1. Proposal Cover Page
   1. Proposer Information

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Organization Name |  | | | Federal ID# | |  |
| Address |  | | | | | |
| Director Name |  | | | | | |
| Director Phone |  | | Director Email | |  | |
| Contact Name |  | | Contact Title | |  | |
| Contact Phone |  | | Contact Email | |  | |
| Subcontractor? | ☐ Yes  ☐ No | | If Yes, Name of Subcontractor | |  | |
| Annual Proposed Budget Amount |  | | | | | |
| Site(s) Proposing to Serve (Check all that apply) | ☐ 144 Eddy Street  San Francisco, CA 94102  *Adults* | ☐ 124 Turk Street  San Francisco, CA 94102  Adults | | | | |
| ☐520 Jones Street  San Francisco, CA 94102  *Adults* | ☐730 Eddy Street  San Francisco, CA 94109  *Older Adults* | | | | |
| ☐238 Eddy Street  San Francisco, CA 94102  *Adults* | ☐2176 Mission Street  San Francisco, CA 94110  Adults | | | | |

* 1. Certifications

I understand that the San Francisco Department of Homelessness and Supportive Housing (HSH) reserves the right to modify contracts requirements at the time of funding and/or during the contract negotiations; that a contract may be negotiated for a portion of the amount requested; that funding sources are subject to change; and that there is no contract until a written contract has been signed by both parties and approved by all applicable City agencies.

Submission of a proposal signifies that the proposed services and prices are valid for 180 calendar days from the Proposals Deadline and that the quoted prices are genuine and not the result of collusion or any other anti-competitive activity.

I understand that as a condition of receiving a contract under this RFP, my organization is required to use the ONE System as described in the RFP.

In accordance with Administrative Code Chapter 12X, I certify that my company is headquartered at the following address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I will notify the City if my organization's headquarters moves.

The signatory below is a person authorized to obligate the Proposer to perform the commitments contained in the RFP and proposal. Submission of this document will constitute a representation by the organization that it is willing and able to perform the commitments and requirements contained in the RFP and proposal.

Signature of authorized representative(s):

**Name:** **Title:**

**Signature:** **Date:**

1. **Minimum Qualifications**

The Proposer must demonstrate that it meets all of the Minimum Qualifications. The Proposer must include the prior or current program name; funder name; funder contact name, title and email; and the start/end dates. If a Subcontractor will be used, the Proposer must identify the Subcontractor and how it meets the Minimum Qualifications.

1. **At least five years of experience providing Property Management services within the past seven years.**

|  |  |
| --- | --- |
| Prior or Current Program Name |  |
| Provided by | Primary Proposer  Subcontractor |
| Funder Name |  |
| Funder Contact Name |  |
| Funder Contact Title |  |
| Funder Contact Email Address |  |
| Start and End Dates of Services |  |
| Describe how Proposer or Subcontractor meets this Minimum Qualification: |  |

* 1. **At least five years of experience working with the target population(s) within the past seven years. If proposing to serve both populations, complete both tables.**

|  |  |  |
| --- | --- | --- |
| Prior or Current Program Name |  | Adults  Older Adults |
| Provided by | Primary Proposer  Subcontractor | |
| Funder Name |  | |
| Funder Contact Name |  | |
| Funder Contact Title |  | |
| Funder Contact Email Address |  | |
| Start and End Dates of Services |  | |
| Describe how Proposer or Subcontractor meets this Minimum Qualification: |  | |

|  |  |  |
| --- | --- | --- |
| Prior or Current Program Name |  | Adults  Older Adults |
| Provided by | Primary Proposer  Subcontractor | |
| Funder Name |  | |
| Funder Contact Name |  | |
| Funder Contact Title |  | |
| Funder Contact Email Address |  | |
| Start and End Dates of Services |  | |
| Describe how Proposer or Subcontractor meets this Minimum Qualification: |  | |

1. **Organizational Capability and Experience (44 Points)**

In no more than eight pages, the Proposer must provide responses to the following:

1. **Describe agency’s experience delivering Property Management services; and the agency’s organizational capability and infrastructure to deliver the services describe in the RFP.**
2. **For each target population Proposer is proposing to serve based on site(s) (e.g. Adults, Older Adults), describe the agency’s experience working with the target population(s) based on proposed site(s). Responses that fail to address all proposed target populations may be considered non-responsive.**
3. **Describe the agency’s experience working with diverse individuals, including Black, Latino and LGBTQ adults and agency’s experience providing responsive services. Include the types of training that staff has received around racial equity, cultural humility, and strengths-based service delivery.**
4. **Describe the agency’s experience in harm reduction and trauma-informed care.**

1. **Describe the agency’s experience using data to make decisions and to continually improve services.**
2. **Program Plan (40 Points)**

In no more than six pages, the Proposer must provide responses to the following:

1. **Describe the agency’s plan to provide the Property Management services required at the proposed site(s); and make note of any challenges and barriers that may arise; and how the agency plans to mitigate such issues, including how it plans to ensure continuity of services for program residents.**
2. **Describe the agency’s plan to integrate best practices and HSH’s Strategic Framework into services.**
3. **Describe agency’s proposed staffing structure and coverage, including brief job descriptions, qualifications, and training.**
4. **Describe the agency’s plan to solicit resident feedback; and how the feedback will be reported to HSH and incorporated into the program.**
5. Budget Workbook (16 Points)

Provide one Appendix 2: Budget Template Workbook for each building that the Proposer is proposing to serve:

1. **Provide direct expenses for all proposed costs to be supported through this contract from July 1, 2019 to June 30, 2022 using the Salary, Operating and Capital tabs, as appropriate.**
2. **Complete the Budget Narrative tab, to clearly explain the basis for each expense listed on the Salaries, Operating and Capital Detail tabs, as appropriate.**
3. **Attach a Cost Allocation Plan.**