



City of Philadelphia Rebuild Initiative
**Attachment C – Proposal Application
Package Requests for Proposal (RFP)**

ATTACHMENT F OVERVIEW

Attachment C provides a checklist of required documentation to be included in your final bid package. Additionally, Attachment C also includes forms that must be completed, signed and included in your final bid package.

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01 - PROPOSAL APPLICATION CHECKLIST



City of Philadelphia
Managing Directors Office- Rebuild
General Construction Services Contract

Project Number: _____

Project Name: _____

Applicant: _____

This proposal package includes the following:

- 01 - Proposal Application Checklist – *to be filled out by applicant and included in proposal*
- 02 - Construction Bid Proposal
- 03 - Not Used
- 04 - Approach to Project Delivery
 - Describe your approach to carrying out the scope of work on time/budget, and strategies that make your firm qualified to best perform these services.
 - Proposed project timeline
 - Proposed sketch of site logistics
 - Proposed project management team, including dedicated project foreman
- 05 - Contractor Qualifications Documentation
 - City of Philadelphia Questionnaire and Financial Statement for Qualifying Bidders
 - Contractor Qualifications Project Example Sheet Forms (3)
- 06 - City of Philadelphia Rebuild Economic Opportunity Plan and Forms
 - A. City of Philadelphia Rebuild Economic Opportunity Plan and Signature Page
 - B. Rebuild Bid Package Contract Participation Worksheet
 - C. City of Philadelphia Office of Labor Standards Documentation of Best and Good Faith Efforts Workforce Diversity Goals
 - D. City of Philadelphia Rebuild Past Contract Participation Form
 - E. Rebuild Workforce Development Program Commitment Form
- 07 - Declarations and Other Information
 - City of Philadelphia Tax Status Certification Form
 - Philadelphia Redevelopment Authority Campaign Contribution Disclosure Forms
- 08 - Attach the following documents:
 - Commercial Activity License

02 – CONSTRUCTION BID PROPOSAL – See *Division 0 Specifications - 004114*

03 – NOT USED



PROPOSAL APPLICATION PACKAGE

Project Number: _____

Project Name: _____

02 Approach to Project Delivery

Describe your approach to carrying out the scope of work on time/budget, and strategies that make your firm qualified to best perform these services. (Not to exceed one page)

Please include a detailed Proposed Project Timeline, Logistics Plan, and Proposed Project Management Team including Dedicated Project Foreman.

City of Philadelphia

QUESTIONNAIRE AND FINANCIAL STATEMENT FOR QUALIFYING BIDDERS

- * No bid will be accepted unless this questionnaire with all questions fully answered (please type or print in ink), is filed with the Department having jurisdiction over the work proposed, on or before the date specified by the Procurement Department.
- * All information provided by a bidder in this questionnaire shall be used by the City in determining and assessing a bidders qualifications and responsibility in accordance with the provisions of Title 17, Chapter 17-100, Sec. 17-101 of the Philadelphia Code.
- * The City reserves the right to investigate any statement made herein, by means of information included in, but not limited to, that contained in this questionnaire. Any misrepresentation of fact, as determined by the City, may result in the disqualification of a bidder.
- * Any material change in the financial, corporate or business status of a qualifying bidder that occurs between the time of submission of this questionnaire and the time of award of the resulting contract must be forwarded to the Procurement Commissioner immediately. Failure to do so may result in the disqualification of the bidder from award.
- * All information on this questionnaire will be held strictly confidential, to the extent permitted by law.

PROJECTS UNDER THE JURISDICTION OF _____ Fax Number _____

PROJECTS APPLIED FOR

DATE SUBMITTED	BID NUMBER	DATE OF OPENING	FEDERAL EIN NUMBER	CITY BUSINESS TAX IDENTIFICATION #
SUBMITTED BY _____ (PLEASE SELECT) _____ INDIVIDUAL _____ CORPORATION _____ PARTNERSHIP _____				
PRINCIPAL OFFICE ADDRESS _____				
PRINCIPAL OFFICE TELEPHONE NUMBER _____		PRINCIPAL OFFICE FAX NUMBER _____		E-MAIL ADDRESS _____

CORPORATION			PARTNERSHIP		
DATE OF INCORPORATION	STATE	CAPITALIZATION	DATE OF ORGANIZATION	TYPE GENERAL LIMITED	
OFFICERS			PARTNERS		
PRESIDENT			NAME		
			ADDRESS		
VICE PRESIDENT			NAME		
			ADDRESS		
SECRETARY			NAME		
			ADDRESS		
TREASURER			NAME		
			ADDRESS		
			NAME		
			ADDRESS		

EXPERIENCE AND EQUIPMENT

1. How many years has your organization been in business as a contractor under its present business name? On a separate sheet of paper, list all other business names under which your organization has been in business as a construction contractor?	YEARS
2. How many years experience has your organization had as a prime contractor in the type of construction work for which you seek qualification?	YEARS
3. How many years experience has your organization had as a subcontractor in the type of construction work for which you seek qualification?	YEARS
4. State the largest dollar amount of work your organization has done in any single year during the last five years as (1) a general contractor \$ _____ (2) a subcontractor \$ _____	
5. On a separate sheet of paper, describe the construction experience of the principal officers and managers (including superintendents) of your organization. Include: name of the individual and position/office, years of construction experience, type of work in which the individual has experience (including size of project worked on), names of organizations worked for and positions/responsibilities held.	
6. Has your organization within the last five years performed work for the City of Philadelphia that was not finally accepted by the City? PLEASE SELECT YES NO If "YES", state the City contract number and project name and attach an explanation of the circumstances surrounding the non-acceptance. Has any officer, partner, or other person active in the management of your organization, within the last five years, been an officer, partner, manager, or sole proprietor of another organization which performed work for the City that was not finally accepted by the City? PLEASE SELECT YES NO If "YES", state the name of the individual, the name and address of the organization, the City contract number and project name for the contract under which work was not finally accepted, and attach a detailed explanation of the circumstances surrounding the non-acceptance.	
7. Has the City, within the last five years, declared your organization in default of a City contract or otherwise terminated the contract? PLEASE SELECT YES NO If "YES", state the City contract number and project name and attach an explanation of the circumstances surrounding the declaration of default or termination. Has a commercial surety for your organization, within the last five years, been called upon to complete any work on a contract with the City? PLEASE SELECT YES NO If "YES", state the City contract number and project name and a detailed explanation of the circumstances. Has any officer, partner, or other person active in the management of your organization, within the last five years, been an officer, partner, manager, or sole proprietor of another organization whose commercial surety was called upon to complete any work on a contract with the City? PLEASE SELECT YES NO If "YES", state the name of the individual, the name and address of the organization, the City contract number and project name for the contract the surety was called upon to complete, and attach an explanation of the circumstances.	
8. Has any officer, partner, or other person active in the management of your organization, within the last five years, been an officer, partner, manager, or sole proprietor of another organization that was declared in default of a City contract or otherwise terminated, or that failed to complete a City Contract? PLEASE SELECT YES NO If "YES", state the name of the individual, the name and address of the organization, the City contract number and project name for the contract defaulted or terminated, and attach an explanation of the circumstances surrounding the declaration of default or termination.	
9. Has your organization ever failed to complete any work under, or been declared in default of, a contract awarded to it by a public or private owner other than the City of Philadelphia? PLEASE SELECT YES NO If "YES", attach a detailed explanation identifying the owner and bid/contract numbers (if applicable) for the project, stating whether the owner declared your organization in default of its contract, and describing the project, the type of work, the dates the work was started and stopped and the reasons the work was not completed.	
10. Has any officer, partner, or other person active in the management of your organization, ever been an officer, partner, manager, or sole proprietor of another organization that failed to complete or was declared in default of a construction contract for a public or private owner other than the City of Philadelphia? PLEASE SELECT YES NO If "YES", state the name of the individual and attach an detailed explanation identifying the owner and bid/contract number (if applicable) stating whether the owner declared the organization in default of its contract, and describing the project, the type of work, the dates the work was started and stopped, the individual's role in the project, and the reasons the work was not completed.	
11. Has any officer, partner, or other person active in the management of your organization, within the last five years been disqualified, suspended, or debarred (under its present name or any other name) from bidding on public contracts, or removed from a bidding list, by any state or federal agency, or by the City of Philadelphia? PLEASE SELECT YES NO If "YES", state the agency that took such action, the date(s) of the action, the type of work to which the contract(s) applied, and the reasons stated by the agency for the action.	

List all INCOMPLETE contracts held by your organization at present. (Please attach additional sheets as needed.)

CONTRACTING ENTITY	CONTRACT NO.	LOCATION	% COMPLETE	AMOUNT OF CONTRACT

19. Has any liquidated damages or other penalties been imposed by the City on your organization? **PLEASE SELECT YES NO**
 Have any liens, claims or stop notices been filed against your organization? **PLEASE SELECT YES NO**
 If you answered YES to either of the above questions, please attach an explanation of details identifying the claimant and stating the grounds asserted by the claimant and stating the disposition.

List the largest projects that your organization has completed.

DOLLAR AMOUNT	DATE	CONTRACTING ENTITY	REFERENCES
			Name
			Phone Number
			Name
			Phone Number
			Name
			Phone Number
			Name
			Phone Number

List any projects that your organization has completed that are similar in nature to the project for which you are qualifying.

DOLLAR AMOUNT	DATE	CONTRACTING ENTITY	REFERENCES
			Name
			Phone Number
			Name
			Phone Number
			Name
			Phone Number
			Name
			Phone Number
			Name
			Phone Number

List any equipment that is owned by your organization that is available for the proposed work. (Please attach additional sheets as needed.)

FINANCIAL POSITION AS OF:		(Not over 6 months old)	
ASSETS		LIABILITIES & EQUITY	
CURRENT ASSETS		CURRENT LIABILITIES	
Cash and cash equivalents	_____	Lines of credit	_____
Short-term investments	_____	Notes payable - current portion	_____
Accounts receivable	_____	Accounts payable	_____
Allowance for doubtful accounts	(_____)	Accrued and withheld payroll	_____
Notes receivable	_____	Accrued expenses	_____
Inventories	_____		_____
Prepaid expenses	_____		_____
Total Current Assets	_____	Total Current Liabilities	_____
PROPERTY AND EQUIPMENT		LONG-TERM LIABILITIES	
Land	_____	Notes payable	_____
Buildings	_____		_____
Machinery and equipment	_____		_____
Trucks and automobiles	_____		_____
Office furniture and equipment	_____		_____
Assets under capital lease	_____		_____
	_____	Total Long-Term Liabilities	_____
Total Property and Equipment	_____	Total Liabilities	_____
Less accumulated depreciation and amortization	(_____)	EQUITY	
Net Property and Equipment	_____	Common stock	_____
OTHER ASSETS		Additional paid-in capital	_____
Cash surrender value of officer's life insurance	_____	Less treasury stock	(_____)
Loans against policies	_____	Retained earnings	_____
Notes receivable	_____	Partner's capital	_____
Organization cost (net)	_____	Owner's equity	_____
	_____		_____
Total Other Assets	_____	Total Equity	_____
TOTAL ASSETS	_____	TOTAL LIABILITIES & EQUITY	_____

Please provide the total dollar amount of all available lines of credit at your organization's disposal. \$ _____

Please provide the total dollar amount of the balance of all available lines of credit at your organization's disposal. \$ _____

I / WE hereby certify that the statements of fact contained herein are correct to the best of my / our knowledge and belief; and that the statement entitled "FINANCIAL POSITION" presents fairly the financial position of the enterprise. I / WE understand that if I / WE knowingly make any false statements herein, I / WE are subject to such penalties as may be prescribed by law or ordinance. Any depository, vendor, reference, or other agency named herein is authorized to supply the holder with any information necessary to verify this statement.

NOTE: A partnership must give firm name and signatures of all partners. A corporation must give full corporate name, signatures of two (2) officers (either president or vice-president and secretary or treasurer) and affix corporate seal.

_____ FIRM OR CORPORATE NAME

SIGNATURE TITLE

SIGNATURE TITLE

Date of Signing

SIGNATURE TITLE

SIGNATURE TITLE

CONTRACTOR QUALIFICATIONS- PROJECT 1

Please type or print clearly and use additional sheets as necessary.

Name and Location of Project: _____

Name and Address of Owner _____

Phone Number _____

Name and Address of Contractor's Bonding Company _____

Phone Number _____

Entire Contract Amount: _____

Project Duration, in months _____

Description (including type and size of systems provided):

CONTRACTOR QUALIFICATIONS- PROJECT 2

Please type or print clearly and use additional sheets as necessary.

Name and Location of Project: _____

Name and Address of Owner _____

Phone Number _____

Name and Address of Contractor's Bonding Company _____

Phone Number _____

Entire Contract Amount: _____

Project Duration, in months _____

Description (including type and size of systems provided):

CONTRACTOR QUALIFICATIONS- PROJECT 3

Please type or print clearly and use additional sheets as necessary.

Name and Location of Project: _____

Name and Address of Owner _____

Phone Number _____

Name and Address of Contractor's Bonding Company _____

Phone Number _____

Entire Contract Amount: _____

Project Duration, in months _____

Description (including type and size of systems provided):

06a – City of Philadelphia Economic Opportunity Plan and Signature Page

See Specifications Division 0 - 007337

06b Rebuild Contract Participation Form – see *attached Excel Form*

**DOCUMENTATION OF BEST AND GOOD FAITH EFFORTS
WORKFORCE DIVERSITY GOALS**

OFFICE OF LABOR STANDARDS

BID TITLE	NAME OF SELLER	BID SUBMISSION DATE

1) Identify the labor organizations (if any) with which you have a collective bargaining agreement.

2) Did you contact the labor organizations applicable to the scope of work of this contract *in writing* to request a diverse workforce? If so, please provide a copy of that request.

3) Please identify any on-the-job training or apprenticeship programs that you operate or provide funding for. Please note if any of these programs are Commonwealth-approved apprenticeship programs that specifically encourage the training and employment of minority, women and/or disabled persons.

4) Please provide the number of trainees and breakout of minority, female and/or disabled participants for each program you operate or fund.

5) Did you seek assistance from the Urban Affairs Coalition, Careerlink Philadelphia, Opportunity Industrial Center, Philadelphia Works, Finishing Trades Institute, JEVS Orleans Technical Institute, the Philadelphia Housing Authority, or any other labor or community organizations applicable to the scope of work for this contract to perform employee outreach? Provide a list of the recruitment agencies or other community based organizations that your firm uses for employment placement.

6) As identified in the Rebuild Ordinance (Bill No. 170206), the current employment hourly goals for Journeypersons are 45% minority [27% African American, 15% Hispanic and 3% Asian] and 5% female. For Apprentices the hourly goals are 50% minority and 5% female. In the space below please provide an estimate of your weekly employment utilization for each category of minority worker and female workers, and how that will allow you to meet the overall employment goals by the completion of the contract.

	Total Hours	Journeymen				Apprentices	
		% African American	% Hispanic	% Asian	% female	% minority	% female
Week 1							
Week 2							
Week 3							
Week 4							
Week 5							
Week 6							
[insert additional rows as needed]							

7) Attach your company's Equal Employment Opportunity Statement and any published nondiscrimination policies.

06d Rebuild Past Contract Participation Detail Form— see *attached Excel Form*



REBUILD WORKFORCE DEVELOPMENT PROGRAM COMMITMENT

As part of Rebuild's commitment to Diversity, Equity & Inclusion, Rebuild operates two Workforce Development Programs that are designed to increase the diversity in the building trades, which will promote diversity and opportunity during and beyond the Rebuild program. These programs serve as a model for future workforce development programs within the City of Philadelphia.

➤ PHL Pipeline

For entry-level workers with interest and aptitude but no experience yet

- 30 participants annually
- Extended onramp to union apprenticeships

➤ Talent Development Program

For experienced workers seeking union membership

- 30 workers over the life of Rebuild
- Up to 3,000 hours of work in relevant trade

Rebuild's Workforce Development Programs select high-quality, driven individuals to receive rigorous training delivered by established workforce training partners. Through hands-on practice, on-the-job training, and classroom instruction, participants develop the skills required for success in the building trades.

Graduates of these Rebuild Workforce Development Programs who have qualified as apprentices in a trade (referred to as "**Rebuild Workforce Development Apprentices**") are currently active in the following trades:

- | | |
|------------------|---------------------------|
| 1. Carpenters | 6. Bricklayers |
| 2. Electricians | 7. Laborers |
| 3. Painters | 8. Sound & Communications |
| 4. Roofers | 9. Insulators |
| 5. Cement Masons | |

Project Users and contractors on Rebuild projects shall participate in the support of the Rebuild Workforce Development Programs, including through the hire of Rebuild Workforce Development Apprentices and partnering with trades unions for the duration of the project, where appropriate. General Contractors must pass this commitment to their subcontractors.

Please identify which scopes on this Project could utilize Rebuild Workforce Development Apprentices from the above-listed trades:

Sign below to indicate your commitment to supporting the Rebuild Workforce Development Program through the hire of Rebuild Workforce Development Apprentices and partnering with trades unions for the duration of the Project, where appropriate, including passing this commitment down to contractors and subcontractors.

NAME:

TITLE:

DATE:



Form 06F

Existing Workforce Diversity Breakdown

We want to get to know your construction team. Please list below the demographic composition of your most recent (12 months or less) construction projects. It is understood that this is only a snapshot of your current workforce and may not be reflective of workers who will be assigned to this particular project.

Project Name	Contractor Name	Select Role <input type="checkbox"/> Prime <input type="checkbox"/> Sub
---------------------	------------------------	--

Please provide demographic information regarding your standing crew below. Add additional rows or provide multiple pages as necessary.

EMPLOYEE'S NAME	PHILADELPHIA RESIDENT? (Y/N)	DATE OF LAST PROJECT WORKED	JOURNEYPERSON /OR/ APPRENTICE	GENDER	RACE					TRADE	ESTIMATED # OF ADDITIONAL HIRES NEEDED FOR PROJECT
					B	H	A	N	W		
A.											
B.											
C.											
D.											
E.											
F.											
G.											
H.											

Contractor Authorized Signature and Title:	Date
---	-------------

Legend		
Race		Gender
B - Black/African American	N - Native American	M - Male
H - Hispanic	W - White	F - Female
A - Asian & Pacific Islander		N - Non-binary

PHILADELPHIA TAX STATUS CERTIFICATION REQUEST**CITY OF PHILADELPHIA
DEPARTMENT OF REVENUE**Provide EOI
Tracking Number:REQUESTER: PHA PHDC PIDC PPA PRA OTHER _____

Taxpayer Name: _____ Date: _____

Taxpayer Trading As: _____

Home Address: _____

Business Address: _____ Business Phone #: _____

1. Are you a Registered Taxpayer? YES NO

If so, provide your Federal Employer Identification Number here: _____

If so, provide your Philadelphia Business Tax Account Number here: _____

If so, provide your Social Security Number here: _____

2. Are you presently delinquent in any City of Philadelphia or Philadelphia School District taxes? YES NO

If so, what tax and amount owed? _____

3. Are you presently delinquent in Water and Sewer charges? YES NO

If so, amount owed: \$ _____

4. Have you ever been sued by the City of Philadelphia or the Philadelphia School District? YES NOHave you declared bankruptcy? YES NO

If so, list date and nature of lawsuit or filing date of bankruptcy petition: _____

5. Are you involved in any other business activity? YES NO

If so, list company name(s) and account number(s) here: _____

6. Do you own real estate? YES NO

If so, list address(es) here, or on the back of this form: _____

I hereby affirm that the information provided above is true and correct to the best of my knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa. C.S.A. Sec. 4904 relating to unsworn falsification to authorities.

Name: (Please Print) _____

Title: _____

Signature: _____

Date: _____

CONFLICT OF INTEREST

All applicants are required to comply with federal, state and local regulations prohibiting conflicts of interest. The regulations concern the following groups of people:

- A. Employees, consultants, officers, or elected or appointed officials of the City of Philadelphia or Philadelphia Redevelopment Authority.
- B. Employees, consultants, or officers of any organization or business receiving federal, state or local funds or participating in a government housing program (including, but not limited to, Philadelphia Housing Development Corporation, Philadelphia Industrial Development Corporation and city-funded non-profits housing entities).

1. Are you now, or have you been during the preceding year, in one of the categories (A or B) described above?

 YES

 NO

2. Is any member of your family or your spouse's family now, or have they been during the preceding year, in one of the categories (A or B) described above?
(Family members include spouses, parents, brothers, sisters, or children).

 YES

 NO

If yes, please state the nature of your relationship and briefly describe your family member's duties or title with respect to the organization or business.

3. Is any person with whom you have a business relationship, or with whom you have had a business relationship during the preceding year, in one of the categories (A or B) described above?
(A person with whom you have a business relationship includes your employees, partners, shareholders, officers or directors).

 YES

 NO

If yes, please state the nature of your relationship and briefly describe that person's duties or title with respect to the organization or business.

CONFLICT OF INTEREST

4. Does or will any person in one of the categories (A or B) described above have any interest in any contract for materials or services related to the project or property for which you are applying? YES NO

Briefly describe the nature of that person's interest in the contract for materials or services.

ADDITIONAL DISCLOSURES

1. Do you own any property that is subject to any significant unresolved violation of City codes and ordinances? YES NO

2. As a property owner, have you been involved in Philadelphia tax foreclosure proceeding in the last five years? YES NO

3. Have you or any member of your development team been convicted of any felony within the past five years? YES NO

4. Are you listed as an owner of record on the Philadelphia District Attorney's list of land that has been confiscated due to criminal activity? YES NO

5. Has the developer or its principals been a developer, stockholder, officer, director, trustee, or partner (LLC) in any other development projects with the Philadelphia Redevelopment Authority, or the City of Philadelphia, or the Philadelphia Housing Development Corporation? YES NO

If yes, provide the following information:

Project Name	Date	City Agency	Agency Role
1.			
2.			
3.			
4.			
5.			

Please include any additional projects on a separate sheet.

CERTIFICATION

I do hereby declare that I have filed the foregoing Statement of Interest and do hereby certify that the statements made in the foregoing Statement are true and correct to the best of my knowledge, information, and belief. I understand that false statements made herein are subject to the penalties of the Act of December 6, 1972, PLI 1482, No. 334, as amended, 18 PA. C. A 4904, relating to unsworn falsification to authorities.

Signature _____

Print/Type Name _____

Date _____

NOTICE: The Philadelphia Redevelopment Authority is subject to the Pennsylvania Right to Know Law. Any information provided in any of the foregoing documents may be subject to disclosure to the public.

[Click here to submit your form via email.](#)

INTERNAL USE ONLY

Check for outstanding License & Inspection violations:

- No outstanding violations.
- Outstanding violations: _____
- _____
- _____

Philadelphia Redevelopment Authority

Disclosure Forms

Directions:

1. Please read the following information regarding the completion of these disclosure forms. Please review the definitions prior to completing any form.
2. Date and initial the top of each form after you have completed it and sign the form on the last page.
3. NOTE: There are two different types of campaign contribution disclosure forms: one for those who are applying as individuals and one for those applying as businesses. Only fill out one type of form. (If you have used a consultant with respect to applying for this financial assistance you will have to fill out a campaign contribution disclosure form for them as well.)

Getting Started

There are five sets of disclosure forms enclosed in this packet. You must provide information for each disclosure form. The information you must disclose includes:

1. Any contributions (defined as a provision of money, in-kind assistance, discounts, forbearance or any other valuable thing) made during the two years prior to the application submission date or prior to your receipt of financial assistance in the absence of an application;
2. The name of any consultant(s) you used to help in obtaining this financial assistance and any campaign contributions they have made;
3. Any subcontractors you are planning to use if awarded this financial assistance;
4. Whether a City or Redevelopment Authority employee or official asked you to give money, services, or any other thing of value to any individual or entity; and
5. Whether a City or Redevelopment Authority employee or official gave you any advice on how to satisfy any minority, women, disabled or disadvantaged business participation goals.

More information on Disclosing Campaign Contributions

Applicants for financial assistance must disclose any contributions they made to:

- A candidate for nomination or election in any public office in the Commonwealth of Pennsylvania
- An incumbent in any public office in the Commonwealth of Pennsylvania
- A political committee or state party in the Commonwealth of Pennsylvania
- A group, committee, or association organized in support of any candidate, office holder, political committee or state party in the Commonwealth of Pennsylvania

The types of contributions that must be disclosed include:

- Any advance or deposit of money, gift, or any other valuable thing given to a candidate or political committee for the purpose of influencing any election in the Commonwealth of Pennsylvania
- The purchase of tickets for events such as dinners, luncheons, rallies and all other fund-raising events
- Granting of rebates or discounts not available to the general public or rebates by television and radio stations and newspapers not extended on an equal basis to all candidates
- Any payments made on behalf of the candidate not made by either the candidate or their committee

Attribution Rules. In addition to disclosing contributions made directly by the applicant, the applicant will be asked to supply information on other types of contributions. The campaign contribution disclosure forms will include questions that specifically ask for information on these other types of contributions. These contributions will be attributed to the individual or business and will be used to determine the applicant's eligibility to receive financial assistance.

Businesses (i.e. corporation, limited liability company, partnership association, joint venture, or any other legal entity) have to disclose contributions made by the following:

- Applicant business
- Parent, subsidiary, or otherwise affiliated entity of the applicant business ("affiliate")
- An individual or business that is then reimbursed by the applicant business or affiliate

Philadelphia Redevelopment Authority

- Officers, directors, controlling shareholders, or partners of the for-profit applicant business or for-profit affiliate
- Political action committee controlled by applicant business or affiliate
- Political action committee controlled by officer, director, controlling shareholder, or partner of the for-profit applicant business or for-profit affiliate

Individuals have to disclose contributions made by the following:

- Applicant individual
- Member of individual's immediate family (i.e., spouse, life partner, or dependent child living at home), when contributions are in excess of \$3,000.

In addition to direct contributions to candidates, incumbents, or political committees in the Commonwealth of Pennsylvania, applicants are also required to disclose:

1. Contributions not directly given to a candidate, incumbent, or political committee but made with the intent that the contribution will benefit the candidate, incumbent, or political committee;
2. Solicitation of contributions on behalf of a candidate, incumbent, or political committee, including the hosting of or solicitation at fundraising events (required to disclose details regarding the date of event and amount raised); and
3. Contributions not made directly by the individual/business to a candidate, incumbent, or political committee but furnished by the individual / business (as an "intermediary").

Eligibility Restrictions

Effective as of January 1, 2016, if an individual makes contributions totaling over \$3,000 in one calendar year to a candidate for City elective office or to an incumbent, the individual is not eligible to apply for, or enter into, any Non-Competitively Bid Contract in excess of \$10,000, nor shall said individual be eligible to be a sub-contractor (at any tier) of any such contract during that candidate's or incumbent's term of office. The monetary limits in effect for individuals prior to January 1, 2016 remain in effect for purposes of determining an individual's eligibility during the two year disclosure period prior to the date an individual's application in response to a contract opportunity is due or for determining an individual's continuing compliance during the term of any such contract that is awarded to the individual. For the period February 1, 2006 through December 31, 2007, the contribution limit amount is \$2,500; for the period January 1, 2008 through December 31, 2011, the contribution limit amount is \$2,600; for the period January 1, 2012 through December 31, 2015, the contribution limit amount is \$2,900.

Effective as of January 1, 2016, if a business makes contributions totaling over \$11,900 in one calendar year to a candidate for City elective office or to an incumbent, the business is not eligible to apply for, or enter into, any Non-Competitively Bid Contract in excess of \$25,000, nor shall said individual be eligible to be a sub-contractor (at any tier) of any such contract during that candidate's or incumbent's term of office. The monetary limits in effect for businesses prior to January 1, 2016 remain in effect for purposes of determining a business' eligibility during the two year disclosure period prior to the date a business' application in response to a contract opportunity is due or for determining a business' continuing compliance during the term of any such contract that is awarded to the business. For the period February 1, 2006 through December 31, 2007, the contribution limit amount is \$10,000; for the period January 1, 2008 through December 31, 2011, the contribution limit amount is \$10,600; for the period January 1, 2012 through December 31, 2015, the contribution limit amount is \$11,500.

→ **Note on Eligibility:** If a candidate for any City elective office contributes \$250,000 or more from his or her personal resources to his or her campaign, then the eligibility thresholds for individuals and businesses shall double with respect to contributions to all candidates for that same elective office (i.e. \$6,000 for individuals and \$23,800 for businesses).

Philadelphia Redevelopment Authority

Definitions

Affiliate	A parent, subsidiary, or otherwise affiliated entity of a business
Applicant	An individual or business who has filed an application to be awarded a non-competitively bid contract or financial assistance
Business	A corporation, limited liability company, partnership, association, joint venture or any other legal entity (including non-profit organizations) other than an Individual
Candidate	Any individual who seeks nomination or election to public office, other than a judge of elections or inspector of elections, whether or not such individual is nominated or elected. An individual shall be deemed to be seeking nomination or election to such office if he or she has (1) received a contribution or made an expenditure or has given his consent for any other person or committee to receive a contribution or make an expenditure, for the purpose of influencing his or her nomination or election to such office, whether or not the individual has made known the specific office for which he or she will seek nomination or election at the time the contribution is received or the expenditure is made; or (2) taken the action necessary under the laws of the Commonwealth of Pennsylvania to qualify himself or herself for nomination or election to such office.
Consultant	A person used by an applicant to assist in obtaining the financial assistance through direct or indirect communication by such individual or business with any City Redevelopment Authority or the organization providing financial assistance or any City officer or employee or officer or employee of the organization providing financial assistance, if the communication is undertaken by such individual or business in exchange for, or with the understanding of receiving, payment from the applicant; provided, however, that "Consultant" shall not include a full-time employee of the applicant.
Contributions	The provision of money, in-kind assistance, discounts, forbearance or any other valuable thing, during the two years prior to the deadline for the filing of the application for the contract opportunity or financial assistance, to any of the following: <ul style="list-style-type: none"> – a candidate for nomination or election to any public office in the Commonwealth of Pennsylvania; – an incumbent in any public office in the Commonwealth; – a political committee or state party in the Commonwealth; or – a group, committee or association organized in support of any candidate, office holder, political committee or state party in the Commonwealth.
Financial Assistance	Any grant, loan, tax incentive, bond financing subsidy for land purchase or otherwise, or other form of assistance that is realized by or provided to a person in the amount of fifty thousand dollars (\$50,000) or more through the authority or approval of the City, including, but not limited to, Tax Increment Financing (TIF) aid, industrial development bonds, use of the power of eminent domain, Community Development Block Grant (CDBG) aid or loans, airport revenue bonds, and Enterprise Zone or similar economic development zone designations (such as Keystone Opportunity Zones, Keystone Opportunity Expansion Zones, Keystone Opportunity Improvement Zones, and Economic Development District Zones), but not including any assistance to which a person is entitled under a law enacted before the individual or business applied for or requested such assistance.
Immediate family	A spouse or life partner residing in the individual's household or minor dependent children

Philadelphia Redevelopment Authority

Incumbent	An individual who holds elective office
Intermediary	A person, who, other than in the regular course of business as a postal, delivery or messenger service, delivers a contribution from another individual or business to the recipient of such contribution
Person	An individual, corporation, limited liability company, partnership, association, joint venture, or any other legal entity
Political committee	Any committee, club, association or other group of persons which receives money or makes expenditures for purposes of influencing any election
Solicit a Contribution	Requesting or suggesting that a person make a contribution. The sponsoring or hosting of a fundraising event is considered soliciting a contribution from the attendees of the event. Any contributions raised at such event are counted as a contribution made by the host of the event.

Philadelphia Redevelopment Authority

Date: _____

Initials: _____

If Applying as an Individual:
Campaign Contribution Disclosure Form

Please read through the directions and definitions before filling out this disclosure form to make sure that each question is answered appropriately and thoroughly. Note that you must provide information for the two years prior to the application deadline.

	Yes	No
Have you made any contributions?	<input type="checkbox"/>	<input type="checkbox"/>
Have you solicited or served as an intermediary for any contributions?	<input type="checkbox"/>	<input type="checkbox"/>
Has a member of your immediate family made any contributions over and above \$3,000?	<input type="checkbox"/>	<input type="checkbox"/>
Has a member of your immediate family solicited or served as an intermediary for contributions over and above \$3,000?	<input type="checkbox"/>	<input type="checkbox"/>
<i>Check here to certify that no contributions were made.</i>	<input type="checkbox"/>	

Additional information on every contribution must be disclosed.
Please use the table provided on the next page.

Philadelphia Redevelopment Authority

Date: _____

Initials: _____

If Applying as a Business:
Campaign Contribution Disclosure Form

Please read through the directions and definitions before filling out this disclosure form to make sure that each question is answered appropriately and thoroughly. Where “non-profit” is an option, indicate whether the business is a non-profit; non-profits are not required to disclose contribution information on these questions. Note that you must provide information for the two years prior to the application deadline.

	Yes	No	Non-Profit
Has the business made any contributions?	<input type="checkbox"/>	<input type="checkbox"/>	
Has the business solicited or served as an intermediary for any contributions?	<input type="checkbox"/>	<input type="checkbox"/>	
Has an officer, director, controlling shareholder, or partner of the business made any contributions? See note below.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has an officer, director, controlling shareholder, or partner of the business solicited or served as an intermediary for any contributions? See note below.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has an affiliate of the business made any contributions?	<input type="checkbox"/>	<input type="checkbox"/>	
Has an affiliate of the business solicited or served as an intermediary for any contributions?	<input type="checkbox"/>	<input type="checkbox"/>	
Has an officer, director, controlling shareholder, or partner of a for-profit affiliate of the business made any contributions? See note below.	<input type="checkbox"/>	<input type="checkbox"/>	
Has an officer, director, controlling shareholder, or partner of a for-profit affiliate of the business solicited or served as an intermediary for any contributions? See note below.	<input type="checkbox"/>	<input type="checkbox"/>	
Has the business or an affiliate of the business reimbursed another individual or business for a contribution that the individual or business has made?	<input type="checkbox"/>	<input type="checkbox"/>	
Has an officer, director, controlling shareholder, or partner of a for-profit business, or of a for-profit affiliate of the business, reimbursed another individual or business for a contribution that the individual or business has made?	<input type="checkbox"/>	<input type="checkbox"/>	
Has a political committee controlled by the business or by an affiliate of the business made any contributions?	<input type="checkbox"/>	<input type="checkbox"/>	
Has a political committee controlled by an officer, director, controlling shareholder, or partner of the for-profit business, or of a for-profit affiliate of the business, made any contributions?	<input type="checkbox"/>	<input type="checkbox"/>	
<i>Check here to certify that no contributions were made.</i>		<input type="checkbox"/>	

Note: Applicants must disclose all contributions to candidates or incumbents which are attributed to an immediate family member of an officer, director, controlling shareholder or partner of the for-profit Applicant or the for-profit affiliate of the Applicant. Please disclose the full amount of the contribution, although only the amount above \$3000 may potentially be attributed to the officer, director, controlling shareholder or partner (and, by extension, the Applicant business).

Additional information on every contribution must be disclosed.
Please use the table provided on the next page.

Philadelphia Redevelopment Authority

Date: _____

Initials: _____

Use of Consultant Disclosure Form

Please list all consultant(s) used in the year prior to the application deadline and the corresponding information for that consultant in the space provided below.

Please note that a Consultant, for the purposes of the required disclosures, is defined as an individual or business used by an applicant or contractor to assist in obtaining financial assistance through direct or indirect communication by such individual or business with any City Redevelopment Authority, the organization providing financial assistance, any City officer/employee, or any officer/employee of the organization providing financial assistance, if the communication is undertaken in exchange for, or with the understanding of receiving, payment from the applicant or contractor or any other individual or business (however, "Consultant" shall not include a full-time employee of the Applicant or Contractor).

Check here to certify that no consultant(s) was used in the year prior to the application deadline.		<input type="checkbox"/>
<hr/>		
Consultant Name		
Address 1		
Address 2		
City, State, Zip		
Phone		
Amount Paid or to be Paid		
<hr/>		
Consultant Name		
Address 1		
Address 2		
City, State, Zip		
Phone		
Amount Paid or to be Paid		
<hr/>		
Consultant Name		
Address 1		
Address 2		
City, State, Zip		
Phone		
Amount Paid or to be Paid		
<hr/>		
Consultant Name		
Address 1		
Address 2		
City, State, Zip		
Phone		
Amount Paid or to be Paid		

Philadelphia Redevelopment Authority

Date: _____

Initials: _____

Consultant: Individual Campaign Contribution Disclosure Form

Use this form if the Consultant used is an Individual. Please read through the directions and definitions before filling out this disclosure form to make sure that each question is answered appropriately and thoroughly. Note that you must provide information for the two years prior to the application deadline.

	Yes	No
Has the Consultant made any contributions?	<input type="checkbox"/>	<input type="checkbox"/>
Has the Consultant solicited or served as an intermediary for any contributions?	<input type="checkbox"/>	<input type="checkbox"/>
Has a member of the Consultant's immediate family made any contributions over and above \$3,000?	<input type="checkbox"/>	<input type="checkbox"/>
Has a member of the Consultant's immediate family solicited or served as an intermediary for contributions over and above \$3,000?	<input type="checkbox"/>	<input type="checkbox"/>
<i>Check here to certify that no contributions were made.</i>	<input type="checkbox"/>	

Additional information on every contribution must be disclosed.
Please use the table provided on the next page.

Philadelphia Redevelopment Authority

Date: _____

Initials: _____

Consultant: Business Campaign Contribution Disclosure Form

Use this form if the Consultant used is a Business. Please read through the directions and definitions before filling out this disclosure form to make sure that each question is answered appropriately and thoroughly. Where "non-profit" is an option, indicate whether the business is a non-profit; non-profits are not required to disclose contribution information on these questions. Note that you must provide information for the two years prior to the application deadline.

	Yes	No	Non-Profit
Has the Consultant business made any contributions?	<input type="checkbox"/>	<input type="checkbox"/>	
Has the Consultant business solicited or served as an intermediary for any contributions?	<input type="checkbox"/>	<input type="checkbox"/>	
Has an officer, director, controlling shareholder, or partner of the Consultant business made any contributions? See note below.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has an officer, director, controlling shareholder, or partner of the Consultant business solicited or served as an intermediary for any contributions? See note below.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has an affiliate of the Consultant business made any contributions?	<input type="checkbox"/>	<input type="checkbox"/>	
Has an affiliate of the Consultant business solicited or served as an intermediary for any contributions? See note below.	<input type="checkbox"/>	<input type="checkbox"/>	
Has an officer, director, controlling shareholder, or partner of a for-profit affiliate of the Consultant business made any contributions? See note below.	<input type="checkbox"/>	<input type="checkbox"/>	
Has an officer, director, controlling shareholder, or partner of a for-profit affiliate of the Consultant business solicited or served as an intermediary for any contributions?	<input type="checkbox"/>	<input type="checkbox"/>	
Has the Consultant business or an affiliate of the business reimbursed another individual or business for a contribution that the individual or business has made?	<input type="checkbox"/>	<input type="checkbox"/>	
Has an officer, director, controlling shareholder, or partner of the for-profit Consultant business, or of a for-profit affiliate of the Consultant business, reimbursed another individual or business for a contribution that the individual or business has made?	<input type="checkbox"/>	<input type="checkbox"/>	
Has a political committee controlled by the Consultant business or by an affiliate of the business made any contributions?	<input type="checkbox"/>	<input type="checkbox"/>	
Has a political committee controlled by an officer, director, controlling shareholder, or partner of the for-profit Consultant business, or of a for-profit affiliate of the Consultant business, made any contributions?	<input type="checkbox"/>	<input type="checkbox"/>	
<i>Check here to certify that no contributions were made.</i>		<input type="checkbox"/>	

Note: Consultants must disclose all contributions to candidates or incumbents which are attributed to an immediate family member of an officer, director, controlling shareholder or partner of the for-profit Consultant or the for-profit affiliate of the Consultant. Please disclose the full amount of the contribution, although only the amount above \$3000 will be attributed to the officer, director, controlling shareholder or partner (and, by extension, the Consultant business).

Additional information on every contribution must be disclosed.
Please use the table provided on the next page.

Philadelphia Redevelopment Authority

Use of Subcontractor Disclosure Form

Please list all subcontractor(s) you are planning to use if awarded this financial assistance by filling out the appropriate information in the space provided below.

Check here to certify that no subcontractor(s) are to be used.	<input type="checkbox"/>
Subcontractor Name	
Address 1	
Address 2	
City, State, Zip	
Phone	
Amount Paid or to be Paid, or Percentage to be Paid	
Subcontractor Name	
Address 1	
Address 2	
City, State, Zip	
Phone	
Amount Paid or to be Paid, or Percentage to be Paid	
Subcontractor Name	
Address 1	
Address 2	
City, State, Zip	
Phone	
Amount Paid or to be Paid, or Percentage to be Paid	
Subcontractor Name	
Address 1	
Address 2	
City, State, Zip	
Phone	
Amount Paid or to be Paid, or Percentage to be Paid	

Philadelphia Redevelopment Authority

Employee Request Form

Please list any City or Redevelopment Authority employees or officers or employees/officers of the organization providing financial assistance who have asked you (the Applicant), any officer director, or management employee of the Applicant, or any person representing the Applicant to give money, services, or any other thing of value (other than contributions as defined above) during the two years prior to the application deadline.

Check here to certify that no City or Redevelopment Authority employees/officers or employees/officers of the organization providing financial assistance have asked you (the Applicant), any officer director, or management employee of the Applicant, or any person representing the Applicant to give money, services, or any other thing of value (other than contributions as defined above) during the two years prior to the application deadline.	<input type="checkbox"/>
Name of Employee/Officer	
Title	
Money Services, or Thing of Value Requested	
Money, Services, or Thing of Value Given (If none, write "none")	
Date Requested	
Date of Payment	
Name of Employee/Officer	
Title	
Money Services, or Thing of Value Requested	
Money, Services, or Thing of Value Given (If none, write "none")	
Date Requested	
Date of Payment	
Name of Employee/Officer	
Title	
Money Services, or Thing of Value Requested	
Money, Services, or Thing of Value Given (If none, write "none")	
Date Requested	
Date of Payment	

Philadelphia Redevelopment Authority

Employee Participation Advice Disclosure Form

Please list any City or Redevelopment Authority employees or officers employees/officers of the organization providing financial assistance who gave you (the Applicant), any officer director, or management employee of the Applicant, or any person representing the Applicant advice that a particular individual or business could be used by the Applicant to satisfy any goals established in the contract or financial assistance agreement for the participation of minority, women, disabled, or disadvantaged business enterprises during the two years prior to the application deadline.

Check here to certify that no City or Redevelopment Authority employees/officers or employees/officers of the organization providing financial assistance gave you (the Applicant), any officer director, or management employee of the Applicant, or any person representing the Applicant advice that a particular individual or business could be used by the Applicant to satisfy any goals established in the contract or financial assistance agreement for the participation of minority, women, disabled, or disadvantaged business enterprises during the two years prior to the application deadline.	<input type="checkbox"/>
Name of Employee/Officer	
Title	
Date of Advice	
Individual or Business Recommended to Satisfy Participation Goals	
Name of Employee/Officer	
Title	
Date of Advice	
Individual or Business Recommended to Satisfy Participation Goals	
Name of Employee/Officer	
Title	
Date of Advice	
Individual or Business Recommended to Satisfy Participation Goals	
Name of Employee/Officer	
Title	
Date of Advice	
Individual or Business Recommended to Satisfy Participation Goals	

Philadelphia Redevelopment Authority

Signature

In order for the submission of these disclosure forms to be considered valid, they must be properly signed below by the respondent. Disclosure forms **that are not signed will be rejected**. By signing your name and title in the signature space below, you, as the respondent, signify your intent to sign these disclosure forms. The signatory hereby declares and certifies themselves to be the respondent, declares and certifies that they are properly authorized to execute these disclosure forms, and represents and covenants that all of the information and disclosures provided to the best of their knowledge are true and contain no material misstatements or omissions. Breach of such representation and covenant may render any subsequent provision of financial assistance voidable, and entitle the City (or Redevelopment Authority) to all rights and remedies provided by law or equity.

If these disclosure forms are being submitted by an INDIVIDUAL, PARTNERSHIP, LIMITED LIABILITY COMPANY OR MANAGED LIMITED LIABILITY COMPANY, sign the forms here:

Signature

Date

Name

Title

If these disclosure forms are being submitted by a CORPORATION, sign the forms here, with signatures by (a) President or Vice-President of the corporation AND (b) Secretary, Assistant Secretary, Treasurer or Assistant Treasurer of the corporation. If the disclosure forms are not signed by the above mentioned, you hereby certify that you are authorized pursuant to a certified corporate resolution to sign in place of such officers.

Signature

Date

Name

President/Vice President, if other, please specify

Signature

Date

Name

*Secretary/Asst. Secretary/Treasurer/Asst. Treasurer
If other, please specify*

08 – List of Documents to Attach



Project Number: _____

Project Name: _____

08 – List of Additional Documents to Attach:

Commercial Activity License