

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



SOLICITATION NO: RFA 2021 - 007 APH Behavioral Health Issue Area

SOLICITATION NAME: Request for Applications for Behavioral Health Services

DATE ISSUED:	Wednesday, November 17, 2021	
RFA APPLICATION DUE DATE:	Thursday, January 20, 2022, 3:00 PM CST	
THRESHOLD FORM DUE DATE	Wednesday, December 8, 2021, 3:00 PM CST	
Anticipated Start date of contract:	October 1, 2022	
Questions regarding the RFA are due on or before	Thursday, January 13, 2021 3:00 PM CST	
Technical Assistance regarding submission of the RFA in PartnerGrants are due on or before	Thursday, January 19, 2022 3:00 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: 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.	Thursday, November 18, 2021 1:30-3:00 PM CST Wednesday, December 2, 2021 10:00-11:30 AM CST	
Pre-Bid Meeting Registration:	Registration Required with this link to get the Conference Call details: November 18th EVENTBRITE REGISTRATION LINK December 2nd EVENTBRITE REGISTRATION LINK	

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).
 - o 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 Austin Finance Online 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 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.

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 by the specified due date.	REQUIRES RESPONSES DUE
1	OFFER SHEET	Due: 1/20/2022
2	RFA APPLICATION	By 3PM CST
3	PROGRAM BUDGET AND FUNDING SUMMARY	
4	COA CERTIFICATIONS AND DISCLOSURES	
SECTION NO.	TITLE	INFORMATION ONLY
А	THRESHOLD REVIEW FORM	Form completed in PartnerGrants Due: 12/8/2021 By 3PM CST
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