



Department of Purchasing & Contracting
1300 Commerce Drive, 2nd Floor
Decatur, Georgia 30030
Fax: (404) 371-7006

Date: June 1, 2018

Request For Vendor Qualifications No. 18-3003621

For Home Repair Program for Single Family Detached Homes

Introduction

The DeKalb County Government (hereinafter, “the County”) is soliciting statements of qualifications from suppliers interested in providing **Home Repair for Single Family Detached Homes**. This Request for Vendor Qualifications is intended to identify one or more responsible suppliers who meet or exceed the identified requirements contained herein. This RFVQ will not result in contract award. Instead, this RFVQ will establish a list of qualified suppliers who will be eligible to participate to win future contracts from the County.

The RFVQ is a prequalification process. The objective of the RFVQ is to identify at minimum five (5) responsible suppliers who meet the County’s qualification requirements to provide the goods and/or services outlined in this RFVQ to the County. This RFVQ process will be conducted to gather and evaluate responses from suppliers. All qualified suppliers are invited to participate by submitting responses, as further defined below. After evaluating all suppliers’ responses, the results of the RFVQ process will be publicly announced, including the names of those suppliers who were identified as qualified suppliers, unsuccessful suppliers and the reasons why those unsuccessful suppliers were not determined to be qualified.

I. Proposed Term:

The Contractors that are pre-qualified from this Request for Vendor Qualifications (RFVQ) shall remain active to perform residential home repair services for a period of up to five (5) years.

In responding to this RFVQ, please complete Attachment A – Pre-Qualification Application by providing specific details where the Applicant has provided residential home repair services in which the Applicant’s team including all principals and owners were comprised of individuals that meet the requirements of at least one (1) of the Contract specialty areas as specified on **page 17**. However, preference will be given to applicants who can provide home repair services in multiple categories.

II. Instructions:

- A. Applicants shall complete the Pre-Qualification Application in its entirety and on the form attached to this RFVQ as Attachment A. Applicants shall not attach information in lieu of completion of the Pre-Qualification Application document. Additional pages may be attached if more space is required, or as otherwise instructed within the Pre-Qualification Application. All additional pages must be clearly labeled with the applicant's name, section, item number and page number.
- B. Applicant's qualification will be determined based upon the information presented. All questions must be answered in full, without exception. Failure to do so may result in the applicant being deemed non-responsive and therefore may not be considered for qualification.
- C. All questions pertaining to this RFVQ must be submitted via email to Arnaz Fanning at afanning@dekalbcountyga.gov no later than 2:00pm on Friday, June 15, 2018. Questions received after this date and time will not receive a response.
- D. **One (1) original stamped "Original" and two (2) sealed copies of the completed Pre-Qualification Application must be submitted to the following address no later than 3:00pm on Friday, June 29, 2018:**

**DeKalb County Department of Purchasing and Contracting
The Maloof Center, 2nd Floor
1300 Commerce Drive
Decatur, Georgia 30030**

Pre-Qualification Applications must be clearly identified on the outside of the envelope with the responder's name, "RFVQ #18-3003621, Home Repair for Single Family Detached Homes".

III. Special Purpose Home Repair Program:

DeKalb County is seeking qualified contractors to provide basic system repairs or replacements for single family detached homes in support of the County's Special Purpose Home Repair Program for Single Family Detached Homes. The program shall operate in the following manner.

- A. The County shall accept applications for the Special Purpose Home Repair Program from citizens and review each application to determine if the Applicant meets the program requirements.
- B. The County shall inspect the home of the pre-qualified Applicant for verification of the program eligible repairs needed and prepare a solicitation containing all program eligible repairs needed and the applicable specifications for work.
- C. After inspection of the homes, if determined that a home contains lead-based paint, then at the time the bid is submitted the Contractors shall provide a copy of its or its subcontractor's Lead Base Paint Abatement Firm License for any work that requires lead-based paint abatement, renovation, and repair, in accordance with the State of Georgia Rule 391-3-254. All licenses and certificates must be:

1. Issued in the name of the person or entity that will perform the paint abatement work.
 2. Current and valid
 3. Issued in compliance with applicable laws.
- D. The County reserves the right on any home that has been determined to have Lead-Based Paint present, to NOT include those homes for rehabilitation at the time of contracting.
 - E. The County shall then provide the bid documents to all pre-qualified Contractors retained under RFVQ #18-3003621
 - F. Contractors shall, before submitting its bids for individual home repairs projects, participate in a coordinated visit to the home and evaluate the actual conditions and the location of any or all obstructions that may exist on the site.
 - G. The County shall evaluate the bids received, and award the job to the lowest, responsive and responsible bidder. However, projects may be awarded on a rotating basis in the event that the project cost estimates determined during initial County inspection fall under an amount required for bidding.
 - H. Contractors may submit bids for repair work on multiple properties simultaneously during the term of the contract.
 - I. The County reserves the right to suspend and/or terminate services with any contractor who fails to respond to five (5) consecutive requests for quotes over a six (6) month period, demonstrates poor workmanship, failure to complete or cure repairs within 15 days of notice of insufficiencies, demonstrates unsafe working conditions, unethical practices and/or damage to property.
 - J. Payments to Contractors shall be made only upon Acceptance by the County of completed work.

IV. Contractor Specifications:

Quotes for the following specifications shall be proposed in each individual request for quote after the Contractor has been qualified as a Contractor for the Home Repair Program for Single Family Detached Homes. DeKalb County will pre-qualify experienced contractors to provide residential home repair services for single-family detached homes. All work must be properly permitted and a Certificate of Occupancy must be issued upon completion. **See Exhibit I Standard Specifications for Residential Rehabilitation.** Repair services include, but are not limited to the following types:

1. Basic System Repairs

The following types of repair services will be required:

A. Heating and Cooling System

Heating and Cooling System repair or replacement of heat pumps or HVAC units.

B. Plumbing

Plumbing repairs or replacements of waterlines, water pumps, or hot water heaters due to failures, plumbing leaks or failure of water supply components such as waterlines, water pumps or hot water heaters.

C. Electrical

Repair or replacement of damaged or non-working electrical systems or wiring such as electrical boxes (breaker/fuse or basic wiring).

D. Roofing

Repair or replacement of damage to or failure of roofing system components.

2. **Other Repairs:**

Contractors may be required to complete repairs necessary to complete “basic system repair” or address other hazardous conditions such as lead-based paint or asbestos. Other repairs include, but are not limited to the following types:

A. Carpentry Repairs

1. Doors
2. Windows
3. Floors
4. Porches
5. Exterior Stairs
6. Cabinets
7. Hardware and accessories
8. Accessibility Aides

B. Paint

C. Drywall

D. Concrete and Masonry

E. Energy Conservation

1. Weatherization
2. Insulation

F. Landscaping

V. **Pre-Qualification Criteria:**

A. **Minimum Company Experience**

1. Applicant must have four (4) years’ experience in home repair services as referenced in Section IV. Principals must provide resumes and evidence of ownership covering the most recent four (4) year period.
2. Applicants must state how many years they have operated under the current company name.
3. The Applicant must have successfully completed four (4) projects related to residential home repair that adhere to the scope, timeline, cost and satisfaction of the homeowner or agency in the last four (4) years.
4. Applicant performing basic system repairs or replacement work must have a minimum of four (4) years recent experience in performing residential home repair for projects that include, but are not limited to, heating, ventilation, air conditioning (HVAC), plumbing, electrical and roofing.

5. Applicant performing other repairs outlined in Section IV must have a minimum of four (4) years recent experience in performing single-family residential structural repairs including, but not limited to, walls, interior ceilings or interior stairs.
6. Applicant must provide detailed information for a minimum of four (4) projects completed in the most recent twenty-four (24) months with costs exceeding five-thousand dollars (\$5,000.00). Applicant must include a brief description, photographs (if possible) and a verifiable reference for each project. As a minimum, the reference must include an individual's names and/or position in the company (if reference is an agency) with appropriate and correct contact information.

B. License Requirements:

Applicants must submit a copy of all applicable licenses listed below.

1. Residential Basic Contractor's License – As required by O.C.G.A. § 43-41-2, et seq., an Applicant responding to this Request for Qualified Contractors must, at a minimum, provide a copy of its Georgia Residential Basic Contractor's License. The Georgia Residential Basic Contractor's License must be issued in the name of the Applicant or in the name of its qualifying agent.
 - a. If proposed, an applicant must be set forth on the license as an affiliated business organization/dependent licensee. All licenses must be current, valid and issued in compliance with all applicable laws. Failure to provide this license with the response may result in the proposed response being deemed non-responsive.
2. Specialty License – As required by O.C.G.A. Title 43, Chapter 14, Sections 1-17, all applicants responding to the RFQC must provide a copy of its or its subcontractor's Georgia license(s) for any work that requires electrical, plumbing, HVAC, or other specialty trades. All licenses and certificates must be issued in the name of the person or entity that will perform the specialty work above. It must be current, valid and issued in compliance with all applicable laws.
3. Business License – Upon qualifying, Applicants must provide a copy of its current, valid Business License. If the Applicant is a Georgia Corporation, Applicant must submit a valid county or city business license. If Applicant is a joint venture, Applicant must submit valid business licenses for each member of the joint venture. If the Applicant is not a Georgia Corporation, applicant must submit a certificate of authority to transact business in the State of Georgia and a copy of its current, valid business license issued by its home jurisdiction. If Applicant holds a professional license, then Applicant must submit a copy of valid professional license.

4. Failure to provide the business license, certificate of authority, or professional license required under this section shall result in the Applicant being removed from the qualified Contractors list and become ineligible to perform the work as described in this solicitation.

C. Financial Statements:

Applicants must provide three (3) years of business tax returns (Balance Sheet and Income Statement) or signed personal tax returns with a Schedule C. these documents must be submitted in a separate, sealed envelope with Attachment A – Pre-Qualification Application.

D. Project Personnel:

Proposed project personnel must meet or exceed the requirements specified in Sections IV and V of this solicitation. DeKalb County reserves the right to approve all personnel provided by the Applicant and its subcontractors for any portion of work resulting from this pre-qualification process.

E. Reference Release Form

Applicants must complete Attachment B, Applicant Reference Release Form and return it with the Pre-Qualification Application. Applicant must also complete Attachment C, Sub-Contractor Reference Release Form for all subcontractors.

F. Federal Work Authorization Program Participation Certificate:

All qualifying contractors and subcontractors performing work with DeKalb County, Georgia must register and participate in the Federal Work Authorization Program to verify the work eligibility information of new employees. In order for an Applicant to be considered, it is **Mandatory** that Attachment D, Applicant Affidavit be completed, notarized and submitted with the Applicants Quote.

VI. Review and Next Step:

Once the DeKalb County Department of Purchasing and Contracting has received all applications, an evaluation committee will review all Pre-Qualification Applications received by the deadline. The committee will determine which firms are pre-qualified to submit bids for the Home Repair Program for Single Family Detached Homes.

VII. Pre-Qualified Applicants will be required to comply with the following Ordinances/Programs when responding to the Request for Quote (RFQ) for Home Repair for Single Family Detached Homes:

A. Ethics Rule:

Bidders are subject to the Ethics provision within the DeKalb County Purchasing Policy; the Organizational Act, Section 22A, the Code of DeKalb County; and the rules of Executive Order 2014-4. Any violations will be addressed, pursuant to these policies and rules.

To the extent that the Organizational Act, Section 22A, the Code of DeKalb County, and the rules of Executive Order 2014-4 allow a gift, meal, travel expense, ticket, or anything else of value to be purchased for a CEO employee by a contractor doing business with the County, the contractor must provide written disclosure, quarterly, of the exact nature and value of the purchase to the Chief Integrity Officer, if created, or the Finance Director or his/her designee. Every contractor conducting business with the County will receive a copy of these ethical rules at the time of execution of the contract.

B. Georgia Open Records Act:

Without regard to any designation made by the person or entity making a submission, DeKalb County considers all information submitted in response to this invitation or request to be a public record that will be disclosed upon request pursuant to the Georgia Open Records Act, O.C.G.A. §50-18-70 et seq., without consulting or contacting the person or entity making the submission, unless a court order is presented with the submission. You may wish to consult an attorney or obtain legal advice prior to making a submission.

C. First Source Jobs Ordinance:

The DeKalb County First Source Jobs Ordinance requires contractors or beneficiaries entering into any type of agreement with the County, including purchase orders, regardless of what they may be called, for the procurement or disposal of supplies, services, construction projects, professional or consultant services, which is funded in whole or part with County funds or County administered funds in which the contractor is to receive \$50,000 or more in County expenditures or committed expenditures and recipient of urban redevelopment action grants or community development block funds administered in the amount of \$50,000 or more make a good faith effort to hire DeKalb County residents for at least 50% of jobs using the First Source Registry (candidate database). The work to be performed under this contract is subject to the provisions of the DeKalb County First Source Jobs Ordinance. Please complete the First Source Jobs Ordinance Acknowledgement and New Employee Tracking Form included in Attachment H, First Source Jobs Ordinance (with Exhibits 1 – 4) and submit with the responder’s response.

For more information on the First Source Jobs Ordinance requirement, please contact WorkSource DeKalb at www.worksourcedekalb.org or 404-687-3400.

D. INSURANCE:

Prior to commencing work, Contractor shall, at its sole expense, procure and maintain insurance of the types and in the amounts described below from insurer(s) authorized to transact business in the state where the work or operations will be performed by Contractor. Such insurance shall be placed with admitted insurers that maintain an A.M. Best's rating of not less than “A” (Excellent) with a Financial Size Category of VII or better with coverage forms acceptable to Contractor. The insurance described below shall be maintained uninterrupted for the duration of the project, including any warranty periods, and shall protect Contractor, and others as required by contract, for liabilities in connection with

work performed by or on behalf of Contractor, its agents, representatives, employees or Contractors.

1. Certificates of Insurance in companies doing business in Georgia and acceptable to the County covering:
 - (a) Statutory Workers' Compensation Insurance, or proof that Contractor is not required to provide such coverage under State law;
 - (1) Employer's liability insurance by accident, each accident \$1,000,000
 - (2) Employer's liability insurance by disease, policy limit \$1,000,000
 - (3) Employer's liability insurance by disease, each employee \$1,000,000
 - (b) Professional Liability Insurance on the Contractor's services in this Agreement with limit of \$1,000,000;
 - (c) Commercial General Liability Insurance covering all operations with combined single limit of \$1,000,000;
 - (d) Comprehensive Automobile Liability Insurance with form coverage for all owned, non-owned and hired vehicles with combined single limit of \$1,000,000.
 - (e) Umbrella or Excess Insurance. Umbrella or excess insurance is to be provided with General Liability, Auto Liability and Employers Liability scheduled as underlying policies with limits not less than the following:
\$5,000,000 per occurrence
\$5,000,000 aggregate
2. Additional Insured Requirement:
 - (a) The County, its elected officials, officers, employees and agents, hereinafter referred to in this article and in the article entitled "Certificates of Insurance" as "the County and its officers" are to be named as additional insured on all policies of insurance except worker's compensation insurance with no cross suits exclusion. The County and its officers shall be included as additional insureds under commercial general liability and commercial umbrella insurance, for liabilities arising out of both the ongoing and completed operations of Contractor. Such additional insured coverage shall be endorsed to Contractor's policy by attachment of ISO Additional Insured Endorsement forms CG 20 10 10 01 (ongoing operations) and CG 20 37 10 01 (products-completed operations), or form(s) providing equivalent coverage.
 - (b) All coverages required of the Contractor will be primary over any insurance or self-insurance program carried by the County.
 - (c) If the Contractor is a joint venture involving two (2) or more entities, then each independent entity will satisfy the limits and coverages specified here or the joint venture will be a named insured under each respective policy specified.
3. The Contractor shall provide Fidelity Bond coverage. Coverage limits shall not be less than the amount scheduled in the contract.
4. Certificates of Insurance must be executed in accordance with the following provisions:

- (a) Certificates to contain policy number, policy limits, and policy expiration date of all policies issued in accordance with this Agreement;
- (b) Certificates to contain the location and operations to which the insurance applies;
- (c) Certificates to contain Contractor's protective coverage for any subcontractor's operations;
- (d) Certificates to contain Contractor's contractual liability insurance coverage;
- (e) Certificates are to be **issued** to:

**DeKalb County, Georgia
Director of Purchasing & Contracting
The Maloof Center, 2nd Floor
1300 Commerce Drive
Decatur, Georgia 30030**

- 5. The Contractor shall be wholly responsible for securing certificates of insurance coverage as set forth above from all subcontractors who are engaged in this work.
- 6. The Contractor agrees to carry statutory Workers' Compensation Insurance and to have all subcontractors likewise carry statutory Workers' Compensation Insurance.
- 7. Contractor agrees to waive all rights of subrogation and other rights of recovery against the County and its officers and shall cause each Subcontractor to waive all rights of subrogation for all coverage, excluding Professional E&O.
- 8. Failure of the County to demand such certificate or other evidence of full compliance with these insurance requirements or failure of the County to identify a deficiency from evidence provided will not be construed as a waiver of the Contractor's obligation to maintain such coverage. Contractor understands and agrees that the purchase of insurance in no way limits the liability of the Contractor.
- 9. Certificates shall state that the policy or policies shall not expire, be cancelled or altered without at least sixty (60) days prior written notice to the County. Policies and Certificates of Insurance listing the County and its officers as additional insureds (except for workers' compensation insurance) shall conform to all terms and conditions (including coverage of the indemnification and hold harmless agreement) contained in this Contract.
- 10. If the County shall so request, the Contractor will furnish the County for its inspection and approval such policies of insurance with all endorsements, or confirmed specimens thereof certified by the insurance company to be true and correct copies. Contractor shall be responsible and have the financial wherewithal to cover any deductibles or retentions included on the certificate of insurance.

11. **Funding Clause**

The Contractor has been informed and understands that funding for this Contract is provided under the **Community Development Block Grant (CDBG)** and expressly agrees that performance of the Contract, in whole or in part, is contingent upon and subject to the availability of such funding under the **Community Development Block Grant (CDBG)** to the Human and Community Development, DeKalb County Georgia.

THE COUNTY RESERVES THE RIGHT TO REJECT ANY AND ALL QUALIFICATIONS, TO WAIVE INFORMALITIES AND TO RE-ADVERTISE

Respectfully,



Arnaz Fanning
Procurement Agent
Department of Purchasing and Contracting

Note: All of the Attachments below must be completed and submitted.

Acknowledgement

- Attachment A – Pre-Qualification Application**
- Attachment B – Applicant Reference Release Form**
- Attachment C – Sub-Contractor Reference Release Form**
- Attachment D – Applicant Affidavit**
- Attachment E – First Source Jobs Ordinance Acknowledgement**
- Attachment F – New Employee Tracking Form**
- Attachment G – Business Service Request Form**
 - Financial Statements**
 - Business License**
 - Residential Basic Contractor’s License**
 - Specialty License(s)**

ACKNOWLEDGEMENT

I, the undersigned, acknowledge that I have read the Qualifications document in its entirety and agree to comply with its every requirement. I further acknowledge that failure to prepare, submit or execute this application in the exact manner requested may be just cause to reject my entire application. I fully understand that this completed acknowledgement page will act to bind me to the terms and conditions of these qualifications. The County reserves the right to reject any and all qualifications, to waive informalities, and re-advertise.

NAME OF COMPANY: _____

BY: _____
(TYPE OR PRINT – TITLE AND NAME OF PERSON SUBMITTING QUALIFICATIONS)

SIGNATURE: _____

(COMPANY FEDERAL ID NUMBER) (INDIVIDUAL E-MAIL ADDRESS)

(STREET ADDRESS)

(CITY) (STATE) (ZIP CODE)

PHONE: () _____ **FAX:** () _____

The above acknowledgement must be properly signed and firmly attached to your application. The acknowledgement becomes a part of your application and without it your application is not complete and will be subject to rejection.

THIS PAGE MUST BE RETURNED WITH YOUR APPLICATION. INSTRUCTIONS AND CONDITIONS ARE FOR YOUR INFORMATION.

Applicant Checklist – All documents below must be submitted.

- Acknowledgement
- Attachment A – Pre-Qualification Application
- Attachment B – Applicant Reference Release Form
- Attachment C – Sub-Contractor Reference Release Form
- Attachment D – Applicant Affidavit
- Attachment E – First Source Jobs Ordinance Acknowledgement
- Attachment F – New Employee Tracking Form
- Attachment G – Business Service Request Form
- Financial Statements
- Business License
- Residential Basic Contractor’s License
- Specialty License(s)

ATTACHMENT A
HOME REPAIR FOR SINGLE FAMILY DETACHED HOMES
APPLICATION FOR PRE-QUALIFICATION

CONTRACTOR NAME: _____

I. GENERAL BACKGROUND

A. Current Applicant Information:

- 1. Applicant Name: _____
Mailing Address: _____
City: _____
State and Zip: _____
Business Address: _____
City: _____
State and Zip: _____
Contact Person: _____
Telephone and Fax: _____
Email Address: _____

- 2. Applicant is:
Corporation: _____
Partnership: _____
Individual: _____
Limited Liability Corporation: (Include a copy of your Articles of Incorporation)

B. Principals/Officers/Individuals authorized to sign contracts:

- Name and Title: _____
- Name and Title: _____
- Name and Title: _____
- Name and Title: _____
- Name and Title: _____

II. COMPANY EXPERIENCE – SIMILAR PROJECTS

CONTRACTOR’S QUALIFICATIONS WILL BE DETERMINED BASED UPON THE INFORMATION PRESENTED ON THIS PAGE. ADDITIONAL INFORMATION PROVIDED AS “ATTACHMENTS” SHALL BE FOR FURTHER EXPLANATION OF PROJECTS LISTED BELOW OR AS SUPPLEMENTAL INFORMATION.

Applicants must provide detailed information for a minimum of four (4) projects completed within the last twenty-four (24) months with costs exceeding \$5,000.00. A brief description and a reference for each project must be listed. As a minimum, the reference must include an individual’s names and/or position in the company (if reference is an agency) with appropriate contact information:

Reference #1

Project Name: _____

Project Description: _____

**Contractor Specialty
(as listed on page 14)
provided for the project:** _____

Company Name: _____

Company Address: _____

Company Contact Person: _____

Contact Person Phone: _____

Contact Person E-Mail: _____

Contract Amount: _____

Year Completed: _____

(Use attachments as needed)

Reference #2

Project Name: _____

Project Description: _____

**Contractor Specialty
(as listed on page 14)
provided for the project:** _____

Company Name: _____

Company Address: _____

Company Contact Person: _____

Contact Person Phone: _____

Contact Person E-Mail: _____

Contract Amount: _____

Year Completed: _____

(Use attachments as needed)

Reference #3

Project Name: _____

Project Description: _____

**Contractor Specialty
(as listed on page 14)
provided for the project:** _____

Company Name: _____

Company Address: _____

Company Contact Person: _____

Contact Person Phone: _____

Contact Person E-Mail: _____

Contract Amount: _____

Year Completed: _____

(Use attachments as needed)

Reference #4

Project Name: _____

Project Description: _____

**Contractor Specialty
(as listed on page 14)
provided for the project:** _____

Company Name: _____

Company Address: _____

Company Contact Person: _____

Contact Person Phone: _____

Contact Person E-Mail: _____

Contract Amount: _____

Year Completed: _____

(Use attachments as needed)

III. PROPOSED PROJECT PERSONNEL

Applicants must indicate their ability to provide Contractors in the categories below and in accordance with the requirements as stated on pages 3-5, Contractor Specifications.

Category	Can Provide	Cannot Provide
Georgia Residential Basic Contractor		
Electrician		
Plumber		
HVAC Contractor		
Lead Based Paint Abatement Firm		

ATTACHMENT B
APPLICANT REFERENCE AND RELEASE FORM

List below at least four (4) references, including company name, contact name, address, email address, telephone numbers and contract period who can verify your experience and ability to perform the type of service outlined in this RFVQ. Attach any additional information to this form.

Company Name	Contract Period		
Contact Person Name and Title	Telephone Number (include area code)		
Complete Primary Address	City	State	Zip Code
Email Address	Fax Number (include area code)		

Company Name	Contract Period		
Contact Person Name and Title	Telephone Number (include area code)		
Complete Primary Address	City	State	Zip Code
Email Address	Fax Number (include area code)		

Company Name	Contract Period		
Contact Person Name and Title	Telephone Number (include area code)		
Complete Primary Address	City	State	Zip Code
Email Address	Fax Number (include area code)		

Company Name	Contract Period		
Contact Person Name and Title	Telephone Number (include area code)		
Complete Primary Address	City	State	Zip Code
Email Address	Fax Number (include area code)		

REFERENCE CHECK RELEASE STATEMENT

Dekalb County is authorized to contact the references provided above for purposes of this RFVQ.

Signed _____ Title _____
 (Authorized Signature of Proposer)

Company Name _____ Date _____

ATTACHMENT C

APPLICANT SUBCONTRACTOR REFERENCE AND RELEASE FORM

List below at least four (4) references, including company name, contact name, address, email address, telephone numbers and contract period who can verify your experience and ability to perform the type of service outlined in this RFVQ. Attach any additional information to this form.

Company Name	Contract Period		
Contact Person Name and Title	Telephone Number (include area code)		
Complete Primary Address	City	State	Zip Code
Email Address	Fax Number (include area code)		

Company Name	Contract Period		
Contact Person Name and Title	Telephone Number (include area code)		
Complete Primary Address	City	State	Zip Code
Email Address	Fax Number (include area code)		

Company Name	Contract Period		
Contact Person Name and Title	Telephone Number (include area code)		
Complete Primary Address	City	State	Zip Code
Email Address	Fax Number (include area code)		

Company Name	Contract Period		
Contact Person Name and Title	Telephone Number (include area code)		
Complete Primary Address	City	State	Zip Code
Email Address	Fax Number (include area code)		

REFERENCE CHECK RELEASE STATEMENT

Dekalb County is authorized to contact the references provided above for purposes of this RFVQ.

Signed _____ Title _____
 (Authorized Signature of Proposer)

Company Name _____ Date _____

ATTACHMENT D

Applicant Affidavit under O.C.G.A. §13-10-91

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

Federal Work Authorization User Identification Number

Date of Authorization

Name of Contractor

Name of Project
DeKalb County Georgia Government
Name of Public Employer

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

Executed on _____, 20__ in _____ (city), _____ (state).

By: _____
Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

Subscribed and Sworn before me on this the
_____ day of _____, 20 ____.

NOTARY PUBLIC
My Commission Expires:

ATTACHMENT E
FIRST SOURCE JOBS ORDINANCE INFORMATION
(WITH EXHIBITS 1 – 4)

EXHIBIT 1

FIRST SOURCE JOBS ORDINANCE ACKNOWLEDGEMENT

The DeKalb County First Source Ordinance requires contractors or beneficiaries of eligible projects entering into any type of agreement with the County, including purchase orders, regardless of what they may be called, for the procurement or disposal of supplies, services, construction projects, professional or consultant services, which is funded in whole or part with County funds or County administered funds in which the contractor is to receive \$50,000 or more in County expenditures or committed expenditures and recipient of urban redevelopment action grants or community development block funds administered in the amount of \$50,000 or more to make a good faith effort to hire DeKalb County residents for at least 50% of jobs created using the First Source Registry (candidate database) within one hundred twenty (120) days of contract execution. The work to be performed under this contract is subject to the provisions of the DeKalb County First Source Jobs Ordinance. All contractors will be asked to submit an ***Employment Roster*** and/or copies of active payroll registers on a monthly basis to verify compliance. The undersigned acknowledges and agrees to comply with the provisions of the DeKalb County First Source Jobs Ordinance.

CONTRACTOR OR BENEFICIARY INFORMATION:

Contractor or Beneficiary Name (Signature)

Contractor or Beneficiary Name (Printed)

Title

Telephone

Email

Name of Business

Please answer the following questions:

1. How many job openings do you anticipate filling related to this contract? _____
2. How many incumbents/existing employees will retain jobs due to this contract?
DeKalb Residents: _____ Non-DeKalb Residents: _____
3. How many work hours per week constitutes Full Time employment? _____

Please return this form to WorkSource DeKalb, fax (404) 687-4099 or email to FirstSourceJobs@dekalbcountyga.gov.

ATTACHMENT F
FIRST SOURCE JOBS ORDINANCE INFORMATION
EXHIBIT 2

NEW EMPLOYEE TRACKING FORM

Name of Bidder _____
Address _____
E-Mail _____
Phone Number _____
Fax Number _____

Do you anticipate hiring from the First Source Candidate Registry? Y or N (Circle one)

If so, the approximate number of employees you anticipate hiring: _____

Type of Position (s) you anticipate hiring: (List position title, one position per line) Attach job description per job title:	The number you anticipate hiring:	Timeline

Please return this form to WorkSource DeKalb, fax (404) 687-4099 or email to FirstSourceJobs@dekalbcountyga.gov.

ATTACHMENT G
BUSINESS SERVICE REQUEST FORM

Note: We need one form completed for each position that you have available.

DATE: _____ **FEDERAL TAX ID:** _____

COMPANY NAME: _____ **WEBSITE:** _____

ADDRESS:

(WORKSITE ADDRESS IF DIFFERENT):

CONTACT NAME:

CONTACT PHONE: _____ **CONTACT FAX:** _____

CONTACT E-MAIL ADDRESS:

Are you a private employment agency or staffing agency? **YES** **NO**

JOB DESCRIPTION: (PLEASE INCLUDE A COPY OF JOB DESCRIPTION)

POSITION TITLE:

NUMBER OF POSITIONS AVAILABLE: _____ **TARGET START DATE:** _____

WEEKLY WORK HOURS: 20-30 hours 30-40 hours Other

SPECIFIC WORK SCHEDULE:

SALARY RATE(OR RANGE):

PERM **TEMP** **TEMP-TO-PERM** **SEASONAL**

PUBLIC TRANSPORTATION ACCESSIBILITY **YES** **NO**

IF SCREENINGS ARE REQUIRED, SELECT ALL THAT APPLY:

CREDIT **DRUG** **MVR** **BACKGROUND** **OTHER** _____

Please return form to: Business Solutions Unit (First Source)

774 Jordan Lane Bldg. #4

Decatur, Ga. 30033

Phone: (404) 687-3400

FirstSourceJobs@dekalbcountyga.gov