately 20 projects). The rates should include expenses, such as travel, for the duration of the project. The prices quoted will be good for 90 days after the submission of the proposal and for one year after the signing of the contract.

## V. Proposal Submission/Delivery

Respondents should submit:

1. One **sealed** narrative (non-cost) proposal with attachments.  
The envelope packet will be marked **“Non-Price Proposal - Housing Rehabilitation Specialist”**, (include respondent’s identification) Contents will be checked for all required submissions.
2. One **sealed** cost proposal.  
**A sealed envelope** will contain one copy of the price proposal and will be marked **“Price Proposal – Housing Rehabilitation Specialist** (include respondent’s identification).

*For U.S. Mail, express mail or hand delivery drop off:*

Jane Kudcey, Housing Coordinator  
Office of Planning and Community Development  
Town of Weymouth, 3<sup>rd</sup> Floor  
75 Middle Street  
Weymouth, MA 02189  
jkudcey@weymouth.ma.us

Questions or requests for clarification regarding this RFP should be submitted by Friday, December 30, 2016 in writing to Jane Kudcey at jkudcey@weymouth.ma.us or via mail at the address listed above.

Any questions and clarifications will be distributed to all recipients of this RFP, and will be posted on COMBUYS and the Goods and Services Bulletin.

**The deadline for delivery of proposals is Wednesday, January 11, 2017 at 4:00 p.m.**

## VI. Evaluation Criteria

### A. Minimal Criteria

The Consultant's must either have a current Construction Supervisor license or have a minimum of one year as a CDBG Housing Rehabilitation Specialist. A minimum of two references should be provided and will be contacted by PCD staff.

### B. Selection Criteria

#### EXPERIENCE

Years of experience as Housing Rehabilitation Specialist in a CDBG Housing Rehabilitation Program similar to the Town of Weymouth:

Highly Advantageous:	10 years or more of experience as a Housing Rehabilitation Specialist.
Advantageous:	5 years but less than 10 years of experience as a Housing Rehabilitation Specialist.
Acceptable:	0-5 years of experience as a Housing Rehabilitation Specialist, but three years experienced as a licensed construction supervisor.
Unacceptable:	No experience as a general contractor or licensed contractor and no experience as a CDBG Housing Rehabilitation Specialist.

## REFERENCES

References from previous clients with experience with Contractor in the capacity of Housing Rehabilitation Specialist or Construction Supervisor or Contractor.

Acceptable:	Two positive references
Unacceptable:	0 references

**The contract award will be made within 30 calendar days, only to a responsive and responsible proposer who is determined to be the most advantageous taking into consideration the evaluative criteria, capability of performing the services contemplated and meeting the minimum criteria set forth in the RFP.** Each proposal will be evaluated in order to determine whether it meets all of the proposal submission requirements as described in the RFP.

**MBE/WBE enterprises are encouraged to respond to this RFP.**

## **VII. Acceptance or Rejection of Proposals**

The Town reserves the right to reject any proposal that, in its judgment, fails to address the objectives in this RFP or which is incomplete or obscure, or which contains irregularities, or in which errors occur. Any fees or other expenses associated with the proposal process are solely the responsibility of parties submitting the proposals and will under no circumstances be reimbursed by the Town. The Town reserves the right to reject any and/or all proposals when such rejection is in the interest of the Town; to reject the proposal of Bidder who has not met the prerequisites of the bid, who has previously failed to perform properly or complete contracts of a similar nature; and to reject proposal of Bidder who is, in the opinion of the Town, not in a position to perform the contract.

**REVENUE ENFORCEMENT AND PROTECTION STATEMENT**

Pursuant to MG c. 62C, § 49A, the undersigned acting on behalf of the Contractor, certifies under the penalties of perjury that, to the best of the under-sign's knowledge and belief, the Contractor is in compliance with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting child support.

\_\_\_\_\_  
Social Security Number  
or  
Federal Identification Number

\_\_\_\_\_  
Signature of Individual or Corporate Name

By: \_\_\_\_\_  
Corporate Officer (if applicable)

\_\_\_\_\_  
Name of Business

## 1 CERTIFICATIONS OF COMPLIANCE REQUIREMENTS

- 1.1 Weymouth is an Affirmative Action Equal Opportunity Employer. Bidders shall make themselves aware of the existing Affirmative Action laws, policies, and practices before submitting this proposal. Failure to make this confirmation shall not relieve the Proposer of its responsibility.
- 1.2 Acceptance by the Town shall constitute a Contract between the Town and the Proposer.
- 1.3 We/I accept responsibility for confirming with the Office of Planning & Community Development, prior to submission of a sealed Proposal, that all addenda relating to this Proposal have been received. Failure to make this confirmation shall not relieve us/me of the responsibility to fulfill the contract.
- 1.4 We/I, the undersigned, certify under penalties of perjury that this Bid is in all respects bona fide, fair and made without collusion or fraud with any other person. As used in the section, the word "person" shall mean any natural person, joint venture, partnership, corporation, or other business or legal entity.
- 1.5 By signing this Proposal, the contractor shall certify that under penalties of perjury, the signing party has filed all State tax returns and has paid all State taxes required under law.
- 1.6 The named organizational entity submitting this proposal is (check appropriate line(s)):  
Corporation\_\_ Partnership\_\_ Proprietorship\_\_  
Minority Owned\_\_ Woman Owned\_\_

## 2 SIGNATURES:

This page must be signed by a(n) individual(s) with authority to commit the proposing entity to a binding agreement. Corporations attach required certification:

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

AUTHORIZED SIGNATURE: \_\_\_\_\_

PRINT NAME OF AUTHORIZED OFFICIAL: \_\_\_\_\_

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

TELEPHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

DATE: \_\_\_\_\_ FEDERAL TAX ID # \_\_\_\_\_

### CERTIFICATE OF BENEFICIAL INTEREST

The undersigned certifies under penalties of perjury that this bid or proposal has been made and submitted in good faith and without collusion or fraud with any other person. As used in this certification, the word "person" shall mean any natural person, business, partnership, cooperation, union, committee, club, or other organization, entity, or group of individuals.

A disclosure statement shall also be made in writing, signed, under the penalties of perjury by the bidder giving the true names and addresses of all persons who have or will have a direct or indirect beneficial interest in said property with the deputy of capital planning and operation.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name of business

### NON - COLLUSION AFFIDAVIT

Massachusetts General Laws, Chapter 701 of the Acts of 1983, requires that each Bidder must certify as follows:

The undersigned certifies under penalties of perjury that this Bid is in all respects bona fide, fair and made without collusion or fraud with any other person. As used in this section the word "person" shall mean any natural person, joint venture, partnership, corporation or other business or legal entity.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Company / Agency

Approval of a contract or other agreement will not be granted unless the applicant signs this certification clause.

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**CERTIFICATION OF STATE TAX COMPLIANCE**

Legislation enacted by the Commonwealth of Massachusetts, effective July 1, 1983, requires that the attestation below be signed:

Pursuant to M.G.L. Ch. 62c, Sec 49a, I certify under the penalties of perjury that I, to the best of my knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

\_\_\_\_\_  
Corporate Name

\_\_\_\_\_  
SS # / Federal Identification #

\_\_\_\_\_  
Corporate Officer

\_\_\_\_\_  
Date

Your Social Security Number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Providers who fail to correct their non-filing or delinquency will not have a contract or other agreement issued, renewed, or extended.

**Acknowledgement of Principal  
(If a Corporation)**

State of \_\_\_\_\_ SS# \_\_\_\_\_

County of \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_, before me personally

came and appeared \_\_\_\_\_ to me known, who being by me duly

sworn, did depose and say that he resides at \_\_\_\_\_,

and that he/she is the \_\_\_\_\_ of \_\_\_\_\_,

the Corporation described in and which executed the foregoing instruments, that he knows the seal of said Corporation; that one of the impressions affixed to said instrument is an impression of such seal; that it was so affixed by order of the directors of said Corporation, and that he/she signed his/her name hereto by like order.

(SEAL)

(NOTARY PUBLIC) \_\_\_\_\_ (COM. EXP. DATE) \_\_\_\_\_

Acknowledgement of Principal  
(If a Partnership)

State of \_\_\_\_\_ SS# \_\_\_\_\_

County of \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_, before me personally  
came and appeared \_\_\_\_\_ to me known, and known to me to be one of the  
members of the firm of \_\_\_\_\_ described in and who  
executed the foregoing instrument and he/she acknowledged to me that he/she executed the same as and for the act and deed of  
said firm.

(SEAL)

(NOTARY PUBLIC) \_\_\_\_\_ (COM. EXP. DATE) \_\_\_\_\_

Acknowledgement of Principal  
(If an Individual)

State of \_\_\_\_\_ SS# \_\_\_\_\_

County of \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_, before me personally  
came and appeared \_\_\_\_\_ to me known to me to be the person described in  
and who executed the foregoing instrument and he/she acknowledged to me that he/she executed the same.

(SEAL)

(NOTARY PUBLIC) \_\_\_\_\_ (COM. EXP. DATE) \_\_\_\_\_

Vote of Corporation

At a meeting of the Board of Directors of the \_\_\_\_\_,

Duly called and held on \_\_\_\_\_, 19 \_\_\_\_\_ at which a quorum  
was present and acting throughout, the following vote was duly adopted:

VOTE: That \_\_\_\_\_ the \_\_\_\_\_

Of the Corporation, be and hereby is authorized to affix the corporate seal, sign and deliver in the name  
and behalf of the corporation a contract with the \_\_\_\_\_

in the amount of \_\_\_\_\_ dollars (\$ \_\_\_\_\_),

and also to seal and execute as above surety company bonds to secure the performance of said contract  
and payment for labor and materials, in such form and on such terms and conditions as he, by the execution  
thereof, shall deem proper.

A true copy.

ATTEST: \_\_\_\_\_  
Clerk of the Corporation