

Request for Qualifications Community Development Corporation of Brownsville Contractors

I. Summary and General Information

The Community Development Corporation of Brownsville (CDCB) is requesting qualifications from General Construction (GC's) contractors and sub-contractors (Subs) to establish a list of pre-qualified GC's and Sub's. Specifically, CDCB is seeking to develop a list of pre-qualified contractors with experience in construction and rehabilitation of residential housing. Likely projects include minor rehabilitation up to and including demolition and reconstruction and new construction of single family housing units throughout Cameron and Willacy Counties.

This RFQ and its attachments describe the terms and conditions under which CDCB will approve contractors. Contractors are asked to submit Qualifications in order to be considered for any future projects. The submittals shall describe their qualifications, their prior construction and rehabilitation experience, their financial capability and a description of past projects they have completed which are similar in nature to CDCB's proposed projects.

The information submitted must be organized and sufficiently detailed to allow the Selection Team to judge the contractor's ability to carry out these projects. The following will be the key selection criteria used in this project:

- *The contractor's qualifications and experience in Construction and Rehabilitation of residential housing.*
- *The contractor's ability and the extent of his/her financial resources available to commit to and carry out these projects.*
- *The contractor's experience in completing projects of a similar nature.*

Upon review of the submittals, the Selection Team will select and meet with those respondents whose qualifications best meet CDCB's selection criteria. The purpose of this meeting will be to review, discuss and evaluate, in more detail, the submittal contents.

Subsequent to these meetings, the Selection Team intends to create a pre-qualified list of bidders for the construction and rehabilitation projects under this program.

Qualifications submitted in response to this RFQ must be submitted as follows; one copy of the proposal shall be mailed or delivered to:

LEO BARRERA, CONSTRUCTION MANAGER

*Community Development Corporation of Brownsville
901 E. Levee Street
Brownsville Texas, 78520*

II. Approved Contractors List

The intent of this RFQ is to establish a list of pre-qualified contractors from which to solicit bids for the work under these projects in accordance with CDCB procurement guidelines. It is anticipated that the established list will include general contractors as well as individual trades and services as the exact scope of work for each project will vary based on the needs of the individual units. CDCB may at its discretion make additions or deletions from this list as it deems necessary depending upon the response to this RFQ.

After development of the specifications for each project, an invitation to bid the work will be forwarded to all contractors on the established list to request bids. The bid process will either be

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formal or informal depending on the scope and projected cost of work. The process will comply with all of CDCB's established procurement guidelines.

III. Content of Qualification Submittals

Submittals should be brief but complete. The information required to be contained in a submittal in response to this RFQ is contained in **Appendix A**.

IV. Selection Criteria and Process

1. Selection Criteria

Selection criteria will include the following:

- Previous recent experience (last five years), in construction and rehabilitation of single family and multifamily residential units, as well as, the experience of all members of the contractor's team.
- Financial capacity, including sufficient financial strength to undertake and complete projects of this size.
- Ability to meet the CDCB's minimum insurance requirements and possible bonding capacities.

2. Selection Process

After reviewing all submittals, the Selection Team will identify several contractors whom it will meet with to discuss and evaluate the contractors' qualifications, experience, and capacity in more depth. Based on the outcome of these meetings, the Selection Team will complete its evaluation and develop a list of pre-qualified bidders for these projects.

3. General

Please note that all of the material and information presented in this RFQ is general in nature and shall not be deemed to be inducements or representations to which CDCB is bound. Contractors are cautioned to make their own independent investigation of all factual, financial, and legal matters upon which their submittals may be based. CDCB reserves the absolute right to reject any or all of the submittals or to waive any irregularity in the submittal.

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APPENDIX A

Contractor's Qualification Submittal

Items 1 through 5 will need to be submitted with the RFQ Submission.

1. **Statement of Construction Experience Exhibit "B"**- All items on the Statement of Construction Experience must be filled in completely and notarized. *This form must be included with the submittal.*
 2. **Financial Capability "Exhibit "B"** - The Contractor must present evidence of his/her financial capacity to perform all requirements within the proposed projects. Such evidence includes:
 - a. Current Financials or last three months bank statements
 - b. Credit references (Bank Line of Credit and Supply Co. Line of Credit)
 - c. Further financial information may be requested by CDCB after review of the submittals. *All information relative to financial statements will remain confidential.*
 3. **Performance Record – Exhibit "B"** - Contractors must have proven performance and experience in completing projects of similar scope.
 - a. Contractors must supply a minimum of three (3) references for projects completed within the last two years.
 - b. Minimum of three references from vendors or suppliers.
 4. **Authorization to Release Information Exhibit "C"** – Each respondent will need to submit a signed Authorization to Release Information Form. CDCB will conduct a Credit Check and check with banking and suppliers on past financial history.
 5. **Driver's License and Social Security Card** – Each Respondent must supply a copy of their Driver's License and Social Security Card.
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When approved by CDCB and placed on the Approved Bidders List the following information will need to be supplied within ten (10) days of commencement of a project. This information does not need to be submitted with the RFQ Submission this list is for informational only.

1. **List of Current Sub-Contractors (Exhibit "D")** – Each General Contractor Respondent will need to supply a list of the current sub-contractors he/she is doing business with.
2. **Insurance Requirements (Exhibit "E")** – If the respondent is approved to be on the Approved Bidders List he/she will need to provide the proof of insurance listed in Exhibit "E".
3. **Section 3 Certification Exhibit "F"**-The work to be performed with the CDCB is subject to the requirements of Section 3, of the Housing and Urban Development Act of 1968, as amended, 12 U.S.C. 1701u (section 3). The purpose of section 3 is to ensure that employment and other economic opportunities generated by HUD assistance or HUD-assisted projects covered by section 3, shall, to the greatest extent feasible, be

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directed to low- and very low-income persons, particularly persons who are recipients of HUD assistance for housing.

- 4. Prospective Bidder's Proof of Responsibility Exhibit "G"** – Each participating Contractor will need to sign the Prospective Bidder's Responsibility Form to indicate his/her understanding receipt of all program documents.

Community Development Corporation of Brownsville
Statement of Construction Experience
Exhibit "B"

General Information

Company Name	Licensee Name

Applicant Information.:

Last Name	First Name	Middle Name

Business Address & Telephone Number:

Address	
Mailing Address	
Email Address	
Phone Number	
Fax Number	
Mobile Number	
Other	

Company History

When Organized/When Started?	
If Incorporated Where was the Company Incorporated?	
Have you ever Filed for Bankruptcy	

Financial Information (Bank Information)

Bank Name	
Bank Address	
Bank Phone Number	
Bankers Name/Bank Contact Person	
Line of Credit Amount (Attached Proof of Line of Credit)	

Reminder – Please attached Current Financials or the last three months bank statements and Proof of Bank Lines of Credit.

Community Development Corporation of Brownsville
Statement of Construction Experience
Exhibit "B"

Financial Information (Supplier Information)

Supplier Name #1	
Supplier Address	
Supplier Phone Number	
Credit Limit	
-----	-----
Supplier Name #2	
Supplier Address	
Supplier Phone Number	
Credit Limit	
-----	-----
Supplier Name #3	
Supplier Address	
Supplier Phone Number	
Credit Limit	
-----	-----
Supplier Name #4	
Supplier Address	
Supplier Phone Number	
Credit Limit	
-----	-----
Supplier Name #5	
Supplier Address	
Supplier Phone Number	
Credit Limit	

**Community Development Corporation of Brownsville
Statement of Construction Experience
Exhibit "B"**

Reminder – Attached Proof of Lines of Credit for each Supplier.

Employees

How Many Direct Employees?	
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Employee Information

Name of Employee	Job/Position	Type of Certification (Optional)

Current Contracts

Name of Contract	Contract Amount	Anticipated Completion Date	Current Status

**Community Development Corporation of Brownsville
Statement of Construction Experience
Exhibit "B"**

Relevant Projects and Federally Funded Projects. (Have you worked on federally funded housing projects?)

Name: (Include Agency Name)	Contract Amount	Completion Date	Current Status

Litigation History

Have you ever failed to complete any work awarded to you?

Name or Address	Gross amount of Contract	Reason

License & Classification

License Number	Classification

**Community Development Corporation of Brownsville
Statement of Construction Experience
Exhibit "B"**

I, _____, swear under penalty of perjury under the laws of the State of Texas that the answers to the foregoing questions and all Statements therein contained are true and correct.

Sworn this _____ day of _____ 20__ at _____.

Signature of Bidder

Title of Bidder

State of _____

County of _____

On _____, Before me, _____

Personally appeared _____

Proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or entity upon which the person acted, executed the instrument.

WITNESS my hand and seal.

Notary Signature



Exhibit "C"
Authorization of Release

I/we _____ hereby certify that the below statements are true and complete to the best of my information knowledge. I/we further understand that Community Development Corporation of Brownsville will keep all the information confidential and use such information only to verify the qualifications of the undersigned as a home improvement contractor.

I/we _____ hereby authorize Community Development Corporation of Brownsville to obtain a credit report on individual(s), partnership(s), and/or corporation(s) applying.

The undersigned hereby authorizes and requests any person, firm or corporation to furnish any information requested by Community Development Corporation of Brownsville in verification of the recitals comprising this Contractor Profile dated _____ of _____ of 20____

Signature

Date



Exhibit "D"
SUBCONTRACTORS LIST

Name: _____ Contact Person: _____

Phone Number: _____ Specialty Trade: _____

Name: _____ Contact Person: _____

Phone Number: _____ Specialty Trade: _____

Name: _____ Contact Person: _____

Phone Number: _____ Specialty Trade: _____

Name: _____ Contact Person: _____

Phone Number: _____ Specialty Trade: _____

Name: _____ Contact Person: _____

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Name: _____ Contact Person: _____

Phone Number: _____ Specialty Trade: _____

Name: _____ Contact Person: _____

Phone Number: _____ Specialty Trade: _____

Name: _____ Contact Person: _____

Phone Number: _____ Specialty Trade: _____

Insurance Requirements
Exhibit "E"

Commercial General Liability: covering claims arising out of Contractor's operations, independent contractors, products/completed operations. Minimum limits and requirements.*			
	LEVEL 1	LEVEL 2	ARTISEN
Per Occurrence Limit	\$500,000	\$1,000,000	\$500,000
General Aggregate	\$1,000,000	\$2,000,000	\$500,000
Products/Completed Operations Aggregate	\$1,000,000	\$2,000,000	\$500,000
Personal & Advertising Injury Liability	\$500,000	\$1,000,000	\$500,000
Medical Payments	\$5,000	\$5,000	\$5,000
Per Location/Per Project General Aggregate Endorsement	Required	Required	Preferred
Include CDCB named as Additional Insured	Required	Required	Required
Exception:	None	None	IF ANY, Subject to Chargeback
*Policy Terms/Conditions/Endorsements subject to CDCB review if required; subject to changes required by Lenders, Investors or Insurance Carriers.			
Workers' Compensation and Employer's Liability: covering your employees and all sub-contractors if not insured by Sub's Workers' Comp Policy.			
	LEVEL 1	LEVEL 2	ARTISEN
Workers Comp Coverage	TX Statutory	TX Statutory	TX Statutory
Employer's Liability: Accident & Disease Limit	\$500,000	\$1,000,000	\$500,000
Exception:	None	None	IF ANY, Subject to Chargeback
Commercial Auto Liability: covering "Any" Auto Owned, Hired or Non-owned			
Per Accident Bodily Injury & Property Damage Combined	\$500,000	\$1,000,000	\$500,000
Exception:	None	None	Subject to Review
Environmental or Pollution Liability: Coverage will be required in any bid request involving Lead, Asbestos or Other Hazard Abatement.			
	if/when required on certain projects.	if/when required on certain projects.	Not Applicable
Builder's Risk Insurance: required for all construction by project General Contractor and/or Lead Contractor when required.*			
"Risks of direct physical loss" (all cause of loss form including windstorm/hail)	Required	Required	Not Applicable
100% of the replacement value of the completed project	Required	Required	Not Applicable
Flood Coverage	When Required	When Required	Not Applicable
*Policy Terms/Conditions/Endorsements subject to CDCB review if required; subject to changes required by Lenders, Investors or Insurance Carriers.			
All policies must contain provisions recognizing that insurance will not be cancelled, non-renewed or be materially changed without thirty (30) days written notice to:			
	CDCB & any other parties as project requires	CDCB & any other parties as project requires	CDCB & any other parties as project requires

Exhibit "F"

CERTIFICATION FOR BUSINESS CONCERNS SEEKING SECTION 3 PREFERENCE IN CONTRACTING AND DEMONSTRATION OF CAPABILITY

Name of Business _____

Address of Business _____

Type of Business/Trade/Profession _____

Type of Business: Corporation Partnership Sole Proprietorship Joint Venture

Please select the statement below (1, 2, and or 3) that best describes your business.

1. **51% (or more) of your business is owned by a Section 3 Resident(s).** A Section 3 Resident is a public housing resident or an individual who resides in the metropolitan area or nonmetropolitan county in which the Section 3 covered assistance is expended *and* who is considered to be a low-to very low-income person.

And provide:

- List if current ownership and percentage of ownership along with contact information
 Any of the following documents, if available:

- | | |
|---|---|
| <input type="checkbox"/> Copy of Article of Incorporation | <input type="checkbox"/> Certified of Good Standing |
| <input type="checkbox"/> Assumed Business Name Certificate | <input type="checkbox"/> Partnership Agreement |
| <input type="checkbox"/> List of Business Name Certificate
% ownership of each | <input type="checkbox"/> Corporation Annual Report |
| <input type="checkbox"/> Organization chart with names and titles
and brief function statement | <input type="checkbox"/> Latest Board minutes appointing officers |
| | <input type="checkbox"/> Additional documentation |

2. **At least 30% of your business workforce are currently Section 3 residents or were Section 3 eligible residents within 3 years of the date of first employment with your business.**

List the number of full-time employees, and provide one or a combination of the following regarding your employees:

- | | |
|--|---|
| <input type="checkbox"/> List of employees claiming Section 3 status with Exhibit J or K completed for each employee | <input type="checkbox"/> other evidence of Section 3 status less than 3 years from date of employment |
| <input type="checkbox"/> PHA/IHA Residential lease less than 3 years from day of employment | |

3. **At least 25% of your total dollar award will be contracted to qualified Section 3 businesses:**
Provide:

- A list of previously contracted Section 3 business (es) and subcontracted amount and
 Agree to provide a list of subcontracted Section 3 business (es) and subcontract amount when submitting bids for any HUD funded projects to meet this requirement.

Authorizing Name and Signature

Date

Witnessed by: _____

Certified Date: _____



Exhibit "G"
Prospective Bidder's Proof of Responsibility

The contents of this questionnaire will be considered confidential

1. The Contractor (print name) _____ of (City) _____, (County) _____, (state) _____ currently holds a license class _____ and bond are therefore current and the undersigned contractor agrees to maintain current status of all license and bonds as required by Community Development Corporation of Brownsville.
2. That the contractor will perform the work in accordance with the work write-up, general specifications and all applicable most recently adopted International Residential Codes of the county and all applicable most recently adopted Electrical and Plumbing Codes and zoning regulations and be subject to a final inspection by. _____
3. Community Development Corporation of Brownsville may remove the contractors name from the list of qualified contractors without notice if: The work performed by the contractor is deemed to be unsatisfactory, and if the contractors relationship between the contractor, homeowner, and/or other parties are found to be unsatisfactory.
4. That all required insurance and workman's compensation shall be maintained.
5. That he/she shall be section 3 certified and shall abide by all applicable equal employment requirements.

By signing below, I confirm that I have read and agree to the terms of the affidavits

Print Name Signature Title Date: