

Austin CITYOFAUSTIN, TEXAS Public Austin Public Health Health REQUEST FOR APPLICATION (RFA) OFFER SHEET



SOLICITATION NO: RFA 006 - Permanent Supportive Housing Services - 2021 - MS

DATE ISSUED:	Thursday, September 23, 2021
RFA APPLICATION DUE DATE:	Wednesday, October 13, 2021 by no later than 3 pm
Anticipated Start date of contract:	November 22, 2021
Questions regarding the RFA or Technical Assistance regarding submission of the RFA in Partnergrants are due:	Tuesday, October 12, 2021 by no later than 3 pm
Questions must be submitted in writing to the Authorized Contact Person or through Partnergrants	Authorized Contact Person: Myk Stocks Social Service Funding Specialist E-Mail: APHCompetitions@austintexas.gov
Questions and Answers will be available:	In Partnergrants and on the solicitation website: APH Competition Website
Optional Pre-Bid Meeting- Date and Time: Note: Each meeting will cover the same material.	Wednesday, September 29, 2021 9am-10:30am
Pre-Bid Meeting Location:	Registration Required with this link to get the Conference Call details: EVENTBRITE REGISTRATION

APH is only accepting applications through the Partnergrants database. No paper copies will be accepted.

All Applicants 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 applications will be submitted through this web-based system. To register, visit the <u>Partnergrants</u> website 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.



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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 RFA Website: APH Competition Website

FORM NO.	Note: Forms 1-4 must be scanned, signed or filled out and uploaded into Partnergrants.	REQUIRES RESPONSES DUE
1	OFFER SHEET	Wednesday,
2	RFA APPLICATION	October 13, 2021 by
3	BUDGET AND NARRATIVE FORM	no later than 3 pm
4	COA CERTIFICATIONS AND DISCLOSURES	
SECTION NO.	TITLE	INFORMATION ONLY
А	Not Applicable – No Separate Threshold Review	
В	STANDARD SOLICITATION PROVISIONS AND INSTRUCTIONS	
С	RFA SCOPE OF WORK	
D	APH CLIENT ELIGIBILITY REQUIREMENTS	Information Only
E	STANDARD APH AGREEMENT BOILERPLATE	
F	APPLYING FOR APH-FUNDED OPPORTUNITY – PARTNERGRANTS INSTRUCTIONS	

INTERESTED PARTIES DISCLOSURE

In addition, Section 2252.908 of the Texas Government Code requires the successful Applicant to complete a Form 1295 "Certificate of Interested Parties" that is signed and includes an "unsworn declaration" for a grant agreement award requiring City Council authorization. The "Certificate of Interested Parties" form must be completed on the Texas Ethics Commission website, printed, signed and submitted to the City by the authorized agent of the Business Entity with acknowledgment that disclosure is made under oath and under penalty of perjury prior to final grant agreement execution.



Austin CITYOFAUSTIN, TEXAS

Public Austin Public Health





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.