



**REQUEST FOR QUOTES (2023)**  
**Standby Generator Testing and Maintenance and**  
**Repair Services**  
**Event #59376 (North)**

**Thursday, January 5, 2023**

**Tracey Scott, Chief Executive Officer**  
**Sheila Johnson, Deputy Chief of Procurement**

## PART 1 – GENERAL INFORMATION

### 1.1 Chicago Housing Authority

The Chicago Housing Authority (“CHA”) is a municipal not-for-profit corporation which provides homes to more than 63,000 households while supporting healthy communities in neighborhoods throughout the city. Designated a Moving to Work agency by the U.S. Department of Housing and Urban Development, CHA has used that flexibility to create innovative partnerships that expand choices and opportunities for the low-income families and individuals it serves.

### 1.2 Solicitation Purpose

The Chicago Housing Authority (CHA) seeks proposals from qualified firms to provide standard testing and routine maintenance services for standby generator systems at selected properties within the CHA portfolio. The Selected Respondent must have 3-5 years of experience and have completed projects of similar scope and size. Contract term shall be for a base period of 14 Months from the Effective Date of the contract.

***Please Note:** Respondents are responsible for reading this Request for Quotes and all exhibits, attachments, addendums, or amendments, in its entirety, as updates and revisions may be added. By submitting a response to this solicitation, the Respondent acknowledges that it has read the entire document and is responding with full knowledge of all terms, conditions, and requirements as set forth.*

### 1.3 Solicitation Schedule

The following Schedule of Events represents CHA’s estimate of the timetable that will be followed in connection with this solicitation:

MILESTONES	DATE AND/OR TIME
RFQ Released	Thursday, January 5, 2023
Quote Due Date and Time	Friday, January 20, 2023 by 5:00 pm CT
SITE VISIT	Upon Request and Pre-Scheduled

CHA reserves the right, at its sole discretion, to adjust this Solicitation Schedule as it deems necessary. All agencies doing business with the Chicago Housing Authority must be a registered vendor. Registration can be completed via <https://supplier.thecha.org>.

### 1.4 Communications

All procurement actions facilitated by CHA will be conducted in an open, transparent, and competitive manner. CHA will consider with each transaction competitive pricing, quality of work, reputation, and referrals, and understanding of the solicited deliverables and/or requirements. CHA supports solicitation of quotes from all markets with no geographical preferences and to give qualified businesses, including those that are owned by minorities, women, and small business enterprises, opportunity to do business with CHA as Contractors and Subcontractors within CHA’s procurement policy and procedures.

To maintain a fair and impartial competitive process, CHA and any outside consultants assisting CHA with this solicitation shall avoid private communication concerning this procurement with prospective Respondents during the entire procurement process. From the issue date of this RFQ until the final award is announced, Respondents are not allowed to communicate about this RFQ for any reason with any CHA staff and/or outside consultants assisting CHA with this solicitation except:

- Through the RFQ Point of Contact named below.
- As otherwise specified in this RFQ; and/or

- As provided by existing work agreement(s) (if any)

Prohibited communications includes all contact, including but not limited to, telephonic communications, emails, faxes, letters, or personal meetings, such as lunch, entertainment, or otherwise. CHA reserves the right to reject the quote of any Respondent violating this provision.

**The Point of Contact for this RFQ is:**

David Martin  
Senior Procurement Specialist  
Chicago Housing Authority  
60 E. Van Buren  
Chicago, IL 60605  
Phone: 312-786-3260  
Email: DPMartin@thecha.org

**Questions must be submitted in via email to the above contact.**

**1.5 Amendments to the RFQ**

CHA reserves the right to increase or delete any scheduled items, and/or increase or reduce the quantity of any scheduled item as deemed necessary, to waive informalities and technicalities, and to make other changes and modifications consistent with CHA's policies, and the laws and regulations governing HUD programs.

## **PART 2 – SCOPE OF WORK**

**2.1 Scope of Work**

The Chicago Housing Authority (CHA) seeks proposals from qualified firms to provide standard testing and routine maintenance services for standby generator systems at selected properties within the CHA portfolio.

The services provided will include all City of Chicago required testing and maintenance of standby generator equipment; as well as completion of approved minor repairs necessary to successfully pass required City of Chicago testing. These services have been combined in a central contract to provide the CHA with the highest level of operational efficiencies in terms of cost and timeliness.

When performing the Services, the selected firm(s) must adhere to a high standard of professional care including, but not limited to, compliance with all applicable City and State regulation and adherence to industry best practices and standards (ASHRAE, ASME, NFPA).

In addition, Standby Generator operations and conditions must adhere to HUD's Uniform Physical Conditions Standard (UPCS) and comply with annual Real Estate Assessment Center (REAC) inspections.

From time to time, CHA may require that the selected firm(s) perform equipment repairs in order for the Standby Generator to operate as intended and to successfully pass the City of Chicago's required annual full load test. Any repair work that the selected contractor deems necessary shall be documented and submitted to the CHA Project Manager for review and authorization.

In performing all of these Services, the selected firm(s) must comply with all applicable Chicago Building Code regulations and practices.

This RFQ includes all standby generator equipment at selected CHA properties listed in **Exhibit A**

**Required Maintenance, Testing and Repairs**

## 1. Annual routine maintenance and full load test

A. Annual full load test as required in Chicago Building Code section 18-27-701.3. The generator shall be tested annually for a period of at least one hour under heavy load. This test **Must** be witnessed by an inspector from the city of Chicago Electrical Bureau, and the CHA Project Manager or designee. A copy of any certification for successful testing shall be submitted to the CHA Project Manager within **(10)** days of the test.

### B. Annual Routine Maintenance and Inspections

#### i. Visual Inspection shall include:

- Inspect all safety devices for proper operation and condition
- Inspect radiator cap, seal and surface
- Inspect flexible water connections for leaks, cracking, and pliability
- Inspect pulleys for excessive wear
- Inspect belts for cracking and fraying
- Inspect oil heater (if present) for proper operation and adjust thermostat setting
- Visually inspect front and rear crankshaft seals and lubrication system gaskets for leaks
- Inspect primary fuel and oil filters
- Inspect and tighten starter motor connections and wires
- Inspect flexible exhaust coupling for cracks and leakage
- Inspect exterior of exhaust manifolds for oil or fuel slobbering (signs of wet stacking)
- Inspect exhaust manifolds and exhaust system for broken or missing hardware
- Inspect air filters for plugging and deterioration
- Inspect turbocharger for seal leakage and excessive end- play clearance
- Inspect control panel for dirt and clean as needed
- Inspect air cleaner seal for pliability and change if needed
- Inspect rotor and stator for excessive damage, wear, and dirt or oil build up
- Inspect coupling and guards for loose or missing parts
- Inspect brushes and slip rings or rotating rectifiers
- Inspect fan drive
- Inspect external generator bearings
- Inspect governor linkage for proper operation
- Inspect generator set vibration isolators and adjust as needed

#### ii. Preventive Maintenance Checks, Adjustments and Recording shall include:

- Record the "Hour Meter" reading at the start of the Maintenance inspection
- Add coolant to correct level, drain and replace coolant per manufacturer's recommendations and as needed
- Re-torque hose clamps
- Check belt tension
- Check jackets water heaters for proper operation and adjust thermostat setting
- Add oil to bring crankcase oil to correct level, drain and replace oil per manufacturer's recommendations and as needed
- Check engine's fuel system for leaks
- Check governor for proper operation
- Check and record battery cells specific gravity
- Top off electrolyte level
- Check and record battery charger amperage
- Adjust battery charger float rate for optimum performance (if possible)
- Check and tighten battery connections
- Clean and apply corrosion inhibitor to terminals of lead acid batteries only
- Drain water in exhaust moisture traps
- Test air cleaner indicator
- Check air intake piping and connections for damage

- Perform an operational test of all safety lamps
- Check and tighten loose connections on the generator set and control panel
- Check relays in control panel
- Check rotor air-gap for correct clearances
- Check tightness of generator leads and voltage regulator control wiring
- Strap and tape any wiring or generator leads that are rubbed or have worn insulation
- Replace primary fuel filters and oil filters per manufacturer's recommendations
- Clean and adjust voltage drop potentiometer
- Clean crankcase breather, inspect hose connections
- Check and record battery voltage level during over-crank test for minimum voltage required maintaining controls during starting
- Check for proper cranking termination upon starting
- Check proper operation of engine and generator instruments with generator running
- Adjust governor control for optimum performance and frequency
- Adjust voltage regulator for proper voltage
- Record field voltage during generator no-load running
- Check and record alternator voltage with engine running
- Check for abnormal noise or vibration
- Check for proper operation of remote fan motors, thermostats, circulating pumps, solenoid valves
- Re-check oil level with engine running
- Re-check for leaks with engine running
- Test auto-start system
- Test safeties and pre-alarms on control and enunciator panels
- Reset all controls to automatic
- Set circuit breaker to correct position
- Check fuel valves to correct position
- Check voltage regulator is on and not tripped
- Check battery charger is on
- Check day tank controls are on
- Check remote radiator fan controls are on
- Check auxiliary water pump controls are on
- Check jacket water heaters are on
- Verify time-clock initiated generator exercise program
- Check spill containment dikes for seal. Clean any collected debris from within the dike enclosure
- Test all automatic and manual transfer switches and associated devices both mechanically and electrically
- After all of the above, run generator set and conduct City of Chicago required testing.

iii. For Diesel generators only, add:

- Record fuel level in main fuel tank and top off
- Test day tank pump for proper operation
- Test day tank alarms
- Drain water and sediment from day tank
- Drain water from water separator
- Operate fuel-priming pump and check for proper operation and leaks
- Inspect day tank inlet filters, clean and replace day tank inlet filters per manufacturer's recommendations

A written report of deficiencies noted during the annual preventative maintenance service, results of any testing performed, and recommendations of any further repair work required to pass the annual load test shall be submitted to the CHA Project Manager within ten **(10)** days after completion of the service.

2. Semiannual Preventative Maintenance

A. Semi- annual preventative maintenance services shall include:

- Record fuel level in main fuel tank and top off
- Change engine fuel filter
- Clean engine primary fuel filter
- Change or clean air cleaner element
- Take lube oil sample for analyzing by the atomic absorption spectrophotometry method.
- Start engine and check lube oil level and pressure, coolant level, condition and temperature
- Test fuel sample for microbial growth

B. For diesel generators only:

- Perform treatment to stabilize diesel fuel, using HYDROTEX POWERKLEEN or equal, test for water condensation, oxidation, of the fuel can be done simultaneously.
- Top off fuel level

A written report of deficiencies noted during the semiannual preventative maintenance service, the results of the oil sample test, along with any recommendations for repairs shall be provided to the CHA Project Manager within ten (10) days after completion of the services.

### 3. Minor Repairs

From time to time, CHA may require that the selected vendor perform equipment repairs in order for the Standby Generator to operate as intended and to successfully pass the City of Chicago's required annual full load test. Any repair work that the selected contractor deems necessary shall be documented and submitted to the CHA Project Manager for review and authorization.

A. The below list of repair services are most frequently experienced and shall be part of the annual services provided for each generator.

- Replace battery, inclusive of all work required to procure and install for compliant operation
- Replace spark plugs, inclusive of all work required to procure and install for compliant operation
- Replace hoses, inclusive of all work required to procure and install for compliant operation
- Replace belts, inclusive of all work required to procure and install for compliant operation

A contract will be awarded for a base period of 14 months.

#### **Pricing/Invoicing:**

All equipment supplies and materials must be provided by the Selected Respondent and included in the pricing. Proper licensing and insurance are required. Invoices should be submitted once a month for service rendered.

#### **2.2 Performance of Work**

Contract period shall be for fourteen (14) months from the Effective Date of the contract. The Effective Date of the contract is the date on which the original contract is executed by CHA. The contract may be amended in writing from time to time by mutual consent of the parties.

#### **2.3 RFQ Narrative Response**

Each Respondent must submit a narrative response that addresses the scope of work described in Section 2.1 of the RFQ. Brevity with respect to responses is strongly encouraged. CHA will look favorably upon succinct and direct language. Emphasis should be placed on conformity to CHA's instructions, requirements of this RFQ, and completeness and clarity of content.

Quote responses shall be no more than ten (10) pages in length and shall be organized in the following structure:

### **Cover Page**

- A. Identify the name of the project
- B. Company name, address, and main telephone number
- C. Name and title of primary contact person with their direct contact information Team Identification
- D. Identify key staff who will complete the major tasks of this study
- E. Provide a clear statement indicating current workload and demonstrate the ability to take on additional work

### **Approach & Work Plan**

The Respondent must provide a narrative describing Respondent's approach to the Statement of Work, including Quality Assurance/Quality Control (QA/QC) standards that will be used to prevent errors, project management systems to be utilized, plans for effective communications including reporting tools, and specific approaches to technical problems that may lead to cost savings for the CHA.

### **References**

Respondents must provide references from at least three (3) organizations or clients that can address the Respondents' specific capabilities as they relate to the requirements of this RFQ, including company names, addresses, telephone numbers, email addresses, fax numbers and contact persons. Respondent will also list the timeframe of each project and list all uncompleted work.

### **Financial Information**

- A. Quote Form (Exhibit B) which includes a separate "not to exceed" fee total to complete the project. The quoted fees shall include estimated reimbursable fees.
- B. Indicate whether any lawsuits or claims have been filed against the Respondent in the past five (5) years.

*Quote responses shall be no more than (10) pages in length, excluding resumes, Quote Form, Mandatory Forms, and any other applicable exhibits specifically requested by CHA within this solicitation. Use Arial font of not less than 11-point size throughout, including all titles, text and any footnotes or citations.*

## **PART 3 – QUOTE SUBMISSION**

### **3.1 Quote Submission Instructions**

All quotes must be submitted on the Quote Forms provided by CHA (see **Exhibit B** – Quote Form). Failure to provide a quote for each item delineated on the Quote Forms may result in the quote being determined "non-responsive" and subsequently disqualified from consideration. Respondents should insert the words "No Quote" in the space provided for any item for which no price is submitted. Quotes shall include all travel expenses, wages, supplies, and materials necessary to perform work under the terms and conditions of this RFQ. Unless otherwise specified herein, all prices shall be on a firm, fixed-price basis and are not subject to adjustment based on cost incurred. Any stipulations made to the Respondent's quote shall subject the quote to rejection. If the Respondent wishes to include additional information, the Respondent may do so with attachments. The CHA will not be accepting manual submissions at this time. All Respondents must submit an electronic proposal via email to the point of contact noted above.

#### **All Quote Responses Must Be Typed.**

Along with submission of the Quote Form, each Respondent must submit the following Mandatory Forms:

- **Exhibit A** – CHA Standby Generator Inventory List-North Group
- **Exhibit B** – RFQ Narrative Responses
- **Exhibit C** – Quote Form
- **Exhibit D** – HUD 5369-C - Certifications and Representations of Offerors Non-Construction Contract

- **Exhibit E** – Contract Compliance Certification
- **Exhibit F** – Schedule A: M/W/DBE Utilization Plan
- **Exhibit G**– Schedule C: Letter of Intent M/W/DBE and/or Section 3 Business Concern

**The successful Respondent(s) will be required to submit mandatory CHA forms and affidavits within seven days of notice of award.** The mandatory forms will be forwarded to the successful Respondents prior to contract award. Forms should be completed, signed, and notarized where required or marked "not applicable" where appropriate. The mandatory forms are:

- Contractors Affidavit
- Economic Disclosure Statement Form
- HUD-50071 - Certification of Payments to Influence Federal Transactions
- Required Insurance Certificate (see **PART 5 - INSURANCE**)

**Failure by the Respondent to provide such information within the allotted time will render the Respondent ineligible for award.**

## **PART 4 – EVALUATION OF QUOTE RESPONSES**

### **4.1 Quotes Evaluation Protocol**

The CHA will evaluate bids in response to this solicitation without discussions and will award a contract to the Respondent whose bid is responsive and conforming to the solicitation and will be advantageous to the CHA based on the qualifications, experience, and overall best value. Cost will not be the sole determinative factor.

CHA reserves the right to award this contract to one Respondent, to make multiple awards, and to accept a quote other than the lowest priced quote. CHA may reject any or all quotes if such action is in CHA's best interest, waive informalities and minor irregularities in quotes received, and award all or part of the requirements stated. Furthermore, CHA reserves the right to delete, add, or modify any aspect of this procurement through negotiations (if applicable) up until the final contract signing.

### **4.2 Evaluation Factors**

The CHA will evaluate bids based on the following factors:

- Price
- Best Overall Value (i.e., supplies, equipment, work plan)
- Service Availability

### **4.3 Due Diligence**

All procurement transactions shall be conducted only with responsible Respondent, i.e., those who have the technical and financial competence to perform and who have a satisfactory record of integrity. Where warranted and before awarding a contract, CHA shall review the proposed Respondent's ability to perform the contract successfully, considering factors such as the Respondent's integrity, compliance with public policy, record of past performance (including vendor performance reports and contacting previous clients of the Respondent), and financial and technical resources. Respondents shall not be awarded to debarred, suspended, or ineligible Respondents. If a prospective Respondent is found to be non-responsible, a written determination of non-responsibility shall be prepared, and the prospective Respondent shall be advised of the reasons for the determination.

## **PART 5 – INSURANCE**

### **5.1 Insurance Requirements**

Prior to the commencement of the Agreement, Vendor/Contractor agrees to procure and always maintain during the term of contract insurance against claims for bodily injury or



property damage claims which may arise from or in connection with performance of the work related to the contract and the results of that work or services provided by the Vendor/Contractor, its agents, representatives, employees or subcontractors.

The insurance carriers used must be authorized to conduct business in the State of Illinois and shall have an A.M.Best rating of not less than A: VII.

### **Workers' Compensation and Employer's Liability**

Coverage must be in accordance with the laws of the State of Illinois and endorsed with waiver of subrogation in favor of Manager and Chicago Housing Authority.

- Coverage A – Statutory Limits
- Coverage B – Employers Liability - \$500,000 bodily injury or disease each accident; each employee

### **General Liability Insurance**

General Liability Insurance written on an occurrence form with limits of not less than One Million Dollars (\$1,000,000) per occurrence and aggregate of not less than Two Million Dollars (\$2,000,000). The insurance policy is to include coverage for Bodily Injury and Property Damage, Contractual Liability, Products-Completed Operations, Personal & Advertising Injury. CHA must be included as an additional insured and such insurance will be endorsed as primary and non-contributory with any other insurance available to CHA.

### **Automobile Liability Insurance**

When any motor vehicles (owned, non-owned and hired) are used in connection with the Services to be performed, the subcontractor shall provide Comprehensive Automobile Liability Insurance with limits of not less than One Million Dollars (\$1,000,000) per occurrence Combined Single Limit, for bodily injury and property damage. CHA must be included as additional insureds on a primary and non-contributory basis.

**Certificate Holder:** Chicago Housing Authority  
60 E Van Buren  
Chicago, IL 60605

**Additional Insureds:** Collectively referred to as the "Additional Insureds" shall include Chicago Housing Authority, Chicago Housing Administration, LLC; and/or other Partnership, Limited Liability Company as established by CHA; its respective commissioners, board members, officers, directors, agents, property management firms, construction management firms, agents, employees, vendors, invitees, and visitors.

**Primary Coverage:** For any claims related to this Agreement, the Vendor's insurance coverage shall be the primary policy. The Vendor expressly understands and agrees that any insurance or self-insurance programs maintained by the CHA shall apply in excess of and shall not contribute with insurance provided by the Vendor.

The Authority in no way warrants that the minimum limits contained herein are sufficient to protect the Authority from liabilities that might arise out of the performance of the work under this Agreement. Vendor shall assess its own risks and, if it deems appropriate and/or prudent, maintain higher limits and/or broader coverages. Vendor is not relieved of any liability or other obligations assumed or pursuant to the contract by reason of its failure to obtain or maintain sufficient insurance.

Renewal Certificates are required prior to expiration of current insurance coverage. The receipt of any Certificate of Insurance does not constitute agreement by the CHA that the insurance requirements in the Contract have been fully met or that the insurance policies indicated on the certificate are in compliance with the requirements of the Contract. The insurance policies shall provide for thirty (30) days written notice to be given to the CHA in the event coverage is substantially changed, canceled or non-renewed.

## **PART 6 – ADMINISTRATIVE TERMS AND CONDITIONS**

### **6.1 Required CHA Vendor Registration**

In order to do business with CHA, Respondent must be a registered vendor prior to submitting a response. If Respondent has already registered with CHA, the Respondent's (Vendor) profile must be up to date.

Respondent is responsible for contacting their local authorities to ensure that Respondent has complied with all laws and is authorized and/or licensed to do business in the Territory. All applicable fees associated therewith are the responsibility of Respondent now or hereafter in effect during the contract. Respondent

and its employees, agents and subcontractors shall also comply with all Federal, State and local laws regarding business permits and licenses that may be required to carry out the services performed under the contract.

### **6.2 Acceptance Period**

All Respondents submitting a quote must agree to honor the terms and conditions contained herein for a period of one hundred twenty (120) days.

### **6.3 Quote Signature**

The person signing the Quote Form must be a person authorized to bind the Respondent contractually. Unsigned offers will be rejected. Unsigned offers cannot be signed after the quote has been received.

### **6.4 Ownership of Documents**

All work products generated, prepared, assembled and provided to CHA pursuant to this RFQ become the property of CHA upon receipt. Work products include but are not limited to reports, memoranda, data, survey responses, presentations, and other materials of any nature, or information related to any of the foregoing, which are or were generated in connection with the scope of services described in the contract. Respondents shall not copyright, or cause to be copyrighted, any portion of any document submitted to CHA as a result of this RFQ.

### **6.5 Rejection of Quotes**

CHA may reject any or all quotes. Action to reject all quotes shall be taken only for unreasonably high prices, error in the solicitation, cessation of need, unavailability of funds, failure to secure adequate competition, or any other reason deemed appropriate by CHA.

### **6.6 Contractor Status**

The Contractor shall be an independent Contractor and will not be an employee of CHA.

### **6.7 Funding Limitations**

This procurement may be funded, in whole or in part, by grant funds provided by the U.S. Department of Housing and Urban Development ("HUD"). CHA will not be bound to any contract if funding has been disallowed by HUD.

### **6.8 Taxes**

CHA is exempt from sales tax. The Contractor agrees to pay all taxes incurred in the performance of an awarded contract. Freight, handling costs, and taxes shall not be charged to the CHA.

**6.9 Advertising**

Respondent agrees not to use the fact of or the results from submission of a quote as a part of any commercial advertising. CHA does not permit the use of CHA's relationship with an entity of purposes of marketing efforts, unless CHA specifically agrees otherwise.

**6.10 Government Restrictions**

In the event any governmental restrictions may be imposed which would necessitate alteration of the material, quality, workmanship or performance of the goods or the material, quality, workmanship or performance of the goods or services offered, it shall be the responsibility of the successful Respondent to immediately notify CHA in writing specifying the regulation which requires an alteration. CHA reserves the right to accept any such alteration, including any reasonable price adjustments occasioned thereby, or to cancel the contract at no expense to CHA.

**6.11 Compliance & Law**

The Respondent shall comply with all applicable Federal, State and local laws, regulations, ordinances and requirements applicable to the work described herein including, but not limited to, those applicable laws, regulations and requirements governing equal employment opportunity programs, subcontracting with small and minority firms, women's business enterprise, and labor surplus area firms, equal opportunity for businesses and unemployed and underemployed persons (as referenced in Section 3 of The Housing and Urban Development Act of 1968, as amended, 12 U.S.C. 1701u (Section 3), the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973, the Davis-Bacon Act, and those laws and regulations concerning the abatement and remediation of asbestos and lead-based paint, and shall provide for such compliance in the contract documents. To the extent the work required under this contract is related to development, Respondentshall further comply with the applicable Annual Contributions Contract (ACC) related to such development. To the extent such work is related to a mixed finance development, Respondent shall comply with the provisions of 24 CFR ' 941.208. The Respondent shall obtain, at Respondent's expense, such permits, certificates and licenses as may be required in the performance of the work specified.

CHA Standby Generator Inventory List North Group

CHA Standby Generator North Group								
	Property Name	Property Address	Size of Generator (KW)	Voltage	Fuel Type	Manufacturer	Model	Serial number
1	Britton Budd	501 W. Surf	250	120/208	NG	Cummins	350GFEB	LM08H31618001
2	Caroline Hedger	6400 N. Sheridan Rd.	300	120/208	NG	Kohler	300REXNB	SMG32DBGV
3	William Castleman	4645 N. Sheridan	275	208/240/480	NG	Elliot	300RN	BX07J339
4	Ella Flagg	4945 N. Sheridan	275	208/240/480	NG	Elliot	300RN	BY07J572
5	Daniel Hudson Burnham	1930 W. Loyola Ave.	280/350	208/240/480	NG	Elliott	300 RN	BY06J565
6	Margaret Day Blake	2140 N. Clark	185	600	NG	Cummins	GTA855G1	25273394
7	Elizabeth Wood	1845 N. Larrabee	150	200/104/104	NG	Generac	105291130100	2100588
8	Maria Diaz Martinez	2111 N. Halsted	100	400	NG	Elliot	100RN	BY05J544
9	Edith Spurlock	2720 N. Sheffield	300	120/208	NG	Cummins	GTA19G2	25281099
10	Edith Spurlock	2640 N. Sheffield	300	120/208	NG	Cummins	GTA19G2	25280104
11	Elizabeth Davis	440 N. Drake	450	120/208	NG	Cummins	GTA28	25277102
12	Fannie Emanuel	3916 W. Washington	350	208/240/480	NG	Generac	SG360	3000683373
13	Hattie Callner	855 W. Aldine Ave.	175	120/208	NG	Cummins	150GFAB	46256760
14	Irene McCoy Gaines	3700 W. Congress	208	120/208	NG	Elliot	200RN	BX10J396
15	Judge Fisher	5821 N. Broadway St.	250	120/208	NG	Cummins	250GFBC-GTA855-G3	25296851
16	The Kenmore	5040 N. Kenmore	150	480	NG	Generac	SG015012160410100	2106879
17	Lidia Pucinska	838 N. Noble	350	208/120	NG	Cummins	KTA196	37259685
18	Lidia Pucinska	847 N. Greenview	325	208	NG	Cummins	GTA1961	25277429
19	Lorraine Hansberry	5670 W. Lake	150/188	208/240/480	NG	Elliot	150RN	BX7J336
20	Mary Hartwell	3920 N. Clark	350	600 AC	NG	Generac	EVL467-N	8790
21	Mary Hartwell	3930 N. Clark	350	600 AC	NG	Generac	Sa200	2055737

22	Mary Hartwell	3940 N. Clark	350	600 AC	NG	Generac	EVL467-N	88486
23	Pomeroy	5650 N. Kenmore	250	208	NG	Cummins	GTA855	25339852
24	Schneider	1750 W. Peterson Ave.	200/250	208/240/480	NG	Elliott	200RN	BX10J412
25	Wicker Park	1414 N. Damen	350	120/208	NG	Cummins	GTA19-G1	25279592
26	Wicker Park	2020 W. Schiller	350	120/208	NG	Cummins	GTA19-G1	25279407
27	Flannery	1507 N. Clybourn	250	120/240/480	NG	Blue star	431PSL6202	MT-0046621-0517
28	Flannery	1531 N. Clybourn	250	208/120	NG	Katolight	537QSR5789	NT-7195568-9789
29	Zela Ormes	116 E Elm	150	120/220/480	NG	Kohler	431PSL6202	MT-0046621-0517
30	Patrick Sullivan	1633 W. Madison St	500	208	NG	Cummins	GTA28	25278243
31	Patrick Sullivan	1633 W. Madison St	250	120/240	NG	Kohler	250ORZD	603041
32	Henry Horner	1815 W Monroe	350	120/208	NG	Kohler	350REZXB	SGM32B9XN

RFQ-Event #59376 (2023) - Standby Generator Testing and Maintenance and Repair Services

**Response Questionnaire**

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**Cover Page**

- 6.11.1 Identify the name of the project
- 6.11.2 Company name, address, and main telephone number
- 6.11.3 Name and title of primary contact person with their direct contact information Team Identification
- 6.11.4 Provide a clear statement indicating current workload and demonstrate the ability to take on additional work.

RFQ-Event #59376 (2023) - Standby Generator Testing and Maintenance and Repair Services

**Response Questionnaire**

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**Approach & Work Plan**

- A. Written narrative based on the understanding of the project goals and objectives.
- B. Work plan and draft project schedule identifying major project tasks, scope of work, meetings, City responsibilities, and deliverables for each task.

**RFQ- Event #59376(2023) -Standby Generator  
Testing and Maintenance and Repair Services**

**Response Questionnaire**

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**References**

- A. Respondents must provide references from at least three (3) organizations or clients that can address the Respondents' specific capabilities as they relate to the requirements of this RFQ, including company names, addresses, telephone numbers, email addresses, fax numbers and contact persons.
- B. Respondent will also list the timeframe of each project and list all uncompleted work.



## EXHIBIT C

### RFQ- Event #59376 (2023) - Standby Generator Testing and Maintenance and Repair Services

#### Quote Form Instructions

ALL QUOTE SUBMISSIONS ARE SUBJECT TO REVIEW FOR COMPLETENESS, ACCURACY, AND COMPLIANCE WITH ALL TERMS AND CONDITIONS PROVIDED IN THE RFQ. PRICING MUST BE SUBMITTED ON THE QUOTE FORM WITHOUT CONDITIONS. ANY CHANGES, MODIFICATIONS, ADDITIONAL TERMS AND CONDITIONS, EXCEPTIONS OR OTHER REVISIONS TO THIS RFQ, INCLUDING THE QUOTE FORM, OR FAILURE TO COMPLETE ALL REQUIRED INFORMATION, MAY CAUSE THE QUOTE TO BE DEEMED NON-RESPONSIVE.

Quotes shall include all travel expenses, wages, supplies, and materials necessary to perform work under this Request for Quotes' terms and conditions. Unless otherwise specified herein, all prices shall be on a firm, fixed-price basis and are not subject to adjustment based on cost incurred. Any stipulations made to the Respondent's quote shall subject the offer to rejection.

**1. Completion of open cells in Quote Form:**

Respondent is responsible for electronically entering information into the open cells in Quote Form in the Excel spreadsheet. Respondent must complete all open cells in the following fields:

- Bidder's Price (columns F, G, H, I)

**2. Signature:**

The Quote Form must include a printed name, signature, title, telephone number and e-mail address of an authorized representative of the Respondent.



**FEE PROPOSAL FOR**

Event #59376

RFQ (2023) Standby Generator Testing and Maintenance and Repair Services

CHA Standby Generator Fee Form Sheet North Group									
	B	C	D	E	F	G	H	I	J
	Property Name	Property Address	Size of Generator (KW)	Voltage	Annual Load Bank Test	Preventative Maintenance	Minor Repairs	Semi Annual Service	Total for Services Annually (F+ G + H + I)
1	Britton Budd	501 W. Surf	250	120/208					
2	Caroline Hedger	6400 N. Sheridan Rd.	300	120/208					
3	William Castleman	4645 N. Sheridan	275	208/240/480					
4	Ella Flagg	4945 N. Sheridan	275	208/240/480					
5	Daniel Hudson Burnham	1930 W. Loyola Ave.	280/350	208/240/480					
6	Margaret Day Blake	2140 N. Clark	185	600					
7	Elizabeth Wood	1845 N. Larrabee	150	200/104/104					
8	Maria Diaz Martinez	2111 N. Halsted	100	400					
9	Edith Spurlock	2720 N. Sheffield	300	120/208					
10	Edith Spurlock	2640 N. Sheffield	300	120/208					
11	Elizabeth Davis	440 N. Drake	450	120/208					
12	Fannie Emanuel	3916 W. Washington	350	208/240/480					
13	Hattie Callner	855 W. Aldine Ave.	175	120/208					
14	Irene McCoy Gaines	3700 W. Congress	208	120/208					
15	Judge Fisher	5821 N. Broadway St.	250	120/208					
16	The Kenmore	5040 N. Kenmore	150	480					
17	Lidia Pucinska	838 N. Noble	350	208/120					
18	Lidia Pucinska	847 N. Greenview	325	208					
19	Lorraine Hansberry	5670 W. Lake	150/188	208/240/480					
20	Mary Hartwell	3920 N. Clark	350	600 AC					
21	Mary Hartwell	3930 N. Clark	350	600 AC					
22	Mary Hartwell	3940 N. Clark	350	600 AC					
23	Pomeroy	5650 N. Kenmore	250	208					
24	Schneider	1750 W. Peterson Ave.	200/250	208/240/480					
25	Wicker Park	1414 N. Damen	350	120/208					
26	Wicker Park	2020 W. Schiller	350	120/208					
27	Flannery	1507 N. Clybourn	250	120/240/480					
28	Flannery	1531 N. Clybourn	250	208/120					
29	Zela Ormes	116 E Elm	150	120/220/480					
30	Patrick Sullivan	1633 W. Madison St	500	208					
31	Patrick Sullivan	1633 W. Madison St	250	120/240					
32	Henry Horner	1815 W Monroe							
					\$0	\$0	\$0	\$0	\$0

# Certifications and Representations of Offerors

## Non-Construction Contract

Public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

This form includes clauses required by OMB's common rule on bidding/offering procedures, implemented by HUD in 24 CFR 85.36, and those requirements set forth in Executive Order 11625 for small, minority, women-owned businesses, and certifications for independent price determination, and conflict of interest. The form is required for nonconstruction contracts awarded by Housing Agencies (HAs). The form is used by bidders/offers to certify to the HA's Contracting Officer for contract compliance. If the form were not used, HAs would be unable to enforce their contracts. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality.

### 1. Contingent Fee Representation and Agreement

(a) The bidder/offeror represents and certifies as part of its bid/offer that, except for full-time bona fide employees working solely for the bidder/offeror, the bidder/offeror:

- (1)  has,  has not employed or retained any person or company to solicit or obtain this contract; and
- (2)  has,  has not paid or agreed to pay to any person or company employed or retained to solicit or obtain this contract any commission, percentage, brokerage, or other fee contingent upon or resulting from the award of this contract.

(b) If the answer to either (a)(1) or (a) (2) above is affirmative, the bidder/offeror shall make an immediate and full written disclosure to the PHA Contracting Officer.

(c) Any misrepresentation by the bidder/offeror shall give the PHA the right to (1) terminate the resultant contract; (2) at its discretion, to deduct from contract payments the amount of any commission, percentage, brokerage, or other contingent fee; or (3) take other remedy pursuant to the contract.

### 2. Small, Minority, Women-Owned Business Concern Representation

The bidder/offeror represents and certifies as part of its bid/offer that it:

- (a)  is,  is not a small business concern. "Small business concern," as used in this provision, means a concern, including its affiliates, that is independently owned and operated, not dominant in the field of operation in which it is bidding, and qualified as a small business under the criteria and size standards in 13 CFR 121.
- (b)  is,  is not a women-owned small business concern. "Women-owned," as used in this provision, means a small business that is at least 51 percent owned by a woman or women who are U.S. citizens and who also control and operate the business.
- (c)  is,  is not a minority enterprise which, pursuant to Executive Order 11625, is defined as a business which is at least 51 percent owned by one or more minority group members or, in the case of a publicly owned business, at least 51 percent of its voting stock is owned by one or more minority group members, and whose management and daily operations are controlled by one or more such individuals.

For the purpose of this definition, minority group members are:

(Check the block applicable to you)

- |   |   |
|---|---|
| <input type="checkbox"/> Black Americans    | <input type="checkbox"/> Asian Pacific Americans  |
| <input type="checkbox"/> Hispanic Americans | <input type="checkbox"/> Asian Indian Americans   |
| <input type="checkbox"/> Native Americans   | <input type="checkbox"/> Hasidic Jewish Americans |

### 3. Certificate of Independent Price Determination

(a) The bidder/offeror certifies that—

- (1) The prices in this bid/offer have been arrived at independently, without, for the purpose of restricting competition, any consultation, communication, or agreement with any other bidder/offeror or competitor relating to (i) those prices, (ii) the intention to submit a bid/offer, or (iii) the methods or factors used to calculate the prices offered;
- (2) The prices in this bid/offer have not been and will not be knowingly disclosed by the bidder/offeror, directly or indirectly, to any other bidder/offeror or competitor before bid opening (in the case of a sealed bid solicitation) or contract award (in the case of a negotiated solicitation) unless otherwise required by law; and
- (3) No attempt has been made or will be made by the bidder/offeror to induce any other concern to submit or not to submit a bid/offer for the purpose of restricting competition.

(b) Each signature on the bid/offer is considered to be a certification by the signatory that the signatory:

- (1) Is the person in the bidder/offeror's organization responsible for determining the prices being offered in this bid or proposal, and that the signatory has not participated and will not participate in any action contrary to subparagraphs (a)(1) through (a)(3) above; or
- (2) (i) Has been authorized, in writing, to act as agent for the following principals in certifying that those principals have not participated, and will not participate in any action contrary to subparagraphs (a)(1) through (a)(3) above (insert full name of person(s) in the bidder/offeror's organization responsible for determining the prices offered in this bid or proposal, and the title of his or her position in the bidder/offeror's organization);  
(ii) As an authorized agent, does certify that the principals named in subdivision (b)(2)(i) above have not participated, and will not participate, in any action contrary to subparagraphs (a)(1) through (a)(3) above; and

(iii) As an agent, has not personally participated, and will not participate in any action contrary to subparagraphs (a)(1) through (a)(3) above.

(c) If the bidder/offeror deletes or modifies subparagraph (a)2 above, the bidder/offeror must furnish with its bid/offer a signed statement setting forth in detail the circumstances of the disclosure.

#### 4. Organizational Conflicts of Interest Certification

(a) The Contractor warrants that to the best of its knowledge and belief and except as otherwise disclosed, it does not have any organizational conflict of interest which is defined as a situation in which the nature of work under a proposed contract and a prospective contractor's organizational, financial, contractual or other interest are such that:

(i) Award of the contract may result in an unfair competitive advantage;

(ii) The Contractor's objectivity in performing the contract work may be impaired; or

(iii) That the Contractor has disclosed all relevant information and requested the HA to make a determination with respect to this Contract.

(b) The Contractor agrees that if after award he or she discovers an organizational conflict of interest with respect to this contract, he or she shall make an immediate and full disclosure in writing to the HA which shall include a description of the action which the Contractor has taken or intends to eliminate or neutralize the conflict. The HA may, however, terminate the Contract for the convenience of HA if it would be in the best interest of HA.

(c) In the event the Contractor was aware of an organizational conflict of interest before the award of this Contract and intentionally did not disclose the conflict to the HA, the HA may terminate the Contract for default.

(d) The Contractor shall require a disclosure or representation from subcontractors and consultants who may be in a position to influence the advice or assistance rendered to the HA and shall include any necessary provisions to eliminate or neutralize conflicts of interest in consultant agreements or subcontracts involving performance or work under this Contract.

#### 5. Authorized Negotiators (RFPs only)

The offeror represents that the following persons are authorized to negotiate on its behalf with the PHA in connection with this request for proposals: (list names, titles, and telephone numbers of the authorized negotiators):

#### 6. Conflict of Interest

In the absence of any actual or apparent conflict, the offeror, by submission of a proposal, hereby warrants that to the best of its knowledge and belief, no actual or apparent conflict of interest exists with regard to my possible performance of this procurement, as described in the clause in this solicitation titled "Organizational Conflict of Interest."

#### 7. Offeror's Signature

The offeror hereby certifies that the information contained in these certifications and representations is accurate, complete, and current.

\_\_\_\_\_  
Signature & Date:

\_\_\_\_\_  
Typed or Printed Name:

\_\_\_\_\_  
Title:

**CHICAGO HOUSING AUTHORITY (CHA)**  
**Department of Procurement & Contracts Contract Compliance Division**

<b>RFP/RFQ/Bidder/Proposers' M/W/DBE &amp; Section 3 Contract Compliance Certification</b>
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**RFP/IFB/CONTRACT/PURCHASE ORDER NO:** \_\_\_\_\_ **DATE FORM COMPLETED:** \_\_\_\_\_

**PROJECT TITLE:** \_\_\_\_\_

**DEVELOPER NAME:** \_\_\_\_\_

**PRIME CONTRACTOR NAME(S):** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **TELEPHONE: ( )** \_\_\_\_\_

**CONTACT NAME/TITLE:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**M/W/DBE? (Please specify):** \_\_\_\_\_ **Certifying Agency:** \_\_\_\_\_

**Ethnicity:** \_\_\_\_\_ **Gender:** \_\_\_\_\_

**FEDERAL TAX IDENTIFICATION OR SOCIAL SECURITY NO.:** \_\_\_\_\_

**CONTRACT AMOUNT: \$** \_\_\_\_\_

As a respondent to CHA IFB/RFP/CONTRACT or PO NUMBER \_\_\_\_\_ do hereby affirm that I understand and fully support the policy and regulations set forth in the Amendment to Special Conditions M/W/DBE Utilization Plan and the Section 3 Rule 24 CFR Part 75, (hereafter referred to as the Policies), as well as Davis-Bacon and Related Acts (when applicable).

Given that contracts awarded for work under this IFB/RFP/CONTRACT are subject to the future issuance of contracts whose amounts will constitute the actual dollar amount, I understand that my M/W/DBE Utilization (Schedules A and C) and the Section 3 Utilization Form. Plans will be required to be submitted on each award to reflect actual contract amounts to the listed contractors.

Based upon the total amount of the award as constituted by all issued awards, I agree to fully comply with the minimum participation goals as outlined in the Policies and the following reporting requirements:

- Submit within five (5) business days of issuance of an award, copies of all resultant subcontractor agreements with approved certified M/W/DBE firms
- On a monthly basis an updated payment report and labor hours must be entered for every subcontractor (M/W/DBE and non-minority subcontractors) into B2Gnow (CHA's electronic payment monitoring and labor hour software for contractors and subcontractors)
- Submit weekly payroll information and labor hours for construction contracts with the LCPTracker (CHA's online payroll and labor hour software)

**CHICAGO HOUSING AUTHORITY (CHA)**  
**Department of Procurement & Contracts Contract Compliance Division**

<b>RFP/RFQ/Bidder/Proposers' M/W/DBE &amp; Section 3 Contract Compliance Certification</b>
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I further understand that any changes to my approved M/W/DBE and Section 3 Utilization Plans require the approval of the Department of Procurement & Contracts' Contract Compliance Division.

**NOTE: It is the responsibility of the prime contractor to make sure that its subcontractor(s) is/are in compliance with CHA's M/W/DBE, Section 3 (24 CFR Part 75) and Davis Bacon compliance requirements.**

I do solemnly declare and affirm under the penalty of perjury that the contents of the forgoing certification are true and correct, and that I am authorized on behalf of the Prime Contractor to make this certification.

**ACKNOWLEDGEMENT:**

\_\_\_\_\_  
(Authorized Principal or Agent Signature)

\_\_\_\_\_  
Date

**CHICAGO HOUSING AUTHORITY (CHA)**  
**Department of Procurement and Contracts Contract Compliance Division**

**SCHEDULE A – M/W/DBE UTILIZATION PLAN**

**(To Be Completed by PRIME CONTRACTOR)**

RFP/IFB/CONTRACT/PURCHASE ORDER NO: \_\_\_\_\_ DATE FORM SUBMITTED: \_\_\_\_\_

PROJECT TITLE: \_\_\_\_\_

PRIME CONTRACTOR NAME(S): \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TELEPHONE: (\_\_\_\_) \_\_\_\_\_

CONTACT NAME/TITLE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

Certification Status: MBE \_\_\_\_\_ WBE \_\_\_\_\_ DBE \_\_\_\_\_ Certified By: \_\_\_\_\_

Ethnicity: \_\_\_\_\_ Gender: \_\_\_\_\_

FEDERAL TAX IDENTIFICATION OR SOCIAL SECURITY NO. : \_\_\_\_\_

CONTRACT AMOUNT: \$ \_\_\_\_\_

M/W/DBE TOTAL: \$ \_\_\_\_\_

M/W/DBE TOTAL PERCENTAGE: \_\_\_\_\_%

IS PRIME M/W/DBE SELF-PERFORMER? Yes \_\_\_ NO \_\_\_

IF YES, SELF-PERFORMANCE AMOUNT: \$ \_\_\_\_\_ % \_\_\_\_\_

The Contractor shall in determining the manner of M/W/DBE participation, first consider **Direct Participation** with M/W/DBE companies as subcontractors, suppliers of goods and services, or as joint venture partners, directly related to the performance of this contract. After exhausting reasonable good faith efforts and with prior CHA approval, the bidder/proposer may also meet all or part of the CHA's M/W/DBE commitment goals, through **Indirect Participation**, by contracting with M/W/DBEs for the provision of goods and services not directly related to the performance of the contract/scope of work. Indirect participation can be demonstrated by providing copies of canceled checks (both front and back) paid to the certified subcontractors, and a Letter of Certification that was current at the time the checks were issued to the subcontractor (must be entered into B2Gnow and Contract Compliance Specialist will approve). Indirect participation must occur within this contract period and will not be considered as acceptable participation on multiple contracts.

Firms seeking M/W/DBE subcontracting credit via Direct or Indirect participation must include **one (1) current certification** from a CHA approved certifying agency. A copy of a current Letter of Certification is required. Applications for certified status will not be accepted. M/W/DBEs utilized for direct or indirect participation must be currently certified by one of the following agencies: City of Chicago, METRA, PACE, Cook County, State of Illinois - Central Management Services (CMS), Women Business Development Center (WBDC), Chicago Transit Authority (CTA), the Chicago Minority Supplier Development Council (CMSDC), Illinois Department of Transportation (IDOT), and/or the Small Business Administration (SBA 8(a)). For contractors whose principal business address is located outside of the metropolitan Chicago area, certification of comparable agencies will be considered.

**CHICAGO HOUSING AUTHORITY (CHA)**  
**Department of Procurement and Contracts Contract Compliance Division**

**SCHEDULE A – M/W/DBE UTILIZATION PLAN**

**(To Be Completed by PRIME CONTRACTOR)**

**PLEASE NOTE:**

*(a). SUBSTITUTION/REMOVAL OF SUBCONTRACTOR: A prime contractor that needs to remove or substitute a subcontractor on its approved utilization plan must submit a written request for the removal or substitution of the subcontractor concerned. Only when DPC Compliance approves such a request in writing can the removal or substitution of the subcontractor be done by the prime contractor. Under no circumstance should a prime contractor unilaterally remove or substitute a subcontractor on its CHA/HUD funded contract without prior approval by DPC Compliance.*

This page (page 2) must be signed by a Principal of the Contractor. The last page must be signed and notarized. This document is subject to change, by the CHA, at any time.

**Prime Contractor Acknowledgement of M/W/D/BE Requirements:**

\_\_\_\_\_  
**Signature of Principal of Contractor**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Print Name**



**CHICAGO HOUSING AUTHORITY (CHA)**  
**Department of Procurement and Contracts Contract Compliance Division**

**SCHEDULE A – M/W/DBE UTILIZATION PLAN**

**(To Be Completed by PRIME CONTRACTOR)**

**I. DIRECT PARTICIPATION**

A. COMPANY NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_ TELEPHONE: ( ) \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_  
ORIGINAL M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
AMENDED M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
*NOTE: Amended Dollar Value only used when changes are made and approved by Compliance during a contract.*  
WORK TO BE PERFORMED/MATERIALS SUPPLIED:

\_\_\_\_\_

Anticipated Performance Timeframe (When will the contractor be onsite performing the work and for how long):

\_\_\_\_\_

B. COMPANY NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_ TELEPHONE: ( ) \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_  
ORIGINAL M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
AMENDED M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
*NOTE: Amended Dollar Value only used when changes are made and approved by Compliance during a contract.*  
WORK TO BE PERFORMED/MATERIALS SUPPLIED:

\_\_\_\_\_

Anticipated Performance Timeframe (When will the contractor be onsite performing the work and for how long):

\_\_\_\_\_

C. COMPANY NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_ TELEPHONE: ( ) \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_  
ORIGINAL M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
AMENDED M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
*NOTE: Amended Dollar Value only used when changes are made and approved by Compliance during a contract.*  
WORK TO BE PERFORMED/MATERIALS SUPPLIED:

\_\_\_\_\_

Anticipated Performance Timeframe (When will the contractor be onsite performing the work and for how long):

\_\_\_\_\_

**CHICAGO HOUSING AUTHORITY (CHA)**  
**Department of Procurement and Contracts Contract Compliance Division**

**SCHEDULE A – M/W/DBE UTILIZATION PLAN**

**(To Be Completed by PRIME CONTRACTOR)**

D. COMPANY NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_ TELEPHONE: ( ) \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_  
ORIGINAL M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
AMENDED M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
*NOTE: Amended Dollar Value only used when changes are made and approved by Compliance during a contract.*  
WORK TO BE PERFORMED/MATERIALS SUPPLIED:

\_\_\_\_\_

Anticipated Performance Timeframe (When will the contractor be onsite performing the work and for how long):

\_\_\_\_\_

E. COMPANY NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_ TELEPHONE: ( ) \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_  
ORIGINAL M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
AMENDED M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
*NOTE: Amended Dollar Value only used when changes are made and approved by Compliance during a contract.*  
WORK TO BE PERFORMED/MATERIALS SUPPLIED:

\_\_\_\_\_

Anticipated Performance Timeframe (When will the contractor be onsite performing the work and for how long):

\_\_\_\_\_

F. COMPANY NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_ TELEPHONE: ( ) \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_  
ORIGINAL M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
AMENDED M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
*NOTE: Amended Dollar Value only used when changes are made and approved by Compliance during a contract.*  
WORK TO BE PERFORMED/MATERIALS SUPPLIED:

\_\_\_\_\_

Anticipated Performance Timeframe (When will the contractor be onsite performing the work and for how long):

\_\_\_\_\_

**CHICAGO HOUSING AUTHORITY (CHA)**  
**Department of Procurement and Contracts Contract Compliance Division**

**SCHEDULE A – M/W/DBE UTILIZATION PLAN**

**(To Be Completed by PRIME CONTRACTOR)**

F. COMPANY NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_ TELEPHONE:( ) \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_  
ORIGINAL M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
AMENDED M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
*NOTE: Amended Dollar Value only used when changes are made and approved by Compliance during a contract.*  
WORK TO BE PERFORMED/MATERIALS SUPPLIED:

\_\_\_\_\_

Anticipated Performance Timeframe (When will the contractor be onsite performing the work and for how long):

\_\_\_\_\_

G. COMPANY NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_ TELEPHONE:( ) \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_  
ORIGINAL M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
AMENDED M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
*NOTE: Amended Dollar Value only used when changes are made and approved by Compliance during a contract.*  
WORK TO BE PERFORMED/MATERIALS SUPPLIED:

\_\_\_\_\_

Anticipated Performance Timeframe (When will the contractor be onsite performing the work and for how long):

\_\_\_\_\_

F. COMPANY NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_ TELEPHONE:( ) \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_  
ORIGINAL M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
AMENDED M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_  
*NOTE: Amended Dollar Value only used when changes are made and approved by Compliance during a contract.*  
WORK TO BE PERFORMED/MATERIALS SUPPLIED:

\_\_\_\_\_

Anticipated Performance Timeframe (When will the contractor be onsite performing the work and for how long):

\_\_\_\_\_

**CHICAGO HOUSING AUTHORITY (CHA)**  
**Department of Procurement and Contracts Contract Compliance Division**

**SCHEDULE A – M/W/DBE UTILIZATION PLAN**

**(To Be Completed by PRIME CONTRACTOR)**

**II. COMPANY NAME: INDIRECT PARTICIPATION**

A. COMPANY NAME: \_\_\_\_\_

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

CONTACT PERSON: \_\_\_\_\_ TELEPHONE:(    ) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

ORIGINAL M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_

AMENDED M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_

*NOTE: Amended Dollar Value only used when changes are made and approved by Compliance during a contract.*

WORK TO BE PERFORMED/MATERIALS SUPPLIED:

\_\_\_\_\_

Anticipated Performance Timeframe (When will the contractor be onsite performing the work and for how long):

\_\_\_\_\_

B. COMPANY NAME: \_\_\_\_\_

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

CONTACT PERSON: \_\_\_\_\_ TELEPHONE:(    ) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

ORIGINAL M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_

AMENDED M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_

*NOTE: Amended Dollar Value only used when changes are made and approved by Compliance during a contract.*

WORK TO BE PERFORMED/MATERIALS SUPPLIED:

\_\_\_\_\_

Anticipated Performance Timeframe (When will the contractor be onsite performing the work and for how long):

\_\_\_\_\_

C. COMPANY NAME: \_\_\_\_\_

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

CONTACT PERSON: \_\_\_\_\_ TELEPHONE:(    ) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

ORIGINAL M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_

AMENDED M/W/DBE DOLLAR VALUE: \_\_\_\_\_ % of Total Contract Value: \_\_\_\_\_

*NOTE: Amended Dollar Value only used when changes are made and approved by Compliance during a contract.*

WORK TO BE PERFORMED/MATERIALS SUPPLIED:

\_\_\_\_\_

Anticipated Performance Timeframe (When will the contractor be onsite performing the work and for how long):

\_\_\_\_\_

**CHICAGO HOUSING AUTHORITY (CHA)**  
**Department of Procurement and Contracts Contract Compliance Division**

**SCHEDULE A – M/W/DBE UTILIZATION PLAN**

**(To Be Completed by PRIME CONTRACTOR)**

**III. M/W/DBE WAIVER REQUEST & GOOD FAITH EFFORTS (GFEs)**

If a Prime Contractor cannot meet the required M/W/DBE participation requirements in whole or part, it may submit a M/W/DBE waiver request to the Chief Procurement Officer, or her/his designee for consideration. The waiver request must be submitted with a compelling good faith efforts (GFEs) documentation demonstrating the infeasibility of M/W/DBE subcontracting. This documentation must also show that the Prime Contractor has exhausted all good faith efforts for M/W/DBEs to perform under this scope of work without success. The Prime Contractor must therefore provide details of the good faith efforts it has undertaken including the types and number of outreach events it conducted for/to M/W/DBE firms, number of M/W/DBE firms contacted, mode and frequency of communications with these firms, among others in the space provided below. Talk to your Compliance Specialist if you need a list of the minimum GFEs documentation requirements. If you need more space, please attach additional document(s) to this Schedule. Additional documentation must be provided on your company's letterhead.

**CHICAGO HOUSING AUTHORITY (CHA)**  
**Department of Procurement and Contracts Contract Compliance Division**

<b>SCHEDULE A – M/W/DBE UTILIZATION PLAN</b>
<b>(To Be Completed by PRIME CONTRACTOR)</b>

**AFFIDAVIT OF PRIME CONTRACTOR**

To the best of my knowledge, information and belief, the facts and representations contained in this Schedule A are true and no material facts have been omitted.

The undersigned will enter into agreements with the above listed companies for work as indicated on this Schedule A within five (5) days after receipt of a signed contract executed by the Chicago Housing Authority. Copies of agreements including but not limited to joint ventures, subcontracts supplier agreements, purchase orders referencing the SPEC., RFP, or Purchase Order Number shall be forwarded to the Procurement & Contracts Department, Contract Compliance Section, 60 East Van Buren, 8thFloor, Chicago, IL 60605.

I do solemnly declare and affirm under the penalty of perjury that the contents of the forgoing document are true and correct, and that I am authorized on behalf of the Prime Contractor to make this affidavit.

**NAME OF PRIME CONTRACTOR (Print or Type)** \_\_\_\_\_

**AUTHORIZED OFFICER**

Name	Signature	Date

**NAME OF NOTARY (Print or Type)** \_\_\_\_\_

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_ ON THIS \_\_\_\_\_ DAY  
OF \_\_\_\_\_

\_\_\_\_\_ 20\_\_\_\_ BEFORE ME APPEARED (NAME) \_\_\_\_\_ TO ME PERSONALLY

KNOWN WHO, BEING DULY SWORN, DID EXECUTE THE FOREGOING AFFIDAVIT, AND DID STATE THAT HE OR SHE WAS PROPERLY

AUTHORIZED BY (NAME OF COMPANY) \_\_\_\_\_ TO EXECUTE THIS AFFIDAVIT AND DID

SO AS HIS OR HER FREE ACT AND DEED. NOTARY PUBLIC \_\_\_\_\_

(SEAL) COMMISSION EXPIRES: \_\_\_\_\_

CHICAGO HOUSING AUTHORITY (CHA)  
Procurement & Contracts Department Contract Compliance Division

SCHEDULE C

Letter of Intent M/W/DBE and/or Section 3 Business Concern

Subcontractors, Suppliers, Consultants

(To Be Completed by Subcontractor and/or Self-Performing Prime Contractor)

M/W/DBE or SECTION 3 BUSINESS CONCERN NAME: \_\_\_\_\_

M/W/DBE Certification Status: MBE  WBE  DBE  Section 3 Business Concern: Yes  NO

NOTE: Section 3 Business Concerns must show evidence of certification with the CHA Section 3 Resource Center, prior to contract award. **If yes, Section 3 Business Concern**

- At least 51 percent owned and controlled by low-or very low-income persons
- The business is at least 51 percent owned and controlled by current public housing residents or who currently live in Section 8-assisted housing.
- Over 75 percent of the labor hours performed for the business over the prior three- month period are performed by Section 3 workers.

FEIN: \_\_\_\_\_ ETHNICITY: \_\_\_\_\_ GENDER: \_\_\_\_\_

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

CONTACT NAME/TITLE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ IFB/RFP/CONTRACT OR PO #: \_\_\_\_\_

PROJECT TITLE: \_\_\_\_\_ DATE FORM COMPLETED: \_\_\_\_\_

PRIME CONTRACTOR: \_\_\_\_\_  
(NAME) (TELEPHONE NUMBER)

NOTE: M/W/DBE contractors must attach a Letter of Certification from one of the certifying agencies listed on the Schedule A - M/W/DBE Utilization Plan. Subcontractors cannot also be an employee of the Prime Contractor.

1. Will the Subcontractor contract any of the work to be performed on this contract to another firm?  
Yes  No

If yes, explain below (Include dollar amount and percentage that will be subcontracted to other firms):

\_\_\_\_\_

2. List commodities/services to be provided for the above-referenced contract:

\_\_\_\_\_

3. Indicate the total dollar value: \$ \_\_\_\_\_

4. Does the subcontractor have any business interests related to the Prime? Yes  NO

**CHICAGO HOUSING AUTHORITY (CHA)**  
**Procurement & Contracts Department Contract Compliance Division**

**SCHEDULE C**

**Letter of Intent M/W/DBE and/or Section 3 Business Concern**  
**Subcontractors, Suppliers, Consultants**  
(To Be Completed by Subcontractor and/or Self-Performing Prime Contractor)

**PLEASE NOTE:**

(a). **SUBSTITUTION/REMOVAL OF SUBCONTRACTOR:** A prime contractor that needs to remove or substitute a subcontractor on its approved utilization plan must submit a written request for the removal or substitution of the subcontractor concerned. Only when DPC Compliance approves such a request in writing can the removal or substitution of the subcontractor be done by the prime contractor. Under no circumstance should a prime contractor unilaterally remove or substitute a subcontractor on its CHA/HUD funded contract without prior approval by DPC Compliance.

**AFFIDAVIT**

The undersigned will enter into a signed agreement with the Prime Contractor listed above within five (5) days after receipt of a signed contract executed by the Chicago Housing Authority.

I do solemnly declare and affirm under the penalty of perjury that the contents of the forgoing document are true and correct, and that I am authorized on behalf of the Subcontractor to make this affidavit.

\_\_\_\_\_  
(NAME OF SUBCONTRACTOR/SUPPLIER - PRINT OR TYPE)

\_\_\_\_\_  
(SIGNATURE OF AUTHORIZED PRINCIPAL OR AGENT) (DATE)

\_\_\_\_\_  
(NAME OF NOTARY - PRINT OR TYPE)

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_ ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_  
20\_\_\_\_ BEFORE ME APPEARED (NAME) \_\_\_\_\_ to me personally known who,  
being duly sworn, did execute the foregoing affidavit, and did state that he or she was properly authorized by  
\_\_\_\_\_ to execute the affidavit and did so as his or her free act and deed.

NOTARY PUBLIC: \_\_\_\_\_ (SEAL):

COMMISSION EXPIRES: \_\_\_\_\_



## Attachments

**Attachment 1**- Links to City of Chicago and State Standby Generators Standards

**Attachment 2**- HUD's Uniform Physical Conditions Standards (UPCS) and Real Estate Assessment Center (REAC) inspections.

## Links to City of Chicago and State Standby Generators standards

**Chicago Code:**

[Chicago Electric Code for Generators Published – Chief ...](#)

<https://chiefengineer.org/2000/chicago-electric-code-for-generators-published>

**National Fire Protection Association:**

[NFPA 110 Emergency Generator Testing Requirements | Prime ...](#)

<https://www.primepower.com/blog/nfpa-110-emergency>

**National Fire Protection Association:**

[NFPA 110: Standard for Emergency and Standby Power Systems](#)

<https://www.nfpa.org/codes-and-standards/all-codes>.

**American Society of Heating, Refrigerating, and Air-Conditioning Engineers:**

[Standards and Guidelines - ASHRAE](#)

<https://www.ashrae.org/technical-resources/standards-and-guidelines>

**Uniform Physical Condition Standards**

[MSHDA - UPCS Plus Physical Inspection Manual](#)

<https://www.michigan.gov/mshda/0,4641,7-141-5555>

**Real Estate Assessment Center**

[PIH/REAC Physical Inspection Overview - NAHMA](#)

[www.nahma.org/wp-content/uploads/files/member/PIH%20REAC%20Physical%20In](http://www.nahma.org/wp-content/uploads/files/member/PIH%20REAC%20Physical%20In)

**American Society of Mechanical Engineers**

[Codes & Standards - ASME](#)

<https://www.asme.org/codes>

**Uniform Physical Condition Standards - Comprehensive Listing**  
**Inspectable Area: Site**

Page: \_\_\_\_\_ of \_\_\_\_\_

Property ID / Name: \_\_\_\_\_

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

Inspectable Item	Observable Deficiency	NOD	Level			NA	H&S
			1	2	3		
Fencing and Gates	Damaged/Falling/Leaning						NLT
	Holes						NLT
	Missing Sections						NLT
Grounds	Erosion/Rutting Areas						NLT
	Overgrown/Penetrating Vegetation						
	Ponding/Site Drainage						
Health & Safety	Air Quality - Sewer Odor Detected						NLT
	Air Quality - Propane/Natural Gas/Methane Gas Detected						LT
	Electrical Hazards - Exposed Wires/Open Panels						LT
	Electrical Hazards - Water Leaks on/near Electrical Equipment						LT
	Flammable Materials - Improperly Stored						NLT
	Garbage and Debris - Outdoors						NLT
	Hazards - Other						NLT
	Hazards - Sharp Edges						NLT
	Hazards - Tripping						NLT
	Infestation - Insects						NLT
Mailboxes/Project Signs	Mailbox Missing/Damaged						
	Signs Damaged						
Market Appeal	Graffiti						
	Litter						
Parking Lots/Driveways/Roads	Cracks						
	Ponding						
	Potholes/Loose Material						
	Settlement/Heaving						
Play Areas and Equipment	Damaged/Broken Equipment						NLT
	Deteriorated Play Area Surface						
Refuse Disposal	Broken/Damaged Enclosure-Inadequate Outside Storage Space						
Retaining Walls	Damaged/Falling/Leaning						NLT
Storm Drainage	Damaged/Obstructed						
Walkways/Steps	Broken/Missing Hand Railing						NLT
	Cracks/Settlement/Heaving						
	Spalling						

- In order to accurately categorize a deficiency as a "Level 1", "Level 2" or "Level 3" (including independent Health & Safety items), you must refer to the Final Dictionary of Deficiency Definitions (PASS) Version 2.3, dated 03/08/2000. This document can be found at "[http://www.hud.gov/offices/reac/pdf/pass\\_dict2.3.pdf](http://www.hud.gov/offices/reac/pdf/pass_dict2.3.pdf)" (325 Pages, 343 KB)

- Additional clarification to these definitions is contained in the REAC PASS Compilation Bulletin which can be found at "[http://www.hud.gov/offices/reac/pdf/pass\\_bulletin.pdf](http://www.hud.gov/offices/reac/pdf/pass_bulletin.pdf)" (24 Pages, 275 KB)

- Only level 3 is applied to independent Health & Safety deficiencies.

- In the H&S column, NLT is a "Non-Life Threatening" Health & Safety concern whereas LT is a "Life Threatening" concern which calls for immediate attention or remedy and will show up on the Exigent Health and Safety Report at the end of an inspection.

**Uniform Physical Condition Standards - Comprehensive Listing**

**Inspectable Area: Building Exterior**

Property ID / Name: \_\_\_\_\_

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

Building Number: \_\_\_\_\_

Inspectable Item	Observable Deficiency	NOD	Level			NA	H&S
			1	2	3		
Doors	Damaged Frames/Threshold/Lintels/Trim						NLT
	Damaged Hardware/Locks						
	Damaged Surface (Holes/Paint/Rusting/Glass)						
	Damaged/Missing Screen/Storm/Security Door						NLT
	Deteriorated/Missing Caulking/Seals						
	Missing Door						
Fire Escapes	Blocked Egress/Ladders						LT
	Visibly Missing Components						LT
Foundations	Cracks/Gaps						
	Spalling/Exposed Rebar						
Health and Safety	Electrical Hazards - Exposed Wires/Open Panels						LT
	Electrical Hazards - Water Leaks on/near Electrical Equipment						LT
	Emergency Fire Exits - Emergency/Fire Exits Blocked/Unusable						LT
	Emergency Fire Exits - Missing Exit Signs						NLT
	Flammable/Combustible Materials - Improperly Stored						NLT
	Garbage and Debris - Outdoors						NLT
	Hazards - Other						NLT
	Hazards - Sharp Edges						NLT
	Hazards - Tripping						NLT
	Infestation - Insects						NLT
	Infestation - Rats/Mice/Vermin						NLT
Lighting	Broken Fixtures/Bulbs						
Roofs	Damaged Soffits/Fascia						
	Damaged Vents						
	Damaged/Clogged Drains						
	Damaged/Torn Membrane/Missing Ballast						
	Missing/Damaged Components from Downspout/Gutter						
	Missing/Damaged Shingles						
	Ponding						
Walls	Cracks/Gaps						
	Damaged Chimneys						NLT
	Missing/Damaged Caulking/Mortar						
	Missing Pieces/Holes/Spalling						
	Stained/Peeling/Needs Paint						
Windows	Broken/Missing/Cracked Panes						NLT
	Damaged Sills/Frames/Lintels/Trim						
	Damaged/Missing Screens						
	Missing/Deteriorated Caulking/Seals/Glazing Compound						
	Peeling/Needs Paint						
	Security Bars Prevent Egress						LT

- In order to accurately categorize a deficiency as a "Level 1", "Level 2" or "Level 3" (including independent Health & Safety items), you must refer to the Final Dictionary of Deficiency Definitions (PASS) Version 2.3, dated 03/08/2000. This document can be found at "[http://www.hud.gov/offices/reac/pdf/pass\\_dict2.3.pdf](http://www.hud.gov/offices/reac/pdf/pass_dict2.3.pdf)" (325 Pages, 343 KB)

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- Only level 3 is applied to independent Health & Safety deficiencies.

- In the H&S column, NLT is a "Non-Life Threatening" Health & Safety concern whereas LT is a "Life Threatening" concern which calls for immediate attention or remedy and will show up on the Exigent Health and Safety Report at the end of an inspection.

**Uniform Physical Condition Standards - Comprehensive Listing**  
**Inspectable Area: Building Systems**

Property ID / Name: \_\_\_\_\_  
 Building Number: \_\_\_\_\_

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

Inspectable Item	Observable Deficiency	NOD	Level			NA	H&S
			1	2	3		
Domestic Water	Leaking Central Water Supply						
	Misaligned Chimney/Ventilation System						LT
	Missing Pressure Relief Valve						NLT
	Rust/Corrosion on Heater Chimney						NLT
	Water Supply Inoperable						NLT
Electrical System	Blocked Access/Improper Storage						NLT
	Burnt Breakers						NLT
	Evidence of Leaks/Corrosion						NLT
	Frayed Wiring						
	Missing Breakers/Fuses						LT
	Missing Covers						LT
Elevators	Not Operable						NLT
Emergency Power	Auxiliary Lighting Inoperable						
	Run-Up Records/Documentation Not Available						
Fire Protection	Missing Sprinkler Head						NLT
	Missing/Damaged/Expired Extinguishers						LT
Health & Safety	Air Quality - Mold and/or Mildew Observed						NLT
	Air Quality - Propane/Natural Gas/Methane Gas Detected						LT
	Air Quality - Sewer Odor Detected						NLT
	Electrical Hazards - Exposed Wires/Open Panels						LT
	Electrical Hazards - Water Leaks on/near Electrical Equipment						LT
	Elevator - Tripping						NLT
	Emergency Fire Exits - Emergency/Fire Exits Blocked/Unusable						LT
	Emergency Fire Exits - Missing Exit Signs						NLT
	Flammable Materials - Improperly Stored						NLT
	Garbage and Debris - Indoors						NLT
	Hazards - Other						NLT
	Hazards - Sharp Edges						NLT
	Hazards - Tripping						NLT
	Infestation - Insects						NLT
	Infestation - Rats/Mice/Vermin						NLT
HVAC	Boiler/Pump Leaks						
	Fuel Supply Leaks						NLT
	General Rust/Corrosion						NLT
	Misaligned Chimney/Ventilation System						LT
Roof Exhaust System	Roof Exhaust Fan(s) Inoperable						
Sanitary System	Broken/Leaking/Clogged Pipes or Drains						NLT
	Missing Drain/Cleanout/Manhole Covers						

- In order to accurately categorize a deficiency as a "Level 1", "Level 2" or "Level 3" (including independent Health & Safety items), you must refer to the Final Dictionary of Deficiency Definitions (PASS) Version 2.3, dated 03/08/2000. This document can be found at "[http://www.hud.gov/offices/reac/pdf/pass\\_dict2.3.pdf](http://www.hud.gov/offices/reac/pdf/pass_dict2.3.pdf)" (325 Pages, 343 KB)

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- Only level 3 is applied to independent Health & Safety deficiencies.

- In the H&S column, NLT is a "Non-Life Threatening" Health & Safety concern whereas LT is a "Life Threatening" concern which calls for immediate attention or remedy and will show up on the Exigent Health and Safety Report at the end of an inspection.

**Uniform Physical Condition Standards - Comprehensive Listing**  
**Inspectable Area: Common Areas**

Property ID / Name: \_\_\_\_\_

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

Building Number: \_\_\_\_\_

X	Inspectable Item Location	Observable Deficiency	NOD	Level			NA	H&S
				1	2	3		
	Basement/Garage/Carport	Baluster/Side Railings - Damaged						
	Closet/Utility/Mechanical	Cabinets - Missing/Damaged						
	Community Room	Call for Aid - Inoperable						NLT
	Day Care	Ceiling - Bulging/Buckling						
	Halls/Corridors/Stairs	Ceiling - Holes/Missing Tiles/Panels/Cracks						
	Kitchen	Ceiling - Peeling/Needs Paint						
	Laundry Room	Ceiling - Water Stains/Water Damage/Mold/Mildew						
	Lobby	Countertops - Missing/Damaged						
	Office	Dishwasher/Garbage Disposal - Inoperable						
	Other Community Spaces	Doors - Damaged Frames/Threshold/Lintels/Trim						NLT
	Patio/Porch/Balcony	Doors - Damaged Hardware/Locks						
	Restrooms/Pool Structures	Doors - Damaged Surface (Holes/Paint/Rust/Glass)						
	Storage	Doors - Damaged/Missing Screen/Storm/Security Door						NLT
		Doors - Deteriorated/Missing Seals (Entry Only)						
		Doors - Missing Door						
		Dryer Vent -Missing/Damaged/Inoperable						
		Electrical - Blocked Access to Electrical Panel						NLT
		Electrical - Burnt Breakers						NLT
		Electrical - Evidence of Leaks/Corrosion						NLT
		Electrical - Frayed Wiring						
		Electrical - Missing Breakers						LT
		Electrical - Missing Covers						LT
		Floors - Bulging/Buckling						
		Floors - Floor Covering Damaged						
		Floors - Missing Floor/Tiles						
		Floors - Peeling/Needs Paint						
		Floors - Rot/Deteriorated Subfloor						
		Floors - Water Stains/Water Damage/Mold/Mildew						
		GFI - Inoperable						NLT
		Graffiti						
		HVAC - Convection/Radiant Heat System Covers Missing/Damaged						
		HVAC - General Rust/Corrosion						
		HVAC - Inoperable						
		HVAC - Misaligned Chimney/Ventilation System						LT
		HVAC - Noisy/Vibrating/Leaking						
		Lavatory Sink - Damaged/Missing						NLT
		Lighting - Missing/Damaged/Inoperable Fixture						
		Mailbox - Missing/Damaged						
		Outlets/Switches/Cover Plates - Missing/Broken						LT
		Pedestrian/Wheelchair Ramp						
		Plumbing - Clogged Drains						NLT
		Plumbing - Leaking Faucet/Pipes						NLT
		Range Hood /Exhaust Fans - Excessive Grease/Inoperable						
		Range/Stove - Missing/Damaged/Inoperable						
		Refrigerator - Damaged/Inoperable						
		Restroom Cabinet - Damaged/Missing						
		Shower/Tub - Damaged/Missing						
		Sink - Missing/Damaged						NLT
		Smoke Detector - Missing/Inoperable						LT
		Stairs - Broken/Damaged/Missing Steps						NLT
		Stairs - Broken/Missing Hand Railing						NLT
		Ventilation/Exhaust System - Inoperable						
		Walls - Bulging/Buckling						
		Walls - Damaged						
		Walls - Damaged/Deteriorated Trim						
		Walls - Peeling/Needs Paint						
		Walls - Water Stains/Water Damage/Mold/Mildew						
		Water Closet/Toilet - Damaged/Clogged/Missing						
		Windows - Cracked/Broken/Missing Panes						NLT
		Windows - Damaged Window Sill						
		Windows - Inoperable/Not Lockable						NLT

	Windows - Missing/Deteriorated Caulking/Seals/Glazing Compound						
	Windows - Peeling/Needs Paint						
	Windows - Security Bars Prevent Egress						LT
Health & Safety	Air Quality - Mold and/or Mildew Observed						NLT
	Air Quality - Propane/Natural Gas/Methane Gas Detected						LT
	Air Quality - Sewer Odor Detected						NLT
	Electrical Hazards - Exposed Wires/Open Panels						LT
	Electrical Hazards - Water Leaks on/near Electrical Equipment						LT
	Emergency Fire Exits - Emergency/Fire Exits Blocked/Unusable						LT
	Emergency Fire Exits - Missing Exit Signs						NLT
	Flammable/Combustible Materials - Improperly Stored						NLT
	Garbage and Debris - Indoors						NLT
	Garbage and Debris - Outdoors						NLT
	Hazards - Other						NLT
	Hazards - Sharp Edges						NLT
	Hazards - Tripping						NLT
	Infestation - Insects						NLT
	Infestation - Rats/Mice/Vermin						NLT
Pools and Related Structures	Fencing - Damaged/Not Intact						
	Pool - Not Operational						
Trash Collection Areas	Chutes - Damaged/Missing Components						

- In order to accurately categorize a deficiency as a "Level 1", "Level 2" or "Level 3" (including independent Health & Safety items), you must refer to the Final Dictionary of Deficiency Definitions (PASS) Version 2.3, dated 03/08/2000. This document can be found at "[http://www.hud.gov/offices/reac/pdf/pass\\_dict2.3.pdf](http://www.hud.gov/offices/reac/pdf/pass_dict2.3.pdf)" (325 Pages, 343 KB)
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- Only level 3 is applied to independent Health & Safety deficiencies.
- In the H&S column, NLT is a "Non-Life Threatening" Health & Safety concern whereas LT is a "Life Threatening" concern which calls for immediate attention or remedy and will show up on the Exigent Health and Safety Report at the end of an inspection.

Inspectable Area: Unit

Property ID / Name: \_\_\_\_\_

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

Building/Unit Nbr: \_\_\_\_\_

Inspectable Item	Observable Deficiency	NOD	Level			NA	H&S
			1	2	3		
Bathroom	Bathroom Cabinets - Damaged/Missing						
	Lavatory Sink - Damaged/Missing						NLT
	Plumbing - Clogged Drains						NLT
	Plumbing - Leaking Faucet/Pipes						NLT
	Shower/Tub - Damaged/Missing						NLT
	Ventilation/Exhaust System - Inoperable						
	Water Closet/Toilet - Damaged/Clogged/Missing						NLT
	Call-for-Aid	Inoperable					
Ceiling	Bulging/Buckling						
	Holes/Missing Tiles/Panels/Cracks						
	Peeling/Needs Paint						
	Water Stains/Water Damage/Mold/Mildew						
Doors	Damaged Frames/Threshold/Lintels/Trim						NLT
	Damaged Hardware/Locks						
	Damaged/Missing Screen/Storm/Security Door						NLT
	Damaged Surface - Holes/Paint/Rusting/Glass						
	Deteriorated/Missing Seals (Entry Only)						
Missing Door							NLT
Electrical System	Blocked Access to Electrical Panel						NLT
	Burnt Breakers						NLT
	Evidence of Leaks/Corrosion						NLT
	Frayed Wiring						
	GFI - Inoperable						NLT
	Missing Breakers/Fuses						LT
	Missing Covers						LT
Floors	Bulging/Buckling						
	Floor Covering Damage						
	Missing Flooring Tiles						
	Peeling/Needs Paint						
	Rot/Deteriorated Subfloor						
	Water Stains/Water Damage/Mold/Mildew						
Health & Safety	Air Quality - Mold and/or Mildew Observed						NLT
	Air Quality - Sewer Odor Detected						NLT
	Air Quality - Propane/Natural Gas/Methane Gas Detected						LT
	Electrical Hazards - Exposed Wires/Open Panels						LT
	Electrical Hazards - Water Leaks on/near Electrical Equipment						LT
	Emergency Fire Exits - Emergency/Fire Exits Blocked/Unusable						LT
	Emergency Fire Exits - Missing Exit Signs						NLT
	Flammable Materials - Improperly Stored						NLT
	Garbage and Debris - Indoors						NLT
	Garbage and Debris - Outdoors						NLT
	Hazards - Other						NLT
	Hazards - Sharp Edges						NLT
	Hazards - Tripping						NLT
	Infestation - Insects						NLT
	Infestation - Rats/Mice/Vermin						NLT
Hot Water Heater	Misaligned Chimney/Ventilation System						LT
	Inoperable Unit/Components						NLT
	Leaking Valves/Tanks/Pipes						
	Pressure Relief Valve Missing						NLT
	Rust/Corrosion						NLT
HVAC System	Convection/Radiant Heat System Covers Missing/Damaged						
	Inoperable						
	Misaligned Chimney/Ventilation System						LT



	Noisy/Vibrating/Leaking						
	Rust/Corrosion						
Kitchen	Cabinets - Missing/Damaged						NLT
	Countertops - Missing/Damaged						NLT
	Dishwasher/Garbage Disposal - Inoperable						
	Plumbing - Clogged Drains						NLT
	Plumbing - Leaking Faucet/Pipes						NLT
	Range Hood/Exhaust Fans - Excessive Grease/Inoperable						
	Range/Stove - Missing/Damaged/Inoperable						
	Refrigerator-Missing/Damaged/Inoperable						NLT
	Sink - Damaged/Missing						NLT
Laundry Area (Room)	Dryer Vent - Missing/Damaged/Inoperable						
Lighting	Missing/Inoperable Fixture						NLT
Outlets/Switches	Missing						LT
	Missing/Broken Cover Plates						LT
Patio/Porch/Balcony	Baluster/Side Railings Damaged						
Smoke Detector	Missing/Inoperable						LT
Stairs	Broken/Damaged/Missing Steps						NLT
	Broken/Missing Hand Railing						NLT
Walls	Bulging/Buckling						
	Damaged						
	Damaged/Deteriorated Trim						
	Peeling/Needs Paint						
	Water Stains/Water Damage/Mold/Mildew						
Windows	Cracked/Broken/Missing Panes						NLT
	Damaged Window Sill						
	Missing/Deteriorated Caulking/Seals/Glazing Compound						
	Inoperable/Not Lockable						NLT
	Peeling/Needs Paint						
	Security Bars Prevent Egress						LT

- In order to accurately categorize a deficiency as a "Level 1", "Level 2" or "Level 3" (including independent Health & Safety items), you must refer to the Final Dictionary of Deficiency Definitions (PASS) Version 2.3, dated 03/08/2000. This document can be found at "[http://www.hud.gov/offices/reac/pdf/pass\\_dict2.3.pdf](http://www.hud.gov/offices/reac/pdf/pass_dict2.3.pdf)" (325 Pages, 343 KB)

- Additional clarification to these definitions is contained in the REAC PASS Compilation Bulletin which can be found at "[http://www.hud.gov/offices/reac/pdf/pass\\_bulletin.pdf](http://www.hud.gov/offices/reac/pdf/pass_bulletin.pdf)" (24 Pages, 275 KB)

- Only level 3 is applied to independent Health & Safety deficiencies.

- In the H&S column, NLT is a "Non-Life Threatening" Health & Safety concern whereas LT is a "Life Threatening" concern which calls for immediate attention or remedy and will show up on the Exigent Health and Safety Report at the end of an inspection.

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- 1. **CONFIRM THE INSPECTION WITH THE PROPERTY**
  - A. Not only during the initial phone call but again a few days before the inspection date (follow up both confirmations with written correspondence - emails)
  - B. Confirm time and place to meet escort
  - C. Confirm inspection is correctly recorded in REAC Scheduler
  - D. Remind property to notify residents prior to start of inspection
  - E. Download inspection prior to arrival
  - F. Use the latest version of the inspection software
- 2. **ARRIVE ON TIME AND BE PREPARED**
  - A. Notify POA if you are running late for the inspection
  - B. If you are late by 1 hour or more, call TAC to obtain a TAC reference #
  - C. Display HUD ID badge at all times
  - D. Have a copy (soft or hard) of the Compilation Bulletin with you at all times
  - E. Be prepared to see in dark places, measure essential inspectable items for compliance, and test ALL smoke detectors at 8' or lower
- 3. **CONFIRM THE RESIDENTS HAVE BEEN NOTIFIED**
  - A. Request to see a copy of the letter sent to residents
  - B. If residents have not been notified, immediately call TAC for directions on how to proceed and get a TAC reference #
- 4. **MULTIFAMILY Only**
  - A. Verify if property has an active HUD Loan, Section 8 units, or any other type of HUD assistance
    - i. Recommend calling TAC to verify this information
- 5. **REQUEST A RENT ROLL (or ALL-INCLUSIVE LIST)**
  - A. Rent roll can be a Site Map
  - B. Rent roll must contain the following:
    - i. All buildings with a unique address
    - ii. Within each building, the rent roll must contain all the units (including non-revenue units), usually the units will have a unique identifier for each unit
    - iii. Each unit must be clearly identified as being either OCCUPIED or VACANT
    - iv. Each unit must be clearly identified with number of bedrooms
  - C. Identify any 504 units (units modified for handicapped use)
  - D. If POA does not provide a rent roll and/or all-inclusive list, the inspector will have to create this document from information supplied by the POA prior to proceeding any further with the inspection
- 6. **REQUEST AREA MEASURES**
  - A. Later in the inspection, inspector will record calculations provided by POA, or prepare "guesstimate" (inspector calculations) of Area Measures during PHYSICAL VISUAL VERIFICATION OF BUILDING(S) (see 9 below)
- 7. **ASK THE RIGHT QUESTIONS**
  - A. Are there any non-revenue units, such as units for property employees (site manager, maintenance supervisor, etc.) living in a unit not shown on the Rent Roll?
  - B. Are there any Buildings and/or Units Temporarily or Permanently offline? (Reference Compilation Bulletin on how to handle these)
  - C. Have any units been converted to something else (Office, commercial space, daycare center, activity center, beauty shop, Police sub-station, 2 units converted into 1 unit, etc.)?
  - D. Are there any other conditions or changes related to the property or inspection that the inspector should be made aware of?
- 8. **REQUEST BED BUG INFORMATION**
  - A. Record properly on the inspection the existence or non-existence of bed bugs
    - i. If bed bugs exist, also record on the inspection all of the Building/Unit location(s) of bed bugs
  - B. If bed bugs exist, call TAC to report the bed bugs and obtain a TAC reference #
- 9. **PHYSICAL VISUAL VERIFICATION OF BUILDING(S)**
  - A. POA must accompany the inspector during the verification process at all times
  - B. Inspector must get into a position to SEE all sides of every building and the entire site
  - C. Inspector can walk or drive the property during verification process
  - D. Verify and mark the following on your Rent Roll (or All-Inclusive) list:
    - i. Existence of building
    - ii. Address of each building
    - iii. Type of each building
    - iv. Number of Units per building (Remember to ask POA about any altered units while visually verifying the building/unit counts)
  - E. Verify any Permanent and/or Temporary Offline building(s)
  - F. If POA does not provide "Area Measures", inspector needs to calculate the area sizes at this time

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## 10. PARTICIPANT INFORMATION - UPDATE/RECORD/ENTER

- A. Record a **minimum** of 3 participants
  - i. Must include role, name, address & phone number
  - ii. Provide FAX number & email address if available
  - iii. For small properties, one person may be recorded for all 3 participants
- B. One participant recorded must actively participate in the inspection
- C. At least one participant must be marked "Present During Inspection"
- D. Only one participant must be marked "Primary Contact"
- E. **Multifamily** properties must include "Owner" & "Management Agent"
- F. **Public Housing** properties must include "Owner/PHA"

## 11. CERTIFICATE INFORMATION - UPDATE/RECORD/ENTER

- A. Lead Base Paint:
  - i. If built before 1978, mark "Yes" or "No" for LBP Disclosure Forms and LBP Inspection Report regardless of housing type (elderly, nursing, etc.)
    - 1. For elderly, nursing, etc., if "No" is marked, provide a statement in the Property Comments field regarding resident population type
  - ii. Use original date of construction, and NOT rehab date
- B. LBP Disclosure Forms – all 5 files selected at random by the inspector must have the form signed by the resident for "Yes" to be selected
- C. LBP Inspection Report – if the property can show the inspector a copy of a report detailing the results for finding lead paint on the property, mark "Yes"

## 12. VERIFY BUILDING AND UNIT INFORMATION IN DCD

- A. Use the Rent Roll (or other All-Inclusive) list to verify the downloaded inspection information on your DCD
- B. Verify the following from your PHYSICAL VISUAL VERIFICATION OF BUILDING(S) and corrected/accurate information on your Rent Roll:
  - i. Each building address is correct and unique
  - ii. Building Type is correct for each building
  - iii. Construction Year is correct for each building
  - iv. Number of Floors is correct for each building
  - v. Number of units in each building is correct
  - vi. Total number of units is correct
  - vii. Utility turned off for a building and/or unit
- C. Include additional information in the comment field that is important to the inspection of any building and/or unit (offline, ongoing renovation, fire damage, etc.)

## 13. UPDATE/RECORD/ENTER PROPERTY INFORMATION

- A. Property Name correct
- B. Mark Scattered Site if appropriate
- C. Property address should be physical address and not PO Box number
- D. Enter property phone number, FAX number & email address as appropriate
- E. Enter "# of Occupied Units"
  - i. Obtain this information from the Rent Roll (or other All-Inclusive) list
  - ii. A verbal from POA is not acceptable for # of occupied units
- F. Include additional information in the comment field that is important to the inspection (snow, locations of bed bugs, changes in downloaded number of buildings and/or units, TAC #s, etc.)
- G. Record Area Measures in DCD

## 14. ALL CORRECTIONS MUST BE COMPLETED IN YOUR DCD BEFORE GENERATING THE SAMPLE

- A. Call TAC to obtain a reference # if the building and/or unit count is different from the download
- B. Call TAC to obtain a reference # if bed bugs are present
- C. Call TAC for any other issues that will affect the Acceptance/Rejection of the inspection

## 15. GENERATE SAMPLE

## 16. IDENTIFY SAMPLE BUILDING(S) AND ENTER SAMPLE UNITS

- A. Select sample units from your Rent Roll (or All-Inclusive) list
- B. Enter sample units in DCD while still in the office if possible
- C. If property is MASTER KEYED, inspector WILL NOT provide POA with a list of sample units
- D. If property is not Master Keyed, inspector will provide POA with a list of sample units
  - i. List call be a full list of units, or a partial list of units (with remaining units provided later in the inspection)

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- ii. If a list of units is provide, inspector will advise POA (and POA's staff) not to go in front of inspector to selected units to make any repairs unless it is an emergency

## 17. EXPLAIN TO ESCORTS HOW THE INSPECTION WILL BASICALLY BE CONDUCTED

- A. POA is required to keep inspector in sight at all times while on the property
- B. POA will need to open closed doors before entering a building, before entering a unit, and before entering any rooms within a unit (except for closets)
- C. Inspector will explain their routine
  - i. Start with which Inspectable Area (Site, Building Exterior, Unit, etc.)
  - ii. Right to left, left to right, or other
- D. Discuss elevator equipment room & off site monitored systems if applicable
- E. Inspector must inspect all inspectable items at 8' from floor or below, such as smoke detectors, doors, windows, sink faucets, tub/shower items, etc. (POA cannot assist with any inspectable items)
  - i. POA will need to clear area (move drapes, move blinds, move residents' personal items) so inspector can inspect all inspectable items
    - 1. Failure of POA to move items so inspector can inspect inspectable items will results in those items being recorded as defective
  - ii. Only exceptions to inspector inspecting all inspectable items:
    - 1. POA must turn on/off stove/oven while inspector is watching
    - 2. All inspectable items over 8 feet from floor must be inspected by POA while inspector is watching, or a defect must be recorded for those items
- F. Inspector will need to see behind all doors in a building and in a unit
  - i. POA will need to be prepared with necessary keys to access all areas
  - ii. If inspector cannot see behind any unit door, an alternate unit must be selected
  - iii. If inspector cannot see behind a Common Area door, a Level 3 defect will be recorded for that door
- G. All defects must be recorded when observed
- H. During the inspection, inspector will call out every defect (including inspectable area, inspectable item, inspectable defect & level of defect)
- I. Once the inspection begins, the POA is not allowed to correct any defects prior to the inspector inspecting that area.
  - i. There are ONLY 5 exceptions to correct defects in the presences of an inspector:
    - 1. Install light bulbs to prove a fixture works
    - 2. Plug in bathroom exhaust fan to show it works
    - 3. Gas Stove - light inoperable pilot light (no repairs allowed) to show burners work, a Level 1 defect will be recorded instead of Level 2 or 3
    - 4. Electric Stove – if burners have been removed for cleaning, POA will be allowed to plug burners back in to show all work properly (no repairs are allowed)
    - 5. Gas/Electric Stoves – if knobs are missing, POA will be allowed to find and install knobs to show all burners/oven work properly
      - a. Missing knob(s) will be a Level 1 defect if all burners/oven work properly
- J. Property is not allowed to go in front of inspector to correct defects
  - i. First observation of this will result in inspector requesting practice be terminated
  - ii. Second observation will result in inspector calling TAC and inspection being reported as "Unsuccessful"
- K. POA may want to take a note pad to record any defects
- L. Please feel free to ask any questions during the inspection
- M. Are there any questions before we start?

## 18. PROCEED WITH INSPECTION

## 19. COMPLETE EH&S FORM

- A. EH&S form provided at the conclusion of the inspection
  - i. Inspector can provide either handwritten form or Rapid 4.0 generated copy
- B. EH&S form will be provided at the end of each day for inspections lasting more than 1 day
- C. Explain HUD's requirements for mitigation of EH&S hazards
- D. Request signature from POA
  - i. Inspector will keep original
  - ii. POA will keep a copy of original
  - iii. If POA refuses to sign, inspector will leave an unsigned copy with the POA and inspector will keep original for 6 months

## 20. UPLOAD COMPLETED INSPECTION WITHIN 24 HOURS

- A. Obtain TAC reference # if unable to upload within 24 hours

\_\_\_\_\_ (CORPORATE NAME ATTACHED TO FEDERAL TAX ID NUMBER) has thoroughly read **RFQ- Event #59376 (2023) – Standby Generator Testing and Maintenance and Repair Services** and all associated Addenda (if applicable) and can provide the services as described at the offer submitted on this Quote Form.

**CONTACT INFORMATION FOR CORPORATE OFFICIAL AUTHORIZED TO BIND RESPONDENT**

DATE	
CORPORATE OFFICIAL NAME	
CORPORATE OFFICIAL TITLE	
CORPORATE OFFICIAL E-MAIL ADDRESS	
COMPANY PHONE NUMBER	
COMPANY ADDRESS	
CORPORATE OFFICIAL SIGNATURE	