

## *CITYOFAUSTIN, TEXAS Austin Public Health* FORM 1 - REQUEST FOR PROPOSALS OFFER SHEET Version 3



## SOLICITATION NAME: RFP 2022-001 Homeless Housing Stabilization Services

DATE ISSUED:	Monday, January 31, 2022 Version 3 Revision Date: March 8, 2022
RFP PROPOSAL DUE DATE:	Tuesday, March 15, 2022, by 3PM CST
THRESHOLD FORM DUE DATE:	Wednesday, February 16, 2022, by 3 PM CST
Anticipated Start date of contract:	July 1, 2022, and October 1, 2022
Questions regarding the RFP are due on or before:	Wednesday, March 2, 2022, by 3 PM CST
Technical Assistance regarding submission of the RFP in Partnergrants are due on or before:	Monday, March 14, 2022, by 3 PM CST
Questions must be submitted in writing to the Authorized Contact Person or through Partnergrants	Authorized Contact Person: Angela Baucom Social Service Funding Specialist E-Mail: <u>APHCompetitions@austintexas.gov</u>
Questions and Answers will be available:	In Partnergrants and on the solicitation website: <u>APH Competition Website</u>
Optional Pre-Bid Meeting- Date and Time:	Tuesday, February 1, 2022, 1:30 PM – 3:00 PM CST Friday, February 4, 8:30 AM – 10 AM CST
Pre-Bid Meeting Location:	Registration Required with this link to get the Conference Call details: February 1: <u>Registration Link</u> February 4: <u>Registration Link</u>

<u>APH is only accepting proposals through the Partnergrants database. No paper copies will be accepted.</u>

All Offerors must:

- 1. Confirm that their organization is a registered vendor with the City of Austin.
  - To confirm: enter the organization's City of Austin Vendor Number when registering as a user in the Partnergrants system (see #2 below).
    - To find the City of Austin Vendor Number please visit <u>Austin Finance Online</u>. And search for the organization's legal name.
  - To register to become a potential City of Austin vendor, go to <u>Austin Finance Online</u> to register.
- 2. Be a registered user in the <u>Partnergrants database</u>. The proposals will be submitted through this web-based system. To register, visit the Partnergrants website and click on "Register Here." Note that the organization's City of Austin Vendor number is required to complete registration in Partnergrants.site and click on "Register Here." Note that the organization's City of Austin Vendor number is required to complete registration in Partnergrants.site and click on "Register Here." Note that the organization's City of Austin Vendor number is required to complete registration in Partnergrants.

This Offer Sheet must be signed and submitted in Partnergrants to be considered for award.



*CITYOFAUSTIN, TEXAS Austin Public Health* FORM 1 - REQUEST FOR PROPOSALS OFFER SHEET Version 3



This solicitation is comprised of the following required sections. Please carefully read each section including those incorporated by reference. By signing this document, you are agreeing to all the items contained herein and will be bound to all terms.

All of the following items can be found on the RFP Website: <u>APH Competition Website</u>

FORM	TITLE	REQUIRES RESPONSES
1	OFFER SHEET	Forms 1-4 must be filled out,
2	RFP APPLICATION (Uploaded in Word) - Updated	signed, scanned, and uploaded
3	PROGRAM BUDGET AND FUNDING SUMMARY	into PartnerGrants by March 15,
4	COA CERTIFICATIONS AND DISCLOSURES	2022, by 3PM CST
EXHIBIT	TITLE	INFORMATION ONLY
А	THRESHOLD REVIEW FORM	Threshold Application due by February 16, 2022, by 2:59pm
В	STANDARD SOLICITATION PROVISIONS AND INSTRUCTIONS	
С	RFP SCOPE OF WORK - Updated	
D	APH CLIENT ELIGIBILITY REQUIREMENTS	Information Only
E	STANDARD APH AGREEMENT BOILERPLATE	
F	APPLYING FOR APH-FUNDED OPPORTUNITY – PARTNERGRANTS INSTRUCTIONS	
G	GRANT-SPECIFIC DISCLOSURES	



CITYOFAUSTIN, TEXAS Austin Public Health FORM 1 - REQUEST FOR PROPOSALS OFFER SHEET Version 3



The undersigned, by their signature, represents that they are submitting a binding offer and is authorized to bind the Applicant to fully comply with the solicitation document contained herein. The Applicant, by submitting and signing below, acknowledges that they have received and read the entire document packet sections defined above including all documents incorporated by reference, and agrees to be bound by the terms therein.

Company Name:	
Company Address:	
City, State, Zip:	
Federal Tax ID No.:	
Printed Name of Officer or	
Authorized Representative:	
Title:	
Email Address:	
Phone Number:	

Signature of Officer or Authorized Representative:

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

\* This Offer Sheet must be signed and submitted in Partnergrants to be considered for award. Electronic Signature is acceptable.