

Rental Assistance Program – Payment Processing Vendor Services

Request for Proposals

June 24, 2020

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Application Process

PHDC is pleased to issue this Request for Proposals ("RFP") to interested qualified vendors (each, a "Respondent", and collectively, the "Respondents") to provide payment processing services related to PHDC's COVID-19 Emergency Rental Assistance Program ("Program")

Submission Deadline

Respondents must submit a response to this RFP ("**Response**") no later than July 8, 2020 at 3:00 PM; absolutely no Response will be accepted after this time.

Related Parties

Respondents may only submit one (1) Response to this RFP. Individuals, businesses, or entities that are legally related to each other or to a common entity may not submit separate Responses. PHDC, in its sole and absolute discretion, retains the right to reject any Response where:

- 1. Respondents or principals of Respondents are substantially similar or substantially related parties; or
- 2. PHDC has determined that the Respondents has violated these conditions or the spirit of these conditions.

Questions

Questions and requests for additional information should be directed in writing to RFP@phdc.phila.gov and will be accepted until 3pm on July 1, 2020.

Submission Process

Responses will only be accepted in online submission through the electronic portal on PHDC's website Click here.

Disqualification

Responses will be disqualified if:

- 1. They are submitted after the specified deadline;
- They are submitted by some means other than the format listed above. Responses sent as an attachment to an email, through Dropbox, or any other electronic venue other than PHDC's online portal will not be accepted;
- 3. They are incomplete.

Schedule

RFP posted	6/24/2020
Questions and requests for additional information due	7/1/2020
Responses due	7/8/2020

PHDC reserves the right, in its sole discretion, to alter this schedule as it deems necessary or appropriate.

Overview

PHDC operates the Program to provide assistance to Philadelphia renters who are unable to afford their rent. Financial assistance is provided to landlords on a monthly basis, and payments are made via direct deposit. PHDC has been operating the Program since May 12, 2020. The Program provides at least 4,000 households with up to \$2,500 for three (3) months of rent support. Following the first three (3) months, each tenant will be reassessed and if there is ongoing need, they will receive another three (3) months of support. Reassessments will take place every

three months, and tenants may receive up to \$10,000 over twelve (12) months. Payments go directly to the landlords. Payments are processed by a third-party vendor. PHDC will continue to operate the Program as funding allows and may expand to provide support through a second rental assistance program if additional funding becomes available.

PHDC is collecting application information from tenants and payment information from landlords through an online system housed within Quick Base. PHDC works with our network of housing counselors and nonprofit legal aid partners to help tenants who do not have online access. PHDC requires landlords to sign an agreement, submit their ACH information, provide a W-9, and a voided check. Once PHDC has reviewed tenant applications and collected payment information from landlords, we provide our third-party payment processing vendor:

- a list of landlords whose tenants have been randomly selected to receive support that includes the tenant's name, address, list of months they will be receiving assistance, and the amount of assistance they have been approved for;
- the landlord's:
 - o name, address, and contact information;
 - o EIN or SSN, bank routing number, and bank account number; and
 - o A link where the vendor can access their W9 and a voided check.

Payments are made on a rolling basis as tenant and landlord files are complete. PHDC can provide this information to vendors in a CSV file, can provide login information so that vendors can access these reports directly in our system, or could work with venders to implement an API so that information moves fluidly across systems. Once payment has been made, vendors must provide us with the wire date associated with each landlord, which must include their unique record ID (provided by PHDC). Again, we can collect this data manually by bulk importing files into our system, we can train vendors to upload data themselves into our system, or we can implement an API.

Requested Services

The services we are requesting include:

- Receiving lists of landlord information from PHDC via Quick Base and creating vendor files;
- Securely storing landlord information (which includes SSNs and EINs), including W-9s;
- Remitting payments to landlords on a timely basis when requested by PHDC (PHDC will make requests no more than weekly);
- Having the capacity to remit at minimum five hundred (500) individual payments per week;
- Remitting the amounts requested by PHDC and ceasing payments on a schedule provided by PHDC;
- Adjusting payment amounts as requested by PHDC;
- Flagging payments that do not process successfully and letting PHDC know so that PHDC can seek to obtain corrected information from the landlord;
- Providing notifications to landlords when payments have been processed;
- Providing tax documents for each fiscal year as per IRS requirements;
- Providing monthly and annual reports to PHDC of payments processed;
- Invoicing PHDC to draw down funds in a timely basis;
- Having the capacity to float **up to Five Hundred Thousand Dollars (\$500,000.00)** for short periods if necessary, while waiting for additional funds to flow.

Contract Length

This contract is expected to be a one (1) year contract with two (2) possible one (1) year extensions to be exercised at PHDC's sole option.

Fee for Service

PHDC will pay a fee not to exceed 3% of funds processed. That fee is inclusive of all costs and there will be no other allowable charges under this contract.

Eligible Respondents

- Respondent(s) must be a corporation or company that is validly existing and permitted to do business in
 the Commonwealth of Pennsylvania (the "Commonwealth") and City of Philadelphia (the "City").
 Respondent(s) must possess all necessary licensing required by the Commonwealth and the City to provide
 the services specified in this RFP.
- The Respondent(s) must clear the federal debarment list under the U.S. System for Award Management ("SAM"). Federal debarment is checked for both the company and principal(s) of the company.
- The Respondent(s) must have a proven record of providing the services required.
- The Respondent(s) must satisfy all conditions set forth below in the "Declarations & Other Information" section.

Response Submission Requirements

Each Response must not to exceed five (5) pages total. The Response should include the following information:

- 1. Name of Respondent;
- 2. Address of Respondent;
- 3. EIN of Respondent;
- 4. Primary Respondent Point of Contact Name/Email/Phone;
- 5. Approximate maximum volume of funds that could be processed on a weekly basis;
- 6. Experience of Respondent in processing payments via electronic transfer for third parties (including approximate volume of funds transferred)
- 7. Respondent's internal capacity relating to processing payments (number of staff, description of internal systems, experience bulk importing and exporting large data sets, and general data management experience);
- 8. Description of Respondent's policies, practices, and track record relating to diversity and inclusion, diverse workforce and hiring, and diverse contracting;
- 9. Description of how Respondent will be able to service this contract with the current workplace restrictions due to COVID-19;
- 10. Respondent experience contracting with the City, PHDC, and/or other public-sector entities;
- 11. If applicable -- Explanation of why Respondent cannot comply with PHDC's insurance requirements;
- 12. Statement that Respondent is applying responsive to this RFP and understands the requirements stated herein; and
- 13. Signature of an authorized representative

Evaluation & Selection

PHDC intends to award this RFP to the Respondent that best demonstrates the level of experience, skill and competence required to perform the services called for in this RFP in the most efficient, cost-effective, and professional manner. Priority will be given to Respondents that demonstrate a strong commitment to diversity and inclusion in their workforce, hiring, contracting, and business practices.

Events of Disqualification or Default

Subsequent to the selection of Respondent(s), and before the execution of an Agreement for Professional Services or other similar agreement (herein, the "Agreement"), PHDC may treat any of the following as an event of disqualification or default:

- 1. Unilateral withdrawal by a selected Respondent;
- 2. Failure to proceed substantially in accordance with the Response as submitted;
- 3. Failure by a Respondent for any reason whatsoever to timely execute the Agreement when tendered;
- 4. Material misrepresentation, omission, or inaccuracy contained in any document submitted either as part of this RFP, or subsequent thereto; and/or
- 5. Failure to provide in a timely manner any additional materials required after selection.

Upon the happening of an event of disqualification or default by a Respondent, PHDC shall have the right, at its election, to:

- 1. Rescind its selection; or
- 2. Declare null and void an Agreement that may already have been executed.

Declarations & Other Information

Economic Inclusion

PHDC strongly encourages and promotes the employment of certified **M/W/DSBE** firms all aspects of its procurement of goods and services. If Respondent is a certified M/W/DSBE firm, please submit information to confirm certification with the Philadelphia Office of Economic Opportunity as part of the Response. PHDC also encourages and promotes hiring of diverse workforce, and companies that are committed to equitable access of opportunity for historically under-served groups.

Tax Clearance & Conflict of Interest Form

Respondents must provide evidence satisfactory to PHDC that:

- all municipal taxes, including business taxes, real estate, school, water and sewer charges, if applicable, are current for both the individual contractor and a Respondent's firm and neither is currently indebted to the City; and
- will not at any time during the term of the Agreement be indebted to the City, for or on account of any delinquent taxes, liens, judgments, fees or other debts for which no written agreement or payment plan satisfactory to the City has been established.

Please complete the Philadelphia Tax Status Certification and Conflict of Interest form (**Attachment A**) and submit it with your Response.

Campaign Contribution Disclosure Forms

Please complete the applicable disclosure forms and submit with your Response (Attachment B).

Insurance Requirements

Please submit a certificate of insurance evidencing the required coverages as outlined in **Attachment C** with your Response. If, for any reason, you cannot comply with the insurance requirements, please provide the reasons for

your inability to do so and PHDC will consider any deviations from the insurance requirements on a case-by-case basis.

Terms & Conditions

By submitting a Response to this RFP, Respondents affirmatively acknowledge: (i) acceptance of the terms and conditions of this RFP; (ii) that PHDC and/or the Philadelphia Redevelopment Authority ("PRA") may exercise in its sole discretion the following rights; and that PHDC and/or PRA may exercise the following rights at any time and without notice to any Respondent:

- 1. to reject any and all Responses;
- 2. to supplement, amend, substitute, modify, or re-issue the RFP with terms and conditions materially different from those set forth here;
- 3. to cancel this RFP with or without issuing another RFP;
- 4. to extend the time period for responding to this RFP;
- 5. to solicit new Responses;
- 6. to conduct personal interviews with Respondent(s) to assess compliance with the selection criteria;
- 7. to request additional material, clarification, confirmation, or modification of any information in any and all Responses;
- 8. to negotiate any aspect of Responses, including price;
- 9. to terminate negotiations regarding any and all Responses at any time;
- 10. to expressly waive any defect or technicality in Responses;
- 11. to rescind a selection prior to execution of the Agreement if PHDC and/or PRA determines that such Response does not conform to the specifications of this RFP;
- 12. to rescind a selection prior execution of the Agreement if PHDC and/or PRA determines that the specifications contained in this RFP are not in conformity with law or that the process in selection of Responses were not in conformity with law or with the legal obligations of PHDC and/or PRA;
- 13. in the event an Agreement is awarded, the successful Respondent(s) shall procure and maintain, during the life of the Agreement, liability insurance in an amount to be determined prior to the award of any Agreement;
- 14. in the event an Agreement is awarded, all Respondents agree to perform their services as an independent contractor and not as an employee or agent of PHDC and/or PRA;
- 15. in the event an Agreement is awarded, all Respondents agree that no portion of performance of the Agreement shall be subcontracted without the prior written approval of the PHDC and/or PRA; and
- 16. each Respondent agrees to indemnify, protect and hold harmless PHDC, PRA and the City from any and all losses, injuries, expenses, demands, and claims against PHDC, PRA or the City sustained or alleged to have been sustained in connection with or resulting from: (i) submission of a Response; (ii) the delivery by Respondents to PHDC of any documents or information; and (iii) any other conduct undertaken by the Respondents in furtherance of or in relation to the Response. Each Respondent agrees that its duty to indemnify and hold harmless shall not be limited to the terms of any liability insurance, if any, required under this RFP or subsequent contract.

Neither PHDC nor PRA is under any obligation whatsoever to Respondents as a result of this RFP. The RFP does not represent any commitment on the part of PHDC and/or PRA. In no event shall PHDC and/or PRA be responsible for any cost, expense, or fee incurred by or on behalf of Respondents in connection with this RFP. All Respondents shall be solely responsible for all such costs, expenses, and fees.

NOTICE: PHDC and/or the City reserve the right to disclose any information provided in your Response to this RFP to the public. Documents provided in your Response to this RFP may also be required to be disclosed by applicable law, including Pennsylvania's New Right to Know Law, subpoena, and/or court order.

To the extent that PHDC's procurement process is inconsistent with federal reimbursement guidelines, the federal guidelines will govern.

Attachment A: Philadelphia Tax Status Certification and Conflict of Interest Form



TAX STATUS CERTIFICATION AND CONFLICT OF INTEREST FORMS

September 2019

PHILADELPHIA TAX STATUS CERTIFICATION REQUEST

CITY OF PHILADELPHIA DEPARTMENT OF REVENUE

STAFF USE ONLY:	PHA	PHDC	PIDC	PPA	PRA	PLB	OTHER		_
Taxpayer Name:						Date:			
Taxpayer Trading As:									
Home Address:									
Business Address:						Business	Phone #:		
1. Are you a Register	ed Taxpay	er/Entity?						☐ YES	NO
If so,	provide y	our Federal	Employer	Identifica	ition Num	ber here:		_	
If so,	provide y	our Philade	lphia Tax A	Account N	umber he	ere:			
If so,	provide y	our Social S	ecurity Nu	ımber her	e:				
2. Is taxpayer/entity	presently	delinquent	in any City	of Philad	elphia or	Philadelph	ia School District tax	es? YES	NO
If so,	what tax	and amoun	t owed: \$_						
3. Is taxpayer/entity	presently	delinquent	in Water a	nd Sewer	charges?			YES	NO
If so,	amount o	owed: \$							
4. Has taxpayer/entit	v ever he	en sued hy t	he City of	Philadeln	hia or the	Philadelnl	nia School District?	YES	□NO
Has taxpayer/e		-	-	· ····································		· ······ace.p.	na Jeneor Bistrict.	YES	
	-	and nature of		or filing da	ate of ban	kruptcy pe	etition:	- 123	
						- /			
5. Is taxpayer/entity	involved i	n any other	business a	ctivity?				YES	□NO
If so,	list comp	any name(s) and acco	unt numb	er(s) here	2:			
I hereby affirm that t		•					•		
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 the Philadelphia Land Bank.
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-profit housing entities).
 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). TYES 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). \[\begin{align*} \text{YES} & \begin{align*} \text{NO} \\ \text{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.} \end{align*}

		CONI	FLICT OF INTER	REST		
4.	Does or will any person in contract for materials or					-
	Briefly describe the natur	e of that perso	n's interest in the c	ontract for materials	or services.	
		ADDITI	ONAL DISCLOS	SURES		
1.	Do you own any property	that is subject	to any significant u	nresolved violation	of City codes	and
	ordinances?				YES	NO
2.	As a property owner, hav	e you been inv	olved in Philadelphi	a tax foreclosure pro	ceeding in th	e last five
	years?				YES	NO
3.	Have you or any member	of your develo	pment team been o	convicted of any felo	ny within the	past five
	years?				YES	NO
4.	Are you listed as an owned			strict Attorney's list o	of land that h	3S
					YES	NO
5.	Have you, your business trustee, or partner (LLC) Philadelphia Housing Dev Authority?	in any other de	evelopment projects	with the City of Phil	adelphia, the	•
	If you was in the fall and				YES	NO
	If yes, provide the followi	ing information				
	Project Name	Date	City Agency	Agency Role		
	1.					
	2.					
	4.					
	5.					
	Discontinuis and 1825					

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: ANY AND ALL INFORMATION SUBMITTED MAY BE SUBJECT TO DISCLOSURE TO THE PUBLIC UNDER THE PENNSYLVANIA RIGHT TO KNOW LAW AND MAY ALSO BE REQUIRED TO BE DISCLOSED BY APPLICABLE LAW, SUBPOENA, OR COURT ORDER.

INTERNAL USE ONLY

Check for outstanding License & Inspection violations:

No outstanding violations.

Outstanding violations:

Attachment B: Campaign Contribution Disclosure Forms



DISCLOSURE FORMS

September 2019

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 PHDC 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 PHDC 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

- Officers, directors, controlling shareholders, or partners of the <u>for-profit</u> applicant business or <u>for-profit</u> 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, 2018 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, 2018 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).

Revised: 2/16

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, PHDC 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:
	 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 PHDC 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

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.

Date:	Initials:
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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?		
Have you solicited or served as an intermediary for any contributions?		
Has a member of your immediate family made any contributions over and above \$3,000?		
Has a member of your immediate family solicited or served as an intermediary for contributions over and above \$3,000?		
Check here to certify that no contributions were made.		

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

Philadelphia Housing Development Corporation (PHDC)	
Date:	Initials:
If Applying as an Individual:	
Campaign Contribution Disclosure Form	

For relationship, please indicate whether the contributor was the Individual or Family Member.

Name of Contributor	Relationship (to individual or business completing this form)	Name of Recipient	Date of Contribution	Amount of Contribution

Please use additional pages as needed.

Philadelphia Housing Development Corporation (PHDC)	
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.

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

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 Housing Development Corporation (PHDC)	
Date:	Initials:
If Applying as a Business:	
Campaign Contribution Disclosure Form	

For relationship, indicate whether the contributor was the Business, Affiliate, Controlled Political Committee, Controlling Shareholder, Director, Officer, Parent, Partner, Reimbursed Contributor, Solicited Contributor, Subsidiary, or Other.

Name of Contributor	Relationship (to individual or business completing this form)	Name of Recipient	Date of Contribution	Amount of Contribution
		and the second control and and and and		

Please use additional pages as needed.

<u>Use o</u>	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 <u>Consultant</u> , 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, PHDC, 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 consultate deadline.	nt(s) was used in the year prior to the application		
Consultant Name			
Address 1			
Address 2			
City, State, Zip			
Phone			
Amount Paid or to be Paid			
Consultant Name			
Address 1			
Address 2			
City, State, Zip			
Phone			
Amount Paid or to be Paid			
Consultant Name			
Address 1			
Address 2			
City, State, Zip			
Phone			
Amount Paid or to be Paid			
Consultant Name			
Address 1			
Address 2			
City, State, Zip			
Phone			
Amount Paid or to be Paid			

Date: _____

Initials:_____

se this form if the Consultant used is an Individual. Please read through the direct efore filling out this disclosure form to make sure that each question is answered a noroughly. Note that you must provide information for the two years prior to the ap	appropriatel	y and
	Yes	No
Has the Consultant made any contributions?		
Has the Consultant solicited or served as an intermediary for any contributions?		
Has a member of the Consultant's immediate family made any contributions over and above \$3,000?		
Has a member of the Consultant's immediate family solicited or served as an intermediary for contributions over and above \$3,000?		
Check here to certify that no contributions were made.		

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

Consultant: Individual Campaign Contribution Disclosure Form

Philadelphia Housing Development Corporation (PHDC)

Date: _____

Disclosure Forms, Contracts, PHDC

Initials:_____

Philadelphia Housing Development Corporation (PHDC)	
Date:	Initials:
Consultant: Individual Campaign Contribution Dis	sclosure Form

Use this form if the Consultant used is an Individual. For relationship, indicate whether the contributor was the Individual or Family Member.

Name of Contributor	Relationship to Consultant	Name of Recipient	Date of Contribution	Amount of Contribution

Please use additional pages as needed.

thoroughly. Where "non-profit" is an option, indicate whether the business is not required to disclose contribution information on these questions. Note the information for the two years prior to the application deadline.			fits are
	Yes	No	Non- Profit
Has the Consultant business made any contributions?			
Has the Consultant business solicited or served as an intermediary for any contributions?			
Has an officer, director, controlling shareholder, or partner of the Consultant business made any contributions? See note below.			
Has an officer, director, controlling shareholder, or partner of the Consultant business solicited or served as an intermediary for any contributions? See note below.	and the site of th		
Has an affiliate of the Consultant business made any contributions?			
Has an affiliate of the Consultant business solicited or served as an intermediary for any contributions? See note below.			
Has an officer, director, controlling shareholder, or partner of a for-profit affiliate of the Consultant business made any contributions? See note below.			
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?			
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?			
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?			
Has a political committee controlled by the Consultant business or by an affiliate of the business made any contributions?			
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?			

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

Philadelphia Housing Development Corporation (PHDC)

Date: _

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

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,

Check here to certify that no contributions were made.

controlling shareholder or partner (and, by extension, the Consultant business).

Initials:

Philadelphia Housing Development Corporation (PHDC)	
Date:	Initials:
Consultant: Business Campaign Contribution Disc	closure Form

Use this form if the Consultant used is a Business. For relationship, indicate whether the contributor was the Consultant Business, Affiliate, Controlled Political Committee, Controlling Shareholder, Director, Officer, Parent, Partner, Reimbursed Contributor, Solicited Contributor, Subsidiary, or Other.

Name of Contributor	Relationship to Consultant	Name of Recipient	Date of Contribution	Amount of Contribution

Please use additional pages as needed.

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 b	e used.	
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		

Employee Request Form

Please list any City or PHDC 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 PHD employees/officers of the organization pr have asked you (the Applicant), any offic employee of the Applicant, or any persor to give money, services, or any other thir contributions as defined above) during thapplication deadline.	oviding financial assistance er director, or management representing the Applicant of value (other than	
Name of Francisco (Office)		
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		
N 65 1 (055		
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		

Employee Participation Advice Disclosure Form

Please list any City or PHDC 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 PHDC employees/officers or employees/officers of the organization financial assistance gave you (the Applicant), any officer of management employee of the Applicant, or any person repetite Applicant advice that a particular individual or business used by the Applicant to satisfy any goals established in the or financial assistance agreement for the participation of momen, disabled, or disadvantaged business enterprises of two years prior to the application deadline.	irector, or
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 Francisco IOSS	
Name of Employee/Officer	
Title	
Date of Advice	
Individual or Business Recommended to Satisfy Participation Goals	

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 PHDC) 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	
(a) President or Vice-President of the corporation. Assistant Treasurer of the corporation. If the dis	y a CORPORATION, sign the forms here, with signatures by on AND (b) Secretary, Assistant Secretary, Treasurer or sclosure forms are not signed by the above mentioned, you to a certified corporate resolution to sign in place of such	
Signature	Date	
Name	President/Vice President, if other, please specify	
Signature	Date	
Name	Secretary/Asst. Secretary/Treasurer/Asst. Treasure If other, please specify	

Attachment C: Required Insurance Coverages

PHILADELPHIA HOUSING DEVELOPMENT CORPORATION

INSURANCE REQUIREMENTS

The individual or entity seeking to enter into a contract with the Philadelphia Housing Development Corporation ("PHDC") or who is entering into a contract with such individual or entity (collectively, the "Contracting Party") will procure and maintain during the entire period of the contract, the insurance described below. All coverages must be provided by an insurance company authorized to do business in the Commonwealth of Pennsylvania and with a minimum A.M. Best Rating of A- Class VIII. All insurance, except Professional Liability, must be written on an "Occurrence Basis" and not a "Claims-Made Basis."

The insurance policies must provide for at least thirty (30) days prior written notice to be given to PHDC in the event that coverage is materially changed, cancelled or non-renewed or once any policy limits have been exhausted by fifty percent (50%). In the event of material change, cancellation or non-renewal of coverage(s), the Contracting Party must replace the coverage(s) to comply with the contract requirements to prevent a lapse of coverage for any time period during the term of the contract.

The Contracting Party will provide the PHDC with the provisions from each of the required insurance policies or endorsements for each of the required insurance policies stating the following:

- 1) Contracting Party's insurance coverage is on a primary and non-contributory basis with any insurance carried or administered by the PHDC;
- 2) includes coverage for ongoing operations and completed operations;
- 3) Philadelphia Housing Development Corporation, the City of Philadelphia (the "City") and their respective officers, directors, employees and agents are named as additional insured on a primary and non-contributory basis on all of the insurance policies, except for workers' compensation and professional/lender liability insurance policies, even for claims regarding their partial negligence;
- 4) includes a waiver of subrogation in favor of the PHDC and all of the other aforementioned additional insureds;
- 5) coverage is applicable separately to each insured against whom a claim is made or suit is brought and there is no "Cross Liability" exclusion on the insurance policies that preclude coverage for suits or claims between the Contracting Party and the PHDC or between the PHDC and any other insured or additional insured under the insurance policies; and
- 6) no act or omission of the PHDC, the City, or their respective officers, directors, employees or agents will invalidate coverage.
- 7) Contracting Party shall not have a Self-Insured Retention ("SIR") on any policy greater than \$50,000, which is the responsibility of the Contracting Party. If Contracting Party's policy(ies) has a SIR exceeding this amount, approval must be received from PHDC prior to starting work. In the event any policy includes a SIR, the Contracting Party is solely responsible for payment within the SIR of their policy(ies) and the Additional Insured requirements specified herein shall be provided within the SIR amount(s).

Endorsement forms required include CG 20 01, CG 20 10 and CG 20 37 as published by the Insurance Services Office ("**ISO**") or on equivalent forms that are satisfactory to the PHDC.

If the contract pertains to a specific property, the property address must be identified on the Certificate of Insurance. Otherwise a contract/work order number or project reference should be included.

Certificates of Insurance must be addressed to: Philadelphia Housing Development Corporation, 1234 Market Street, 16th floor, Philadelphia, PA 19107.

The PHDC reserves the right to request and obtain complete copies of the Contracting Party's insurance policies.

- I. Insurance Review Insurance requirements are subject to the periodic review by the PHDC. Any failure, actual or alleged, on the part of the PHDC to monitor or enforce compliance with any of the insurance requirements will not be deemed as a waiver of any rights on the part of the PHDC. The PHDC may require additional types of insurance or higher limits if, in its sole discretion, the potential risk warrants it. The amount of insurance provided in the required insurance coverages outlined below, shall not be construed to be a limitation of the liability on the part of the Contracting Party.
- II. Without in any way affecting the indemnity obligations of the Contracting Party pursuant to its contract with the PHDC and in addition thereto, the insurance coverage required by all Contracting Parties is as follows:
 - a. <u>Commercial General Liability</u>: The policy will be provided on ISO form CG 00 01 04 13 or an equivalent form, include a "Cross Liability" endorsement, name the PHDC, the City, and their respective officers, directors, employees and agents as <u>Additional Insured</u> and include coverage for all operations performed by or on behalf of the Contracting Party for bodily injury and property damage arising out of:

Products and Completed Operations

Premises Operations and Mobile Equipment

Independent Contractors

Employees and Volunteers as Additional Insured

Elevators and/or Escalators (if applicable and within the scope of the services of the contract)

Blanket Contractual Liability (written and oral and must include liability

for employee injury assumed under a contract as provided in the standard ISO policy form)

No amendment to the definition of an "Insured Contract"

No sexual abuse or molestation exclusion

Broad Form Property Damage (including completed operations)

Coverage for Resulting Damage (Expanded Definition of Occurrence-Property Damage) (if applicable and within the scope of the services of the contract)

Explosion, Collapse and Underground Hazards (if applicable and within the scope of the services of the contract)

Personal Injury and Advertising Injury

No Exclusions for residential construction with respect to the work to be completed by the Contracting Party (if applicable and within the scope of the services of the contract)

• The following minimum limits will be provided:				
\$1,000,000	Each Occurrence (combined single limit for bodily injury			
	(including death) and property damage)			
\$1,000,000	Personal and Advertising Injury			
\$2,000,000	,000,000 General Aggregate (other than Products/Completed Operations)			
\$2,000,000	Products/Completed Operations Aggregate			

- The General Aggregate Limit must apply on a Per Project basis.
- The definition of "occurrence" must be expanded via endorsement to state the following (if applicable and within the scope of the services of the contract):

"Occurrence" means an accident, including continuous or repeated exposure to substantially the same general harmful conditions. Faulty workmanship in "your work" is not an "occurrence" but "property damage" that is ancillary and accidental damage caused by faulty workmanship in "your work" is considered an "occurrence" if the following conditions are met:

- 1) faulty workmanship in "your work" causes "property damage" to property other than "your work;" and
- 2) such "property damage" was not expected or intended by you or the persons performing "your work."
- Workers' Compensation and Employer's Liability Insurance: b. Contracting Party will obtain a workers' compensation policy which provides benefits in accordance with the statutory requirements of the Commonwealth of Pennsylvania and includes "all states" coverage or at least coverage in all other states in which the Contracting Party performs work or through which the Contracting Party's employees travel. This policy will also include coverage for United States Longshoremen and Harbor Workers (if applicable) and employer's liability. The following minimum employer's liability limits will be provided:

\$100,000 Each Accident	Bodily Injury by Accident
\$100,000 Each Employee	Bodily Injury by Disease
\$500,000 Policy Limit	Bodily Injury by Disease

• Coverage should cover all individuals, including sole proprietors, partners, members, officers, or volunteers, providing services on behalf of the Contracting Party.

- c. <u>Automobile Liability Insurance:</u> The policy will name the PHDC, the City, and their respective officers, directors, employees and agents as <u>Additional Insured</u> and cover liability arising out of the use of <u>all owned, non-owned and hired</u> automobiles (or symbol 1 Any Auto) with the following minimum coverages:
 - \$1,000,000 Per Occurrence (combined single limit for bodily injury (including death) and property damage)
 - For Contractor(s) involved in the transportation of hazardous material, include the following endorsements: MCS-90 and ISO-9948
 - Contractual Liability Coverage (including liability for employee injury assumed under a contract as provided in the standard ISO policy form)
 - Coverage for <u>all owned</u> automobiles will be waived if the Contracting Party does not own any automobiles so long as the Contracting Party provides the PHDC with a letter stating that the Contracting Party does not own any automobiles. The letter must be on company letterhead and executed by an individual authorized to make such a representation on behalf of the Contracting Party. When the Contracting Party does not own any automobiles, coverage for <u>non-owned and hired</u> automobiles must be endorsed to the commercial general liability policy or provided under a separate <u>non-owned and hired</u> automobile liability policy.
- d. Professional Liability: Professional Liability Insurance with a minimum policy limit of \$5,000,000 per claim and aggregate with a deductible not to exceed \$50,000. The definition of "Covered Services" shall include those services outlined in the contract. This insurance shall extend to the Contracting Party and its legal representatives in the event of death, dissolution or bankruptcy, and coverage provided will cover all actual or alleged acts, errors and omissions arising out of the professional services rendered by the Contracting Party's agents, employees or any person for whom the Contracting Party is responsible in the performances of the services under the contract as well as liability assumed under the contract. The retroactive date must be on or prior to the contract date. The Contracting Party will also obtain tail coverage or an extended reporting period or maintain its current coverage for occurrences happening during the performance of the contract for at least 2 years after completion of the contract.
- e. <u>Commercial Umbrella Liability</u>: Commercial umbrella liability insurance with a minimum limit of \$5,000,000 for each occurrence and the annual aggregate amount (where applicable) that will apply on a following form basis of the commercial general liability, automobile liability, and employer's liability insurance policies.
- f. <u>Cyber Liability or Security and Privacy Liability Insurance</u>: Cyber liability or security and privacy liability insurance to cover third party liability arising out of:

(i) breach of privacy, inclusive of confidential and proprietary business information; (ii) intellectual property, copyright, trademark, trade secret, and/or patent infringements; (iii) Health Insurance Portability and Accountability Act violations; and/or (iv) other breaches of personally identifiable information, proprietary business information, and/or protected health information, that may arise from the Contracting Party's work under the contract. The limit of liability for each claim and the annual aggregate will be \$5,000,000. Privacy breach notification and credit monitoring must be included in the above. The policy will name the PHDC, the City, and their respective officers, directors, employees and agents as **Additional Insured**.

g. <u>Crime Insurance</u>: Crime insurance with a minimum limit of \$5,000,000 per claim and has the following sublimits for each coverage listed below:

\$5,000,000	Employee Theft (Employee Dishonesty)
\$5,000,000	Premises Coverage
\$5,000,000	In Transit Coverage
\$5,000,000	Forgery (Forgery & Alteration)
\$5,000,000	Computer Fraud
\$5,000,000	Client Coverage
\$5,000,000	Funds Transfer Fraud
\$5,000,000	Money Orders & Counterfeit Currency
\$500,000	Claim Expense

The crime insurance policy shall include the employee theft of clients' property and theft, disappearance and destruction coverage parts. The employee theft coverage part shall include the clients' property endorsement, ISO form CR 04 01 or its equivalent. The crime insurance policy shall name the PHDC as an **Additional Insured** and a loss payee.