

Action Ottawa

APPLICATION PACKAGE

June 25, 2013



Table of Contents

[Profile of the Proponent Organization 2](#_Toc357684681)

[Conflict Of Interest Declaration 6](#_Toc357684682)

[Reference Form 7](#_Toc357684683)

[Signature Form 8](#_Toc357684684)

[Checklist of Attachments to complete Action Ottawa Proposal: 9](#_Toc357684685)

# Profile of the Proponent Organization

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| **What is the name of your organization or of the lead respondent?** | | | | | | | | | |
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| **Who is the contact for the organization?** | | | | | | | | | |
| **Name:** | | | | | **Title:** | | | | |
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| **Telephone:** ( ) | | | | **Fax:** ( ) | | | **E-mail:** | | |
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| **What is your organization's address?** | | | | | | | | | |
| **Mailing Address:** | | | | | | | | | |
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| **City, Province and Postal Code:** | | | | | | | | | |
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| **What is the organization's contact information?** | | | | | | | | | |
| **Telephone:** ( ) | | | | **Fax:** ( ) | | | **E-mail:** | | |
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| **Who is the contact person for project information?** (If different from above) | | | | | | | | | |
| **Name:** | | | | | **Title:** | | | | |
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| **Telephone:** ( ) | | | | **Fax:** ( ) | | | **E-mail:** | | |
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| **Indicated your organization's incorporation information** | | | | | | | | | |
| Note: All applicants must be incorporated | | | | |  |  |  |  |  |
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| \_\_\_\_ Non-profit Corporation | | | | | \_\_\_\_Private Corporation | | | |  |
| **Date of incorporation:** | | | **Incorporation Number:** | | | **Charitable Number (if applicable):** | | | |
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| **State your organization's mission** | | | | | | | | | |
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| **Briefly describe the primary activities of your organization.** | | | | | | | | | |
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| **Provide a list of the Board of Directors, subsidiary companies and their directors** | | | | | | | | | |
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| **List Partner Organization(s) Information (if applicable):** | | | |
| Organization Name: | Type of Corporation | Letter or Memorandum of Understanding  (Attached): | Board Resolution  (Attached) |
|  | * Non-profit Corporation | * Yes * No | * Yes * No |
|  | * Non-profit Corporation * Private Corporation | * Yes * No | * Yes * No |
|  | * Non-profit Corporation * Private Corporation | * Yes * No | * Yes * No |
|  | * Non-profit Corporation * Private Corporation | * Yes * No | * Yes * No |

Good Standing with the City of Ottawa:

The applicant must not be in receipt of a “Notice of Breach” of any existing contracts with the City of Ottawa, that has not been rectified to the City’s satisfaction by the time of closing of this RFQ.

* I have no contracts with the City
* I have current contracts with the City:

* + No, I am not in Breach.
  + Yes, we are in receipt of a “Notice of Breach”

Comments:

Organizations that are in Breach of an existing contract with the City are not eligible to apply.

# Conflict Of Interest Declaration

(To be submitted by the Proponent)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name of Proponent)

1. We confirm that neither the Proponent nor any of its Team Members has or will have directly or indirectly employ, engage or retain an employee, servant, Council member or agent of the City in relation to the Affordable Housing Request for Qualifications.
2. Except as disclosed below, we are not aware of any City employee, Council member or member or employee of a City agency, board or commission having a financial interest in our Proponent team:
3. ..
4. ..
5. ..
6. The Proponent team has/has no (strike out the inapplicable portion) knowledge of or the ability to avail itself of confidential information of the City of Ottawa in relation to the Affordable Housing project other than confidential information which may have been disclosed by the City of Ottawa to Registered Parties in the normal course of the RFQ.
7. We hereby confirm that, except as otherwise disclosed herein, we are not aware of any conflict of interest (real or perceived or potential) in submitting a response to this RFQ, nor is one anticipated in the event the undersigned Proponent responds (as part of a consortium) to a subsequent RFQ.

Signature of Authorized Representatives of the Proponent

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature)

Name:

Title:

Date:

# Reference Form

Each proponent shall provide a minimum of 3 references from clients for Canadian projects for whom they have provided similar services within the past five years.

**1)** Reference Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Company, organization, tenant):

Address: Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City, Prov.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date work undertaken: \_\_\_\_\_\_\_\_\_\_\_\_

Nature of the Assignment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Canadian project? (Yes/No)

**2)** Reference Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Company, organization, tenant):

Address: Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City, Prov.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date work undertaken: \_\_\_\_\_\_\_\_\_\_\_\_

Nature of the Assignment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Canadian project? (Yes/No)

**3)** Reference Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Company, organization, tenant):

Address: Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City, Prov.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Date work undertaken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of the Assignment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Canadian project? (Yes/No)

# Signature Form

|  |
| --- |
| ***SIGNATURE FORM***  I hereby certify that all information provided in this application is as accurate as possible in all respects, and certify my intent to implement this project as presented, should it be selected for funding. I further certify there is no conflict of interest between said corporation (s) or its/their employees with respect to this project and the City of Ottawa.  Name of Corporation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    I have the authority to bind the Corporation Name of Signatory  (Please print)  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    I have the authority to bind the Corporation Name of Signatory  (Please print)  Date**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ***Note: Municipal Freedom of Information and Protection of Privacy Act:***  The City of Ottawa is subject to the *Municipal Freedom of Information and Protection of Privacy Act,* R.S.O. 1990, c. M. 56, as amended (“MFIPPA”) with respect to, and protection of, information under its custody and control. Accordingly, all documents provided to the City in response to this Request for Proposal (“RFP”) may be available to the public unless the party submitting the information requests that it be treated as confidential.  All information is subject to MFIPPA and may be subject to release under the Act, notwithstanding your request to keep it confidential. |

# 11. Checklist of Attachments to complete Action Ottawa Qualification:

#### **Ten (10) Copies (Qualification Submission Document):**

1. Experience and Qualifications of the Lead Agencies (Section 9.1)
2. Profile(s) of relevant project(s) and/or Programs (Section 9.2)
3. Experience and Qualifications of Key Team Members (section 9.3)

**Provide One Copy of:**

1. Conflict of Interest Declaration
2. Reference Form
3. Signed and dated signature page
4. Articles of Incorporation
5. Most recent Audited Financial Statement
6. Letters of Participation and/or Memorandum of Understanding and Board Resolutions from partners.
7. Checklist of Attachments